


**BID2020-36 SUMMER FOOD SERVICE PROGRAM FOR THE CITY OF TRENTON, DEPARTMENT OF RECREATION, NATURAL RESOURCES, AND CULTURE BID  
OPENING 5/27/2020 AT 11:00AM**

<b>BID2020-36 SUMMER FOOD SERVICE PROGRAM FOR THE CITY OF TRENTON, DEPARTMENT OF RECREATION, NATURAL RESOURCES, AND CULTURE</b>	
<b>NUMBER OF RESPONDENTS:</b>	<b>1</b>
<b>NAME OF BIDDER</b>	<b>PREFERRED MEAL SYSTEMS, INC.</b>
<b>ADDRESS</b>	5240 ST. CHARLES ROAD
<b>CITY, STATE, ZIP</b>	BERKELEY, IL 60163
<b>CONTACT NAME</b>	<b>HEATHER MCDERMOTT</b>
<b>TELEPHONE</b>	708-318-2500
<b>FAX</b>	708-493-2690
<b>E-MAIL</b>	<a href="mailto:HEATHER.MCDERMOTT@PREFERREDMEALS.COM">HEATHER.MCDERMOTT@PREFERREDMEALS.COM</a>
<b>STATEMENT OF OWNERSHIP DISCLOSURE</b>	INCLUDED
<b>BID GUARANTEE</b>	10% THE AMERICAN INSTITUTE OF ARCHITECTS W.P.O.A/STEPHEN A. VANN
<b>CONSENT OF SURETY</b>	THE AMERICAN INSTITUTE OF ARCHITECTS
<b>PERFORMANCE BOND AND LABOR AND MATERIAL PAYMENT BONDS</b>	<b>REQUIRED FROM AWARDED VENDOR WITH SIGNED CONTRACTS</b>
<b>MANDATORY EQUAL EMPLOYMENT OPPORTUNITY EXHIBIT A</b>	INCLUDED
<b>REQUIRED EVIDENCE EEO/AFFIRMATIVE ACTION REGULATIONS QUESTIONNAIRE</b>	INCLUDED
<b>ACKNOWLEDGEMENT OF RECEIPT OF ADDENDA</b>	N/A
<b>NJ BUSINESS REGISTRATION CERTIFICATE</b>	INCLUDED
<b>EIC</b>	CERT.#2895 EXP. 08/15/2021
<b>NON-COLLUSION AFFIDAVIT</b>	INCLUDED
<b>AMERICANS WITH DISABILITIES ACT OF 1990 LANGUAGE</b>	INCLUDED
<b>DISCLOSURE OF INVESTED ACTIVITIES IN IRAN</b>	INCLUDED
<b>ETHICS COMPLAINT DISCLOSURE</b>	INCLUDED
<b>DEBARMENT NOTICE REQUIRED</b>	INCLUDED
<b>CERTIFICATE OF INSURANCE</b>	<b>REQUIRED FROM AWARDED VENDOR</b>
<b>CITY OF TRENTON RESIDENT EMPLOYMENT POLICY</b>	INCLUDED
<b>60-DAY EXTENSION COMPLIANCE</b>	YES
<b>COMPLIANCE WITH EMERGENCY SERVICES</b>	YES
<b>THREE (3) REFERENCES</b>	INCLUDED
<b>TOTAL ESTIMATED AMOUNT OF BID</b>	<b>\$273,576.11(SEE ATTACHED BREAKDOWN OF PRICING)</b>
<b>EXCEPTIONS (IF ANY)</b>	NONE
<b>FATAL FLAW</b>	<b>NONE</b>

## NJDA SFSP FOOD SERVICE MANAGEMENT COMPANY CONTRACT

This document contains an invitation to food service management companies to bid for the furnishing of unitized meals to be served to children participating in the Summer Food Service Program (SFSP) authorized by Section 13 of the National School Lunch Act and operated under Part 225 of the United States Department of Agriculture (USDA) regulations. This document sets forth the terms and conditions applicable to the proposed procurement. Upon acceptance it shall constitute the contract between the bidder and the sponsor named below.

