



# Hardin County Unit District #1

Andy Edmondson, Superintendent

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P.O. Box 218 ♦ Elizabethtown, IL 62931  
Phone: 618-287-2411 ♦ Fax: 618-287-2421

## INVITATION TO SUBMIT PROPOSAL ON FOOD SERVICE PRODUCTS

The Board of Education of Hardin County CUSD #1 is now accepting "Request for Proposal" for Food Products, Disposable Foam/Paper Products and basic Food Service Cleaning Products, as outlined in the specifications attached. Our K-12 facility located two miles east of Elizabethtown on Route 146.

### **Instruction to Bidders**

Proposals should be delivered in a sealed envelope plainly marked as

### **Food Service Proposal 2023-2024.**

Address all Proposals to the attention of:

Office of the Superintendent, BIDS  
Hardin County CUSD #1  
PO Box 218  
Elizabethtown, IL 62931

Proposals will be **accepted** until 2:00 PM  
Friday, June 23, 2023

Proposals received after this time will NOT be accepted and will be returned unopened.

Proposals will be **opened** at the District Office  
Friday, June 23, 2023 at 2:15 p.m.  
4 School Rd  
Elizabethtown, IL 62931

- **Proposal Period** will cover **August 1, 2023 to July 31, 2024**
- **Estimated Quantities** - Quantities indicated on the proposal forms are an estimated total for anticipated use based on past purchases. They will provide the basis for determining the lowest proposal complying with specification for each item and are submitted as information only. In case of unforeseen action, the district will not be held responsible for purchasing full amounts stated.
- After public opening, the School Food Authority MAY require at least 20 business days to review all proposals prior to awarding. The vendor with the winning proposal will be announced at the June 26, 2023 Unit # 1 School Board Meeting.
- This Proposal offer acknowledges the right of the school district to accept or reject any or all proposals and to waive any informality in any proposal received whenever it is deemed to be in the best interest of the district. It declares that this proposal is in all respects fair and without collusion or fraud, and that no person employed by the district, is directly or indirectly interested in the proposal or any portion of the profits that might result from the proposal.
- The Board expects **the same discounted pricing** (or percentage fee) for those items not specified on the proposal sheet but purchased by the district, including but not limited to fresh produce.

- The School Food Authority reserves the right to purchase a food item (s) not carried by winning Vendor from another Vendor. The food service will make attempts to work with winning Vendor first to locate/secure food item, but CAN purchase food item if winning Vendor cannot make it available at reasonable cost.
- **Proposals without complete information as requested will not be considered. The following information must be included in the Request for Proposal**
  - **Price** – lowest price available
  - **Guarantee of Quality of product** – product not meeting quality expectation will not be accepted even if lowest priced
  - **Information regarding Product line/ Capacity/ Reliability** – Vendor must be capable of delivering promptly, all items on the proposal. Also, it must be clearly evident the Vendor can acquire, on short notice, any peripheral items which might be required. The Vendor must clearly demonstrate to have the capacity, physically and financially, to supply the items requested. The Vendor must have a proven record of service, particularly with respect to delivering all items on a regularly scheduled basis at an economical price.
  - **Information on Manufacturers' Rebates** - Tracking of manufacturers rebates. The district requires that Vendor track the usage items eligible for manufacturer's rebates so that all available monies can be garnered for the food service program.
  - **Information on "Buy American"**
    - The vendor shall purchase, to the maximum extent practicable, domestic commodities or products which are either an agricultural commodity produced in the United States or a food product processed in the United States substantially using agricultural commodities produced in the United States (U.S.).
    - The vendor shall certify the percentage of U.S. content in the products supplied to the school food authority (SFA).
    - The SFA reserves the right to review purchase records to ensure compliance with the Buy American provision in 7CFR Part 250.
    - The vendor shall provide nutrition facts labels and any other documentation requested by the SFA to ensure compliance with U.S. content requirement.
    - In the event a product is not produced or manufactured in the U.S.; the cost of a U.S. produced product is significantly higher than foreign products; and/or the product is not produced or manufactured in the U.S. in sufficient and reasonably available quantities of a satisfactory quality, the vendor shall provide reasonable notice to the SFA in advance of the product purchase. The SFA may then issue approval of such product purchases on a case-by-case basis.
  - **Information on Vendor's Business Practice**
    - Vendor MUST be able to provide information for "Bid Rigging Certification" attached to this RFP
    - Vendor MUST be able to provide information for "Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion Lower Tier Covered Transaction" document attached to this RFP

- Vendor MUST be able to provide information for “Disclosure of Lobbying Activities” document attached to this RFP
- These three aforementioned documents must be included with the Vendor’s response to this RFP. Because these documents are now required by the Illinois State Board of Education, failure to include completed documents will make the submitted RFP automatically disqualified.

