



Child and Adult Care Food Program
VENDED CONTRACT RENEWAL



Name of Sponsor: Dona Ana County Head Start - New Mexico State University	Sponsor EPICS ID #: 053
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Vended Meal Service only: If your Organization does not vend, nor contracts with a food service management company, please do not complete this form.
Organizations that contract with a School Foodservice Authority, catering company, or a meal vendor for delivered meals, please complete.
Organizations contracting with a Foodservice Management Company for on-site preparation, please complete.

Instructions:

List the vendor(s) below, use additional pages if needed.
Include a copy of the CACFP Standard Vendor Contract/Renewal when submitting the Renewal Application packet.
Additional requirements must be included in the contract and submitted as an addendum to the standard agreement.
The maximum contract period is one year with the option for renewals for up to three additional years.

Food Service Vendor – Name and Address	New	Renewal	Effective Date	End Date
Gadsden Independent School District, PO Drawer 70, Anthony, NM. 88021	<input type="checkbox"/>	<input checked="" type="checkbox"/>	8/1/22	5/19/23
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
Food Service Management Company – Name and Address	New	Renewal	Effective Date	End Date
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		
	<input type="checkbox"/>	<input type="checkbox"/>		

Certification Statement

I hereby certify that all the above information is true and correct. I understand that this information is being given in connection with receipt of federal funds and that New Mexico FNB CACFP officials may, for cause, verify the information and that deliberate misrepresentation may subject me to prosecution under applicable state and federal criminal statutes.

Brianda Tzintzun Digitally signed by Brianda Tzintzun
Date: 2022.05.20 11:33:08 -06'00'

Signature of Sponsor Representative

Brianda Tzintzun, Program Manager

Name / Title

5/20/22

Date