SPONSOR		BID OPENING		
NAME CITY OF TRENTON		BID ADVERTISING DATE 5/12/2020	BID NUMBER BID2020-36	
AGREEMENT #21200003		DATE: 05/27/2020		
ADDRESS (Include City, State, Zip Code) 319 E. STATE STREET, TRENTON, NJ 08608		TIME 11:00 AM		
CONTACT NAME: MARIA RICHARDSON		LOCATION: CITY OF TRENTON DIV. OF PURCHASING, CITY HALL, FIRST FLOOR, 319 E. STATE ST, TRENTON, NJ 08608		
TELEPHONE NUMBER: 609-989-3361		TELEPHONE NUMBER: 609-989-3138		
BIDDER				
NAME Preferred Meal Systems, Inc.		SIGNATURE (In ink) 		
STREET ADDRESS (Include City, State, Zip Code) 5240 St. Charles Road, Berkeley, IL 60163		NAME (Print or Type) Patrice Tillman		
TELEPHONE NUMBER 708-318-2500		TITLE VP - Controller		
		DATE 05/21/2020		
SECTION A - UNIT PRICE SCHEDULE/CONTRACT DATES				
START DATE: July 6, 2020		END DATE: August 21, 2020		
MEAL TYPE	ESTIMATED NUMBER OF SERVINGS (MEALS) PER DAY	ESTIMATED NUMBER OF SERVING DAYS	UNIT PRICE	ESTIMATED TOTAL PER MEAL
BREAKFAST	834	35	\$2.33	\$68,012.70
		35		
			Estimated Total	\$68,012.70
MEAL TYPE	ESTIMATED NUMBER OF SERVINGS (MEALS) PER DAY	ESTIMATED NUMBER OF SERVING DAYS	UNIT PRICE	ESTIMATED TOTAL PER MEAL
LUNCH	1436	35	\$4.09	\$205,563.40
			Estimated Total	\$205,563.40
TOTAL ESTIMATED AMOUNT OF BID (TO BE INSERTED BY THE BIDDER)				\$ 273,576.11
BID BOND PERCENTAGE REQUIRED (Sponsor shall insert appropriate percentage from 5% to 10%).		PERFORMANCE BOND PERCENTAGE REQUIRED (Sponsor shall insert appropriate percentage from 10% to 25%).		
Bid Bond	10 %	Performance Bond	10 %	
ACCEPTANCE				
Sponsor and FSMC agree to abide by all provisions, specifications and stipulations in the attached Contract, its Attachments A, B, C, D, E and F and the Bidding Requirements and Specifications which are expressly made part of this Contract.				
CONTRACT NUMBER		NAME (Print)		
SPONSOR SIGNATURE		TITLE	DATE	

New Jersey Department of Agriculture  
Division of Food & Nutrition  
Summer Food Service Program - Schedule A

Agreement No.: 11-0107  
Vendor ID: V21600124206  
Sponsor: CITY OF TRENTON  
319 E STATE ST  
TRENTON, NJ 086081809

CCR-Completed: Yes Phone: (609)989-3635  
DUNS No: 136478000  
Contact Person: ADAM CRUZ ACRUZ@TRENTONNJ.ORG

Revision Date Effective Date Status Approval Date  
08/21/2019 07/02/2019 A 08/20/2019

Site	Name/Address	Ph	Add. Days	Incl. Wthr	Bfst ALMS	Bfst Time	AM Sppl ALMS	AM Time	Lunch	Lunch Time	PM Sppl ALMS	PM Time	Dinn ALMS	Dinn Time	Days
O 006	COLUMBUS PARK HAMILTON & CHESTNUT AVES. TRENTON NJ 08618	(609)989-3628	27	C	15	09:00			15	12:00					M A
From 07/02/2019 To 08/16/2019 Elig Yes 2018 <i>7/10/20 8/21/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH BRFT ENDS= 10AM LUNCH ENDS= 2PM</u>												
O 067	ROWAN TOWERS 620 W STATE ST. TRENTON, NJ 08618	(609)382-5613	27	O	25	09:00			25	12:00					S A
From 07/02/2019 To 08/16/2019 Elig Yes 2018 <i>7/10/20 8/19/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH LUNCH ENDS= 2PM</u>												
O 089	SAMARITAN BAPTIST 531 DR. MLK BLVD TRENTON, NJ 08618	(609)883-5849	27	O	30	09:00			30	12:00					M A
From 07/02/2019 To 07/28/2019 Elig Yes 2018			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BRFT ENDS=10AM LUNCH ENDS= 2PM</u>												
O 155	LIFEGATE CHRISTIAN ASSEMBLY 801 S. CLINTON AVE TRENTON, NJ 08611	(609)856-0208		O	20	09:00			20	12:00					S A
From 07/02/2019 To 08/10/2019 Elig Yes 2018 <i>7/10/20 8/10/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH</u>												
O 186	EDGEWOOD PLAYGROUND EDGEWOOD AVE TRENTON, NJ 08618	(609)989-3161	27	C	15	09:00			15	12:00					M A
From 07/02/2019 To 07/26/2019 Elig Yes 2018 <i>7/10/20 8/21/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH BRFT ENDS= 10AM LUNCH ENDS= 2PM</u>												
O 188	JOHN BEECH PARK SCHENK THIRD STREET TRENTON, NJ 08611	(609)989-3161		O	20	09:00			20	12:00					S A
From 07/02/2019 To 08/10/2019 Elig Yes 2018 <i>7/10/20 8/10/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BRFT ENDS 10AM; LUNCH ENDS 2PM</u>												
O 302	AGABITI PARK ROEBLING AND EMORY ST TRENTON, NJ 08611	(609)989-3161	27	C	15	09:00			15	12:00					S A
From 07/02/2019 To 08/16/2019 Elig Yes 2018 <i>7/10/20 8/21/20</i>			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFT ENDS= 10AM LUNCH ENDS= 2PM</u>												

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Summer Food Service Program - Schedule A

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Vendor ID: V21600124206  
Sponsor: CITY OF TRENTON  
319 E STATE ST  
TRENTON, NJ 086081809