▪ **Information on Customer Service**

- **Information regarding Customer Support** – Vendor will have a knowledgeable sales staff with a school food service understanding. Sales staff will be aware of new products to present to the food service department such as: Free Samples, Free marketing products
- Vendor will have a customer service/support center with the ability to notify district of issues that may arise with orders or deliveries in a timely manner.
- **Due to the Healthy School Meals Initiative, the Vendor must provide nutritional information on website (or in writing) of ALL food items on proposal.** (Including but not limited to Calories, Sodium, Fat, CN labeling, USDA labeling, Manufacture’s labels)
- **Alternate item listing** – *While not required as part of this proposal*, an alternate item listing of products not on the attached “bid” list would be appreciated by the SFA. This is to afford the district the opportunity to purchase other items not on the true bid list at a reasonable cost.

▪ **Information on Invoices / Deliveries**

- **Minimum 2 days per week delivery.** Delivery days spaced apart appropriately. (i.e. Monday, Thursday or Tuesday, Friday, ETC.
- **Vendor will make deliveries to the correct location between 6:30 a.m. and 1:30 p.m. Monday through Friday.** No Delivery on Saturday or any other “No-School Day” unless prearranged and agreed upon in advance by the District.
- **Deliveries will be as ordered.** No dropped deliveries accepted unless pre-agreed upon by district.

▪ **Condition of delivered food items**

- **Frozen items must be delivered frozen** (0 degrees or colder). Any ice seen on box may subject item to be rejected. Upon opening, any food items that look to have been at a temperature above 0 then re-frozen will be documented and subject to be picked up at **next** delivery and a credit issued.
- **Boxed items must be delivered in dry, undamaged boxes.** Any damage found upon opening the box (i.e. dented cans, busted containers, damaged boxes) will be documented and subject to be picked up and a credit issued.

**Weighting factors will be as follows:**

**50% - Price and quality**

**20% - Product line/Capacity/Reliability**

**15% - Delivery**

**15% - Customer Service (including rebate tracking, free samples, knowledgeable sales staff, other as listed in above information)**

**Payments to Vendor**

**Hardin County Community Unit School District #1 is tax exempt** and all purchases are exempt from the retailer's occupation tax and the service use tax.  
Our tax exempt number is: E99966123

Payments will be made from information on the Vendor invoices. Credits and adjustments will be taken in a timely manner. Payments will be sent to Vendor upon approval of the School Board at monthly meetings (scheduled on the last Monday of each month).

**BIDDER CONTACT INFORMATION**

**Bidder Name:** \_\_\_\_\_  
**Contact Person for Orders:** \_\_\_\_\_  
**Office Phone:** \_\_\_\_\_  
**Cell Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

**Emergency Contact Person for After/Before Hours** \_\_\_\_\_  
**Office Phone:** \_\_\_\_\_  
**Cell Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

**Contact Person: Product Information (ingredient listings and nutrient analysis)**

\_\_\_\_\_  
**Office Phone:** \_\_\_\_\_  
**Cell Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

**Contact Person: Billing Questions, Credits, Damaged or Incorrect Products**

\_\_\_\_\_  
**Office Phone:** \_\_\_\_\_  
**Cell Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_  
**E-mail:** \_\_\_\_\_

# HARDIN COUNTY COMMUNITY UNIT SCHOOL DISTRICT - Food Service Products- REQUEST FOR PROPOSAL

	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
VEGETABLES - DRY/CANNED/BOXED							
BEAN BLK TFF	6 # 10 Cans	25					
BEAN, GRN BLU LAKE CUT 4 SIEV	6 # 10 Cans	25					
BEAN, MEXICAN CHILI W/GRAVY	6 # 10 Cans	15					
BEAN, PORK & DLX CND	6 # 10 Cans	10					
BEAN, REFRIED	6 # 10 Cans	40					
CORN, WHL KRNL GLDN STD CND	6 # 10 Cans	20					
PEA, GRN RNDM CND	6 # 10 Cans	20					
POTATO INST MASHED W/VITAMIN C	Idahoan	20					
POTATOES, DEHYDRATED: Simplot Traditions™ Au Gratin Potato Casserole / SKU 10071179022862. Made with 100% Idaho® Potatoes. Au Gratin Casserole, sliced potatoes with cheese. No partially hydrogenated oil. PACK SIZE: 12/20.35 oz bags per case.		15					
POTATO, AU GRN DHY INST							

