Date June		-	Contract		
Year	of Re	enewal	(Circle)		
1	2	3	(4)	5- COVID19 Emergency Extension	6- COVID19 Emergency Extension 7- COVID19 Emergency Extension

Contract Renewal Agreement for Food Management Services Nonprofit Food Service Program

This document contains the rates and fees for the contract of food service management for nonprofit food service programs for the period beginning July 1, 2022, and ending June 30, 2023. The terms and conditions of the original contract are applicable to the contract renewal. Upon acceptance, this document shall constitute the contract renewal between the Food Service Management Company (FSMC) and the School Food Authority.

The FSMC shall not plead misunderstanding or deception because of the character, location, or other conditions pertaining to the contract.

PER MEAL PRICES MUST BE QUOTED AS IF NO USDA COMMODITIES WILL BE RECEIVED

2021-2022

Rate**

2022-2023

Rate***

Percentage

Increase****

	Authorized Signature of SFA	Title		Date	
	School Food Authority (SFA)		Agreement Number		
	Roselle School District 12	19-02	2-0120-00		
Accep	stance of Contract Renewal Agreement			-9	
		Title		Date	
Barb	greement shall not exceed one year. Linn-Brack Authorized Signature of FSMC	President, K-1	12	03/11/2022 Date	
award	bmission of this proposed renewal agreemen under this solicitation, the FSMC shall opera				
	City	State		Zip Code	
	Berkeley	IL		60163	
	Street Address				
	5040.04.01.1.00.1				
	Preferred Meal Systems, Inc. d/b/a K-12 by Food Service Management Company	Elior			
**Rat	tes must be the same. tes must be based on original contract terms tes must not be rounded up. Do not exceed t rcentage increase must not exceed the allow	four decimal places.		` ,	
10.	Reimbursable Summer Lunch	10	10	10	
9.	Reimbursable Summer Breakfast	5 6 7 8 9 10	9.	9.	
	Special Milk Reimbursable After-School Supper	8.	8.	7 8	
	Reimbursable After-School Snack	6.	6	6.	
	A la Carte Equivalents Fee A la Carte Management Fee	4 5	4 5		
4	(Breakfasts and Lunches) A la Carte Equivalents Fee*	4	1	4	
	Reimbursable Lunches* Management Fee per School Meal	1. 2. <u>\$4.4047</u> 3	3	2. <u>6.0%</u> 3.	

Contract Renewal Agreement Certification Form 2022–2023

The Contract Renewal Agreement Certification Form must be completed and signed by the School Food Authority's (SFA's) authorized representative.

A. School	Food	Authority	y Information
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Agreement Number (RCD	T Code)19-022-0120-00
School Food Authority	Roselle School District 12
Contractor Name	Preferred Meal Systems, Inc. d/b/a K-12 by Elior

B. Required Documentation

Submit signed copies of the following documents.

- Contract Renewal Agreement
- Contract Renewal Agreement Certification Form 2022–2023
- Certification forms, as applicable, signed annually by the contractor. The contractor certification forms are located on our website at https://www.isbe.net/Pages/General-Procurement-All-Programs.aspx under Contract Certification Forms.
 - o Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transactions,
 - o Certificate Regarding Lobbying—Contracts, Grants, Loans, and Cooperative Agreements.
 - Disclosure of Lobbying Activities- If the annual contract is over \$100,000 and any funds other than Federal appropriated funds have been used for lobbying;
- Any other amendments, if applicable, for non-material allowable contract changes accompanied by written justification for the amendment.

C. Contract Renewal Terms

Per the contract renewal terms stated in the contract, the maximum allowable percentage increase that may be applied to the fixed meal rates and fixed management fees is as follows (refer to the original contract for renewal terms; check the appropriate box):

□ CPI–Food Away from Home (Dec)	6.0%
□ CPI–All (Dec)	7.0%
□ CPI–Food (Dec)	6.3%
□ CPI–Food Away from Home (Dec)	not to exceed (insert number) %
□ Other (specify)	

D. Certification Statement

Under the provisions of the United States Department of Agriculture, Food and Nutrition Service, I certify as a sponsor in the Child Nutrition Programs all information contained in the executed *Contract Renewal Agreement* and accompanying contract renewal documents is true and accurate.

