

February 4, 2020

Joaquin Arellano
City of Hollywood, FL
Department of Parks, Recreation & Cultural Arts
1405 S. 28 Avenue
P.O. Box 229045
Hollywood, FL 33022-9045

Dear Mr. Arellano,

FLIPANY is pleased to submit its proposal to the City of Hollywood Department of Parks, Recreation & Cultural Arts as an approved sponsor under the State of Florida, Department of Agriculture and Consumer Services (DACS) to become the daily food service sponsor for the 2020 summer camps (4+ sites up to 600 youth) and 2020-2021 aftercare programs (4+ sites up to 600 youth). Intended to increase the overall number of children in South Florida and more specifically, the City of Hollywood who have access to afterschool/summer meals and the number of children in underserved areas who receive nutrition education, FLIPANY is thoroughly interested in this opportunity to increase the healthy equity of your residents.

A food service sponsor in good standing with DACS and the Department of Health for the past 8 years, FLIPANY currently serves approximately 97 sites during afterschool and an estimated 87 sites during the upcoming summer throughout Miami-Dade, Broward, Monroe and Palm Beach Counties. Recently receiving awards from FLDACS for CLOSING THE MEAL GAP and being a TRAILBLAZER- for streamlining our summer food service in 2019, FLIPANY continues to be invested in our ability to provide the healthiest food possible, great customer service, financial strength and responsible business practices.

A concept similar to that implemented through other city-related initiatives such as Let's Move! and the nutrition/fitness programs sponsored by the Children's Services Council, we are eager to build upon our current partnership of more than four consecutive years in an effort to learn more about the City of Hollywood and its needs regarding health and wellness for the youth, adults and city staff as well.

On behalf of FLIPANY, thank you in advance for giving us the opportunity to respond to this RFP and we look forward to continuing a mutually rewarding partnership.

Sincerely,



Lynne Kunins

President/CEO

FLIPANY Overview:

Quick Facts:

- Founded in 2005 by CEO Lynne Kunins, FLIPANY (Florida Introduces Physical Activity and Nutrition to Youth) was developed as a non-profit organization to address the health and education disparities in the underserved areas of South Florida.
- Since its inception, FLIPANY has successfully partnered with more than 400 sites in Miami-Dade, Broward, Palm Beach and Monroe Counties.
- In 2019, FLIPANY served more than 2 million healthy meals to children and provided more than 40,000 youth with nutrition education.

Mission:

FLIPANY's mission is to foster healthy lives through nutrition education, physical activities and wellness initiatives.

Agency Innovations:

Highlighting FLIPANY's unique ability to deliver delicious and nutritious snacks and meals for children; our innovative menu has earned us the Turnip the Beet Gold Award for two years in a row.

Pricing Structure:

In order for FLIPANY to maintain an effective and progressive relationship with all of our sites, an internal system has been utilized to mitigate extraneous costs and eliminate all waste above 5% where feasible. These systems are in accordance to program attendance and are directly impacted by the accuracy in site reporting. Additionally, FLIPANY has implemented use of leftover snacks and providing shelf stable items that can be used in the event of an unexpected increase in enrollment or attendance.

In accordance to this, the city will not be invoiced for any "over-ordering" that falls under the 5% threshold per month. For sites where waste is identified above and beyond the 5%, the city will be invoiced at a rate of \$0.94/snack and \$3.41/meal. This is an additional measure to ensure site staff are ordering based on actual attendance and not on the maximum capacity available for the day.

It is important to note that each site is assigned a Program Monitor to aide in the ordering and reporting process for accuracy and technical assistance. FLIPANY is committed to providing high quality meals per the provided menus and as such, is not able to absorb the cost of inaccurate ordering at all of our sites.

FLIPANY Response to Point-by Point Requirements

1. History of more than five (5) years providing these services. Please include a current list of sites serviced and contact information.

At this time, FLIPANY would like to retain possession of our current site list. We are however, happy to provide the requested documents to the City of Hollywood should an opportunity to interview be extended upon review of this proposal response.

2. Minimum of three references and contact information.

Business Name	Contact Person	Phone Number	Email
City of Miami Parks & Recreation	Virginia Bentley	(305) 960-2946	vbentley@miamigov.com
Dr. Martin Luther King Jr. Community Center	Sandra White	(954) 921-3412	swhite@hollywoodfl.org
City of West Park Parks & Recreation	Cesar Garcia	(954) 985-1990	cgarciac@cityofwestpark.org

3. Sample of after school and summer menu to include hot and cold meals.

Please see the attached items listed as Addendum 1-5.

4. Menu flexibility pertaining to off-site field trips.

For all off-site field trips, FLIPANY is required to provide the Department of Agriculture and Consumer Services with 48 hours advance notice. In order to efficiently meet such regulations and to ensure there are no interruptions in service prior to leaving the associated property, our sites are required to submit a list of any upcoming field trips as early as possible.* On such days, a picnic-style or boxed lunch is delivered to the respective site prior to departure, so children are able to have a nutritious meal and/or snack while off-site.

*This timeline may vary according to the season (i.e. a week in advance for afterschool sites and at the start of the season for summer sites), with reminder requests sent intermittently.

5. Process of ordering meals.

Prior to the start of meal service, sites are invited to an in-person training where a printed manual is provided which includes a step-by-step guide on the meal ordering process. This guide is also taught and reiterated verbally for confirmation of understanding as the order process varies according to meal type (2-component vs. 5-component) and type of service day (in-school vs out-of-school). The ordering process is initiated by accessing the 'Access to Healthy Food' portion of the FLIPANY website and the respective program thereafter; afterschool or summer.

Based on the requested meal type, the order submission deadline may vary as well; with items to be delivered by the Caterer and served by the site the following week. To ensure deadlines are not missed, prior to the start of meal service FLIPANY's Program Monitors provide all sites with a schedule to include the aforementioned timelines and send out weekly email reminders as a courtesy.

