

April 4, 2015

Dr. Stephen R. Johns Business Manager Millburn CCSD #24 18550 West Millburn Road Wadsworth, IL 60083

Dear Dr. Johns:

Enclosed find all renewal documents required to complete the renewal process for the 2015-15 school year.

Note there is a change in the *Certification Form* that requires the District to report allotted commodity dollars and usage for the school year. Because of this, you will not be able to submit the renewal to the State until the end of the school year. That does not, however, prevent you from taking it to your Board of Education for approval now.

Also included are the recommendations for price increases and the *Food and Labor Cost Outlook* that documents the need for the CPI increase. We will be happy to provide a financial projection upon request.

We are asking for an increase of 3.0% in the meal rate(s) as allowed in our agreement. Please feel free to call on us with any questions you may have regarding the documents enclosed.

Arbor Management, Inc. is proud of the partnership that we share with Millburn CCSD #24, and we look forward to serving your students and staff in the 2015-16 school year.

Regards, **Arbor Management, Inc**

Marjana S. Nixon

Marjana S. Nixon Vice-President, Operations

Cc: Distribution

Date of Original Contract					
/	Augus	st 10, 20	12		
Year of Renewal (Circle)					
1	2	X	4		

Contract Renewal Agreement for Food Management Services Nonprofit Food Service Program

This document contains the rates and fees for the furnishing of food service management for nonprofit food service programs for the period beginning ______ July 1 _____, 2015, and ending _____ June 30 _____, 2016. The terms and conditions of the original contract are applicable to the contract renewal. Upon acceptance, this document shall constitute the contract renewal between the Food Service Management Company (FSMC) and the School Food Authority.

The FSMC shall not plead misunderstanding or deception because of the character, location, or other conditions pertaining to the contract.

PER MEAL PRICES MUST BE QUOTED AS IF NO USDA COMMODITIES WILL BE RECEIVED							
1. Reimbursable Breakfasts 2. Reimbursable Breakfasts—Meal Rate Fee 3. Reimbursable Lunches* 4. Reimbursable Lunches—Meal Rate Fee 5. Management Fee per School Meal (Breakfasts and Lunches) 6. A la Carte Equivalents Fee* 7. A la Carte Management Fee 8. After-School Snacks 9. Special Milk 10. Other (specify) *Rates must be the same.	2014-2015 2015-2016 Percentage Increase*** 1. 1. 1. 1. 2. 2. 2. XXXXXXXX 3. \$2.6005 3. \$2.6785 3. 3.0% 4. 4. 4. XXXXXXXX 5. 5. 5. 6. \$2.6005 6. \$2.6785 6. 3.0% 7. 7. 7. 7. 7. 8. 3.0% 9. 9. 9. 10. 10. 10. 10. 10. 10. 10. 10.						
**Rates must not be rounded up. Do not exceed four decimal places. **Percentage increase must not exceed the allowable increase established in the original contract.							
Arbor Management, Inc. Food Service Management Company							
2100 Corporate Drive Suite B Street Address							
Addison City	IL 60101 State Zip Code						
By submission of this proposed renewal agreement, renewal award under this solicitation, the FSMC started and regulations. This agreement shall not exceed	the FSMC certifies that, in the event they received nall operate in accordance with all applicable curre						

Title

Date

Authorized Signature

Contract Renewal Agreement Certification Form 2015–2016

The Contract Renewal Agreement Certification Form must be completed and signed by the school food authority's (SFA's) authorized representative. A copy of this form must be submitted by the SFA along with copies of all applicable, required contract renewal documents listed in Section C below.

A. School Food Authority Information

Agreement Number (RCDT Code)34-	-049-0240-04	
School Food Authority	yMillburn CCSE) 24	
Contractor Name	Arbor Manag	gement, Inc.	
B. General Contract	t Information		
Contract Type:	x FSMC □Vended	□ FSMC—Vended	□ Other
Programs:	x Lunch ☐ Breakfast ☐ Summer Meals	□ Special Milk □ Child and Adult Ca	
C. Required Docum	entation		
Submit copies of the	following documents.		
representative Food-Based A Certification for the a Debard Transa If the a Contra If the a have b Any other a	Meal Pattern Contract Amenorms, as applicable, signed annual contract is \$25,000 or ment, Suspension, Ineligibili actions, annual contract is over \$100 acts, Grants, Loans, and Codennual contract is over \$100 peen used for lobbying—Signeen used for lobbying—Signey used for lobbying	dment, if applicable, signanually by the contract more—Signed copy of the and Voluntary Exclusion,000—Signed copy of the operative Agreements, 000 and any funds other copy of the Disclosion.	ned by both parties; or the <i>Certification Regarding</i>
D. Contract Renewa	al Terms		
applied to the fixed m terms; check the appl	eal rates and fixed manager ropriate box): Away From Home (Dec) c) Dec)		vable percentage increase that may be (refer to the contract for renewal

E. Certification Statement

Under the provisions of the United States Department of Agriculture, Food and Nutrition Service, I certify as a sponsor in the Child Nutrition Programs all information contained in the executed *Contract Renewal Agreement* and accompanying contract renewal documents is true and accurate.

I understand the nonprofit school food service program account cannot be used to pay for unallowable contract costs. As authorized representative for the school food authority noted above, I will ensure operation of the nonprofit school food service program, including use of nonprofit school food service program account funds, is in compliance with the rules and regulations of the Illinois State Board of Education and the United States Department of Agriculture regarding Child Nutrition Programs.

I understand revisions cannot be made to the executed *Invitation for Bid and Contract* without first submitting proposed revisions to the Illinois State Board of Education for review and receiving written notification the proposed revisions are allowable within the regulatory guidelines. Furthermore, I understand additional documents and/or agreements, including those developed by the contractor, cannot become part of the executed contract.

I understand all contract information provided to the Illinois State Board of Education is being given in connection with the receipt of federal funds and deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes. Further, I understand such misrepresentation could result in the loss of federal and state funding received by the school food authority for School-Based Child Nutrition Programs.

I certify that all contract provisions, including those relating to USDA Foods, including the utilization by the FSMC/Vendor of USDA Foods to the maximum extent possible have been met.

School Year 2015 USDA Foods Entitlement Amount	(A)	\$	
Amount of USDA Foods credited to the SFA by the FSMC/Vendor	(B)	\$	
USDA Foods Entitlement Utilization Percentage	(B / A)	%	
Authorized Representative Signature	Ti	tle -	Date

Mail, fax, or email to: Nutrition and Wellness Programs

Illinois State Board of Education 100 North First Street W270 Springfield, IL 62777-0001

Fax: 217-524-6124 Email: cnp@isbe.net

Please submit documents only once. For example, do not fax <u>and</u> mail. Only one <u>copy</u> of each set of documents is necessary. **All original documents should be retained in the SFA's files.**