I understand the nonprofit school food service program account cannot be used to pay for unallowable contract costs. As authorized representative for the school food authority noted above, I will ensure operation of the nonprofit school food service program, including use of nonprofit school food service program account funds, is in compliance with the rules and regulations of the Illinois State Board of Education and the United States Department of Agriculture regarding Child Nutrition Programs.

I understand revisions cannot be made to the executed *Invitation for Bid and Contract* without first submitting proposed revisions to the Illinois State Board of Education for review and receiving written notification the proposed revisions are allowable within the regulatory guidelines. Furthermore, I understand additional

documents and/or agreements, including those developed by the contractor, cannot become part of the executed contract.

I understand all contract information provided to the Illinois State Board of Education is being given in connection with the receipt of federal funds and deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes. Further, I understand such misrepresentation could result in the loss of federal and state funding received by the school food authority for School-Based Child Nutrition Programs.

I certify that all contract provisions, including those relating to USDA Foods utilization by the FSMC to the maximum extent possible have been met:

School Year 2021-22 USDA Foods Entitlement Amount

(A) \$\frac{10,072.11}{20,072.11}\$

School Year 2021-22 USDA Foods credits issued to the SFA by the FSMC

(B) \$\frac{10,133.16}{20,072.11}\$

USDA Foods Entitlement Utilization Percentage as of (March 2022)

(B / A) % 100.6

Date of certification must be as of the date contract renewal is signed based on year to date actual credits received by the Vendor

SFA Authorized Representative Signature Title E-mail Date

Mail or email to:

Nutrition Department

Illinois State Board of Education 100 North First Street W270 Springfield, IL 62777-0001

Email: nutritionprocurement@isbe.net

Please submit documents only once. For example, do not email and mail. Only one copy of each set of documents is necessary. All original documents should be retained in the SFA's files.

ILLINOIS STATE BOARD OF EDUCATION

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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:

- 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.

Preferred Meal Systems, Inc., d/b/a K-12 by Elior	Roselle School District 12		
Organization Name	PR/Award Number or Project Name		
Barbara Timm-Brock	President, K-12		
Name of Authorized Representative	Title		
DocuSigned by:			
Barbara Timm-Brock	03/11/2022		
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.
- 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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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.

Preferred Meal Systems, Inc., d/b/a K-12 by Elior	Roselle School District 12		
Organization Name	PR/Award Number or Project Name		
Barbara Timm-Brock	President, K-12		
Name of Authorized Representative DocuSigned by:	Title		
Barbara Timm-Brock	03/11/2022		
Original Signature of Authorized Representative	Date		