For example, at this time all Snack orders must be submitted between Monday at 4pm and Wednesday at Noon. All Supper orders must be submitted daily between 4pm and Noon the following day.

6. Sponsor's approach to respond to concerns and/or issues that may arise.

Upon enrollment, all sites are provided with the contact protocol for any concerns and/or issues that may arise during or prior to meal service. These issues are addressed by Viktoriya Yudovina, our Senior Program Manager within the Food and Nutrition Department. Viktoriya has a combined 7+ years of experience managing the federal food program at FLIPANY. In this role, she is responsible for training program monitors, requesting/reviewing site paperwork, monitoring daily/weekly order forms, and handling all challenges related to food delivery, timeliness and food quality. Viktoriya ensures that her team is timely and has all of the necessary tools to provide high quality technical assistance to sites where needed while remaining in the office daily for any additional issues that may occur.

7. Provide current copy of Department of Business and Professional Regulation License.

FLIPANY is not required to hold a DBPR license. In its place, we have provided the City of Hollywood with a copy of our SunBiz Division of Corporations documents in *Active* status. Please see Addendum 6-7.

8. Must submit certification of insurance meeting City's requirements.

Please see the attached item listed as Addendum 8.

9. State whether sponsor will provide refrigerators and food warmers or does site need to provide (per site)

As a meal sponsor, FLIPANY is dedicated to ensuring that our sites have sufficient equipment to deliver a high quality food program to the children within programs such as those offered by the City of Hollywood. FLIPANY also acknowledges the limitations of some sites and in such cases, are willing to provide food warmers and coolers/refrigerators where applicable. These items will be provided on a temporary basis and will be contingent upon the City's ability to provide a permanent replacement within an agreed upon timeframe. In order for sites to access such resources, an official request must be submitted by the Site Supervisor to our Food and Nutrition Department.

Addendums:

Addendum 1	Summer Food Service Program-Breakfast & Snack Menu
Addendum 2	Summer Food Service Program-Lunch Menu
Addendum 3	Summer Food Service Program-Cold Boxed Lunch & Bulk Menu
Addendum 4	Afterschool Meal Program- Supper Menu
Addendum 5	Afterschool Meal Program-PowerSnack Menu
Addendum 6	SunBiz Division of Corporations Record
Addendum 7	SunBiz Division of Corporations Fictitious Name Record
Addendum 8	Copy of General Liability Insurance



USDA

Taste
CATERING
cuisine • environs

BREAKFAST & SNACK

2019 Summer Food Service Program
6.01.19



MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
CYCLE 1 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 2 ea. Graham Crackers 2 pk/14g ea.	CYCLE 1 Breakfast 1 ea. 2 oz. IW Cinnamon Raisin Roll 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. 6 oz Fruit Juice 100% 2 ea. 2.5 oz. WG Cookie 2pk/70g	CYCLE 1 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. *75 oz 1oz Grain eq WG Cheez-It	CYCLE 1 Breakfast 1 ea. 2 oz. WG Fruit Muffin 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. 2 oz. WG Fruit Muffin	CYCLE 1 Breakfast 1 ea. 1.5 oz. Granola Bar 2 pk/42g ea. 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. 6 oz Fruit Juice 100% 1 ea. 1oz Animal Crackers
CYCLE 2 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. 1.5 oz. Granola Bar 2 pk/42g ea.	CYCLE 2 Breakfast 1 ea. 2 oz. IW WG Potato Bun 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. *6 oz Fruit Juice 100% 1 ea. 2 oz. IW WG Potato Bun	CYCLE 2 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. *75 oz 1oz Grain eq WG Pretzels	CYCLE 2 Breakfast 1 ea. 2 oz. WG Fruit Muffin 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. 2 oz. WG Fruit Muffin	CYCLE 2 Breakfast 1 ea. 1.5 oz. Granola Bar 2 pk/42g ea. 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. 6 oz Fruit Juice 100% 1 ea. 1 oz WG Bug Bite Grahams
CYCLE 3 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 2 ea. Graham Crackers 2 pk/14g ea.	CYCLE 3 Breakfast 1 ea. 2 oz. IW Brioche Roll 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. 6 oz Fruit Juice 100% 1 ea. 2.5 oz. WG Cookie 2 pk/70g	CYCLE 3 Breakfast 1 ea. 1 oz. Cereal Bowl 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. 1 oz. WG Honey Bun Goldfish	CYCLE 3 Breakfast 1 ea. 2 oz. WG Oat Bran Muffin 1 ea. *1 c Fresh Fruit 1 ea. 8 oz. Skim Milk Snack 1 ea. *1 c Fresh Fruit 1 ea. 2 oz. WG Oat Bran Muffin	CYCLE 3 Breakfast 1 ea. 1.5 oz. Granola Bar 2 pk/42g ea. 1 ea. *6 oz Fruit Juice 100% 1 ea. 8 oz. Skim Milk Snack 1 ea. 6 oz Fruit Juice 100% 1 ea. 1oz Animal Crackers
*we serve 1/2 c extra fruit at breakfast and 1/4 c extra fruit at snack *see Nutrition certification statement that 75oz serving is 1oz Grain equivalent	*we serve 2 oz. extra juice at breakfast	*we serve 1/2 c extra fruit at breakfast and 1/4 c extra fruit at snack *see Nutrition certification statement that 75oz serving is 1oz Grain equivalent	*we serve 1/2 c extra fruit at breakfast and 1/4 c extra fruit at snack	*we serve 2 oz. extra juice at breakfast

"This institution is an equal opportunity provider."

