

ATTACHMENT A

BRAND AND GRADE LABELS SPEC SHEETS –

Provide sample labels and identify grade definitions of applicable Distributor color codes.

ATTACHMENT B

HACCP SUMMARY

Provide a current HACCP (Hazard Analysis Critical Control Point) summary describing company food safety practices.

ATTACHMENT C

EVIDENCE OF INSURANCE

Attach copy, or evidence, of required Property, Liability and Worker's Compensation Insurance.

Distributor Insurance documents are to be included in the packet

ATTACHMENT D









NC LUNSFORD ACT N.C. General Statute 14-208.18

The Distributor acknowledges that N.C. General Statute 14-208.18 prohibits anyone required to register as a sex offender under Article 27A of Chapter 14 of the General Statutes from knowingly, among other things, being on the premises of any school. This prohibition applies to persons required to register under Article 27A who have committed any offense in Article 7A of Chapter 14 or any offense where the victim of the offense was under the age of 16 years at the time of the offense.

CRIMINAL BACKGROUND CHECKS:

1. The Distributor shall conduct or have conducted within the previous twelve (12) months, a criminal background check (which includes a check of the State Sex Offender and Public Protection Registration Program, the State Sexually Violent Predator Registration Program, and the National Sex Offender Registry) (collectively, "listed registries") on each of its employees or agents who, pursuant to this Agreement, engage in any services on the premises of a school or within 300 feet of any location intended primarily for the use, care, or supervision of minors, including but not limited to schools, children's museums, child care centers, nurseries, and playgrounds, prior to any such employee or agent engaging in such services.
 - a. Distributors shall conduct such criminal background checks no less than once every twelve (12) months thereafter.
 - b. Distributor shall maintain a log of the date and results of all such criminal background checks and subsequent criminal background checks for those assigned employees and agents.
 - c. Within 5 days of a request from the school district, Distributor shall provide to the school district the log and results required by subsection b above.
2. Distributor shall not assign any employee or agent to, pursuant to this Agreement, provide services on the premises of a school or within 300 feet of any location intended primarily for the use, care, or supervision of minors, including but not limited to schools, children's museums, child care centers, nurseries, and playgrounds if said worker:
 - a. appears on any of the listed registries;
 - b. has been convicted of any crime, whether misdemeanor or felony, involving a minor;
 - c. has been convicted of any felony involving sex, violence, or drugs; or
 - d. has engaged in any crime or conduct indicating that the worker may pose a threat to the safety or well-being of students or school personnel.
3. Each North Carolina school district reserves the right to prohibit any individual employee or agent of Distributor from providing services on school district property or at any school district events if the school district(s) determines, in its sole discretion, that such employee or agent poses a threat to the safety or well-being of students, school personnel or others.

Signed:

		
Authorized Signature	Printed Name	Title
		
Name of Company	City, State, Zip Code	
		
Telephone	E-Mail	Date

ATTACHMENT E
DISTRIBUTOR'S FOOD RECALL POLICY/PROCEDURES

The U.S. food service industry is the safest in the world, but issues surface from time – to – time requiring fast and effective communication to recall a product that has been deemed unsafe.

Provide a summary, or attach a document, explaining your company policy on addressing Food –Recalls.


Company Name (Type)


Signature of Authorized Representative

Print Authorized Representative Name


Date

2024-2025 OFFICIAL JCPS ICE CREAM DISTRIBUTOR/VENDOR IFB/CONTRACT ATTACHMENTS

ATTACHMENT F- SCHOOL DISTRICT CALENDAR

SCHOOL STAFF CALENDAR



2024-2025
STAFF CALENDAR
215 Staff 168 Student days

JULY				
M	T	W	T	F
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31		

AUGUST				
M	T	W	T	F
			1	2
5	6	7	8	9
12	13	14	15	16
WD	RS	RS	RC	RC
19	20	21	22	23
RC	RS	RS	RS	WD
26	27	28	29	30

SEPTEMBER				
M	T	W	T	F
2	3	4	5	6
H				
9	10	11	12	13
16	17	18	19	20
23	24	25	26	27
			ER-C	
30				

OCTOBER				
M	T	W	T	F
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
Q1 (40)	RS			
28	29	30	31	

