COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF EDUCATION
607 SOUTH DRIVE
HARRISBURG, PA 17120
www.education.pa.gov

Food Service Management Company (FSMC)
Renewal Year Cost Reimbursable Contract

Methacton School District

123-46-530-3

July 1, **2025** to June 30, **2026**

Any School Food Authority (SFA) selecting to renew a contract with their current FSMC must prepare a Renewal Year Contract utilizing this document which may not be re-typed or changed in any way.

Agreement Page

The Pennsylvania Department of Education (PDE) provides this contract as a service to sponsors, therefore; PDE shall not be named as a party to this contract. The School Food Authority, hereafter referred to as the SFA, is the responsible authority, without recourse to PDE and/or the United States Department of Agriculture (USDA) regarding the settlement and satisfaction of all issues arising under this contract. This includes, but is not limited to, disputes, claims, protests of award or source evaluation.

The FSMC certifies that they shall operate in accordance with all applicable State and Federal regulations.

The FSMC certifies that all terms and conditions within the Bid Solicitation shall be considered a part of the contract as if incorporated therein.

This Agreement shall be in effect for one year starting **July 1, 2025** and may be renewed, by mutual agreement, for up to 2 additional one-year period(s).

IN WITNESS WHEREOF, the parties hereto have caused this contract to be signed by their duly authorized representative on the date signed.

Methacton School District	Aramark Educational Services, LLC
SFA	FSMC
SFA Authorized Representative Signature	FSMC Authorized Representative Signature
Kimberly Steffy	G. Preston Davis
Printed Name of SFA Authorized Representative	Printed Name of FSMC Authorized Representative
Director of Business Services	Regional Vice President
SFA Authorized Representative Title	FSMC Authorized Representative Title

Appendix A

SFA Renewal Certification of Acknowledgement

Initial below each statement certifying that you have read and fully understand the contents of this contract.

A. I certify that I, Kimberly Steffy on behalf of **the SFA**, have read and fully understand the contents of this contract. I understand that the SFA must maintain oversight of the food service operations and that these responsibilities will not be delegated to the FSMC. I also understand that the SFA is responsible for closely monitoring the FSMC contract and the FSMC's daily activities.

Initial Here:

B. I certify that I, nor any employees (including School Board members) of **the SFA** will not solicit or accept donations, gratuities, nor favors from current or potential FSMCs (i.e. gifts, golf outings, meals, etc.).

Initial Here:

C. I certify that **the SFA** has a written Code of Conduct that addresses conflicts of interest and governing the performance of its employees engaged in the selection, award and administration of contracts, and will make sure all employees are aware of said standards.

Initial Here:

D. I have read and understand what the allowable costs are for all of the applicable CN programs.

Initial Here:

E. I certify that **the SFA** will be legally responsible for the conduct of the food service program and shall supervise the food service operations in such manner as will ensure compliance with the rules and regulations of PDE and the USDA regarding each of the CN programs covered by this contract.

Initial Here:

F. I certify that this **SFA position** Director of Business Services will fulfill the SNP director responsibilities. The SFA must identify a SNP director who is an employee of the SFA. The SNP director must meet the minimum Professional Standards hiring and annual training requirements. In addition, the SNP director must ensure program oversight, including but not limited to, ensuring that the FSMC's food service director and all food service staff also meet the Professional Standards requirements (Title 7 CFR §210.30). Directors must complete an eight-hour food safety course upon hire. The training must not be more than 5 years prior to their starting date or completed within 30 days of the employee's start date and every five years thereafter.

Initial Here:

G. I certify that **the SFA** shall retain control of the CN programs' non-profit school food service account, signature authority, and overall financial responsibility for the CN programs. This includes access to the PEARS account, COMPASS, or PrimeroEdge Student Eligibility System.

Initial Here:

H. I certify that CN programs are the responsibility of **the SFA** and **the SFA** is responsible for all contractual agreements entered into in connection with the CN programs.

Initial Here:

I. I certify that **the SFA** will be responsible for determining student eligibility for all applicable programs and that **the FSMC** will not be involved in the process.

Initial Here:

J. I certify that **the SFA** will retain all records for the current year plus the three additional years beyond the end of the contract.

