



MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

Community Food and Nutrition Assistance (CFNA)

**Child and Adult Care Food
Program**

**Competitive Bid Procedures
for Meal Service Contracts**

\$250,000.00 or less

Missouri Department of Health and Senior Services Community
and Public Health
Community Food and Nutrition Assistance
P.O. Box 570
Jefferson City, Mo 65102
Telephone: 800-733-6251
Fax: 573-526-3679
E-mail: CACFP@health.mo.gov www.health.mo.gov/cacfp

JUNE 2025

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD- 3027, USDA Program Discrimination Complaint Form which can be obtained online

at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil
Rights 1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:

(833) 256-1665 or (202) 690-7442; or

3. email:

Program.Intake@usda.gov

This institution is an equal opportunity provider.

Sponsors must use the bid prototype included in this packet if the food service contract has a total aggregate value of \$250,000.00 or less. If the contract will exceed \$250,000.00, please contact the Department of Health and Senior Services-Community Food and Nutrition Assistance (DHSS-CFNA) at 800-733-6251 for the correct bid packet.

Contracts for \$250,000.00 or less are not required to follow the formal invitation for bid process; however, it is the sponsor's responsibility to ensure that competitive procurement procedures are followed.

- **Schedule A-List of Centers/Sites/Homes where program will operate** - List the name of centers/sites/homes, address and phone number, authorized designee, meal type, quantity of meals, delivery time of meals, days of operation, beginning and ending date of program, and holding facilities at center/site/home.
- **Schedule B-Two-Week Cycle Menu** - Develop, at a minimum, a two-week cycle menu and insert it into Schedule B of the bid packet. Program regulations specify minimum meal pattern requirements, but sponsors may improve upon these minimums to increase the variety and appeal of menus. **Do not let potential bidders provide the menus.** Each potential bidder must be given a fair and equal opportunity to bid on the SAME meals. Resources needed to develop the menus include:
 - **Standardized Recipes:** A standardized recipe is one that has been tried several times using the same method and equipment. A standardized recipe produces consistency in product quality and yield the same number of servings every time it is used as long as the same procedures, equipment, and ingredients are used. Because standardized recipes specify exact amounts of ingredients, it is easier to manage the cost and storage of foods. A link to the USDA Standardized Recipes is available on the CACFP website at: <http://health.mo.gov/cacfp>.
 - **The USDA Food Buying Guide (FBG) for Child Nutrition Programs is available as an interactive web-based tool, as a mobile app, and as a downloadable PDF.** USDA resources help you determine the right amount of food and appropriate type of food to purchase for your program. These resources aid in determining the specific meal contribution each food makes towards the meal pattern requirements, as well as providing information on recipe analysis. The FBG, Web-based Interactive FBG, The FBG Mobile App, and The FBG Calculator are available online at: <https://www.fns.usda.gov/tn/food-buying-guide-for-child-nutrition-programs>.
 - Food specifications must describe the sponsor's needs in clear and precise language. **The specifications should not include information, which could restrict competition.** Restriction of competition might

include the use of brand-name products or a description of a product that may limit the bid to one supplier.

- **Schedule C-Child and Adult Care Food Program Food Charts** available on the CACFP website at: <http://health.mo.gov/cacfp>.
- **Schedule D-CACFP Unit Price Table** will be used to track unit prices from bidders. Sponsors will use this information to complete the **Documentation of FSMC Contact Sheet for CACFP**.
- **Bidder Certification Sheet** will be used to verify that the bidders listed on the Documentation of Contact Sheet for CACFP were provided with bid packets that included a Schedule-A List of Sites where program will operate, Schedule B-Two-Week Cycle Menu, Schedule C- Child and Adult Care Food Program Food Charts, and Schedule D- Child and Adult Care Food Program Unit Price Table from the sponsor.

Contact at least three reputable Food Service Management Companies (FSMC) by email, fax or in person and obtain written price quotes on the meals you propose to serve. You will need to supply **Schedule A - List of Centers/Sites/Homes where program will operate, Schedule B – Two-Week Cycle Menu, and Schedule C - Child and Adult Care Food Program Food Charts, Schedule D – CACFP Unit Price Table, and the Bidder Certification Sheet** to assist with verifying the bid process was completed and assuring meals meet minimum requirements.