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<p>CYCLE 1 Build Your Own Bun Teriyaki Baked Diced Chicken 2 oz. on WW Bun 2.1 oz. / 1 ea. Creamy Carrot Raisin Slaw 1/2 c Shredded Fresh Carrots & Dried Raisins Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1.1 oz. / 75 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 1 Beef-a-Roni 1 cup Serving 4 oz Meat Sauce & WG Pasta 1/2 cup Garden Salad 1/2 c Spinach, Kale & Carrot Italian Dressing 1 ea. Fruit Cup 4 oz. / 1 ea. Chocolate Milk 1%</p> <p>USDA RECIPE 1/4 cup Red Veggie Credit 1/2 c Extra Vegetable</p>	<p>CYCLE 1 Arroz con Pollo 1 cup Serving *Dice Chicken 2 oz & Brown Rice 1/2 c Chicken added to Rice, Peas, Red Peppers Greens Salad 1/2 c Spinach, Romaine & Cucumber French Dressing 1 ea. Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>USDA PROTEIN ENHANCED RECIPE *RECIPE WITH 2 OZ CHICKEN NOT 1 STRIP 1/2 c Extra Fruit</p>	<p>CYCLE 1 Build Your Own 1/2 Sandwich *Tuna Fish Salad 2 oz. 1 slice WW Bread 1.3 oz. / 38 gr. Sweet & Sour Slaw Salad 1/2 c Purple & White Cabbage, Shredded Carrots Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>USDA RECIPE .3 oz / 10 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 1 Build Your Burger CN Hamburger 2.5 oz. / 1 ea. on WW Bun 2.1 oz. / 1 ea. Broccoli & Sunflower Salad 1/2 c Fresh Florets, Sunflower Seeds & Raisins Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>1.1 oz. / 75 gr. Extra Grain 1/2 c Extra Fruit</p>
<p>CYCLE 2 Build Your Own Bun BBQ Baked Diced Chicken 2 oz. on WW Bun 2.1 oz. / 1 ea. Homestyle Potato Salad 1/2 c Boiled Potatoes, Onion, Relish & Mayo Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1.1 oz. / 75 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 2 Mac & Cheese 1 cup Serving 4 oz Cheese Sauce & WG Pasta 1/2 c Cheddar, Cottage, Eggs, Parmesan, Cauliflower & Bechamel Spinach Leaf & Grape Tomato 1/2 c LF French Dressing 1 ea. Fruit Cup 4 oz. / 1 ea. Chocolate Milk 1%</p> <p>USDA RECIPE 1/2 c Extra Vegetable</p>	<p>CYCLE 2 Steak & Taters Salisbury Steak Au Jus 3.2 oz. / 1 ea. WG Dinner Roll 1.8 oz. / 1 ea. Mash Potato mixed with Corn 1/2 c Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1/2 oz. Extra Protein Eq. .8 oz / 23 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 2 We Roll Your Sandwich Turkey 3 oz. & Cheese 1 oz WW Tortilla Roll Up 31 gr / 1 ea. Green Bean & Tomato Salad 1/2 c Tossed in Vinaigrette Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1/2 oz. Extra Protein 3 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 2 Build Your Bean Soft Taco Trio Mixed Beans & Cheddar 3 oz. Cannellini, Kidney & Pinto Beans In Mild Tomato Salsa 1/2 oz. Served on WW Tortilla 31 gr / 1 ea. Shred Lettuce Salad 1/2 c Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1 oz. Extra Protein 3 gr. Extra Grain 1/2 c Extra Fruit</p>
<p>CYCLE 3 Build Your Bun Baked Chicken & Gravy 2 oz on WW Bun 2.1 oz. / 1 ea. Classic Coleslaw 1/2 c Shredded Cabbages & Carrots Fresh Fruit 1 cup / 1 ea. Skim Milk</p> <p>1.1 oz. / 75 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 3 Baked Ziti Pasta 1 cup Serving *4 oz. Cheese Mix & WG Pasta 1/2 c Ricotta, Egg, Mozzarella, Parmesan & Tomato Marinara Garden Salad 1/2 c Spinach, Kale & Carrot Italian Dressing 1 ea. Fruit Cup 4 oz. / 1 ea. Chocolate Milk 1%</p> <p>USDA MODIFIED RECIPE *Mac-n-Cheese Italian Style 1/2 c Extra Vegetable</p>	<p>CYCLE 3 Traditional Tastes Herb Roasted Chicken 2 oz Vegetable Mirepoix Carrot, Celery, Onion WG Dinner Roll 1.8 oz. / 1 ea. Greens Salad 1/2 c Spinach, Romaine & Cucumber Italian Dressing 1 ea. Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>.8 oz / 23 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 3 Build Your Wrap *Chicken Salad 2 oz. Onion, Celery, Yogurt, Applesauce WW Tortilla Roll Up 31 gr / 1 ea. Sweet & Sour Carrot Pea Salad 1/2 c Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>USDA MODIFIED RECIPE *Tuna Salad base exchanging for Chicken 3 gr. Extra Grain 1/2 c Extra Fruit</p>	<p>CYCLE 3 Build Your Burger CN Hamburger 2.5 oz. / 1 ea. on WW Bun 2.1 oz. / 1 ea. Broccoli & Sunflower Salad 1/2 c Fresh Florets, Sunflower Seeds & Raisins Fresh Fruit 1 c / 1 ea. Skim Milk</p> <p>1.1 oz. / 75 gr. Extra Grain 1/2 c Extra Fruit</p>