CCR-Completed: Yes Phone: (609)989-3635  
DUNS No: 138478000  
Contact Person: ADAM CRUZ, ACRUZ@TRENTONNJ.ORG

Revision Date 08/21/2019 Effective Date 07/02/2019 Status A Approval Date 08/20/2019

Site	Name/Address	Ph	Add. Days	Incl. Wthr	Bfst ALMS	Time Bfst	AM Sppl ALMS	Time Sppl	Lunch ALMS	Lunch Time ALMS	PM Sppl ALMS	Time Sppl	Dinn ALMS	Dinn Time	Def
O 304	LAUREL AVE PARK LAUREL AVE TRENTON, NJ 08618	(609)989-3161	O		20	09:00			20	12:00					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>08/10/2019</del> <i>8/21/2020</i> Elig Yea 2018</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BKFST ENDS 10AM; LUNCH ENDS 2PM</u></p>															
O 308	LIPINSKI PARK HEIL STREET TRENTON, NJ 08638	(609)989-3628	27	C	15	09:00			15	12:00					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>07/29/2019</del> <i>8/21/2020</i> Elig Yea 2018</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFST ENDS= 10AM LUNCH ENDS= 2PM</u></p>															
O 319	G GRANT 94FT (CAMP) 401 BRUNSWICK AVE TRENTON, NJ 08638	(609)851-0351	O		75	08:30			75	12:00					M A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>08/10/2019</del> <i>8/21/2020</i> Elig Yea 2016</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFST ENDS= 9:30AM LUNCH ENDS= 2PM</u></p>															
O 325	GEORGE PAGE PARK N. OLDEN & LAWRENCE ST TRENTON, NJ 08638	(609)989-3448	27	C	15	09:00			15	12:00					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>07/29/2019</del> <i>8/21/2020</i> Elig Yea 2016</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFST ENDS= 10AM LUNCH ENDS= 2PM</u></p>															
O 346	IKE WILLIAMS CENTER CLAY STREET TRENTON, NJ 08609	(609)886-3161	27	O	25	08:30			25	1:30					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>08/10/2019</del> <i>8/21/2020</i> Elig Yea 2016</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFST ENDS= 9:30AM LUNCH ENDS= 1:30PM</u></p>															
O 347	G GRANT PARK ESTATE STREET TRENTON, NJ 08250	(609)989-3161	O		20	09:00			20	12:00					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>08/10/2019</del> <i>8/21/2020</i> Elig Yea 2016</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BKFST ENDS 10AM; LUNCH ENDS 2PM</u></p>															
O 352	HOLY CROSS CHURCH 500 E. STATE ST TRENTON, NJ 08609	(609)383-0565	O		30	09:00			30	12:00					S A
<p>From: <del>07/02/2019</del> <i>7/10/2020</i> To: <del>07/26/2019</del> <i>8/21/2020</i> Elig Yea 2016</p> <p>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BRFST ENDS= 10AM LUNCH ENDS= 2PM</u></p>															

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TRENTON, NJ 086081809

CCR-Completed: Yes Phone: (609)989-3835  
DUNS No: 136478000  
Contact Person: ADAM CRUZ ACRUZ@TRENTONNJ.ORG

Revision Date: 08/21/2019 Effective Date: 07/02/2019 Status: A Approval Date: 08/20/2019

Site	Name/Address	Ph.	Add. Days	Incl Wthr	Bfst ALMS	Time Bfst	AM Sppl	Time AM Sppl	Lunch ALMS	Lunch Time ALMS	PM Sppl	Time PM Sppl	Dinn ALMS	Dinn Time	Dej	S	A
O 354	MLK PARK BRUNSWICK AVE NEAR SOUTHWA TRENTON, NJ 08618	Ph: (609)989-3161 From 07/09/2019 To: 08/16/2019 Elig Yes 2018	0	20	30	08:00			20	30	12:00						
Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BKFAST ENDS 10AM; LUNCH ENDS 2PM</u>																	
O 358	CHOSEN GENERATION 215 N MONTGOMERY ST TRENTON, NJ 08611	Ph: (609)638-4184 From 08/28/2019 To: 08/16/2019 Elig Yes 2016	27	0	50	60	08:00			60	60	12:00					
Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH</u>																	
<del>O 374</del>	<del>FOUNDATION ACQY CHARTE 363 WEST STATE STREET TRENTON, NJ 08618</del>	<del>Ph: (609)331-4856 From 07/08/2019 To: 07/28/2019 Elig Yes 2016</del>	<del>0</del>	<del>100</del>	<del>110</del>	<del>08:30</del>			<del>100</del>	<del>110</del>	<del>12:00</del>						
<del>Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BRFT ENDS= 9:30AM LUNCH ENDS= 2PM</u></del>																	
O 377	TRENTON POLICE HQ'S 225 NORTH CLINTON AVENUE TRENTON, NJ 08609	Ph: (609)789-7839 From 07/08/2019 To: 08/16/2019 Elig Yes 2016	0	25	35	08:00			25	35	12:00						
Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 30TH TO AUGUST 10TH BRFT ENDS= 9AM LUNCH ENDS= 2:00PM</u>																	
O 382	JUAN MARTINEZ MEM. PARK FURMAN ST./LAMBERTON ST. TRENTON, NJ 08611	Ph: (609)989-3161 From 07/09/2019 To: 08/16/2019 Elig Yes 2016	0	20	30	08:00			20	30	12:00						
Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>BKFAST ENDS 10AM; LUNCH ENDS 2PM</u>																	
O 384	CADWALADER PARK PROGRAM 299 PARKSIDE AVE TRENTON, NJ 08618	Ph: (609)989-3835 From 07/09/2019 To: 08/16/2019 Elig Yes 2016	27	0	40	80	09:00			40	80	12:00					
Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFT ENDS= 10AM LUNCH ENDS= 2PM</u>																	
<del>O 386</del>	<del>THE SALVATION ARMY 575 EAST STREET TRENTON, NJ 08609</del>	<del>Ph: (609)399-8373 From 07/08/2019 To: 08/02/2019 Elig Yes 2016</del>	<del>0</del>						<del>35</del>	<del>45</del>	<del>12:00</del>						
<del>Days of Operations: <u>M,T,W,Th</u> Comments: <u>CLOSED JULY 10TH LUNCH ENDS= 2PM</u></del>																	