VEGETABLES/FRUIT- FRESH							
APPLE SLICES, 100/2oz	PRE PACKAGED	100					
APPLE, GRANY SMITH 125 CT WA.		50					
APPLE, RED DLC 175 CT WA. FCY		75					
BANANA GRN TIP		75					
BATTER BITES		45					
BROCCOLI, FLORT FRESH REF		50					
CLEMENTINES		25					
CABBAGE SHRED SEP COLOR		6					
CARROT, BABY PLD FRESH REF		50					
CARROT, 100/2oz		50					
FRIES 1/2 IN STRAIGHT CUT FZ		60					
FRIES WEDGE 8 CUT NAT SKN-ON		75					
LETTUCE SHRED 1/8"		80					
ORANGE, CA CHO FRESH REF		30					
ORANGE, CLEM SDLES FRESH REF		50					
POTATO, FF 1/2" CC FCY FZN		60					
POTATO, FF SWT 3/8" SC BTRD		30					
SALAD MIX ROMAINE 80/20		75					
TOMATO GRAPE BULK		30					

FRUIT- DRY/CANNED/FROZEN							
APPLE SAUCE CUPS	Assorted flavors	20					
APPLESAUCE	SWEETENED	100					

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FRUIT COCKTAIL	Diced pears, diced peaches, pineapple, grapes & cherries in light syrup.	20					
FRUIT CUPS	Assorted flavors	25					
FRUIT MIX, BIT IN JCE SS PLST	Fruit mix in pear juice from concentrate shall be prepared from clingstone peaches, Bartlett pears, and Thompson seedless grapes 40% less calories than fruit mix in heavy syrup	10					
FRUIT SALAD, CHNK 5 WAY IN LS		20					
FRUIT SLUSHY/ VARIOUS FLAVORS	Fortified with calcium each 4.4 oz SideKick™ contains 100% daily requirement of Vitamin C with no added sweeteners. Meets 1/2 c serving of fruit.	20					
FRUIT SNACKS	MADE WITH 100% JUICE SMART SNACK APPROVED	10					
ORANGE MANDARIN WHL L/S	Mandarin Oranges. Broken segments in light syrup	60					
PEACH DICED IN EXTRA L/S TFF		20					
PEARS/DICED	In Juice	20					
PINEAPPLE, TIDBT IN JCE CND	WEDGE SHAPED SECTIONS OF PINEAPPLE CUT FROM SLICES OR PORTIONS OF SLICES, PACKED IN THEIR OWN JUICE	60					
STRAWBERRIES	Frozen, sliced, sugar	25					
<b>BREAKFAST - DRY/CEREAL/PASTRIES</b>							
BISCUIT DGH STHERN STYLE	PILSBURY 2.2 OZ	150					
CEREAL, OTML RLD QUICK BOX		10					
DRY CEREAL-READY TO EAT (WG)	Malt -o-Meal / variety flavors Whole grain Meets	20					
DRY CEREAL-READY TO EAT (WG)	Kellogg's variety flavors Whole grain Meets	50					
DRY CEREAL-READY TO EAT (WG)	General Mills variety flavors Whole grain Meets	50					
MUFFINS BAKED PRE- PACKAGED	Assorted flavors must meet 2 oz grain requirement	150					
TOASTER PASTRY (WG) "POPART"	Whole grain 1 oz grain Variety flavors	100					
<b>BREAKFAST - FROZEN/COOLER</b>							
EGG PATTY	Precooked square or circle egg patty	56					
EGG SCRMBLD MIX CIB	Bags	100					
FLAUTA, EGG SSG & CHS 3 Z BTRD (Tornados)		150					
FLAUTA, FRNCH TOAST & SSG 3 Z (tornados)		150					
FRNCH TOAST STICK WHL WHEAT	1 meat/ 1.50 grain requirement -CN label	260					
FROZEN CINNAMON ROLL	3 OZ	40					
FROZEN CINNAMON ROLL	5 OZ	40					
MINI WRAP PANCAKE/SAUSAGE	Foster Farms	75					
PANCAKE	eggo	75					

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	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
PANCAKE, MAPL 3.17 Z FZN MINI	100% whole grain. Individually wrapped, heat & serve packages. Meets 35-10-35 criteria. No artificial sweeteners. Zero trans fat.	200					
SANDWICH, PNT BUTR & JELLY (uncrustables)		30					
SAUSAGE LINKS, USDA	Pork sausage link. 1.20 oz fully cooked pork sausage link provides 1 oz equivalent meat for child nutrition	130					
SAUSAGE PANCAKE STICK FZ	turkey sausage dipped in 100% whole grain maple flavored pancake batter and then fully cooked. 1 grain / 1 meat -CN label	50					
SAUSAGE PATTY, USDA	Fully cooked, all meat pork sausage patty fully cooked provides 1.00 oz equivalent meat for child nutrition	100					
SAUSAGE, TRKY LNK .8 Z MILD		1					
SAUSAGE, TRKY PTY 1.03 Z 2.25"		1					
TURKEY SAUSAGE BREAKFAST PIZZA (WG)	3" x 4" (WG) 1 meat / 1.25 grains - CN label	60					