COLD BOXED LUNCH & BULK

2019 Summer Food Service Program

6.01.19

ALL 8 oz. MILK SERVINGS ARE IN INDIVIDUAL 1/2 PINT CARTONS

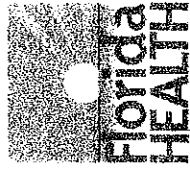


MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
MONDAY 1/2 Turkey & Cheese Sandwich Turkey Breast 3 oz. & Cheese 1 oz. on 1 slice WW Bread 1.3 oz / 38 gr. Fresh Fruit 1 cup / 1 ea. 100% Fruit Juice 6 oz. / 1 ea. Skim Milk	TUESDAY Caesar Chicken Wrap Diced Chicken 3 oz. Tossed in Caesar Dressing Dark Greens 1/2 c in Wrap WW Tortilla 31 gr. / 1 ea. Fruit Cup 4 oz. / 1 ea. 100% Fruit Juice 6 oz. / 1 ea. Chocolate Milk 1%	WEDNESDAY 1/2 Italian Sub Beef Salami 3 oz. & Cheese 1 oz. Dark Greens 1/2 c on Sub 1/2 - 8" WW Sub Roll 5 oz. / 142 gr. Italian Dressing 1 ea. Fresh Fruit 1 cup / 1 ea. 100% Fruit Juice 6 oz. / 1 ea. Skim Milk	THURSDAY Tuna Salad Soft Bun USDA Tuna Fish Salad 3 oz. WW Bun 2.1 oz. / 1 ea. Fresh Fruit 1 cup / 1 ea. no apple 100% Fruit Juice 6 oz. / 1 ea. Skim Milk	FRIDAY Turkey & Cheese Roll-Up Turkey Breast 3 oz. & Cheese 1 oz. in WW Tortilla 31 gr. / 1 ea. Fresh Fruit 1 cup / 1 ea. 100% Juice 6 oz. 1 ea. Skim Milk
		IF IS A COLD MENU MEAL IT IS SERVED AS BULK PRE-MADE SANDWICHES ALL BOXED LUNCHES MUST BE SENT AS INDIVIDUALLY WRAPPED SANDWICHES		


2 Taste Catering - Supper

FLIPANY
The Ingredient to a Healthy Life

FLIPANY Afterschool Menu February 2020



MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3 - Cheese & Meat Lasagna in Red Sauce Lean Ground Turkey (1oz) w/ Tomato Sauce (drain grease from meat) Shredded Cheese (1oz) Mixed Vegetables (1/2c) Applesauce (1/4c) Pasta (from Lasagna) (1/2c) 1% White (8oz)	4 - Cheese Ravioli (CN Label) Cheese (2oz), Green Beans (1/2c) Tomato Sauce (1/4c) Fresh Berries (1/4c) Ravioli Pasta (1/2c) WG Garlic Bread (1oz) 1% White (8oz)	5 - BBQ Chicken Pulled Chicken (2oz) w/ BBQ Sauce Baked Beans (1/2c) Coleslaw (1/4c) Corn Muffin (1 serv) 1% White (8oz)	6 - Picadillo Lean Ground Beef (2oz) (drain grease from meat) Roasted Broccoli (1/2c) Cob Corn (1/4c) WW Tortilla (1 serv) 1% White (8oz)	7 - Crispy Oven Chicken (8oz) Crispy Chicken Breast (2oz) Lima Beans (1/2c) Stewed Tomatoes (1/4) Brown Rice (1/2c) 1% or Fat Free Flavored Milk
10 - Salisbury Steak with Gravy Beef Steak (2oz) Roasted Potatoes (1/2c) Steamed Cauliflower Broccoli Mix (1/4c) WW Roll (1 serv) 1% White (8oz)	11 - Turkey Dinner Roasted Turkey (2oz) Mashed Sweet Potatoes (1/2c) Collard Greens (1/4c) or Spinach (1/2c) WW Roll (1 serv) 1% White (8oz)	12 - Baked Chicken Dinner Baked Chicken Breast (2oz) Brunoise Vegetables (1/2c) Green Beans (1/4c) Brown Rice (1/2c) 1% White (8oz)	13 - Turkey and Sweet Potato Dinner Roast Turkey Slices (2oz) Fresh Roasted Sweet Potatoes (1/2c) Corn (1/4c) WW Roll (1 serv) 1% White (8oz)	14 - Chicken Burger Chicken Patty (2oz) Baked Potato Wedges (1/2c) Lettuce, Sliced Tomatoes, Pickles, Onions (1/4c) WW Hamburger Bun (1 serv) Ketchup and Mayo packet 1% or Fat Free Flavored Milk (8oz)
17 - No School *All grains must be 100% Whole Grain 	18 - Bean Burrito Bean and Cheese (2oz) Shredded Lettuce, Tomato Salad (1/2) Cinnamon Apples (1/4c) WW Tortilla (1 serv) 1% White (8oz)	19 - Arroz Con Pollo Shredded Chicken (2oz) Green Peas (1/2c) Bake Plantains (1/4c) Brown Rice (1/2c) 1% White (8oz)	20 - Sloppy Joes Lean Ground Turkey (2oz) (drain grease from meat) Italian Green Beans (1/2c) Pineapple (1/4c) WW Hamburger Bun (1 serv) Ketchup Packet, 1% White (8oz)	21 - Chicken Parmesan Chicken (1oz) Cheese (1oz) Tossed Salad (1 cup) Whole Fresh Fruit WG Penne Pasta 1% or Fat Free Flavored Milk (8oz)
24 - Black Bean Rice Bowl Seasoned Black Beans (1/4c) Cheese 1oz Whole Kernel Corn (1/2c) Pico De Gallo (1/4c) Brown Rice (1/2c) 1% White (8oz)	25 - Chicken Alfredo Diced Chicken (2oz) Cucumber, Tomato Salad (1 cup) Cinnamon Apples (1/4c) WW Pasta (1/2c) Assorted Dressing packets 1% White (8oz)	26 - Spaghetti w/Meat Sauce Lean Ground Turkey (2oz) w/ Tomato Sauce (drain grease from meat) Romaine, Tomato, Cucumber Salad (1 cup), Steamed Carrots (on side) (1/4c) 1 Garlic Bun, WW Pasta (1/2c) Assorted Dressing packets 1% White (8oz)	27 - Mac and Cheese Cheese (2oz) Roasted Broccoli (1/2c) Applesauce (1/4c) WW Pasta (1/2c) 1% White (8oz)	28 - Beef Empanada (CN Label) Lean Beef Empanada Fresh Tomato, Corn, Avocado Salad (1 cup) Plantains (1/4c) Congri (1/2c) (CN Label), Light Ranch Dressing (on side or packet) 1% or Fat Free Flavored Milk (8oz)

