

**Request for Child and Adult Care Food Program (CACFP) Catering Quote**

The center should complete the name lines and columns 1 and 2 prior to sending to the caterer for request of quote.

Caterer should complete columns 3 and 4 and remainder of form and return with price quote by date and time specified by the center.

<b>Sponsor/Center Name:</b> <u>Family Care Center</u>				
<b>*MEALS FOR AGES 1-5 ARE BASED UPON PORTION SIZES FOR AGES 3-5.</b>				
Meal	1. Estimated Total No. of Meals per Day	2. Preferred Delivery time	3. Unit Price per Meal	4. Total Price
Breakfast (Ages 1-5)*	85	6:30 AM	2.25	191.25
Breakfast (Ages 6-18)				
Breakfast (Adult)				
Lunch (Ages 1-5)*	85	10:00 AM	4.75	403.75
Lunch (Ages 6-18)				
Lunch (Adult)				
Supper (Ages 1-5)*				
Supper (Ages 6-18)				
Supper (Adult)				
Snack (Ages 1-5)*	85	10:00 AM	1.25	106.25
Snack (Ages 6-18)				
Snack (Adult)				

**Total:** \$ 701.25

By signing this quote, I hereby state that I have read and agree to the requirements listed in the CACFP Catering Agreement and have reviewed the meal pattern requirements (provided by the center).

**Caterer Company Name:** Lean Feast

**Authorized Caterer Representative:**  1/16/26  
 (Signature) (Date)

**Name and Title:** Collins Youngblood, Owner  
 (Print or Type)

# Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion AD-1048

## Lower Tier Covered Transactions

### *Instructions for Certification*

- (1) By signing and submitting this form, the prospective lower tier participant is providing the certification set out on page 1 in accordance with these instructions.
- (2) The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. 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 available remedies, including suspension or debarment.
- (3) The prospective lower tier participant shall provide immediate written notice to the person(s) to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- (4) The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549, at 2 C.F.R. Parts 180 and 417. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
- (5) The prospective lower tier participant agrees by submitting this form that, should the proposed covered transaction be entered into, it shall not knowingly enter into 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.
- (6) The prospective lower tier participant further agrees by submitting this form that it will include this 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.
- (7) A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that 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 System for Award Management (SAM) database.
- (8) Nothing contained in the foregoing shall be construed to require establishment of a system of records to render in good faith the certification required by this clause. 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.
- (9) Except for transactions authorized under paragraph (5) of these instructions, 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 available remedies, including suspension and/or debarment.

## Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion

### Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion AD-1048 Lower Tier

**Covered Transactions** *The following statement is made in accordance with the Privacy Act of 1974 (5 U.S.C. § 552a, as amended). This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, and 2 C.F.R. §§ 180.300, 180.335, Participants' responsibilities. The regulations were amended and published on August 31, 2005, in 70 Fed. Reg. 51865-51880. Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the proposed covered transaction. According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0505-0027. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The provisions of appropriate criminal and civil fraud privacy, and other statutes may be applicable to the information provided.*

**(Read instructions on page two before completing certification.)** A. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency; B. 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 proposal.

ORGANIZATION NAME <b>LeanFeast</b>	PR/AWARD NUMBER OR PROJECT NAME
NAME(S) AND TITLE(S) OF AUTHORIZED REPRESENTATIVE(S) <b>Collins-Youngblood Owner</b>	
SIGNATURE(S) 	DATE <b>1/16/26</b>

*In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.*

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

*To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [How to File a Program Discrimination Complaint \(https://www.ascr.usda.gov/filing-program-discrimination-complaint-usda-customer\)](https://www.ascr.usda.gov/filing-program-discrimination-complaint-usda-customer) and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter 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; (2) fax: (202) 690-7442.*

## Child and Adult Care Food Program (CACFP) Meal Service Agreement

<b>Name of Sponsor/Institution:</b> <small>Lex-Fayette Urban Co Government / Family Care Center</small>	<b>CNIPS ID:</b> 11475
<b>Contact Person:</b> Shelia Horton-Holt	<b>Phone No.</b> 859-288-4040
<b>Address:</b> 1135 Harry Sykes Way, Lexington, KY. 40504	

Lean Feast agrees to furnish meals daily to the above child care center for the period from: 1/26/26 to \_\_\_\_\_, except for holidays or other days of in-operation complete with

required (indicate below):

- paper products
- condiments
- Milk

**\*AGES 1-5 MEALS BASED ON PORTION SIZES FOR AGES 3-5.**

Meal Type/Age	Estimated Total No. of Meals Per Day	Estimated No. of Serving Days per Year	Unit Price per Meal	Total Price	Delivery or Pick-up Time
Breakfast (1-5)*	85	248	2.25	47,430	6:30 AM
Breakfast (6-12)					
AM Snack (1-5)*					
AM Snack (6-12)					
Lunch (1-5)*	85	248	4.75	100,130	10:00 AM
Lunch (6-12)					
PM Snack (1-5)*	85	248	1.25	26,350	10:00 AM
PM Snack (6-12)					

**TOTAL PRICE: \$ 173,910**

Lean Feast agrees to:

- Ensure that meals/snacks meet the minimum meal pattern requirements of program regulations, 7 CFR Part 226, including creditable components and accurate portion sizes, and will maintain complete and accurate records that at a minimum include details regarding the preparation and delivery of meals/snacks ordered, including nutrition and/or Child Nutrition (CN) labels, receipts, and cost determination records for a period of 3 years after the end of the agreement period.
- The caterer agrees to maintain required permits at all times.
- Make records available to the Kentucky CACFP, U.S. Department of Agriculture, the child care center or any other appropriate state or federal officials
- Provide meals in:  bulk or  unitized. Meal preparation/assembly cannot be subcontracted by the caterer.
- Prepare meals for:  pick up by center or  delivery by caterer at the time(s) indicated above.
- Number of meals prepared per day can be altered with 1 days notice.
- Provide delivery slips using the Kentucky CACFP delivery slip form or equivalent.
- Submit billing invoice for payment by the 7th of each month to mailing address provided by center.
- Notify the Institution immediately if the Caterer or its principals are suspended, disbarred or otherwise prohibited from performing under this contract.
- Any other information pertinent to the agreement may be included and attached to this agreement by the center.

The Sponsor/Institution agrees to pay for meals based on the above unit price(s) within 30 days of receipt of invoice.

Lean Feast agrees to provide meals that are safe and wholesome, but that any liability is severed upon receipt of meals.

If for any reason, this agreement is no longer desired, either party may terminate these services with a 14 days notification.

IN WITNESS WHEREOF, the parties here to have caused said agreement to be executed by their duly authorized officers.

By: \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Child Care Center

By:  \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Lean Feast  
Caterer

**Agreement Renewal First Year**

The institution or facility is exercising the option to renew the original (initial) catering contract that will expire on September 30, 20\_\_\_\_.

**First Year Renewal: October 1, 20\_\_\_\_ to September 30, 20\_\_\_\_**

By: \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Child Care Center

By: \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Caterer

**Agreement Renewal Second Year**

The institution or facility is exercising the option to renew the original (initial) catering contract that will expire on September 30, 20\_\_\_\_.

**Second Year Renewal: October 1, 20\_\_\_\_ to September 30, 20\_\_\_\_**

By: \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Child Care Center

By: \_\_\_\_\_  
Authorized Signature                      Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Caterer