

## Appendix E – (ME) Cost Proposal

### 23-9000 MEAL COMPLIANCE NUTRITION REVIEW SERVICES

The Offeror shall submit the Cost Proposal in a sealed envelope marked "Cost Proposal 23-9000 MEAL COMPLIANCE NUTRITION REVIEW SERVICES" and shall be separate from the Technical Proposal. The Offeror must provide a **fully-burdened rate** which must include, but not limited to, all off-site School Food Authority (SFA) work, all on-site SFA work, operating and personnel expenses, such as: overhead, salaries, administrative expenses, profit, any software, hardware and travel costs; such as vehicle, gas, hotel costs, meals etc.

The Offeror will submit a cost per each SFA by region. Next, calculate the total region cost using the cost per SFA and times by the number of SFA's per region as indicated by the highlighted text.

Depending on the size of the SFA, the SDE will determine whether the Meal Compliance Nutrition Review will be a single site review, or a multi-site review.

The Offeror has the opportunity to bid one (1) region, two (2) or all three (3) regions.

State of Idaho Regions	Estimated Number of SFAs based on 5-year average with some inflation	Fully Burdened Cost Per SFA
North Idaho	12	Cost per SFA <b>\$ 0.00</b> Region Cost: Cost per SFA x 12 = <b>\$ 0.00</b>
Southwest/Central Idaho	23	Cost per SFA <b>\$ 0.00</b> Region Cost: Cost per SFA x 23 = <b>\$ 0.00</b>
Eastern Idaho	10	Cost per SFA <b>\$ 0.00</b> Region Cost: Cost per SFA x 10 = <b>\$ 0.00</b>
All Regions	45	Cost per SFA <b>\$ 0.00</b> Region Cost: Cost per SFA x 45 = <b>\$ 0.00</b>

**Additional Scope of Work Items as Requested**

Item	Estimated Number Each Year	Fully Burdened Cost Per Item
New Sponsor Meal Compliance Evaluation	2-5	
Seamless Summer Option (SSO) menu compliance review	1-3	
SFSP Administrative Reviews	25-30	
Develop Trainings	2-3	
Updated Existing Trainings	2-3	

Contractor's Legal Business Name	Tax ID#
Phone #:	Email:
Contractor's Authorized Printed Name	Title
Contractor's Authorized Signature	Date