New Jersey Department of Agriculture  
 Division of Food & Nutrition  
 Summer Food Service Program - Schedule A

Agreement No.: 11-0107  
 Vendor ID: V21800124208  
 Sponsor: CITY OF TRENTON  
 319 E STATE ST  
 TRENTON, NJ 086081809

CCR-Completed: Yes Phone: (809)989-3635  
 DUNS No: 136478000  
 Contact Person: ADAM CRUZ ACRUZ@TRENTONNJ.ORG

Revision Date 08/21/2019 Effective Date 07/02/2019 Status A Approval Date 08/20/2019

Site	Name/Address	Ph	Add. Days	Incl. Wthr	Bfst ALMS	Bfst Time	AM Sppl ALMS	AM Time	Lunch	LunchTime	PM Sppl ALMS	PM Time	Dinn ALMS	Dinn Time	Del. C
Q-300	NOAH'S ARK DAYCARE & PREK 225-229 PULTON STREET TRENTON, NJ 08611	Ph (800)308-7822 From 07/02/2019 To 08/16/2019 Elig Yea 2016	27	O	20	30	08:30			20	30	11:30			S A
			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFT ENDS= 9:30AM LUNCH ENDS= 1:30PM</u>												
O-382	BRROUTO PERFORMING ARTS 29 EXST PAUL AVENUE TRENTON, NJ 08638	Ph (809)989-0269 From 07/02/2019 To 08/16/2019 Elig Yea 2016	27	O	100	110	09:00			100	110	12:00			S A
			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH</u>												
O 399	CAPITAL CITY SPORTS COMP CALHOUN ST/ PRINCETON AVE TRENTON, NJ 08638	Ph (809)989-3628 From <del>07/02/2019</del> To <del>08/16/2019</del> Elig Yea 2016		C	15	25	09:00			15	25	12:00			M A
			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFT ENDS=10AM LUNCH ENDS= 2PM</u>												
O 400	RUSH CROSSING 180 RIBER AVENUE TRENTON, NJ 08609	Ph (267)253-7347 From 07/02/2019 To 08/14/2019 Elig Yea 2016	27	O						20	30	12:00			S A
			Days of Operations: <u>T, TH</u> Comments: <u>CLOSED JULY 4TH/ LUNCH ENDS= 2PM; ONLY OPEN TUES. &amp; THURS.</u>												
O 410	FAM TRANSITION SUP SVCS 169 WILFRED AVENUE HAMILTON, NJ 08618	Ph (215)208-5364 From <del>08/20/2019</del> To <del>08/16/2019</del> Elig Yea 2017		O	34	44	08:45			34	44	11:45			S A
			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/BRFT ENDS= 9:45AM LUNCH ENDS= 1:45PM</u>												
O 415	TCHS AYSAAP @ CAD PARK PARKSIDE AVE & WEST STATE TRENTON, NJ 08618	Ph (809)800-7164 From <del>08/20/2019</del> To <del>08/15/2019</del> Elig Yea 2017		C			08:30					12:00			M A
			Days of Operations: <u>T, TH</u> Comments: <u>BRFT ENDS= 9:30AM LUNCH ENDS= 2PM</u>												
Q 417	PAUL ROBESON CHARTER SCH 643 INDIANA AVENUE TRENTON, NJ 08638	Ph (809)394-7727 From 08/24/2019 To 07/19/2019 Elig Yea 2017		O	165	175	07:35			165	175	11:00			S A
			Days of Operations: <u>M,T,W,Th,F</u> Comments: <u>CLOSED JULY 4TH/ BRFT ENDS= 8:35AM LUNCH ENDS= 1PM</u>												

New Jersey Department of Agriculture  
 Division of Food & Nutrition  
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 TRENTON, NJ 086081809