SNACKS/RICE/PASTA - DRY							
BAKED POTATO CHIPS	150 calories per serving or less, VARIOUS FLAVORS, BAKED	175					
CHIP, TORTILA CORN YLW RND	Whole grain, yellow corn tortilla rounds. Trans Fat Free.	20					
COOKIE, OTML BULK SHLF STABL	Whole grain/ Smart Snack standards	10					
COOKIE, CHOC CHIP BULK SHLF STABL	Whole grain/ Smart Snack standards	15					
COOKIE, SUGAR BULK SHLF STABL	Whole grain/ Smart Snack standards	10					
CRACKER SALTINE	Bulk	3					
CRACKER SALTINE INDIVIDUAL WRAPPED	(WG) ½ grain serving	50					
MACARONI, ELBOW (WG)		10					
MARSHMALLOW TREATS (WG)		10					
NACHO TACO IN A BAG (WG)	Nacho tortilla chips in an easy open, flat bottom bag	25					
NOODLE, EGG CURLY 1/2" WIDE		15					
PASTA SPAGHETTI THIN 10"		20					

ROLLS/COOKIES/BREAD - FROZEN							
BREADSTICK GARLIC 8" PARBKD		40					
BREADSTICK, MOZZ STUFD 7" BKD (BOSCO)	1 meat/ 2 grains/ reduced fat Whole grain	50					
BREADSTICK, PIZZA STUFD 7" BKD (BOSCO)		20					
COOKIE DGH CHOC CHIP	Frozen Dough	10					
COOKIE DGH OTML-RSN	Frozen Dough	4					
COOKIE DGH PEANUT BUTTER	Frozen Dough	4					
COOKIE DGH SUGAR	Frozen Dough	4					



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	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
COOKIE DGH WHI CHNK MACADAMIA	Frozen Dough	4					
DINNER ROLL, BAKED	Thaw & use, Quality product(WG optional)	25					
DOUGH, BSCT CHS CHEDR GR1C 1.2	Frozen Dough	25					
ROLL DNR YEAST PARBKD TFF	WG	100					
TORTILLA, FLOUR 6" PRSSD SHLF		10					
TORTILLA, FLOUR 8" PRSSD SHLF		10					

<b>BEEF/PORK</b>							
BACON RND FC		25					
BASE BEEF LS NO MSG		10					
BEEF INSIDE RND CH DNUD SLCD		2					
BEEF PATTY 4/1 HS 80/20 IQF		20					
BROTH BEEF NO MSG TFF		10					
BURRITO, BF BEAN TVP CN BULK		40					
CORN DOG	Made with turkey hot dogs, RF, coated with a fine whole wheat grain corn meal and honey, CN label = 2 oz protein equivalent meat and 2 oz grain	50					
CORN DOG MINI		60					
HAM	Kentucky legend whole ham	10					
HOT DOG / FRANKS	8/1, low sodium, Beef or turkey (priced separate) CN Label	30					
PORK RIB BARBEQUE, CN, USDA	2.40 oz flame broiled rib shaped pork patty provides 2.00 oz equivalent meat/meat alternate for child nutrition meal pattern requirement	30					
RAVIOLI, BF IN TMTO SCE		15					

<b>CHICKEN/FISH</b>							
BASE CHICKEN LS NO MSG		5					
BROTH CHICKEN NO MSG TFF		25					
CHICKEN BRST FIL ITAL FC FZ		25					
CHICKEN BRST PATTY 3 OZ GRLLD		50					
CHICKEN PRODUCTS	Breakbush CN label	300					
CHICKEN, BRST MEAT 3 OZ FIL		50					
CHICKEN, BRST MEAT 3.1 OZ FITA		50					
CHICKEN, STRIP-TENDERLOIN-BRD		200					

<b>DELI/DAIRY/BEVERAGE</b>							
CHEESE AMER YLW SLCD 160		20					
CHEESE, CHEDR MILD SHRD BAG		25					
CHEESE, CHEDR MILD STICK REDUC		10					
CHEESE, PARMESAN GRATED TUB		10					
DELI BOLOGNA		20					