Initial Here:

K. I certify that all food will be in compliance with the current meal standards and Local Wellness Policy.

Initial Here:

L. I certify that **the SFA** will monitor **the FSMC** in order to ensure compliance with USDA regulations.

Initial Here:

M. I certify that **the SFA** has created an advisory board composed of students, teachers, and parents to assist in menu planning.

Initial Here:

N. I certify that **the SFA** will not delegate any of the above responsibilities to the FSMC.

Initial Here:

O. I hereby certify that neither **the SFA** nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

Initial Here:

P. I further certify that neither **the SFA** nor any of its principals/authorized representatives has a reported criminal background that would affect the receipt of Federal funds.

Initial Here:

Q. I certify that **the FSMC** is not a paid consultant or contractor with **the SFA** in any other capacity than for this contract.

Initial Here:

I certify under penalty of perjury that the information on these forms is true and correct, and that I will immediately report to the State Agency any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of Federal funds. The State Agency may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable Federal and State criminal statutes.

On behalf of **the SFA**, I hereby agree to comply with all State and Federal laws and regulations governing the CN programs administered by the State Agency. In accordance with Federal law and USDA policy, **the SFA** does not discriminate on the bases of 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. I will ensure that all monthly claims for reimbursement are true and correct and that records are available to support these claims.

Printed Name of SFA Authorized Representative: Kimberly Steffy

SFA Authorized Representative Title: Director of Business Services

SFA Authorized Representative Signature:

Appendix B

FSMC Certification of Acknowledgement

Initial below next to each statement certifying that you have read and fully understand the contents of this contract.

A. I certify that I, G. Preston Davis , on behalf of **the FSMC**, have read and fully understand the contents of this contract.

Initial Here:

B. I certify that I, nor any of the employees of **the FSMC** have not received any solicitations from any **the SFA** employee. In addition, I certify that no gifts, donations, or anything of monetary value (i.e. golf outings, meals, etc.) have been provided.

Initial Here:

C. I certify that employees of **the FSMC** will be trained to understand and comply with all necessary trainings including the current written Code of Conduct authored by **the SFA**.

Initial Here:

D. I certify that all of **the FSMC** food service employees meet the minimum Professional Standards requirements.

Initial Here:

E. I certify that **the SFA** will be legally responsible for the conduct of the food service program, and shall have access to all necessary documents, which will be maintained onsite, including but not limited to all contracts with vendors so that they may supervise the food service operations in such manner as will ensure compliance with the rules and regulations of PDE and the USDA regarding each of the CN programs covered by this contract.

Initial Here:

F. I certify that **the FSMC** will not have control of the CN programs' non-profit school food service account, signature authority, and overall financial responsibility for the CN programs. This includes access to the PEARS account, COMPASS, or the PrimeroEdge Student Eligibility System.

Initial Here:

G. I certify that **the SFA** will be responsible for determining student eligibility for all applicable programs and that **the FSMC** will have no involvement in the process.

Initial Here:

H. I certify that all food will be in compliance with the current meal standards and Local Wellness Policy.

Initial Here:

I. I hereby certify that neither **the FSMC** nor its principals/authorized representatives is presently debarred, suspended, proposed for debarment, declared ineligible, disqualified, or voluntarily excluded from participation in this transaction by any Federal/State department or agency.

Initial Here:

J. I certify that **the FSMC** will comply with all applicable standards, orders, or requirements issued under the Clean Air Act and the Federal Water Pollution Control Act and will report violations to the Federal awarding agency and the Regional Office of the Environmental Protection Agency.

Initial Here:

K. I certify that neither **the FSMC** nor any of its principals/authorized representatives has a reported criminal background that would affect the involvement in CN programs.

Initial Here:

L. I certify that **the FSMC** is not a paid consultant or contractor with **the SFA** in any other capacity than for this contract.

Initial Here:

I certify under penalty of perjury that the information on these forms is true and correct, and that I will immediately report to the SFA any changes that occur to the information submitted. I understand that this information is being given in connection with receipt of Federal funds. The State Agency may verify information; and the deliberate misrepresentation of information will subject me to prosecution under applicable Federal and State criminal statutes.