CCR-Completed: Yes Phone: (609)989-3835  
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Site	Name/Address	Ph	Add. Days	Incl. Withr	Bfst	Bfst ALMS	Time Bfst	AM Splt	Time AM ALMS	Lunch	Lunch ALMS	Time LUNCH	PM Splt	Time PM ALMS	Dinn	Dinn ALMS	Time Dinn	Del		
O-422	<del>WW-REG-CENTER</del> 361 PROSPECT AVE TRENTON, NJ 08618	(609)989-3107 From 07/15/2019 To 08/16/2019 Elig Yea 2017	O				100	110	02:30						100	110	05:30	S	A	
			Days of Operations: <u>M,T,W,Th,F</u> Comments																	
O-428	<del>CARTER PARK</del> <del>GARFIELD AVE</del> BETWEEN E. STATE STRAVINSKY TRENTON, NJ 08618	(609)989-3835 From 07/02/2019 To 08/16/2019 Elig Yea	C	15	25	09:00				15	25	12:00							M	A
			Days of Operations: <u>M,T,W,Th,F</u> Comments <u>CLOSED JULY 4TH BRFT ENDS= 10AM LUNCH ENDS= 2PM</u>																	
O-429	W. TRENTON COMM. CENTER 510 STUYVESANT AVE TRENTON, NJ 08618	(609)600-4331 From 07/02/2019 To 08/16/2019 Elig Yea 2018	O	15	25	09:00				15	25	12:00							S	A
			Days of Operations: <u>M,T,W,Th,F</u> Comments <u>CLOSED JULY 4TH</u>																	
O-430	SAM NAPLES COMM CENTER 611 CHESTNUT AVE TRENTON, NJ 08611	(609)989-3462 From 07/04/2019 To 08/16/2019 Elig Yea 2018	O	25	35	09:00				25	35	12:00							S	A
			Days of Operations: <u>M,T,W,Th,F</u> Comments <u>CLOSED JULY 4TH BRFT ENDS= 9AM LUNCH ENDS= 1PM</u>																	
O-436	<del>CHARTER VILLAGE SCHOOL</del> <del>104 GULLIVAN WAY</del> TRENTON, NJ 08628	(609)695-0110 From 07/08/2019 To 08/05/2019 Elig Yea 2019	O	50	60	08:00				100	110	12:00							S	A
			Days of Operations: <u>M,T,W,Th,F</u> Comments <u>BRFT ENDS 9AM</u>																	
O-437	JOYCE KILMER MIDDLE SCH 1300 STUYVESANT AVENUE TRENTON, NJ 08618	(609)638-1556 From 07/01/2019 To 07/26/2019 Elig Yea 2019	C							75	85	12:00							S	A
			Days of Operations: <u>M,T,W,Th,F</u> Comments <u>LUNCH ENDS= 2PM</u>																	













SITE CODE

NEW JERSEY STATE DEPARTMENT OF AGRICULTURE  
 DIVISION OF FOOD & NUTRITION  
 CHILD NUTRITION PROGRAMS  
 SUMMER FOOD SERVICE PROGRAM  
 PO BOX 334  
 TRENTON, NJ 08625-0334

SITE INFORMATION SHEET

1. Sponsor Name CITY OF TRENTON, NEW JERSEY  
 2. Agreement Number 11-0107  
 3. Site Name Achievers Early Prep Ch. School  
 4. Street Address 500 Smith St  
 5. City, State, Zip Code Trenton NJ 08611  
 6. Telephone Number (732) 631-4009  
 7. Name of Site Supervisor \_\_\_\_\_

18 TYPES OF MEALS SERVED	STATE USE ONLY		
	Sponsor Estimate # Children Daily	Serving Total	# of meals approved
BREAKFAST			
AM Supper			
LUNCH	<u>150</u>	<u>1800</u>	
PM Supper			
DINNER			

NOTE: Residential and non residential camps estimate ELIGIBLES only

8. Type of Site (check one)  
 A. Open  
 B. Enrolled / Area Eligible  
 C. Enrolled / Non-Area Eligible  
 D. Migrant  
 E. Residential Camp  
 F. Homeless

9. Type of meal service: (check one)  
 A. Self-Preparation / On Site  
 B. Central Kitchen  
 C. Vended-Prepackaged  
 D. Food Service Mgt. Co.  
 E. School Contract

19. In Inclement Weather site will be:  
 Check one: Open  Closed   
 If relocating specify address: \_\_\_\_\_

10. If answer to 8 is A, B, or D, check one of the following to document that the site is an area in which poor economic conditions exist (at least 50% needy children, see procedures):  
 A. Census Tract Data (attach copy)  
 B. School Survey Data  
 Indicate specific school(s) nearest to the site address school year \_\_\_\_\_  
 C. Enrollment Documentation

20. Describe the Meal Service Area:  
 A. How many children can eat comfortable at one time? 150  
 B. Is there shift feeding?  Yes  No  
 C. Indicate how many staff will directly supervise the meal service.  
3

11. Indicate other United States Department of Agriculture (USDA) programs in which this site participates.  
 School Breakfast Prog.  Nat'l School Lunch Prog.  None  
 Child Care Food Prog.  Food Distribution Prog.  Other

NOTE: Sites may not receive simultaneous funding from more than one USDA program.