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3 - Tomato & Cheese Pizza Mozzarella Shred (in Marinara) (2oz) Diced Tomato with Garlic & Basil (1/2c) Pear WG Crostini Melba Toast 1oz eq 1% White	4 - Tuna Snackable Tuna Salad (2oz) Celery Sticks (1/2c) Grapes (1/4c) Whole Wheat Crackers (0.8oz) Mayo-Yogurt Dressing (1oz, mixed in) 1% White	5 - Salad Topper Ranch Sauce Grilled Diced Chicken (2oz) Baby Spinach/Spring Mix (1c) Apple Slices (1/4c) Whole Wheat Dinner Roll Light Ranch Dressing 1% White	6 - Baked Chicken & Cheddar Taco Taco Chicken & Cheddar Cheese (2oz), Salsa: Tomatoes, Scallions, Corn, Lime (1/2c), Peaches (on side) Whole Grain Soft Corn Tortilla Lime Dressing (mixed-in) 1% White	7 - Turkey Lunchable Sliced Turkey (2oz) Baby Carrots (1/2c) Fruit Cocktail (1/4c) WW Potato Roll Mayo & Mustard packets Fat Free Flavored Milk
10 - Grilled Chicken Caesar Grilled Chicken (2oz) Romaine Lettuce (1c) Apple Slices (1/4c) Whole Wheat Croutons (1/2c) Caesar Dressing in Entrée 1% White	11 - Power Pack Hard Boiled Egg, Halved (1 Large) Baby Carrots (1/2c) Grapes (1/4c) WW Graham Crackers Light Ranch Dressing 1% White	12 - Veggie & Cheese Tray Cubed Cheese (3oz) Cherry Tomatoes (1/2c) Cucumbers Whole Grain Melba Crackers French Dressing 1% White	13 - Turkey and Cheese Bunwich Sliced Turkey (2oz) American Cheese (1oz) Broccoli Florets (1/2c) Pineapple Tids (1/4c) WG Roll (1oz), Mustard & Ranch packets, 1% White	14 - Snackable Sliced Ham (2oz) Cheese (1oz) Celery Sticks (1/2c) Banana WG Goldfish Crackers Fat Free Flavored Milk
17 - No School *All grains must be 100% Whole Grain 	18 - Baked Chicken & Cheddar Taco Taco Chicken & Cheddar Cheese (2oz) Salsa: Tomatoes, Scallions, Corn, Lime (1/2c) Peaches (on side) Whole Grain Soft Corn Tortilla Lime Dressing (mixed-in) 1% White	19 - Buffalo Chicken Salad Slider Diced Buffalo Baked Chicken (1oz) mixed with 2% Cheese (1oz) Cauliflower with Ranch on side (1/2c) Diced Pineapple (1/4c) WW Dinner Roll Ranch Dressing PC 1% White	20 - DIY Cereal Parfait Plain Non-Fat Yogurt (6oz) Sunflower Seeds (1 T) Carrot Sticks (1/2c) Fresh Berries (1/4c) WG Cereal (Cheerios, Wheat Flakes, Wheat Chex) 1 cup = 1oz eq Honey (1 T) in the yogurt 1% White	21 - Tuna Salad Stacker Tuna Salad (2oz) Sliced Raw Cucumber (1/2c) Strawberries (1/4c) Whole Wheat Crackers (0.8oz) Mayo-Yogurt Dressing (1oz, mixed in) Fat Free Flavored Milk
24 - Southern Greens Salad BBQ Baked Chicken (cubed on top) (2oz) Classic Salad Mix w/ Shredded Carrots (1c) Cucumbers (1/4c) WG Corn Bread (1oz eq. svq) Assorted Dressing (low sugar) 1% White	25 - Buffalo Chicken Salad Slider Diced Buffalo Baked Chicken (1oz) mixed with 2% Cheese (1oz) Cauliflower with Ranch on side (1/2c) Diced Pineapple (1/4c) WW Dinner Roll Ranch Dressing PC 1% White	26 - DIY Cereal Parfait Plain Non-Fat Yogurt (6oz) Sunflower Seeds (1 T) Carrot Sticks (1/2c) Fresh Berries (1/4c) WG Cereal (Cheerios, Wheat Flakes, Wheat Chex) 1 cup = 1oz eq Honey (1 T) in the yogurt 1% White	27 - Ham & Cheese 1/2 Sandwich Ham 2oz Cheese 1oz Cherry Tomatoes (1/2c) Whole Orange WW Bread 1 slice 1oz = 28 gram Mayo & Mustard packets 1% White	28 - Pretzel Wagon Assorted Cheese Cubes 3oz Cucumber Wheels (1/2c) Whole Apple WG Pretzels 1oz eq Fat Free Flavored Milk



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /

Detail by Entity Name

Florida Not For Profit Corporation

FLORIDA INTRODUCES PHYSICAL ACTIVITY AND NUTRITION TO YOUTH INCORPORATED

Filing Information

Document Number	N05000004034
FEI/EIN Number	87-0743538
Date Filed	04/20/2005
Effective Date	04/18/2005
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	03/28/2006
Event Effective Date	NONE