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	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
DELI HAM		20					
DELI TURKEY		20					
SOUR CREAM PACKETS		10					
YOGURT CUPS, 4 OZ		100					
PIZZA - FROZEN							
PIZZA CHEESE (WG)	51%Whole Grain-rich Sodium targets trans fat CN	20					
PIZZA PEPPERONI (WG)	51%Whole Grain-rich Sodium targets trans fat CN	100					
PIZZA SAUSGAE (WG)	51%Whole Grain-rich Sodium targets trans fat CN	50					
STUFFED CRUST CHEESE PIZZA	Tonys	10					
STUFFED CRUST PEPPERONI PIZZA	Tonys	50					
CONDIMENTS/SAUCES/MIXES							
AMERICAN MUSTARD	Yellow mustard / portion control	40					
BUTTER BUDS GARLIC MIST PAN SPRAY	Garlic Buttermist® combines the flavor of fresh garlic with the natural taste of All-American Wisconsin butter, blended with premium canola oil. Contains zero fat, calories, cholesterol or carbohydrates per serving.	25					
BUTTER BUDS MIST PAN SPRAY	Buttermist® contains the actual flavor of natural butter from Wisconsin... flavor that is captured, concentrated and blended with premium canola oil. Buttermist gives you the natural flavor of butter with zero fat, cholesterol and calories.	25					
DIPPING CUPS	Various flavors/ Ranch, sweet & sour, BBQ, Honey mustard, ETC.	200					
DRESSING/ (RANCH, FRENCH, ITALIAN)	Portion control dressings/ fat free	50					
HONEY CLOVER JUG TFF		10					
JELLY GRAPE CUP TFF		100					
JELLY VAR S/F TFF GF		1					
KETCHUP	100 % natural Ketchup made with sugar/ (low sodium)	50					
LEMONADE MIX		3					
MARGARINE LOD TFF		50					
MARGARINE SOLIDS TFF		10					
MIX, GRVY BF SHLF STABL		10					
MIX, GRVY CHIX RSTD SHLF STABL		10					
MIX, GRVY TRKY RSTD PHO-FREE		1					
MIX, SCE ALFR ADD WATER SHLF		6					
OIL SOY CLR FRY TFF		15					
ONION DEHYDRATED CHPD		5					
ONION YLW MED	FRESH	10					
PEPPER BLK TABLE GRIND		5					

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	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
PEPPER, BELL DCD FRESH REF		1					
PICKLE, DILL CC CHIP 400-500		20					
SALSA	All natural ingredients, no added sugars or flavors, no artificial additives, preservatives or thickeners.	10					
SALSA CUP	Credits as a 1/2c red vegetable for NSLP	50					
SALT IODIZED RND TFF		2					
SAUCE BBQ SWEET		5					
SAUCE CHEESE CHED	Gallon Jug	25					
SAUCE CHEESE QUESO BLANC		25					
SAUCE MARINARA, CUP	1 oz	10					
SAUCE, SPAG TMTO CAN SHLF		100					
SELF RISING FLOUR		3					
SUGAR	50 LB bag	5					
SUGAR, BRN LIGHT GRAN CANE		5					
SUGAR, PWD RD CNFR 10X CANE		5					
SUGAR, WHT GRANULATED	50 Pound Bag	4					
SYRUP CORN LIGHT TFF		5					
SYRUP PANCAKE S/F CUP TFF	Sugar Free	1					
SYRUP, PANCAKE SYRUP CUP	Lower sodium (10 mg or under) rich, thick, fully bodied maple flavored syrup	150					
TEA ICED BAG FILTER PACK	Lipton	1					
VINEGAR WHI DISTILLED 50 GRAIN		40					
<b>PAPER/CLEANING PRODUCTS</b>							
6 COMPART-MENT FOAM SCHOOL LUNCH TRAY	This is a white 6 compartment foam serving tray with four food compartments plus a milk compartment and a utensil compartment. This tray measures 12-1/2"x8-1/2"x1-1/8".	100					
9 x 12 PULP TRAY		100					
BAG LINER PAN OVENABLE 34X16		2					
BAG SANDWICH 6X6 ZIP		15					
BAG STRG 2 GALLON		10					
BAG STRG GALLON		2					
BAG STRG QT		5					
BAG T-SHIRT		75					
BAG WAX SANDWICH BAG		10					
BLEACH	CLOROX BRAND ONLY	20					
BOWL, FM 10-12 Z WHT LAMTD		20					
BROOM LG ANGLE 12"		12					
CONT FOAM 3C 9X9X3 WHI VNTD		8					

