

CACFP VENDED MEAL CONTRACT RENEWAL

Is this the right contract for me?

Answer the questions below. A “yes” response to the questions below indicates that this is the appropriate contract for your organization. A “no” response to any of the questions below indicates that an individual from your organization should contact your assigned education program specialist (EPS) to discuss other meal purchasing options.

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	I have an existing vended meal contract procured through a competitive procurement process
<input checked="" type="checkbox"/>	<input type="checkbox"/>	I have renewed my original contract fewer than 4 times
<input checked="" type="checkbox"/>	<input type="checkbox"/>	There have been no significant changes to my meal service (adding/removing meal types, adding/removing locations, etc.)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	I am satisfied with the service, quality, and price that I have received over the contract period

PROCUREMENT REGULATIONS

Child and Adult Care Food Program procurement requirements are found in 7 CFR 226.22. The summary below addresses some key points of the regulation:

- Full requirements are documented in 2 CFR 200, subpart D; 2 CFR 400; and 2 CFR 415.
- You are bound by the provisions of any contract you enter into, whether or not that contract resulted from a proper procurement process, **but** any costs incurred under a contract that does not meet the requirements of the regulation are unallowable costs.
- The Ohio Department of Education is not a party to any contract formed pursuant to this agreement.
- If you make any changes to this prototype document, you need to submit those changes to us for approval **prior to** beginning your solicitation process.

Carefully read the attached instructions. Please contact your EPS or call our office toll-free at 1-800-808-6325 if you have questions or need assistance.

VENDED MEAL RENEWAL CONTRACT

() (hereinafter "Sponsor") and Extra Virgin Food Services (hereinafter "FSMC") mutually agree to renew the current Food Service Contract (hereinafter "Contract") that expires on ()

The Contract shall be renewed for a period of one year beginning on () and ending on (), with the first day of food service being (()). All terms, conditions and assurances of the Contract shall remain in full force and effect for the duration of this renewal except as amended herein.

The Contract was first completed in program year (). After the original bid year, the Contract can be renewed at a maximum of four one-year periods. This renewal is the 2nd year of renewal of the Contract.

Schedule A indicates the site(s) that will be provided food service under this contract.

1. FINANCIAL TERMS

In general, price increases should not exceed the Consumer Price Index for all Urban Consumers (CPI-U), U.S. base, for food away from home, as computed and published by the U.S. Department of Labor, for the most recent twelve-month period for which CPI data are available.

In the chart below, insert the unit price for each meal type as applicable.

	PREVIOUS CONTRACT			RENEWAL CONTRACT		
Meal	Primary	Secondary	Adults	Primary	Secondary	Adults
Breakfast						
Lunch						
Supper						
Snacks						
Extra Milk						

The price increases above (if any) are based on increase in food costs. No further increases in price will be considered for the duration of the renewal period.

2. ATTACHMENTS

FSMC must submit the following attachments as applicable with this Renewal Contract:

- Current food service license
- Current Food Safety Registration
- Current certification of Federal or State meat inspection or letter of exemption

3. SIGNATURES

IN WITNESS WHEREOF, the parties hereto have executed this Renewal Contract as of the date indicated below. The individual signing as the authorized representative is deemed to have authorization to bind the agency to legal and binding agreements.

Sponsor

FSMC

Signature of Authorized Representative

Signature of Authorized Representative

Julie Steingraber

Print Name of Authorized Representative

Print Name of Authorized Representative

Date

Date

SCHEDULE A

Site/Center Information		Meal Type(s) to be Vended	Estimated number of meals			Indicate required services with an "X"						Meal Delivery Time
						Milk Delivery Included	Extra Milk Needed	Tableware or Utensils Needed	Meals Delivered Unitized	Meals Delivered Bulk		
			1-2 years	3-5 years	6-18 years							
Site Name & Address Contact: Phone:		Breakfast	X			X					X	
		AM Snack	X									
		Lunch	X			X					X	
		PM Snack	X									
		Supper										
		Eve. Snack	X			X						
Site Name & Address Contact: Phone:		Breakfast										
		AM Snack										
		Lunch										
		PM Snack										
		Supper										
		Eve. Snack										
Site Name & Address Contact: Phone:		Breakfast										
		AM Snack										
		Lunch										
		PM Snack										
		Supper										
		Eve. Snack										

Site/Center Information	Meal Type(s) to be Vended	Estimated number of meals			Indicate required services with an "X"						Meal Delivery Time
		1-2 years	3-5 years	6-18 years	Milk Delivery Included	Extra Milk Needed	Tableware or Utensils Needed	Meals Delivered Unitized	Meals Delivered Bulk		
Site Name & Address Contact: Phone:	Breakfast										
	AM Snack										
	Lunch										
	PM Snack										
	Supper										
	Eve. Snack										