On behalf of **the FSMC**, I hereby agree to comply with all State and Federal laws and regulations governing the CN programs administered by the State Agency. In accordance with Federal law and USDA policy, **the FSMC** does not discriminate on the bases of 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.

Printed Name of FSMC Authorized Representative	G. Preston Davis
FSMC Authorized Representative Title	Regional Vice President
FSMC Authorized Representative Signature	

Appendix C

Acknowledgement of Personnel Relationships

☐ Yes ☒ No (choose one), **the SFA** employs the same person/people that is/ are employee(s) of the **FSMC**.

If Yes, we the undersigned certify that the employee(s):

- Does/will not have a real or apparent conflict of interest.
- Does/will not participate in the selection, award, or administration of the contract.
- Does/will not have access to or control of the food service financial account.
- Does/will not be involved in the establishment of the selling prices for all reimbursable and non-reimbursable meals, a la carte items, adult meals, catering, or vending items.
- Does/will not have access to CN PEARS, COMPASS, or the PrimeroEdge Student Eligibility System.
- Does/will not be involved in the completion, distribution or collection of the parent letters and household applications for free and reduced price meals.
- Does/will not be involved in the determination or verification of eligibility for free and reduced price meals.

Employee Name	SFA Position Title and Job Duties	FSMC Position Title and Job Duties

Methacton School District	Aramark Educational Services, LLC
SFA	FSMC
SFA Authorized Representative Signature	FSMC Authorized Representative Signature
Kimberly Steffy	G. Preston Davis
Printed Name of SFA Authorized Representative	Printed Name of FSMC Authorized Representative
Director of Business Services	Regional Vice President
SFA Authorized Representative Title	FSMC Authorized Representative Title

Appendix D

Certification Regarding Debarment and Suspension

This certification is required by the regulations implementing Executive Order 12549 and 12689, "Debarment and Suspension" (Title 2 CFR Part 180). These regulations restrict awards, subawards, and contracts with certain parties that are debarred, suspended, or otherwise excluded from or ineligible for participation in Federal assistance programs or activities.

(1) The prospective participant certifies, by submission of this proposal, that neither it nor its principals:

(a) Are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency;

(b) Have not within a three-year period preceding this application 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 had one or more public transactions (Federal, State, or local) terminated for cause or default.

(2) Where the prospective participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

FSMC	Aramark Educational Services, LLC
Printed Name of FSMC Authorized Representative	G. Preston Davis
FSMC Authorized Representative Title	Regional Vice President
FSMC Authorized Representative Signature	

Appendix E

Certification Regarding Lobbying

Applicable to Grants, Subgrants, Cooperative Agreements, and Contracts Exceeding $100,000 in Federal Funds

Submission of this certification is a prerequisite for making or entering into this transaction and is imposed by section 1352, Title 31, U.S. Code. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. 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.

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 a Federal contract, the making of a Federal grant, the making of a Federal loan, the entering into a cooperative agreement, and the extension, continuation, renewal, amendment, or modification of a 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 grant or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all covered subawards exceeding $100,000 in Federal funds at all appropriate tiers and that all subrecipients shall certify and disclose accordingly.

FSMC	Aramark Educational Services, LLC
Printed Name of FSMC Authorized Representative	G. Preston Davis
FSMC Authorized Representative Title	Regional Vice President
FSMC Authorized Representative Signature	

Appendix E

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

☐ Applicable ☒ Not Applicable

(This form must be signed regardless of Applicability)

