Child Care Food Program Meal Service Agreement With District School Board/School Food Service



_X____ milk

Name of Sponsor/Institution: Central Ky Head Start (West Main Head Start)	CNIPS ID: 11400
Contact Person: Nicole Burchell (nicole.burchell@ckyhs.org)	Phone No.: (270) 795-4301
Address: 356 West Main Street, Lebanon, KY 40033	

____ condiments

The <u>Marion County School District Food Service</u> agrees to furnish meals daily to the above childcare center for the period from: 8/1/23 to 9/30/24, except for holidays or other days of in-operation complete with required (indicated below):

____ paper products

	Estimated Total No. of Meals per Day	Estimated No. of Serving Days per Year	Unit Price per Meal	Total Price	Delivery or Pick-Up Time
Breakfast(1-2)		, .			
Breakfast(3-5)					
Breakfast(6-12)					
AM Snack(1-2)					
AM Snack(3-5)					
AM Snack(6-12)					
Lunch(1-2)			***		
Lunch(3-5)	38	144	\$4.00	\$21,888.00	10:45am
Lunch(6-12)			· · · · · · · · · · · · · · · · · · ·		
PM Snack(1-2)					
PM Snack(3-5)					
PM Snack(6-12)					
 Provide meals in:	X bulk or _X pick up by cen using the KY CACFP o	unitized Iter or deliv delivery slip form.		ict Food Service	at the time(s) indica
 Provide meals in:	X bulk or _X pick up by cenusing the KY CACFP of payment by the cost determination ecords will be made and the Kentucky Officto pay for meals bas Food Service warran	unitized Iter or delived delivery slip form. Item of each more available to the KY (in the large of the large controls and the above units meals provided	ery by School Distr th to the mailing a d of 3 years after th CACFP, representat General. hit price(s) within _ are safe and whole	ict Food Service address provided ne end of the agr ive of the U.S. Do30 days of esome, but that I	at the time(s) indicate. eement period to we partment of Agricular receipt of invoice iability is severed u
 Provide meals in:	X bulk or _X pick up by cen using the KY CACFP of payment by the cost determination cords will be made a nd the Kentucky Offic to pay for meals base Food Service warrance con this agreement is	unitized Iter or delivery slip form. Sth of each more records for a period available to the KY (size of the Inspector sed on the above units meals provided is no longer desired, and agreement to	ery by School Distraction to the mailing and of 3 years after the CACFP, representation General. In the price of the price of the price of the party may the defendance of the party may be described by the defendance of the defendance	ict Food Service address provided ne end of the agr ive of the U.S. Do30 days of the these serminate these services.	at the time(s) indicated in the time(s) indicated in the time(s) indicated in the time(s) in the
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 Provide meals in:	X bulk or X pick up by cen using the KY CACFP of payment by the cost determination and the Kentucky Office to pay for meals base Food Service warrance on this agreement is a shereto have caused	unitized Iter or delivery slip form. Sth of each more records for a period available to the KY (size of the Inspector sed on the above units meals provided is no longer desired, and agreement to	ery by School Distraction to the mailing and of 3 years after the CACFP, representation General. Init price(s) within are safe and whole either party may the be executed by the By:	ict Food Service address provided ne end of the agr ive of the U.S. Do30 days of esome, but that I erminate these services	at the time(s) indicated to very end of receipt of invoice iability is severed uservices with a 2-weet of officers.

Child Care Food Program Meal Service Agreement With District School Board/School Food Service

Name of Sponsor/Institution: Central Ky Head Start (Lebanon Head Start)	CNIPS ID: 11400 Phone No.: (270) 692-4291	
Contact Person: Nicole Burchell (nicole.burchell@ckyhs.org)		
Address: 1081 Corporate Drive, Lebanon, KY 40033		

The Marion County School District Food Service agrees to furnish meals daily to the above childcare center for the period from: 8/1/23 to 9/30/24, except for holidays or other days of in-operation complete with required (indicated be

pa	paper products		condiments		X milk	
Meal Type/Age	Estimated Total No. of Meals per Day	Estimated No. of Serving Days per Year	Unit Price per Meal	Total Price	Delivery or Pick-Up Time	
Breakfast(1-2)						
Breakfast(3-5)						
Breakfast(6-12)						
AM Snack(1-2)						
AM Snack(3-5)						
AM Snack(6-12)						
Lunch(1-2)	8	144	\$4.00	\$4,608.00	10:45am	
Lunch(3-5)	72	144	\$4.00	\$41,472.00	10:45am	
Lunch(6-12)						
PM Snack(1-2)						
PM Snack(3-5)						
PM Snack(6-12)	1					
 Provide meals in:	_X pick up by cer using the KY CACFP payment by the d cost determination ecords will be made	nter or delivery slip form. Sth of each morecords for a perioravailable to the KY	nth to the mailing a d of 3 years after th CACFP, representat	address provided ne end of the agr	l. eement period to w	
ne sponsor/Institution agrees ethlehem High School Distric ceipt of meals. If for any rea otification.	t Food Service warra	nts meals provided	are safe and whole	esome, but that	liability is severed up	
witness whereof, the partie	w_2 =	_	be executed by th	eir duly authoriz	ed officers.	
/: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		9 \$	By:			
Authorized Signature	Date	_		ed Signature	Date	
CK4 HS Title		_		Title		
Child Care Center			Sc	hool District Foo	d Sorvico	