NOVEMBER				
M	T	W	T	F
				1
4	5	6	7	8
	WD			
11	12	13	14	15
H				
18	19	20	21	22
25	26	27	28	29
		AL	H	H

DECEMBER				
M	T	W	T	F
2	3	4	5	6
9	10	11	12	13
16	17	18	19	20
				Q2 (38)
23	24	25	26	27
AL	H	H	H	AL
30	31			
AL	AL			

JANUARY				
M	T	W	T	F
		1	2	3
		H	AL	WD
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
H				
27	28	29	30	31
		ER-C		

FEBRUARY				
M	T	W	T	F
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
RC				
24	25	26	27	28

MARCH				
M	T	W	T	F
3	4	5	6	7
10	11	12	13	14
Q3 (44)	WD	RC		
17	18	19	20	21
24	25	26	27	28
31				

APRIL				
M	T	W	T	F
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
AL	AL	AL	AL	H
21	22	23	24	25
28	29	30		

MAY				
M	T	W	T	F
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
			ED Q4 (46)	RS
26	27	28	29	30
H	RS	RS	RS	RS

JUNE				
M	T	W	T	F
2	3	4	5	6
WD	WD	WD	WD	WD
9	10	11	12	13
16	17	18	19	20
23	24	25	26	27
30				

HOLIDAYS	LABOR DAY	NEW YEAR'S DAY	LEGEND	FIRST DAY FOR STUDENTS	RC	REQUIRED COUNTY	ER	EARLY RELEASE
	VETERAN'S DAY- NOV. 11	MARTIN LUTHER KING, JR.		END OF EACH GRADING PERIOD	RS	REQUIRED SCHOOL	INCLEMENT WEATHER	
	THANKSGIVING HOLIDAY	SPRING BREAK		EARLY DISMISAL DAY	H	HOLIDAY		
	CHRISTMAS HOLIDAY	MEMORIAL DAY		WD	OPTIONAL WORKDAY	AL	ANNUAL LEAVE	ADOPTED: 3-12-2024

ATTACHMENT G

HUB CERTIFICATION

Historically Underutilized Business (HUB) Certification

Companies submitting Bids that have been certified by the North Carolina Department of Administration as Historically Underutilized Business (HUB)

Entities are encouraged to indicate their HUB status when responding to this IFB.

Mark YES or No with an "X" as applicable and sign below.

☐ **Yes**, I certify that my company has been certified by the North Carolina Department of Administration as Historically Underutilized Business (HUB), and I have attached a copy of our HUB certification to this form.

Required documentation for recognition as a HUB:

Check all that apply:

- ☐ Minority
- ☐ Small Business
- ☐ Women Owned

☐ **No**, I certify that my company is does not qualify for HUB status.


Company Name (Print)


Signature of Authorized Representative

Print Authorized Representative Name


Date

ATTACHMENT H

CERTIFICATION OF CONTRACTS, GRANTS, LOANS, COOPERATIVE LOBBYING AND COOPERATIVE AGREEMENTS

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 any 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 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 Standard Form-LLL, "Disclosure Form to Report Lobbying", in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers (including sub-contracts, sub-grants and contracts under grants, loans and cooperative agreements) and that all sub-recipients 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.

Company Name (Print)

Signature of Authorized Representative

Print Authorized Representative Name

Date

ATTACHMENT I

CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS - PRIMARY COVERED TRANSACTIONS

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and
 - (d) have not within a three-year period preceding this application/bid had one or more public transactions (Federal, State or Local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.


Company Name (Print)


Signature of Authorized Representative


Date


Print Authorized Representative Name

Instructions for Certification

1. By signing and submitting this form, the prospective lower tier participant is providing the certification set out in this document 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 and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to whom this bid 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," "bid," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of rules implementing Executive Order 12549. You may contact the person to which this bid is submitted for assistance in obtaining a copy of the 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 it 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 Non-Procurement List.

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8. 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 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.

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ATTACHMENT J SCHOOL DISTRICT PROFILE

Double Click on gray box and type in Default text box.