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	SPECIFICATION	ESTIMATED USAGE	MANUFACTURER	PRODUCT NUMBER	CASE/PACK SIZE	BID PRICE PER CASE	COST PER SERVING
CUP FOAM 16 OZ WHI		3					
CUP PORTN 4 OZ TRNSLCNT		5					
CUP W4F PAPER CONE 4 OZ WHI		2					
DAWN LIQUID DETERGENT	DAWN BRAND ONLY	15					
DETERGENT, LDYR L5 PWDR DRUM		4					
FILM PVC 18 ROLL W/SLIDE		15					
FOAM PLATE3:C112 0.25" 3 COMPARTMENT		25					
FOIL, ALUM 18"X500' HVY-DTY RL		4					
GLOVE LATEX LG PWDR FREE	GOOD QUALITY	50					
GLOVE VINYL MED PWDR FREE	GOOD QUALITY	10					
LID PORTN CUP CLR 3.25-5.5 OZ		5					
PLASTIC FORK	Bulk	2					
PLASTIC FORK	DIXIE SMART STOCK	100					
PLASTIC SPOON	Bulk	2					
PLASTIC SPOON	DIXIE SMART STOCK	100					
SANITIZER	SANI TABS	2					
TORK XPRESS NAPKIN	White, 1 PLY Napkin Folded	15					
TOWEL BAR RIBBED TERRY 16X19		10					
TOWEL, FLOUR SAK COTN 23"X28"		10					
TOWEL, PAPR 7.87"X350' BROWN		1					
<b>PREFERRED PACKAGING: HEAT SEAL TRAYS AND LIDDING</b>							
3 COMPARTMENT TRAY		200					
3 COMPARTMENT TRAY OVENABLE		10					
6.5 OZ FRUIT CUP		35					
SALAD TRAY		3					
LIDDING FILM		20					

## CONTRACTOR QUESTIONNAIRE

COMPANY NAME	ADDRESS	CITY	STATE	ZIP
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Pursuant to 105 ILCS 5/10-20.40 all school districts in the State of Illinois are required to annually report the number and value of contracts awarded to "minority owned businesses, female owned businesses, and businesses owned by persons with disabilities, as defined in the Business Enterprise for Minorities, Females and Persons with Disabilities Act, and locally owned businesses" for contracts over \$25,000. In order to comply with this requirement, we request contractors to complete the following questionnaire and return with their bid responses.

**Is Your Company a Locally Owned Business YES \_\_\_\_\_ NO \_\_\_\_\_ as it relates to this School District?** For purposes of this questionnaire, "Locally Owned" means that the registered address or principal place of business of the company is located within the boundaries of the school district. For a corporation, LLC, LP, LLP, or LLLP, the registered address is the address for business on file with the Illinois Secretary of State. For all other business entities, the principal place of business is where the books and records of the business are kept and/or the management of the business works.

Guidance issued by the Illinois State Board of Education suggests that we inquire whether your company is certified as a minority, female, or disabled person owned business by a certifying agency (e.g., Chicago Transit Authority – Cook County– Illinois Department of Transportation – Metropolitan Transit Authority Metropolitan Water Reclamation District – U.S. Small Business Administration – State of Illinois) or that it would be eligible for certification if an application were made. The Guidance includes the definitions set forth below.

**Definition of Ownership:** "Minority owned business, female owned business, and business owned by a person with a disability" means a business concern which is at least 51% owned by one or more minority persons, females, or persons with a disability; or in the case of a corporation, at least 51% of the stock in which is owned by one or more minority persons, females, or persons with a disability; and the management and daily business operations of which are controlled by one or more of the minority females, or persons with a disability who own it. (30 ILCS 575/2)

**Is Your Company a Minority Owned Business? YES \_\_\_\_\_ NO \_\_\_\_\_** "Minority person" shall mean a person who is a citizen or lawful permanent resident of the United States and who is: (a) African American – a person having origins in any of the black racial groups in Africa; or (b) Hispanic - a person of Spanish or Portuguese culture with origins in Mexico, South or Central America, or the Caribbean Islands, regardless of race; or (c) Asian American - a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands); or (d) Native American or Alaskan Native – a person having origins in any of the original peoples of North America. (30 ILCS 575/2)

**Is Your Company a Female Owned Business? YES \_\_\_\_\_ NO \_\_\_\_\_** "Female" shall mean a person who is a citizen or lawful permanent resident of the United States and who is of the female gender. (30 ILCS 575/2)

**Is Your Company a Business Owned By Persons with Disabilities? YES \_\_\_\_\_ NO \_\_\_\_\_** "Person with a disability" means a person who is a citizen or lawful resident of the United States and is a person qualifying as being disabled, where "Disabled" means a severe physical or mental disability that: (a) results from: amputation, arthritis, autism, blindness, burn injury, cancer, cerebral palsy, cystic fibrosis, deafness, head injury, heart disease, hemiplegia, hemophilia, respiratory or pulmonary dysfunction, mental retardation, mental illness, multiple sclerosis, muscular dystrophy, musculoskeletal disorders, neurological disorders, including stroke and epilepsy, paraplegia, quadriplegia and other spinal cord conditions, sickle cell anemia, specific learning disabilities, or end stage renal failure disease; and (b) substantially limits one or more of the person's major life activities. Another disability or combination of disabilities may also be considered as a severe disability for the purposes of item (a) if it is determined by an evaluation of rehabilitation potential to cause a comparable degree of substantial functional limitation similar to the specific list of disabilities listed in this definition. (30 ILCS 575/2).