- Document the information and price quotes obtained from the companies contacted on the **Documentation of FSMC Contact for CACFP** attachment.
- Consideration shall be given to such matters such as contractor integrity, compliance with public policy, record of past performance, lack of conflict of interest, and financial and technical resources.
- The award of the contract goes to the lowest bidder unless the sponsor has documentation and justification to support awarding the bid to someone other than the lowest bidder. Any bid that the sponsor wishes to accept that is not the lowest bid must have the approval of DHSS-CFNA prior to acceptance.
- Choose the company that offers the best quality meals at the lowest price. Sign a contract with the company using the contract prototype provided by DHSS-CFNA. The signed contract should only be completed by the chosen company.
- Send a copy of the Documentation of FSMC Contact for CACFP, the bidder certification sheets, accepted bid documents, chosen contractor's business license along with a sanitation inspection and/or health permit that is within the last year, and the completed and signed contract to CFNA **within 5 days of signing**.

The sponsor is ultimately responsible for assuring that all requirements are being met by the Food Service Management Company, including the responsibility for maintaining menus and production records.

These records should be collected by the sponsor on a weekly, or no more than monthly,

basis. The records should be reviewed for accuracy and adequacy to assure the meals meet minimum requirements.

Items DHSS-CFNA requires from sponsor to approve contract:

- ☐ Documentation of FSMC Contact for CACFP
- ☐ Bidder Certification Sheets (per contractor)
- ☐ Accepted Bid Documents (all schedules provided to the chosen FSMC)
- ☐ Completed and Signed Contract
- ☐ Copy of Contractor's Current Business License
- ☐ Sanitation Inspection and/or Health Permit (within the last year)
- ☐ Certification that the owner/operator(s) of the FSMC (contractor) is not on the USDA National Disqualified List (NDL). By checking this box and signing the FSMC contract, the sponsor is certifying they have verified that the FSMC owner/operator(s) is not on the NDL (<https://snp.fns.usda.gov/ndlweb/Welcome.action>).

Missouri Department of Health and Senior Services
Community Food and Nutrition Assistance
Child and Adult Care Food Program
Food Service Management Contract for \$250,000.00 or less

This agreement is made and entered into by and between:

Name of Sponsor

Name of Contractor

The contractor agrees to furnish meals as ordered by the sponsor for the period of:

_____ To _____
Beginning Date Ending Date

Based on the following:

	Estimated Number of Meals Served Per Day		Estimated Number of Serving Days Per Year		Unit Price		Total Price
Breakfast		X		X		=	
Lunch		X		X		=	
Snack		X		X		=	
Supper		X		X		=	
					Grand Total		

The unit prices submitted are based on the cycle menu attached (Schedule B), which is a part of this Agreement. The meals furnished shall meet or exceed requirements as specified in Section 226.20 of the Child and Adult Care Food Program (CACFP) Federal Regulations, attached copy of which is a part of this agreement. The contractor agrees to deliver ☐ **Unitized** ☐ **Bulk** meals ☐ **Inclusive** ☐ **Exclusive** of milk on a daily basis to the location(s) during the timeframes indicated on the delivery schedule attached which is part of this agreement (Schedule A).

The sponsor will make notification of any changes in approved sites not less than ____ days prior to the day of delivery of the meals. The sponsor reserves the right to increase or decrease the number of meals ordered on a ____ hour notice or less if mutually agreed upon between the parties of this Agreement.

The contractor agrees to package and deliver meals in containers that meet local health standards. Potentially hazardous foods shall be maintained at temperatures of 41 degrees Fahrenheit or below or at 135 degrees Fahrenheit or above during transport. The contractor assures that it has state or

local health certification at the preparation facility and assures that health and sanitation requirements will be met at all times. If requested, the contractor agrees to provide meals for periodic inspection to determine bacteria levels. The contractor shall provide the sponsor with a copy of the health inspection certification.

The contractor shall attach a ticket with each delivery specifying the menu and the quantity of each food item for each meal (breakfast, lunch, snack, supper) that is provided. The contractor shall submit an itemized invoice to the sponsor ☐ **Weekly** ☐ **Monthly** which specifies the quantity of meals by type delivered during the preceding ☐ **Week** ☐ **Month** with a copy of each delivery ticket attached.

The contractor agrees to maintain all records (supported by invoices, menus, production records, receipts, etc.) that the sponsor needs to meet its responsibilities under the CACFP Federal Regulations. These records shall be available for inspection and audit by representatives of the sponsor, State Agency, United States Department of Agriculture, and the United States Government Accounting Office at any reasonable time and place up to three years from the date of receipt of final payment, or until final resolution of any audits.

Payment shall not be made for any meals that do not meet requirements of Section 226.20 of the CACFP Federal Regulations, are spoiled or unwholesome at the time of delivery, delivered outside of agreed upon delivery time, or do not otherwise meet the requirements of this Agreement.