2024-2025 Johnston County Public Schools

School Name/ Manager Name	Address	City, State, Zip - Phone	FRESH FRUIT & VEG PROGRAM (YES/NO)	SUMMER FEEDING PROGRAMS (YES/NO)
Archer Lodge Middle Brittany Valdivia	740 Wendell Road	Wendell, NC 27591 919-559-0714	No	No
Benson Elementary Michelle Williams	2040 Hwy 50 North	Benson, NC 27504 919-894-4233	No	No
Benson Middle Debra Barbour	1600 North Wall St	Benson, NC 27504 919-894-3889	No	No
Clayton High Laverne Holley	600 S. Fayetteville St	Clayton, NC 27520 919-553-4064	No	No
Clayton Middle Jennifer Merlin	490 Guy Road	Clayton, NC 27520 919-553-5811	No	No
Cleveland Elementary Rodica Ban	10225 Cleveland Rd	Clayton, NC 27520 919-550-2700	No	No
Cleveland High Jennifer Allen	1892 Polenta Rd	Clayton, NC 27520 919-934-2455	No	No
Cleveland Middle Peggy Navarrete	2323 Cornwallis Rd	Garner, NC 27529 919-553-7500	No	No
Cooper Academy Dewayne McClary	849 N. Mial St	Clayton, NC 27520 919-553-0256	No	No
Corinth Holders Elementary Ginger Matthews	3976 NC 231	Zebulon, NC 27597 919-365-7560	No	No
Corinth Holders High Kayla Cadogan Fleegle	6875 Applewhite Road	Wendell, NC 27591 919-365-4306	No	No
Dixon Road Elementary Michelle Little-Pulley	835 Dixon Rd	Willow Springs, NC 27592 919-894-7771	No	No
East Clayton Elementary Jawanda Vick	2075 NC 42 East	Clayton, NC 27520 919-550-5311	No	No
Four Oaks Elem Laura Chavis	180 Hatcher St	Four Oaks, NC 27524 919-963-2165	No	No
Four Oaks Middle Patrina Williams	1475 Boyette Road	Four Oaks, NC 27524 919-963-4022	No	No
Glendale-Kenly Elementary Sheila Richardson	2001 Bay Valley Rd	Kenly, NC 27542 919-284-2821	No	No
Innovation Academy Justin Kearney	521 Martin Luther King Jr Dr	Smithfield, NC 27577 919-934-6481	No	No

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McGee's Crossroads Elementary Tammy Baker	10330 NC 50 North	Angier, NC 27501 919-894-6003	No	No
McGee's Crossroads Middle Kayla Herring	13353 NC 210	Benson, NC 27504 919-894-6003	No	No
Meadow Elementary Amanda Cuaraqui	7507 NC 50 South	Benson, NC 27504 919-894-4226	No	No
Micro Elementary Tammy Twiggs	301 E. Main Street	Micro, NC 27555 919-588-4300	No	No
North Johnston High Carolyn Lee	5915 US 301 North	Kenly, NC 27542 919-284-2031	No	No
North Johnston Middle Sue Ann Creech	301 E. Main St	Micro, NC 27555 919-284-3374	No	No
Pine Level Elem Sherita Cox	304 W. Blanche Street	Pine Level, NC 27568 919-965-3323	No	No
Polenta Elementary Sonya Woodard	105 Josephine Rd	Garner, NC 27529 919-898-6039	No	No
Powhatan Elementary Marcia Murray	3145 Vinson Rd	Clayton, NC 27527 919-553-3259	No	No
Princeton Elementary Wendy Creech	650 Holt's Pond Rd	Princeton, NC 27569 919-936-0755	No	No
Princeton Middle/High Angela Allen	101 Dr. Donnie Jones Jr. Blvd	Princeton, NC 27569 919-936-5011	No	No
River Dell Elementary Rachel Blackman	12100 Buffalo Rd	Clayton, NC 27520 919-553-1977	No	No
Riverwood Elementary Wendy Richters	108 Athletic Club Blvd	Clayton, NC 27520 919-359-6300	No	No
Riverwood Middle Karen Rushton	204 Athletic Club Blvd	Clayton, NC 27520 919-359-2769	No	No
Selma Elementary Erika Santos	311 W. Richardson St	Selma, NC 27576 919-965-3361	No	No
Selma Middle Kisha Cunningham	1533 US 301 North	Selma, NC 27576919-965-2555	No	No
Smithfield Middle Debbie Williford	1455 Buffalo Road	Smithfield, NC 27577 919-934-5191	No	No
Smithfield-Selma High Debby Cuevas	700 Booker Dairy Rd	Smithfield, NC 27577 919-934-5191	No	No
South Johnston High Annie Teresa Bell	10381 US 301 South	Four Oaks, NC 27524 919-894-3146	No	No