21. Describe the type and amount of refrigeration on site for holding meals until completion of meal service  
Commercial Refrigeration

22. ANSWER ONLY IF MEALS ARE DELIVERED TO SITE:  
 How will the need for meal adjustments be communicated to the sponsor?  
Telephone + email

12. Does this site operate year round?  Yes  No  
 13. Is this a Day Care Center?  Yes  No  
 If yes, complete Day Care Center Form.  
 14. Is there regularly scheduled organized activity?  Yes  No  
 15. Name and Address of Food Preparation Facility: (Self Prep and FSMC)  
 \_\_\_\_\_

CERTIFICATION

I CERTIFY THAT THIS SITE HAS BEEN VISITED ON \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ AND CONFIRMED THAT IT HAS THE CAPABILITY AND FACILITIES FOR MEAL SERVICE PLANNED FOR THE NUMBER OF CHILDREN ANTICIPATED TO BE SERVED. I FURTHER CERTIFY THAT THE INFORMATION ON THIS FORM AND SUBSEQUENT ATTACHMENTS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THIS INFORMATION IS BEING GIVEN IN CONNECTION WITH THE RECEIPT OF FEDERAL FUNDS AND THAT DELIBERATE MISREPRESENTATION MAY SUBJECT ME TO PROSECUTION UNDER APPLICABLE STATE AND FEDERAL CRIMINAL STATUTES. THE PROGRAM MUST BE MADE AVAILABLE TO ALL CHILDREN REGARDLESS OF SEX, AGE, RACE, COLOR, DISABILITY OR NATIONAL ORIGIN.

16. Site Operating Dates  
 Beginning 8/1/2020 Closing 8/7/2020

17. Site Number of Operating Days (Meals Served to Children):  
 June \_\_\_ July \_\_\_ Aug 5 Sept \_\_\_ Total Days 5  
 (Residential Camps & Colleges Only)  
 Check if open  Sat  Sun Total # Sat/Sun \_\_\_\_\_  
 ((Indicate Sat/Sun dates of operation (month/day))

Name/Title of Site Rep \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Curt Kido-Burg - District Manager 3-27-2020  
 Name/Title Authorized Sponsor/Rep \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
[Signature] 3-27-2020

STATE AGENCY USE ONLY:  
 Percentage of children verified as eligible for free and reduced priced meals \_\_\_\_\_ % Verification source:  School Survey  Census

Approved By \_\_\_\_\_ Date \_\_\_\_\_  
 Computer Entry By \_\_\_\_\_ Date \_\_\_\_\_

**USDA Food and Nutrition Service  
NJ Summer Food Service Program (SFSP)  
SCHEDULE B**

**Meal Patterns**

**Breakfast Meal Pattern**

**Select All Three Components for a Reimbursable Meal**

1 milk	1 cup	fluid milk
1 fruit/vegetable	1/2 cup	juice, 1 and/or vegetable
1 grains/bread <sup>2</sup>	1 slice 1 serving 3/4 cup 1/2 cup 1/2 cup	bread or cornbread or biscuit or roll or muffin or cold dry cereal or hot cooked cereal or pasta or noodles or grains

-----  
1. Fruit or vegetable juice must be full-strength.

2. Breads and grains must be made from whole-grain or enriched meal or flour. Cereal must be whole-grain or enriched or fortified.

**Lunch or Supper Meal Pattern**

**Select All Four Components for a Reimbursable Meal**

1 milk	1 cup	fluid milk
2 fruits/vegetables	3/4 cup	juice, 1 fruit and/or vegetable
1 grains/bread <sup>2</sup>	1 slice 1 serving 1/2 cup 1/2 cup	bread or cornbread or biscuit or roll or muffin or hot cooked cereal or pasta or noodles or grains
1 meat/meat alternate	2 oz. 2 oz. 2 oz. 1 large 1/2 cup 4 Tbsp. 1 oz. 8 oz.	lean meat or poultry or fish 3 or alternate protein product or cheese or egg or cooked dry beans or peas or peanut or other nut or seed butter or nuts and/or seeds 4 or yogurt 5

-----  
1. Fruit or vegetable juice must be full-strength. Full strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.

2. Breads and grains must be made from whole-grain or enriched meal or flour. Cereal must be whole-grain or enriched or fortified.

3. A serving consists of the edible portion of cooked lean meat or poultry or fish.

4. Nuts and seeds may meet only one-half of the total meat/meat alternate serving and must be combined with another meat/meat alternate to fulfill the lunch or supper requirement.

5. Yogurt may be plain or flavored, unsweetened or sweetened.

**Snack (Supplement) Meal Pattern**

**Select Two of the Four Components for a Reimbursable Snack**

1 milk	1 cup	fluid milk
1 fruit/vegetable	3/4 cup	juice, <sup>1</sup> fruit and/or vegetable

1 grains/bread <sup>2</sup>	1 slice 1 serving 3/4 cup 1/2 cup 1/2 cup	bread or cornbread or biscuit or roll or muffin or cold dry cereal or hot cooked cereal or pasta or noodles or grains
1 meat/meat alternate	1 oz. 1 oz. 1 oz. 1/2 large 1/4 cup 2 Tbsp. 1 oz. 4 oz.	lean meat or poultry or fish <sup>3</sup> or alternate protein product or cheese or egg or cooked dry beans or peas or peanut or other nut or seed butter or nuts and/or seeds or yogurt <sup>4</sup>

- 
1. Fruit or vegetable juice must be full-strength. Juice cannot be served when milk is the only other snack component.
  2. Breads and grains must be made from whole-grain or enriched meal or flour. Cereal must be whole-grain or enriched or fortified.
  3. A serving consists of the edible portion of cooked lean meat or poultry or fish.
  4. Yogurt may be plain or flavored, unsweetened or sweetened.

