

**PROCUREMENT AND FOOD SERVICE MANAGEMENT COMPANY
DECLARATION ISSUE**

Please complete the required information listed below regarding **ANY** contract your SAU may have procured.

SAU/RA CONTACT INFORMATION

SAU/RA #: _____

Contact Name: _____

Email: _____

Phone #: _____

List **All** School Name(s) under contract: *(use additional sheets if needed)*

FOOD SERVICE MANAGEMENT COMPANY INFORMATION

Name of Company: _____

FSMC CONTRACT INFORMATION

Annual TOTAL Value Contract: \$ _____ Applicable School Year: _____

Original Contract Date: _____ Next Bid Year: _____

Reminder: All original Food Service Management Contracts and/or Procurement Contracts and amendments must be approved by the State Agency prior to signing.

NON-FSMC CONTRACTS

Name of Company	Contract Value	Original Contract Date	Next Bid Year

(use additional sheets, if needed.)

This institution is an equal opportunity provider.