Principal Address

1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305

Changed: 07/20/2015

Mailing Address

1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305

Changed: 05/03/2016

Registered Agent Name & Address

KUNINS, LYNNE E
1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305

Address Changed: 05/03/2016

Officer/Director Detail

Name & Address

Title CEO

KUNINS, LYNNE E
1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305

Title Board Chair

Andrade, Stephen
 1777 NORTH DIXIE HIGHWAY
 FORT LAUDERDALE, FL 33305

Title Director

Elvir, Ana
 1777 NORTH DIXIE HIGHWAY
 FORT LAUDERDALE, FL 33305

Title Director

Strohmeyer, Kurt
 1777 NORTH DIXIE HIGHWAY
 FORT LAUDERDALE, FL 33305

Title Director

Ludwig, Kathy
 1777 NORTH DIXIE HIGHWAY
 FORT LAUDERDALE, FL 33305

Title Director

John, Mullin
 1777 NORTH DIXIE HIGHWAY
 FORT LAUDERDALE, FL 33305

Annual Reports

Report Year	Filed Date
2017	04/26/2017
2018	03/26/2018
2019	02/09/2019

Document Images

02/09/2019 -- ANNUAL REPORT	View image in PDF format
03/26/2018 -- ANNUAL REPORT	View image in PDF format
04/26/2017 -- ANNUAL REPORT	View image in PDF format
05/03/2016 -- ANNUAL REPORT	View image in PDF format
03/20/2015 -- ANNUAL REPORT	View image in PDF format
02/26/2014 -- ANNUAL REPORT	View image in PDF format
05/01/2013 -- ANNUAL REPORT	View image in PDF format
02/08/2012 -- ANNUAL REPORT	View image in PDF format
03/29/2011 -- ANNUAL REPORT	View image in PDF format
03/29/2010 -- ANNUAL REPORT	View image in PDF format
03/20/2009 -- ANNUAL REPORT	View image in PDF format
01/16/2008 -- ANNUAL REPORT	View image in PDF format
01/19/2007 -- ANNUAL REPORT	View image in PDF format

03/28/2006 -- Amendment	View image in PDF format
02/27/2006 -- ANNUAL REPORT	View image in PDF format
07/29/2005 -- Amendment	View image in PDF format
04/20/2005 -- Domestic Non-Profit	View image in PDF format

Florida Department of State, Division of Corporations

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Fictitious Name Search

Fictitious Name Detail

Fictitious Name

FLIPANY

Filing Information

Registration Number G05164700050
Status ACTIVE
Filed Date 06/13/2005
Expiration Date 12/31/2020
Current Owners 1
County BROWARD
Total Pages 5
Events Filed 4
FEI/EIN Number 87-0743538

Mailing Address

1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305

Owner Information

FLORIDA INTRODUCES PHYSICAL ACTIVITY AND NUTRITION TO Y
1777 NORTH DIXIE HIGHWAY
FORT LAUDERDALE, FL 33305
FEI/EIN Number: 87-0743538
Document Number: N05000004034

Document Images

[06/13/2005 -- REGISTRATION](#)[07/21/2015 -- CHANGE NAME/ADDRESS](#)[02/14/2015 -- Fictitious Name Renewal Filing](#)[09/19/2013 -- CHANGE NAME/ADDRESS](#)[06/04/2010 -- RENEWAL](#)

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Fictitious Name Search

Florida Department of State, Division of Corporations



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/26/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Southern Agency, Inc. 4978 North Pine Island Road Lauderhill, FL 33351	CONTACT NAME: Jarrett Piersall	
	PHONE (A/C, No, Ext): 954-749-1706	FAX (A/C, No): 954-749-7264
INSURED Flipany Inc. 1777 North Dixie Highway Fort Lauderdale, FL 33305	E-MAIL ADDRESS: jpiersall@southernagency.org	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Scottsdale Insurance Co.	
	INSURER B: Technology Insurance Co.	
	INSURER C: Scottsdale Insurance Co.	
	INSURER D: United States Liability Insurance Company	
INSURER E:		
INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	CPS3295601	10/17/2019	10/17/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED <input type="checkbox"/> RETENTION \$			CXS0009008	10/17/19	10/17/20	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> Y	N/A	TWC3821485	10/05/19	10/05/20	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

City of Hollywood 2600 Hollywood Blvd. Hollywood, FL 33020	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE <i>Jarrett Piersall</i>

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Joaquin Arellano

From: Horace McLarty
Sent: Thursday, February 27, 2020 3:01 PM
To: Joaquin Arellano
Subject: FW: [EXT]City of Hollywood RFP Response- FLIPANY
Attachments: City of Hollywood 2-26-2020.pdf

GL and WC are acceptable.

Horace McLarty
Accountant, Human Resources/Risk Management



Office: (954) 921-3292
Fax: (954) 921-3678
Email: hmclarty@hollywoodfl.org

From: Joaquin Arellano
Sent: Wednesday, February 26, 2020 4:28 PM
To: Horace McLarty <HMCLARTY@hollywoodfl.org>
Subject: FW: [EXT]City of Hollywood RFP Response- FLIPANY

Hi Horace,
Please see attached updated COI for Flipany.