NEW JERSEY DEPARTMENT OF AGRICULTURE  
 DIVISION OF FOOD & NUTRITION  
 SUMMER FOOD SERVICE PROGRAM  
 PO BOX 334  
 TRENTON NJ, 08625-0334

**STATE AGENCY USE ONLY:**  
 Approved by \_\_\_\_\_ Date \_\_\_\_\_  
 Expiration Date \_\_\_\_\_  
 MO/DA/YR

Sponsor CITY OF TRENTON  
 Agreement #           
 Telephone 609-964-3361

**SCHEDULE C  
 TEN DAY MENU PLANNER**

WEEK 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/>		DAY 1		DAY 2		DAY 3		DAY 4		DAY 5	
REQUIRED COMPONENTS		Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size
B P A S T	1. Juice or Fruit or Vegetables (2)	FRESH PEACH	1/2 c soss.	FRESH PLUM	1/2 c soss.	FRESH BANANA	1/2 c soss.	FEST PEACH	1/2 c soss.	FRESH STRAWBERRY	1/2 c soss.
	2. Bread or Bread Alternate (3)	APPLE CINNAMON CEREALS	1 SERV.	BANANA MUFFIN	1 SERV.	CHEERIOS	1 SERV.	BANANA MUFFIN	1 SERV.	MULTIGRAIN GOLDEN GRAHAMS	1 SERV.
	3. MILK	1% WHITE MILK	8 OZS.	FAT FREE STRAWBERRY MILK	8 OZS.	1% WHITE MILK	8 OZS.	FAT FREE CHOCOLATE MILK	8 OZS.	1% WHITE MILK	8 OZS.
A M S E R I C S	1. MILK		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.
	2. Juice or Fruit or Vegetable (2)		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.
	3. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	4. Meat or Meat Alternate (1)		1 oz.		1 oz.		1 oz.		1 oz.		1 oz.
L U N C H	1. Meat or Meat Alternate (1)	SLICED CHICKEN	2 OZS.	TURKEY HAM & AMERICAN CHEESE	2 OZS.	CHICKEN SALAD	2 OZS.	BEEF BOLOGNA & CHEDDAR CHEESE	2 OZS.	TURKEY MEAT	2 OZS.
	2. Juice or Fruit or Vegetable (2)	ORANGE JUICE	1/2 c soss.	APPLE JUICE	1/2 c soss.	GRAPE JUICE	1/2 c soss.	APPLE JUICE	1/2 c soss.	ORANGE JUICE	1/2 c soss.
	3. Fruit or Vegetable	CANTALOUPE	1/4 c soss.	FRESH NECTARINE	1/4 c soss.	FRESH STRAWBERRIES	1/4 c soss.	NECTARINE	1/4 c soss.	HONEY DEW MELON	1/4 c soss.
	4. Bread or Bread Alternate (3)	WHOLE GRAIN WHITE BREAD	1 SERV.	WHOLE WHEAT ROLL	1 SERV.	KASHI ROLL	1 SERV.	WHOLE WHEAT ROLL	1 SERV.	WHOLE WHEAT BREAD	1 SERV.
	5. MILK	1% WHITE MILK	8 OZS.	FAT FREE CHOCOLATE MILK	8 OZS.	1% WHITE MILK	8 OZS.	FAT FREE STRAWBERRY MILK	8 OZS.	1% WHITE MILK	8 OZS.
P H O L E G R A I N	1. MILK		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.
	2. Juice or Fruit or Vegetable (2)		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.
	3. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	4. Meat or Meat Alternate (1)		1 oz.		1 oz.		1 oz.		1 oz.		1 oz.
D I E T A R Y	1. Meat or Meat Alternate (1)		2 OZS.		2 OZS.		2 OZS.		2 OZS.		2 OZS.
	2. Juice or Fruit or Vegetable (2)		1/2 c soss.		1/2 c soss.		1/2 c soss.		1/2 c soss.		1/2 c soss.
	3. Fruit or Vegetable		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.		1/4 c soss.
	4. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	5. MILK		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.

\* PLEASE REFER TO SCHEDULE B OF THE AGREEMENT AND THE ODPD NUTRITION GUIDANCE FOR SPONSORS FOR PORTION REQUIREMENT

(1) Cold cut meats with high water content, is "Rolls" - Turkey Roll must = 2.5 oz.  
 (1) Peanut butter meat = 4 tablespoons. (2) Sandwiches require 2 servings of bread.  
 (2) Cold dry cereal must = 1/4 cup.