1. Type of Federal Action: _____ a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: _____ a. bid/offer/ application b. initial award c. post-award	3. Report Type: _____ a. initial filing b. material change For Material Change Only: Year _____ Quarter _____ Date of Last Report _____
4. Name and Address of Reporting Entity: Prime Subawardee Tier, if known: Congressional District, if known:	5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: $	
10. a. Name and Address of Lobbying Entity: (last name, first name, MI)	10. b. Individuals Performing Services (including address if different from No. 10,a.)	
(Attach Continuation Sheet(s) SF-LLL-A If Necessary) (if individual, last name, first name, middle)		
11. Amount of Payment (check all that apply): $ _____ Actual $ _____ Planned	13. Type of payment (check all that apply): ___ a. retainer ___ b. one-time fee ___ c. commission ___ d. contingent fee ___ e. deferred ___ f. other; specify:	
12. Form of Payment (check all that apply): ___ a. cash ___ b. in-kind; specify: Nature _____ Actual _____		
14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or member(s) contracted for Payment indicated in Item 11: (Attach Continuation Sheet(s) SF-LLL-A, if necessary)		
15. Are Continuation Sheet(s) SF-LLL-A Attached:	Yes_____ (Number _____)	No _____
16. Information requested through this form is authorized by Title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.	Signature: Name: G. Preston Davis Title: Regional Vice President Telephone: 937-660-4708	

Disclosure of Lobbying Activities
Continuation Sheet SF-LLL-A

Reporting Entity: _____ Page _____ of _____

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. Section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity 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 a covered Federal action. Use of SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state, and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee; e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee", then enter the full name, address, city, state, and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) Number, Invitation for Bid (IFB) Number; grant announcement number; the contract, grant or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes e.g., "RFP-DE-90-001".
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state, and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.

    (b) Enter the full names of the individual(s) performing services and include full address if different from 10(a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check all that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check all that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether a SF-LLL-A Continuation Sheet(s) is attached. List number of sheets, if yes.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget. Paperwork Reduction Project (0348-00046), Washington, DC 20503.

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA : Methacton School District K-8 NSLP Sites
FSMC: Aramark Educational Services, LLC

Contract Begin Date: 07/01/2025
Contract End Date: 06/30/2026
Days of Service: 180

Section 1 - Actual "In-School" Revenue

To be completed by SFA (include SSO Reimbursements, if applicable)

		MEALS	RATES	REVENUE
BREAKFASTS:				
Adult Paid				$ 0.00
A la Carte Sales		2,500	$ 1.00	$ 2,500.00
	Subtotal Breakfasts			$ 2,500.00
LUNCHES:				
Elementary Paid		51,772	$ 2.75	$ 142,373.00
Elementary Tiered Paid				$ 0.00
Middle Paid		103,913	$ 3.05	$ 316,934.65
Middle Tiered Paid				$ 0.00
Secondary Paid				$ 0.00
Secondary Tiered Paid				$ 0.00
Adult Paid		300	$ 4.75	$ 1,425.00
A la Carte Sales		350,000	$ 1.00	$ 350,000.00
	Subtotal Lunches	155,685		$ 810,732.65
SNACKS/SUPPLEMENTS:				
Paid				$ 0.00
Reduced Price				$ 0.00
Adult Paid				$ 0.00
A la Carte Sales				$ 0.00
	Subtotal Snacks/Supplements	0		$ 0.00
OTHER:				
Special Milk				
Vending Machine Sales				
	Subtotal Other			
Total "In-School" Revenue		155,685		$ 813,232.65

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 2 - Federal Reimbursements

To be completed by SFA (include SSO Reimbursements, if applicable)

	MEALS	RATES	Reimbursements
BREAKFASTS:			
Free	10,204	$ 2.37	$ 24,183.48
Free, Severe Need	3,324	$ 2.84	$ 9,440.16
Reduced	1,032	$ 2.07	$ 2,136.24
Reduced, Severe Need	341	$ 2.54	$ 866.14
Paid	32,985	$ 0.39	$ 12,864.15
Paid, Severe Need	6,503	$ 0.39	$ 2,536.17
Subtotal Breakfasts	54,389		$ 52,026.34
HIGH RATE LUNCHES:			
Free	0	$ 4.45	$ 0.00
Reduced	0	$ 4.05	$ 0.00
Paid	0	$ 0.44	$ 0.00
Subtotal High Rate Lunches	0		$ 0.00
LOW RATE LUNCHES:			
Free	66,803	$ 4.43	$ 295,937.29
Reduced	4,171	$ 4.03	$ 16,809.13
Paid	133,995	$ 0.42	$ 56,277.90
Subtotal Low Rate Lunches	204,969		$ 369,024.32
SNACKS/SUPPLEMENTS:			
Free		$ 1.21	$ 0.00
Reduced		$ 0.60	$ 0.00
Paid		$ 0.11	$ 0.00
Subtotal Snacks/Supplements	0		$ 0.00
SPECIAL MILK:			
Paid		$ 0.27	$ 0.00
Performance Based Reimbursement (if certified):			
Lunches	204,969	$ 0.09	$ 18,447.21
Total Federal Reimbursement	259,358		$ 439,497.87