Regards,
Joaquin Arellano
Parks Manager Recreation & Aquatics
(O) 954.921.3404 ext. 5456

From: Brandi Murray [<mailto:bmurray@FLIPANY.ORG>]
Sent: Wednesday, February 26, 2020 2:34 PM
To: Joaquin Arellano <JARELLANO@hollywoodfl.org>
Subject: RE: [EXT]City of Hollywood RFP Response- FLIPANY

Try this one ☺

From: Joaquin Arellano [<mailto:JARELLANO@hollywoodfl.org>]
Sent: Wednesday, February 26, 2020 9:34 AM
To: Brandi Murray <bmurray@FLIPANY.ORG>
Subject: RE: [EXT]City of Hollywood RFP Response- FLIPANY

Awesome. One thing left Workers Compensation: The per statues box need to be checked off with an "X"



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

02/25/2020

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IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Global Green Ins 4976 N PINE ISLAND RD Sunrise FL 33351	CONTACT NAME: MARIA COGLIONESSE / MARLENE UCHA	
	PHONE (A/C, No, Ext): 954-749-0773	FAX (A/C, No): 954-746-8913
INSURED FLIPANY INC. 1777 NORTH DIXIE HIGHWAY FORT LAUDERDALE FL 33305	E-MAIL ADDRESS: MOLIVE@GGIAUSA.COM	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: PROGRESSIVE EXPRESS INS COMPANY	
	INSURER B:	
	INSURER C:	
	INSURER D:	
INSURER E:		
INSURER F:		
NAIC # 19193		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	02699907-7	10/01/2019	10/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A					<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**City of Hollywood
2600 Hollywood Blvd
Hollywood FL 33020

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

MARIA COGLIONESSE

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Joaquin Arellano

From: Horace McLarty
Sent: Thursday, February 27, 2020 3:00 PM
To: Joaquin Arellano
Subject: FW: [EXT]City of Hollywood RFP Response- FLIPANY
Attachments: FLIPANY INC COI.PDF

Auto is acceptable.

Horace McLarty
Accountant, Human Resources/Risk Management



Office: (954) 921-3292
Fax: (954) 921-3678
Email: hmclarty@hollywoodfl.org

From: Joaquin Arellano
Sent: Wednesday, February 26, 2020 6:09 PM
To: Horace McLarty <HMCLARTY@hollywoodfl.org>
Subject: FW: [EXT]City of Hollywood RFP Response- FLIPANY

Auto Insurance for your review.

Regards,
Joaquin Arellano
Parks Manager Recreation & Aquatics
(O) 954.921.3404 ext. 5456

From: Brandi Murray [<mailto:bmurray@FLIPANY.ORG>]
Sent: Tuesday, February 25, 2020 5:35 PM
To: Joaquin Arellano <JARELLANO@hollywoodfl.org>
Subject: RE: [EXT]City of Hollywood RFP Response- FLIPANY

Here you go!

From: Joaquin Arellano [<mailto:JARELLANO@hollywoodfl.org>]
Sent: Tuesday, February 25, 2020 2:02 PM
To: Brandi Murray <bmurray@FLIPANY.ORG>
Subject: RE: [EXT]City of Hollywood RFP Response- FLIPANY

Any update on this area?

**AFTERSCHOOL MEALS PROGRAM
SPONSOR-SITE AGREEMENT FOR UNAFFILIATED SITES**

This agreement is entered into between FLIPANY, hereinafter
Name of Sponsoring Organization
referred to as the "sponsor," and _____, hereinafter
Name of Site
referred to as the "site."

I. THE SPONSOR AGREES TO:

- A. Instruct the site to comply with site requirements set forth in the Child Care Food Program (CCFP) Procedure Manual for Afterschool Programs, as revised, and applicable CCFP policy memoranda.
- B. Train site personnel on program requirements before the site begins participation in the Afterschool Meals Program. The training will cover all required topics, including but not limited to information on meal pattern requirements; recording and maintaining menus, meal counts, and attendance records; and civil rights requirements.
- C. Offer, at least annually, additional training sessions scheduled at times and places mutually convenient for the sponsor and site.
- D. Respond to the site's requests for technical assistance within two (2) days.
- E. Distribute to the site all necessary CCFP Afterschool Meals Program record keeping forms.
- F. Collect monthly, all necessary program records for claiming CCFP Afterschool Meals Program reimbursement including, but not limited to, menus for each meal service claimed, Attendance Records, and Meal Count Records including daily meal count documentation if meal counts were recorded on another document and later transferred to the Monthly Meal Count Record form.
- G. Review the site's Afterschool Meals Program operations to assess compliance with the meal pattern, record keeping, and other program requirements. At least one review will occur during a new site's first four weeks of CCFP participation. Unless otherwise approved by the Florida Department of Health (DOH), reviews will be conducted at least three times within each 12-month period and not more than six months will elapse between reviews, even if the reviews occur in different federal fiscal years.
- H. Maintain records concerning the location and dates of all compliance reviews, problems noted, corrective actions prescribed, and sanctions imposed.
- I. Present photo identification when making visits to the site.
- J. Hold site responsible for compliance with program policies and procedures, and disallow snacks and/or meals not meeting U.S. Department of Agriculture (USDA) meal pattern requirements or not supported by appropriate records.
- K. Not discriminate against any child because of race, color, national origin, sex, age, or disability.
- L. Determine the site's area eligibility to participate in the Afterschool Meals Program at least once every five years, and maintain the site's eligibility documentation as directed in the Procedure Manual for Afterschool Programs, as revised.
- M. Provide snacks and/or prepared meals, and/or pay for catered snacks and/or meals delivered by a DOH registered caterer, to the site at no cost to the site. However, if a site is responsible for the disallowance of snacks and/or meals due to the site's failure to meet program requirements, the sponsor may charge the site for the amount that the sponsor paid for the disallowed snacks and/or meals.
- N. Not charge the site a fee for the sponsor's program services.