ILLINOIS STATE BOARD OF EDUCATION

100 North First Street Springfield, IL 62777-0001

DISCLOSURE OF LOBBYING ACTIVITIES

Directions: Complete this form to disclose lobbying activities pursuant to	31 U.S.C. 1352. (S	ee reverse for pub	no baracii	uisciosui e.)	
1. TYPE OF FEDERAL ACTION					
a. Contract b. Grant c. Cooperative agreement	d. Loan	e. Loan guar	antee	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 cha	nge only:	Year	Quarter	Date of last report	
4. NAME AND ADDRESS OF REPORTING ENTITY					
Prime Subawardee, Tler, if known	Con	gressional District,	if known		
5. IF REPORTING ENTITY IN NO. 4 IS SUBAWARDEE, ENTER NAME A	ND ADDRESS OF	PRIME			
Congressional District, if known					
6. FEDERAL DEPARTMENT/AGENCY					
7. FEDERAL PROGRAM NAME/DESCRIPTION					
7. TEDERALI ROGINARI MARIEDEGGIA TIGIN					
8. FEDERAL ACTION NUMBER, if known	a AWARD AMOL	INT if known	CI	FDA Number, if applicable	
6. FEDERALACTION NUMBER, II NIOWII	9. AWARD AMOUNT, if known				
40 NAME AND ADDRESS OF LODDWING FAITHY	L INDRUGUALO	\$	-D) ((0F0		
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			
40. TVDE OF DAVAGENT (shook all that apply)					
13. TYPE OF PAYMENT (check all that apply)				-	
a. Retainer		c. Commiss	sion		
<u> </u>		c. Commiss			
☐ a. Retainer ☐ b. One-time fee ☐ d. Contingent fee ☐ e. Deferred	of service, including	f. Other, sp	ecify	nember(s) contacted, for	
a. Retainer b. One-time fee	of service, including	f. Other, sp	ecify	nember(s) contacted, for	
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s)	of service, including	f. Other, sp	ecify	nember(s) contacted, for	
a. Retainer b. One-time fee d. Contingent fee e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11.		f. Other, sp	ecify	nember(s) contacted, for	
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A	TTACHED	f. Other, spr	ecifyee(s), or m		
a. Retainer b. One-time fee d. Contingent fee e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11.		f. Other, spr	ecifyee(s), or m		
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A 16. Information requested through this form is authorized by title 31 U.S.C. Section 1352. This disclosure of lobbying activities is a material	TTACHED	f. Other, spon officer(s), employ Docusigned by:	ecifyee(s), or m		
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A 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	TTACHED ORIGINAL SIGNATU	f. Other, sponsor of formal property of the processioned by: Docusioned by:	ecifyee(s), or m		
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A 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	ORIGINAL SIGNATU PRINT NAME OR TY Barbara Timm-	f. Other, spin officer(s), employ DocuSigned by: DOCUSIGNED BASEDESAFESA PE Brock	ecifyee(s), or m		
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A 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	ORIGINAL SIGNATURE PRINT NAME OR TY Barbara Timm-ITILE President, K-	TRE Barbara Tim Docusioned by: PE Brock	ecifyee(s), or m		
□ a. Retainer □ b. One-time fee □ d. Contingent fee □ e. Deferred 14. Brief description of services performed or to be performed and date(s) payment indicated in item 11. 15. □ YES □ NO CONTINUATION SHEET(S), ISBE 85-37A A 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	ORIGINAL SIGNATU PRINT NAME OR TY Barbara Timm-	TRE Barbara Tim Docusioned by: PE Brock	ecifyee(s), or m		

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.

- 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.
- Identify the status of the covered Federal action.
- 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.
- 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".
- 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.

ATTACHMENT 9C

ILLINOIS STATE BOARD OF EDUCATION

100 North First Street Springfield, Illinois 62777-0001

CONTINUATION SHEET DISCLOSURE OF LOBBYING ACTIVITIES

REPORTING ENTITY		
The office extends		

Bid-Rigging Certification

	Barbara Timm	-Brock	, a dul	
	(Agent)			
authorized agent of	Preferred Meal S	Systems, Inc. d/b/a K-12 by Elior		
		(Contractor)		
do hereby certify that neither _	Preferre	Preferred Meal Systems,Inc. d/b/a K-12 by Elior		
		(Contractor)		
nor any individual presently aff	iliated with	Preferred Meal Systems, Inc. d/b/a K-12 by	Elior	
	_	(Contractor)		
		red from bidding on a public contraction (bid-rigging) or Section 33E-4 (bid re		
of the Illinois Criminal Code, co	ntained in C	hapter 38 of the Illinois Revised Sta	tutes.	
		Basbasa Timm-Brock		
	-	Authorized Agent		
		Preferred Meal Systems, Inc. d/b/a K-12 b	y Elior	
		Contractor		