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 3 - State Reimbursements

To be completed by SFA (include SSO Reimbursements, if applicable)

BREAKFASTS:	**MEALS**	**RATES**	**Reimbursements**
Free	10,204	$ 0.10	$ 1,020.40
Free, Severe Need	3,324	$ 0.10	$ 332.40
Reduced	1,032	$ 0.40	$ 412.80
Reduced, Severe Need	341	$ 0.40	$ 136.40
Paid	32,985	$ 2.08	$ 68,608.80
Paid, Severe Need	6,503	$ 2.55	$ 16,582.65
Subtotal Breakfasts	54,389		$ 87,093.45
LUNCHES:			
Free	66,803	$ 0.10	$ 6,680.30
Reduced	4,171	$ 0.50	$ 2,085.50
Paid	133,995	$ 0.10	$ 13,399.50
Additional amount for Lunch if Breakfast participation <=20%	204,969	$ 0.02	$ 4,099.38
Additional amount for Lunch if Breakfast participation >20%		$ 0.04	$ 0.00
Subtotal Lunches	204,969		$ 26,264.68
Total State Reimbursement	259,358		$ 113,358.13

Section 4 - Other Income

To be completed by SFA

Other Income: Internal Catering (Special Functions)	$ 10,050.00
Other Income: External Catering (To Outside Organizations)	$ 13,400.00
Other Income: Sponsor-to-Sponsor Agreements (Sold to other Sponsors of Child Nutrition Programs)	
Interest Income	$ 603.00
Total Other Income	$ 24,053.00

Revenue Summary

Total "In-School Revenue"	$ 813,232.65
Total All Reimbursements	$ 552,856.00
Total Other Income	$ 24,053.00
Total Revenue	$ 1,422,253.80

Commodity Usage @	$ 0.3000	204,969	-$ 61,490.70

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 5 - Meal Equivalents

A la Carte Meal Equivalents

Federal reimb. - free, high lunch	
Federal reimb. - free, low lunch	$ 4.4300
Performance Based reimb.	$ 0.0900
State reimb. - free, lunch	$ 0.1000
Commodity Usage	$ 0.3000
Total	$ 4.9200

A la carte revenue	$ 352,500.00
Adult meal revenue	$ 1,425.00
Vending Sales	$ 0.00
	$ 353,925.00
Meal Equivalents	71,936
Reimbursable Meals	259,358
Total Meals	331,294

Section 6 - SFA Costs

To be completed by SFA (if applicable)

EXPENSES:	**TOTAL COST**
Direct Labor and Benefits	
SFA Labor Costs (must equal to grand total on Attachment 6)	
SFA Fringe Costs (must equal to grand total on Attachment 7)	
Subtotal Labor and Benefits	$ 0.00
Direct Costs (Must itemize)	
Subtotal Direct Costs	$ 0.00
Indirect Costs (Must Itemize)	
Subtotal Indirect Costs	$ 0.00
Subtotal SFA Costs	$ 0.00