COMPONENT

(1) Juice or Fruit or Vegetable (2) 1/2 c. (3) Milk 8 oz.

NEW JERSEY DEPARTMENT OF AGRICULTURE  
DIVISION OF FOOD & NUTRITION  
SUMMER FOOD SERVICE PROGRAM  
PO BOX 134  
TRENTON NJ, 08623-0334

STATE AGENCY USE ONLY:

Approved by \_\_\_\_\_ Date \_\_\_\_\_

Expiration Date \_\_\_\_\_

MO/DAY/YR

Sponsor City of Trenton  
Agreement #             
Telephone 609-989-1161

**SCHEDULE C  
TEN DAY MENU PLANNER**

WEEK 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/>		DAY 1		DAY 2		DAY 3		DAY 4		DAY 5	
REQUIRED COMPONENTS		Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size	Food Item	Portion Size
B R E A K F A S T	1. Juice or Fruit or Vegetables (2)	APPLE JUICE	1/2 c. 6oz.	FRUIT PUNCH JUICE	1/2 c. 6oz.	FRESH BANANA	1/2 c. 6oz.	FRESH GRAPES	1/2 c. 6oz.	ORANGE JUICE	1/2 c. 6oz.
	2. Bread or Bread Alternate (3)	RICE CHEX CEREAL	1 SERV.	BLUEBERRY MUFFIN	1 SERV.	CINNAMON TOAST CRUNCH	1 SERV.	APPLE MUFFIN	1 SERV.	FRUITY CHEERIOS	1 SERV.
	3. Milk	1% WHITE MILK	8 OZS.	FAT FREE STRAWBERRY MILK	8 OZS.	1% WHITE MILK	8 OZS.	FAT FREE CHOCOLATE MILK	8 OZS.	1% WHITE MILK	8 OZS.
A F T E R N O O N	1. Milk		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.
	2. Juice or Fruit or Vegetable (2)		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.
	3. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	4. Meat or Meat Alternate (1)		1 OZ.		1 OZ.		1 OZ.		1 OZ.		1 OZ.
L U N C H	1. Meat or Meat Alternate (1)	CHICKEN PATTY & PROVOLONE CHEESE	2 OZS.	BEEF PASTRAMI & AMERICAN CHEESE	2 OZS.	TURKEY SALAMI	2 OZS.	CORNEBEEF & SWISS CHEESE	2 OZS.	TUNA SALAD	2 OZS.
	2. Juice or Fruit or Vegetable (2)	ORANGE JUICE	1/2 c. 6oz.	APPLE JUICE	1/2 c. 6oz.	GRAPE JUICE	1/2 c. 6oz.	FRUIT PUNCH 100% JUICE	1/2 c. 6oz.	LETTUCE & TOMATOES	1/2 c. 6oz.
	3. Fruit or Vegetable	LETTUCE AND TOMATOES	1/4 c. 2oz.	FRESH PLUM	1/4 c. 2oz.	COLESLAW	1/4 c. 2oz.	WATERMELON	1/4 c. 2oz.	FRESH PEACH	1/4 c. 2oz.
	4. Bread or Bread Alternate (3)	WHOLE GRAIN WHITE BREAD	1 SERV.	WHOLE WHEAT ROLL	1 SERV.	WHOLE WHEAT BREAD	1 SERV.	KAISER ROLL	1 SERV.	WHOLE WHEAT BUN	1 SERV.
	5. Milk	FAT FREE STRAWBERRY MILK	8 OZS.	1% WHITE MILK	8 OZS.	1% WHITE MILK	8 OZS.	FAT FREE STRAWBERRY MILK	8 OZS.	1% WHITE MILK	8 OZS.
P M S N E C K T	1. Milk		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.
	2. Juice or Fruit or Vegetable (2)		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.		3/4 c. 6oz.
	3. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	4. Meat or Meat Alternate (1)		1 OZ.		1 OZ.		1 OZ.		1 OZ.		1 OZ.
D I N N E R	1. Meat or Meat Alternate (1)		2 OZS.		2 OZS.		2 OZS.		2 OZS.		2 OZS.
	2. Juice or Fruit or Vegetable (2)		1/2 c. 6oz.		1/2 c. 6oz.		1/2 c. 6oz.		1/2 c. 6oz.		1/2 c. 6oz.
	3. Fruit or Vegetable		1/4 c. 2oz.		1/4 c. 2oz.		1/4 c. 2oz.		1/4 c. 2oz.		1/4 c. 2oz.
	4. Bread or Bread Alternate (3)		1 SERV.		1 SERV.		1 SERV.		1 SERV.		1 SERV.
	5. Milk		8 OZS.		8 OZS.		8 OZS.		8 OZS.		8 OZS.

\* PLEASE REFER TO SCHEDULE B OF THE AGREEMENT AND THE SMPF NUTRITION GUIDANCE FOR SPONSORS FOR PORTION REQUIREMENTS

(1) Cold cut meats with high water content. In "Rolls" - Turkey Roll meat = 2.5 oz.  
(2) Sandwiches require 2 servings of bread.  
(3) Fat-free chocolate milk = 1.5 oz.