

Addendum No. 1

(date) _____

SCHOOL NUTRITION PROGRAMS FOOD SERVICE MANAGEMENT SERVICES SCHOOL YEAR 2023-2024

Request for Proposals

Solicitation Number: _____

School Food Authority: _____

SFA's address: _____

Phone number: _____

Fax number: _____

All requirements of RFP No. _____, School Nutrition Management Services School Year 2023-2024 published on (date) _____, except those specifically changed by this Addendum No. 1, shall remain in effect. In the event of any inconsistency between information provided in School Nutrition Management Services School Year 2023-2024 published on (date) _____, and information in this Addendum No. 1, the information in this Addendum No. 1 shall prevail.

This Addendum No. 1 is issued for the purpose of revising sections of the RFP. This Addendum No. 1 shall be attached to and form a part of the referenced RFP and any resulting awarded contract.

The following sections of the RFP are revised as follows:

Refer to III. PROPOSAL CONTENT AND SUBMISSION, B. Proposal Submission Requirements

The date proposals will be received is changes as follows:

FROM: Proposals will be received by the SFA until _____ (Time) on _____ (Date) at the address or e-mail shown below.

TO: Proposals will be received by the SFA until _____ (Time) on _____ (Date) at the address or e-mail shown below.

Refer to Exhibit G in the Attachments to the RFP:

Exhibit G is replaced by Revised Exhibit G, below, which updates the formula for calculating the Non-Program Revenue Meal Equivalent.

Exhibit G: Price Proposal Form

The undersigned FSMC proposes to manage the SFA’s school food service at the fixed per-meal rates shown below, subject to the terms of this RFP including SFA’s estimated total numbers of meals shown below. If the contract is awarded, FSMC will bill SFA for meals and meal equivalents at the fixed rates shown below, without any additional charges.

The meal prices in this proposal must not consider the value of USDA Foods that the FSMC may receive for use during the year. FSMC will fully credit SFA for the value of USDA Foods received for use.

The FSMC acknowledges that the contract will be awarded based primarily on the lowest proposed Total Cost to SFA, shown below, combined with SFA’s evaluation of non-price criteria specified in the RFP.

| Program | FSMC’s Proposed Fixed Price per Meal or Equivalent | X | SFA’s Estimated Annual Meals or Meal Equivalents—all sites | = | FSMC’s Proposed Cost to SFA—all sites (extended cost) |
|--------------------------------------|--|---|--|---|---|
| Breakfast (SBP)(SSO) | \$ | X | 77,237 | = | \$ |
| Lunch (NSLP) (SSO) | \$ | X | 168,022 | = | \$ |
| Milk (SMP) | \$ | X | 0 | = | \$ |
| NSLP Afterschool Care Program (ASCP) | \$ | X | 0 | = | \$ |
| At-Risk After-school Snacks (CACFP) | \$ | X | 0 | = | \$ |
| At-Risk After-school Supper (CACFP) | \$ | X | 0 | = | \$ |
| Summer (SFSP) Breakfast | \$ | X | 0 | = | \$ |
| Summer (SFSP) Lunch | \$ | X | 0 | = | \$ |
| Non-Program Rate | \$ | X | 28,851 | = | \$ |

FSMC’s proposed Total Cost to SFA: \$ _____

Financial Guarantee - Offeror must select one of the following options:

- Breakeven position required
- Financial Guarantee Amount _____
- Subsidy Amount _____
- No Guarantee Required

Submitted by: _____

Company: _____

Printed Name and Title of Authorized Representative: _____

Signature: _____ Date: _____