## Bid-Rigging Certification

\_\_\_\_\_, a duly  
(Agent)

authorized agent of \_\_\_\_\_,  
(Contractor)

do hereby certify that neither \_\_\_\_\_,  
(Contractor)

nor any individual presently affiliated with \_\_\_\_\_,  
(Contractor)

\_\_\_\_\_, has been barred from bidding on a public contract as a  
result of a violation of either Section 33E-3 (bid-rigging) or Section 33E-4 (bid rotating)  
of the Illinois Criminal Code, contained in Chapter 38 of the Illinois Revised Statutes.

\_\_\_\_\_  
Authorized Agent

\_\_\_\_\_  
Contractor

## CERTIFICATE OF INDEPENDENT BID DETERMINATION

I, the undersigned, in submitting the accompanying bid, do hereby make the following statements that I certify on behalf of the bidder to be true and complete in every respect:

- 1) I have read and I understand the contents of this Certificate;
- 2) I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
- 3) Each person whose signature appears on the accompanying bid has been authorized by the bidder to determine the terms of, and to sign, the bid, on behalf of the bidder;
- 4) For the purposes of this Certificate and the accompanying bid, I understand that the word "competitor" shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who;
  - has been requested to submit a bid in response to this invitation for bids;
  - could potentially submit a bid in response to this invitation for bids, based on their qualifications, abilities or experience;
- 5) The bidder discloses that [check one of the following, as applicable]:
  - \_\_\_(a) the bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with, any competitor;
  - \_\_\_(b) the bidder has entered into consultations, communications, agreements or arrangements with one or more competitors regarding this invitation for bids, and the supplier/bidder discloses, in the attached document(s), complete details thereof, including the names of the competitors and the nature of, and reasons for, such consultations, communications, agreements or arrangements;
- 6) Without limiting the generality of paragraphs (5)(a) or (5)(b) above, there has been no consultation, communication, agreement or arrangement by or on behalf of the bidder with any competitor regarding:
  - prices;
  - methods, factors or formulas used to calculate prices;
  - the intention or decision to submit, or not to submit, a bid; or
  - the submission of a bid which does not meet the specifications of the invitation for bids; except as specifically disclosed pursuant to paragraph (5)(b) above;
- 7) In addition, there has been no consultation, communication, agreement or arrangement with any competitor by or on behalf of the bidder regarding the quality, quantity, specifications or delivery particulars of the products or services to which this invitation for bids relates, except as specifically authorized by the procuring authority or as specifically disclosed pursuant to paragraph (5)(b) above;
- 8) The terms of the accompanying bid have not been, and will not be, knowingly disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening, or of the awarding of the contract, whichever comes first, unless otherwise required by law or as specifically disclosed pursuant to paragraph (5)(b) above; and,
- 9) I understand that the accompanying bid will be disqualified if this certification is found not to be true and complete in every respect.

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

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Springfield, IL 62777-0001

**CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY, AND VOLUNTARY EXCLUSION LOWER  
TIER COVERED TRANSACTIONS**

This certification is required by the regulations implementing Executive Orders 12549 and 12689, Debarment and Suspension, 2 CFR part 3485, including Subpart C Responsibilities of Participants Regarding Transactions (also see federal guidance at 2 CFR part 180). Copies of the regulations may be obtained by contacting the Illinois State Board of Education.

**BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS BELOW.**

**CERTIFICATION**

The prospective lower tier participant certifies, by submission of this Certification, that:

- (1) Neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency;
- (2) It will provide immediate written notice to whom this Certification is submitted if at any time the prospective lower tier participant learns its certification was erroneous when submitted or has become erroneous by reason of changed circumstances;
- (3) It shall not knowingly enter any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated;
- (4) It will include the clause titled *Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—Lower Tier Covered Transactions*, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions;
- (5) The certifications herein are a material representation of fact upon which reliance was placed when this transaction was entered into; and
- (6) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this Certification.