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South Smithfield Elementary Kelli Tyndall	201 W. Sanders St	Smithfield, NC 27577 919-934-8979	No	No
Swift Creek Middle Kizzy Chance	325 Norris Road	Clayton, NC 27520 919-262-0750	No	No
Thanksgiving Elementary Ashlie Mitchell	1161 Lynch Rd	Selma NC 27576 984-400-7300	No	No
West Clayton Elementary Tricia Jones	1012 S. Lombard St	Clayton, NC 27520 919-553-7113	No	No
West Johnston High Michelle Baker	5935 Raleigh Rd	Benson, NC 27504 919-934-7333	No	No
West Smithfield Elementary Tamika Sanders	2665 Galilee Rd	Smithfield, NC 27577 919-989-6418	No	No
West View Elementary Sheila Sanders	11755 Cleveland Rd	Garner, NC 27529 919-861-6184	No	No
Wilson's Mills Elementary Carolyn Windross	4654 Wilson's Mills Rd	Wilson's Mills, NC 27593 919-934-7978	No	No

ATTACHMENT K
PROPOSED DELIVERY SCHEDULE

The vendor shall attach an annual delivery schedule consistent with the School Staff Calendar that can be found in Attachment F. Delivery shall occur to sites listed on the School District Profile that can be found in Attachment J.

**ATTACHMENT L
NEW VENDOR FORM AND W9**

The offeror shall complete and submit the “New Vendor Form” as well as a copy of the vendor’s W-9.

[New Vendor Form](#)

NEW VENDOR INFORMATION PACKET

In compliance with Federal laws, Johnston County Public Schools requests the following information regarding your Taxpayer Identification Number (TIN), Federal Identification Number (FIN), or Social Security Number (SSN). If we do not receive your correct identification number, Federal law requires that we withhold 31% of amounts due to you and forward these amounts withheld to the IRS until we receive your correct identification number. In addition, you may be subject to certain other penalties from the IRS. Please complete all of the requested information on the next page of this form. Incomplete forms will cause unnecessary delays on orders. **This information must be received before we will process your order for payment.**

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NEW VENDOR INFORMATION SHEET

Vendor / Individual Name: _____

Federal Tax ID Number
Number

OR

Social Security

_____-_____-_____-_____-_____-_____-

_____-_____-_____-_____-_____-_____-

Legal/Business Status (Check only one)

☐ Corporation

☐ Partnership

☐ Individual

☐ Trust / Estate

☐ Government Agency

☐ College / University / School System

☐ Non-Profit

☐ Sole Proprietor

Business Information

Type of Business

☐ Minority Owned

☐ Black (B)

☐ Hispanic (H)

☐ Asian American (AA)

☐ American Indian (AI)

☐ Female Owned

☐ Disabled Owned

☐ None of the Above

Type of Sales

☐ Merchandise (Goods Only)

☐ Service Only

☐ Merchandise & Services

☐ Attorney / Legal Fees

☐ Consultant / Professional Fees

☐ Medical / Health Care Payments

☐ Prizes / Awards

☐ Royalties

☐ Rental / Lease

☐ Yes ☐ No Are you a state contract vendor with the North Carolina Department of Purchasing & Contract?

Remittance Address: _____

City _____ State _____ Zip _____

Phone # _____ Fax # _____

Email _____

I certify under penalty of perjury that the Tax ID Number and other relevant information provided is correct.

Signature/Title _____ Date _____

***Submit a W-9 along with this form**

2024-2025 OFFICIAL JCPS ICE CREAM DISTRIBUTOR/VENDOR IFB/CONTRACT ATTACHMENTS

AP Use Only

Vendor

_____ Date _____

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ATTACHMENT M
DEVIATIONS / COMPLIANCE FORM

If the undersigned proposalder intends to deviate from the general terms and conditions or items specifications listed in thiS proposal invitation, all such deviations must be listed on this page, with complete and detailed conditions and information included or attached. Johnston County Public Schools School Nutrition Services will consider any deviations in its proposal award decisions, and Johnston County Public Schools School Nutrition Services reserves the right to accept or reject any proposal based upon any deviations indicated below or in any attachments or inclusions.

In the absence of any deviation entry on this form, the offerer assures Johnston County Public Schools School Nutrition Services of their full compliance with the general terms and conditions, item specifications, and all other information contained in this proposal invitation.

☐ No Deviations

☐ Deviations as listed

List any deviations your company is submitted below:

Company Name (Please Print)

Original Signature of Representative Authorized to Sign

ATTACHMENT N
TABULATION SHEET

ATTACHMENT O- NO BID RESPONSE

Thank you for the opportunity, but our company declines to bid for the 2024-2025 contract period.

<hr/>	
Distributor Signature	Date
<hr/>	
Printed Name	Title