ADDENDUM TO CACFP FOOD PROCUREMENT CONTRACT

The	(hereinafter "Sponsor")
(Name of sponsoring agency)	
and	(hereinafter "Vendor")
(Name of vend	
currently have an existing food procurement contract (as checked below) that is in effect through	
	(month/day/year)
☐ School Food Service Vending Agreement	☐ Invitation For Bid and Contact
	□ Renewal Contract for Invitation For Bid and Contract
·	
	, both parties mutually agree to [check applicable box (es)]:
☐ Add the following site(s):	
[Lis	st site name(s)]
☐ Add meal(s) and /or snack(s) as checked below to the exi	isting contract heginning
Breakfast Lunch Su	ipper (month/day/year)
Breakfast Lunch Su AM Snack PM Snack Evolution	ening Snack
$\hfill\Box$ Extend existing contract (as noted above) on a short term	
(month/day/year)	
•	ne above date, the sponsor must obtain approval from the State
Agency before another addendum is completed and signed by both parties. Addendums cannot be used as a method to	
avoid completion of the required CACFP food procurement	contracts.)
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TERMS The price per meal for added meal/snack or for meals/snack	
The price per meal for added meal/snack or for meals/snacks at new site(s) will be: \$breakfast \$lunch \$supper \$snacks	
Δ11 other terms and conditions of the existing contract check	\$supper \$snacks ked above will be applicable to this addendum except for (list
any changes):	
any changes)	
ATTACHMENTS	
For New/Added Site: Sponsor must submit to the State Age	
inspection report for new/added site. For Added Meal/Snac	ck: Sponsor must submit to the State Agency copy of one
month's menus for the meal/snack.	
APPROVAL	
	rement contract is subject to approval by the Child and Adult
Care Food Program, Ohio Department of Education.	onioni contract to subject to appear and all
SIGNATURES	
IN WITNESS WHEROF, the parties hereto have executed this Addendum to the Existing CACFP Food Procurement	
Contract as of the date indicated below. The individuals sign	
authorization to bind the agency to legal and binding agreen	
SPONSORING AGENCY	VENDOR
Signature of Authorized Representative:	Signature of Authorized Representative:
Print Name:	Print Name:
Title:	Title:
Date:	Date:
Telephone:	Telephone:
Fax Number:	Fax Number:
rax number.	rax number.