\_\_\_\_\_  
*Organization Name*

\_\_\_\_\_  
*PR/Award Number or Project Name*

\_\_\_\_\_  
*Name of Authorized Representative*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Original Signature of Authorized Representative*

\_\_\_\_\_  
*Date*

**Instructions for Certification**

1. By signing and submitting this Certification, the prospective lower tier participant is providing the certifications set out herein.
2. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal government, the department or agency with which this transaction originated may pursue all available remedies, including suspension and/or debarment.
3. Except for transactions authorized under paragraph 3 above, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal government, the department or agency with which this transaction originated may pursue all available remedies, including suspension and/or debarment.
4. The terms *covered transaction*, *debarred*, *suspended*, *ineligible*, *lower tier covered transaction*, *participant*, *person*, *primary covered transaction*, *principal*, *proposal*, and *voluntarily excluded*, as used herein, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549 and Executive Order 12689. You may contact the person to which this Certification is submitted for assistance in obtaining a copy of those regulations.
5. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the "GSA Government-Wide System for Award Management Exclusions" (SAM Exclusions) at <http://www.sam.gov>.
6. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required herein. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.



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Springfield, IL 62777-0001

**CERTIFICATE REGARDING LOBBYING**

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit ISBE 85-37, "Disclosure of Lobbying Activities," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

\_\_\_\_\_  
*Organization Name*

\_\_\_\_\_  
*PR/Award Number or Project Name*

\_\_\_\_\_  
*Name of Authorized Representative*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Original Signature of Authorized Representative*

\_\_\_\_\_  
*Date*

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Springfield, IL 62777-0001

DISCLOSURE OF LOBBYING ACTIVITIES

Directions: Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352. (See reverse for public burden disclosure.)

1. TYPE OF FEDERAL ACTION

☐ a. Contract ☐ b. Grant ☐ c. Cooperative agreement ☐ d. Loan ☐ e. Loan guarantee ☐ f. Loan insurance

2. STATUS OF FEDERAL ACTION

☐ a. Bid/offer/application ☐ b. Initial award ☐ c. Post-award

3. REPORT TYPE

☐ a. Initial filing ☐ b. Material change ☐ For material change only: \_\_\_\_\_ Year \_\_\_\_\_ Quarter \_\_\_\_\_ Date of last report

4. NAME AND ADDRESS OF REPORTING ENTITY

☐ Prime ☐ Subawardee, Tier \_\_\_\_\_, if known \_\_\_\_\_ Congressional District, if known

5. IF REPORTING ENTITY IN NO. 4 IS SUBAWARDEE, ENTER NAME AND ADDRESS OF PRIME

\_\_\_\_\_ Congressional District, if known

6. FEDERAL DEPARTMENT/AGENCY

7. FEDERAL PROGRAM NAME/DESCRIPTION

\_\_\_\_\_ CFDA Number, if applicable

8. FEDERAL ACTION NUMBER, if known

9. AWARD AMOUNT, if known

\$ \_\_\_\_\_

10a. NAME AND ADDRESS OF LOBBYING ENTITY  
(If individual, last name, first name, MI)

b. INDIVIDUALS PERFORMING SERVICES  
(Including address if different from No. 10a) (last name, first name, MI)

(Attach Continuation Sheet(s) ISBE 85-37A, if necessary)

11. AMOUNT OF PAYMENT (check all that apply)

\$ \_\_\_\_\_ ☐ Actual ☐ Planned

12. FORM OF PAYMENT (check all that apply)

☐ a. Cash ☐ b. In-kind; specify: nature \_\_\_\_\_ value \_\_\_\_\_

13. TYPE OF PAYMENT (check all that apply)

☐ a. Retainer ☐ b. One-time fee ☐ c. Commission  
☐ d. Contingent fee ☐ e. Deferred ☐ f. Other, specify \_\_\_\_\_

14. Brief description of services performed or to be performed and date(s) of service, including officer(s), employee(s), or member(s) contacted, for payment indicated in item 11.

15. ☐ YES ☐ NO CONTINUATION SHEET(S), ISBE 85-37A ATTACHED

16.  
Information requested through this form is authorized by title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

ORIGINAL SIGNATURE

PRINT NAME OR TYPE

TITLE

TELEPHONE NUMBER

DATE

# INSTRUCTIONS FOR COMPLETION OF ISBE 85-37, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. Section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the ISBE 85-37A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001".
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.  
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial(MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not an ISBE 85-37A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

*Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.*

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**CONTINUATION SHEET  
DISCLOSURE OF LOBBYING ACTIVITIES**

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REPORTING ENTITY

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## Certification Forms

\_\_\_\_\_ Bid-Rigging Certification

\_\_\_\_\_ Certificate of Independent Bid Determination

\_\_\_\_\_ Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion—  
Lower Tier Covered Transactions

\_\_\_\_\_ Certificate Regarding Lobbying

\_\_\_\_\_ Disclosure of Lobbying Activities