



100 North First Street
Springfield, Illinois 62777-0001

POST-CONTRACT AWARD SUMMARY SHEET- INFORMAL IFB VENDED MEALS

NUTRITION DEPARTMENT

Upon completion of the contract award, please submit this completed form along with the required documentation listed below, via mail or email.

A. School Food Authority (SFA) Information

AGREEMENT NUMBER (RCDT CODE - unique identifier or your SFA)	SCHOOL FOOD AUTHORITY NAME (Full official name of the SFA)	
ADDRESS (Include Street, City, State, and ZIP Code)		
AUTHORIZED REPRESENTATIVE* (as listed on WINS sponsor application)	PHONE NUMBER (Include Area Code)	EMAIL
PROCUREMENT CONTACT (MUST be employed directly by the SFA)	PHONE NUMBER (Include Area Code)	EMAIL

*** The Authorized Representative is the individual who is the highest-ranking official that is legally and financially responsible for all areas of the school district or organization. For public schools this would be the District Superintendent.**

B. Contract Award

CONTRACT AWARD DATE	COMPANY AWARDED THE CONTRACT	TOTAL ESTIMATED CONTRACT COST
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C. Required Documentation Checklist

Submit **signed copies** of the following documents with this completed form. **Retain the originals in the SFA file.**

- Written Purchase Description (Informal IFB)**
Copy of the written purchase description (Informal IFB) sent to companies.
- Section 22 – Bid Summary Sheet**
 - A Bid Summary Sheet for **each bid received**.
 - The Bid Summary Sheet for the **awarded bid**, signed by both parties.
- Section 23 – Contract Certification Forms**
All applicable contract certification forms.
- Solicitation Email**
Copy of the email listing the date, time, and companies that received the solicitation.
 - The SFA is required to send the solicitation to **all companies on the ISBE List of Known FSMC-Vended Meals Companies in the SNP**.
- Statement of No Bid / No Proposal**
Statement from vendors opting not to submit a bid/proposal.
 - If **fewer than three bids/proposals** are received, the SFA is required to contact all companies on the **ISBE known list** by email and request that they complete and return a Statement of No Bid/No Proposal.
 - Submit a copy of the email sent to those companies.
- Completed Evaluation**
Completed evaluation summarizing **all quotes/bids received**.

D. 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 the executed Solicitation is the same Solicitation previously submitted to the Illinois State Board of Education and determined in compliance with all applicable regulations and statutes.
- ☐ The School Food Authority agrees that it will not amend, supplement, or otherwise modify the executed solicitation or resulting contract except as permitted under applicable law and program requirements and, when required, only after obtaining written approval from the Illinois State Board of Education. Furthermore, I understand that additional documents and/or agreements, including those developed by the contractor, cannot become part of the executed contract.
- ☐ 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 the Solicitation and all related documents are subject to review by the Illinois State Board of Education and the United States Department of Agriculture at any time. I acknowledge that knowingly making or causing to be made a materially false statement or certification in connection with this procurement or the receipt of federal funds may result in administrative, civil, or criminal penalties under applicable federal or state law, as well as other remedies authorized by law.
- ☐ I certify that the individual signing this document on behalf of the School Food Authority represents and warrants that they possess full legal authority and fiscal authorization to bind the School Food Authority to the terms and obligations set forth in the procurement process.

SFA AUTHORIZED REPRESENTATIVE*	TITLE
DISTRICT/SCHOOL NAME	RCDT CODE

Digital Signature of Representative

Date

*** The Authorized Representative is the individual who is the highest-ranking official that is legally and financially responsible for all areas of the school district or organization. For public schools this would be the District Superintendent.**

Maintain a copy of this form for your records.

Mail or email signed and dated form along with copies of all required documentation to:

Mail: Nutrition Procurement Department
Illinois State Board of Education
100 North First Street W270
Springfield, IL 62777-0001

Email: NutritionProcurement@isbe.net