II. THE SITE AGREES TO:

- A. Prepare and/or serve age specific snacks and/or meals that meet program meal pattern requirements.
- B. Record meal counts within one hour of the end of each snack and/or meal service.
- C. Claim only those meal types approved by the sponsor for reimbursement.
- D. Claim reimbursement for no more than one snack and one meal per child per day.
- E. Maintain copies of all Child Care Food Program (CCFP) Afterschool Meals Program records such as menus, Meal Count Records, Attendance Records, etc. for the current fiscal year and three subsequent fiscal years. Records for the current month and the previous 12 months shall be maintained at the site. Records older than 13 months may be maintained off-site or stored electronically, but these records shall be made available to staff of the sponsor, the Florida Department of Health (DOH), the U.S. Department of Agriculture (USDA), the Florida Department of Law Enforcement (FDLE), the Florida Department of Financial Services, Division of Public Assistance Fraud, and Early Learning Coalitions upon presentation of proper photo identification.
- F. Send the previous month's claim documentation (Attendance Records, Monthly Meal Count Records and daily meal count sheets, menus) to the sponsor by the fifth (5th) day of each month. If the fifth (5th) day of the month falls on a weekend or holiday, these records must be received by the sponsor on the first business day following the weekend/holiday.
- G. Attend training sessions as required by the sponsor.
- H. Allow representatives of the sponsor, DOH, USDA, FDLE, the Florida Department of Financial Services, Division of Public Assistance Fraud, and Early Learning Coalitions access to the site during operating hours for the purpose of reviewing CCFP Afterschool Meals Program meal services and/or records. The site will allow such access upon presentation of photo identification whether the review is announced or unannounced.
- I. Allow representatives of the sponsor, DOH, USDA, FDLE, the Florida Department of Financial Services, Division of Public Assistance Fraud, and Early Learning Coalitions to conduct parental/household contacts regarding the CCFP Afterschool Meals Program.
- J. If licensed or accredited, maintain a current child care license/accreditation and notify the sponsor of any changes (e.g., capacity, hours/days of operation, expiration, revocation, etc.) within two (2) days of a change.
- K. Maintain current food service inspection documentation (satisfactory inspection report or valid permit/certificate) and notify the sponsor of any food service changes (e.g., food service method, permit expiration or revocation, etc.) within two (2) days of a change.
- L. Report a change of address or ownership, site closure, and any permanent changes in meal service times to the sponsor immediately.
- M. Report to the sponsor any pending sale of the site prior to the sale closing date. (Note: This agreement is not transferable to a new owner.)
- N. Provide all eligible children the same snacks and/or meals at no separate cost to the parent or guardian.
- O. When requested by the sponsor, distribute to parents copies of CCFP Afterschool Meals Program materials.
- P. Not discriminate against any child because of race, color, national origin, sex, age, or disability.
- Q. The site agrees to use the U.S. Department of Homeland Security's E-Verify system, <https://e-verify.uscis.gov/emp>, to verify the employment eligibility of:
 - 1. All persons employed during the agreement term by the site to perform employment duties within Florida;
 - 2. All persons (including subcontractors) assigned by the site to perform work pursuant to this agreement.

III. THE SPONSOR AND SITE MUTUALLY AGREE:

A. Effective Date

This agreement shall begin on the latest date on which both parties have signed the agreement.

B. Termination

1. Termination at Will

This agreement may be terminated by either party or the Florida Department of Health without cause upon no less than thirty (30) days notice in writing to the other party, unless a lesser time is mutually agreed upon in writing by the parties. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

2. Termination Because of Lack of Funds

In the event funds to finance this agreement become unavailable and the Florida Department of Health terminates the sponsor's contract, the sponsor may terminate this agreement upon no less than twenty-four (24) hours notice in writing to the site. Said notice shall be delivered by certified mail, return receipt requested, or in person with proof of delivery.

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, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may 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 complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, 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; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

I have read the above agreement and I understand each section and paragraph.

IN WITNESS THEREOF, the parties have caused this three (3) page agreement to be executed by their undersigned officials as duly authorized.

Site Owner/Director _____ First _____ Last _____		
Mailing Address _____		
Signature _____	Date _____	Date of Birth _____

Sponsor Representative <u>Lynne Kunins / Lynne Kunins</u>		
Title <u>President / CEO</u>		
Signature <u>Lynne Kunins</u>	Date <u>2/25/20</u>	
Sponsor must ensure that <u>both</u> signature boxes are complete		



Sponsor/Site Agreement- Template Summer Food Service Program

Name of Site: _____ Site # _____

Address of Site: _____

City: _____ State: _____ Zip: _____

Person in Charge of Site: _____


Telephone of the person in charge: _____

The person named above agrees to:

1. Serve meals to all needy children 18 years of age and under (or persons 19 and over who are mentally or physically disabled and participating in a public or private nonprofit school program for the mentally or physically disabled).
2. Ensure that no meals are removed from the site with the exception of transfer of meals and field trips with prior approval from Sponsor Representative.
3. Provide adequate supervision during meal service with accurate "Point of Service" meal counts.
4. Maintain and submit on a timely basis such reports and records as required by the Sponsor including the daily meal count.
5. Immediately report, to the sponsor, any changes in the number of meals required as attendance fluctuates.
6. Report immediately any other problems in regard to meal service.
7. Abide by all SFSP regulations and special instructions that have been provided by the sponsor.
8. Attend sponsor training sessions.
9. Refuse to receive meals that are spoiled, frozen, damaged, or not within appropriate temperature ranges.
10. Be responsible to the program for the reimbursement of all disallowed meals.
11. Immediately notify the sponsor of any meal service times that need to be changed or are not being met.
12. If meals are not prepared on site, immediately notify the sponsor if meals are not delivered at the scheduled times.
13. Comply with civil rights laws and regulations.
14. Ensure the trained Site Supervisor or approved alternate contact is on site during meal service.
15. Will not accept meals from another sponsor.
16. Site is not receiving federal funds from other sources for meals.
17. Ensure a copy of the DOH inspection is submitted to the sponsor.
18. Ensure "And Justice for All" poster is displayed in a prominent location.
19. Has not signed an agreement with another summer sponsor.

This is to certify that I have read and agree to the above statements and understand that any violation of these guidelines may result in prosecution under applicable state and federal statutes. In addition, if there is any violation of the above mentioned rules, the sponsor reserves the right to immediately terminate the site and to not consider the site for renewal in the following year.

Site Supervisor Signature



Sponsor Signature

2/25/20

Date