

**WHEN COMPLETED, RETURN  
COPY TO:**  
**Illinois State Board of Education**  
 Nutrition Programs  
 100 North First Street, W-270  
 Springfield, Illinois 62777  
 Fax: 217-524-6124

**Child and Adult Care Food Program (CACFP)  
 RENEWAL OF COMPETITIVELY BID VENDED MEAL CONTRACT**

**GENERAL INFORMATION:**

1. Appropriate for CACFP organizations with annual meal purchases over **\$100,000**.
2. Once a CACFP organization has completed the competitive procurement process using **Invitation to Bid and Contract**, the initial contract may be renewed by mutual agreement for four consecutive one-year periods.
3. By completing this form, the CACFP organization is exercising its option to renew the food vendor contract with the company noted below.
4. A copy of the completed form must be returned to the Illinois State Board of Education (ISBE) along with a copy of the vendor's most recent public health inspection report and the vendor-signed **Certification Regarding Debarment, Suspension, Ineligibility, and Voluntary Exclusion Lower Tier Covered Transactions**.

**CACFP ORGANIZATION DATA**

NAME OF CACFP ORGANIZATION	AGREEMENT NUMBER
ADDRESS (Street, City, State, Zip Code)	CACFP ORGANIZATION CONTACT
	TELEPHONE NUMBER (Include Area Code)

**VENDOR DATA**

NAME OF VENDOR	CONTACT PERSON
ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER

**TERMS OF RENEWAL**

1. Date contract was originally established: \_\_\_\_\_

2. Price of meals provided:

	BREAKFAST	LUNCH	SUPPER	SNACK
Price Currently Charged				
Price for Renewal Period				
Percent of Price Change*				

\*Price increases should not exceed the current consumer price index.

3. Dates for which this renewal is in effect: \_\_\_\_\_ through \_\_\_\_\_.

**ACCEPTANCE OF AGREEMENT**

**VENDOR REPRESENTATIVE**

\_\_\_\_\_  
 Signature of Vendor Representative

\_\_\_\_\_  
 Printed Name of Vendor Representative

\_\_\_\_\_  
 Date Signed

**CACFP ORGANIZATION REPRESENTATIVE**

\_\_\_\_\_  
 Signature of CACFP Representative

\_\_\_\_\_  
 Printed Name of CACFP Representative

\_\_\_\_\_  
 Date Signed