The owner/operator(s) of the FSMC (contractor) must be in good standing with USDA Child Nutrition Programs; therefore, the owner/operator(s) must not be on the USDA NDL. The USDA NDL application is available as a web-based list at: <https://snp.fns.usda.gov/ndlweb/Welcome.action>. Sponsors will be required to set up an e-Authentication account with USDA to access the NDL. By signing this contract, the sponsor is certifying they have verified that the FSMC owner/operator(s) is not on the NDL.

The sponsor shall have the option to cancel this contract if the Federal government withdraws funds to support the CACFP. It is further understood that, in the event of cancellation of the contract, the sponsor shall be responsible for meals that have already been assembled and delivered in accordance with this Agreement.

This Agreement may be terminated by either party upon _____ days written notification.
The following parties as of the date indicated below hereby execute this Agreement:

_____ Contractor Official's Signature	_____ Sponsor Official's Signature
_____ Print Name	_____ Print Name
_____ Title	_____ Title
_____ Date	_____ Date

Send completed packet within 5 days of signing to:

DHSS-CFNA
PO Box 570, Jefferson City, MO 65102
Fax: 573-526-3679
E-Mail: CACFP@health.mo.gov

JUNE 2025

DOCUMENTATION OF FSMC CONTACT for CACFP

FOOD CONTACTS FOR \$250,000.00 OR LESS

Instructions: Completed form to be sent to the DHSS-CFNA with the Food Service Management Contract.

	FSMC Name Address Telephone Number Email Contact Person	Date of Contact	Method of Contact (email, fax, in person, etc.)	Price Per Meal				Price Quote
				Meal	Unit Price	Estimated Servings per Day	Estimated Number of Days	
FSMC #1				Breakfast				
				Lunch				
				Snack				
				Supper				
				Grand Total				\$
FSMC #2				Breakfast				
				Lunch				
				Snack				
				Supper				
				Grand Total				\$
FSMC #3				Breakfast				
				Lunch				
				Snack				
				Supper				
				Grand Total				\$

☐ I certify the following items were provided to all FSMC contacts listed above: Schedule A- List of Centers/Sites/Homes where program will operate, Schedule B-Two-Week Cycle Menu, Schedule C-Child and Adult Care Food Program Food Charts, and Schedule D – CACFP Unit Price Table. I certify that the FSMC owner/operator(s) (contractor) is not on the USDA National Disqualified List (NDL).

Signature _____ Date _____

Schedule A of Food Service Management Company Bid Packet for CACFP

To be completed by sponsor for bidder.

List of All Centers/Sites/Homes where program will operate.

Name of Center/Site/Home	Address and phone number of Center/Site/Home	Authorized Designee	Meal Type** (B, L, S, Sn)	Quantity of meals	Delivery time of meals	Days of operation	Dates		Holding facilities for meals?	
							Begin	End	Yes	No

**B=Breakfast, L=Lunch, S=Supper, Sn=Snack

Schedule B - Food Service Management Company Bid Packet for CACFP

To be completed by sponsor for bidder.

Provide a Two-Week Menu Cycle for each Center/Site/Home

Schedule C - Food Service Management Company Bid Packet for CACFP

To be completed by sponsor for bidder.

Provide the Child and Adult Care Food Program Food Charts
available on the CACFP website at: <http://health.mo.gov/cacfp>.

Schedule D - Food Service Management Company Bid Packet for CACFP Unit Price Table

To be completed by bidder for sponsor.

Name of Bidder _____

Meal Type	Estimated Number of Meals per Day	Multiplied by	Estimated Number of Serving Days per Year	Multiplied by	Unit Price per Meal	Equals	Total Price
A.	B.		C.		D.		E.
Breakfast <input type="checkbox"/> Unitized		X		X		=	
AM Snack <input type="checkbox"/> Unitized		X		X		=	
Lunch <input type="checkbox"/> Unitized		X		X		=	
PM Snack <input type="checkbox"/> Unitized		X		X		=	
Supper <input type="checkbox"/> Unitized		X		X		=	
						Grand Total	

☐ I certify that the information above is accurate, and this form was completed by the bidder listed above.

Signature _____ Date _____

Bidder Certification Sheet

This Bidder Certification Sheet must be signed and sent to DHSS-CFNA with the CACFP Food Service Management Contract. Please read the section below and complete the required information along with signing and dating the completed form.

This is a certification that _____
Name of Contractor

received a bid packet that included a Schedule-A List of Sites where program will operate, Schedule B-Two-Week Cycle Menu, Schedule C- Child and Adult Care Food Program Food Charts, and Schedule D- CACFP Unit Price Table from _____ to be considered for the FSMC bid.

Name of Sponsor

The signature below authorizes the verification of this certification.

Contractor Official's Signature

Print Name

Title Date