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs
To be completed by FSMC

EXPENSES:		**TOTAL COST**
Food Costs-Including Commodities		$ 652,703.01
Enter the amounts of food and milk purchased and received. Include the Commodity Distribution Assessment Fee, Commodity Value and Bonus Commodity Value (Do not include rebates, discounts and credits)		
Less: Commodity Usage		-$ 61,490.70
	Subtotal Food Costs	$ 591,212.31
Commodity Delivery Charge		
Direct Labor and Benefits		
FSMC Labor Costs (must equal grand total on Attachment 4		$ 657,308.48
FSMC Fringe Costs (must equal grand total on Attachment 5		$ 145,809.64
	Subtotal Labor and Benefits	$ 803,118.12
Direct Costs		
Accounting		
Background Checks, Fingerprinting, and/or Drug Testing		$ 123.20
Car/Truck Rental and/or Mileage		$ 1,950.63
China, Silverware, Glassware		
Cleaning and Janitorial Supplies		$ 3,411.89
Computer and Technology		$ 3,468.81
Courier Services (Air & Ground)		
Dues/Subscriptions		
Employee Meals		
Employee Recruitment and Advertising		$ 2,246.51
Equipment Depreciation/Rental/Buy Back Investment		$ 5,191.90
Equipment Maintenance		
Equipment Repairs		
Equipment Replacement - Expendable		
Freight and Delivery Charges		
Insurance (Liability, Workman's Compensation, Vehicle, etc.)		$ 6,337.10
Licenses and/or Permits		$ 2,872.76
Office Supplies and Printing		$ 12,023.04
Paper Products and Disposable Supplies		$ 36,650.06
Payroll Processing		
Performance Bond		
POS Systems, Support and Service		$ 2,938.72
Postage		
Promotional Materials (Program Specific)		$ 6,700.27
Smallware/Replacement Wares		$ 4,175.09

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs (continued)

Staff Training and Certification	$ 2,425.89
Storage Costs (Food and/or supplies)	
Taxes (sales and other)	
Telephone, including Mobile and Internet	$ 1,844.24
Tickets, tokens	
Trash Removal and Pest Control	
Uniforms, Linens, and Laundry	$ 5,518.53
Vending Rental	
Wellness Programs and materials	
Subtotal Direct Costs	$ 97,878.64

Other Costs included in the RFP (Section Q) required of the FSMC by the SFA (Must Itemize)

Subtotal Other Costs	$ 0.00

Internal Catering (Special Functions)	$ 5,671.05
External Catering (To Outside Organizations)	$ 7,096.79
Sponsor-to-Sponsor (Sold to other Sponsors of Child Nutrition Programs)	$ 0.00

Administrative Fee: Cannot include any costs already covered in other categories. Documentation must must be provided outlining all methodologies used to calculate the Administrative Fee on Attachment 9.

Billed Over: 12 months **Fees charged on the basis of:** Per Meal Fees Only

		flat fee	
		flat fee	
		flat fee	
		flat fee	
Reimb. Meals Plus Equivalents:	331,294	per-meal fee	$ 38,761.40
Per-Meal Rate: (if applicable)	$ 0.1170	**Subtotal Administrative Fee**	$ 38,761.40
Total per-meal fees:	$ 38,761.40		

FSMC Management Fee (enter the fee that will be charged to manage the program)

Billed Over: 12 months **Fees charged on the basis of:** Per Meal Fees Only

		flat fee	
Reimb. Meals Plus Equivalents:	331,294	per-meal fee	$ 35,249.68
Per-Meal Rate: (if applicable)	$ 0.1064	**Subtotal Management Fee**	$ 35,249.68
Total per-meal fees:	$ 35,249.68		

SNP Cost Reimbursable

Projected Operating Costs for Participating Sites

SFA Name: Methacton School District K-8 NSLP Sites Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs (continued)

Subtotal FSMC Costs	$ 1,578,987.99
Less Rebates, Discounts and Applicable Credits (Enter as a negative number)	-$ 122,200.00
Total FSMC Costs	$ 1,456,787.99

Select the Guarantee Option:

Breakeven

Enter amount of Guaranteed Loss or Profit (if applicable):

Section 8 - Contract Summary

	SUMMARY
Total Revenue	$ 1,422,253.80
SFA Costs	$ 0.00
Total FSMC Costs	$ 1,456,787.99
School Nutrition Program - Profit or (Loss)	-$ 34,534.19

Summary of FSMC Labor

Enter the subtotals from the FSMC Labor Worksheets.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District

Subtotal Page 1	$ 343,749.83
Subtotal Page 2	$ 313,558.65
Subtotal Page 3	
Subtotal Page 4	
Subtotal Page 5	
Subtotal Page 6	
Subtotal Page 7	
Subtotal Page 8	
Subtotal Page 9	
Subtotal Page 10	
Subtotal Page 11	
Subtotal Page 12	
Subtotal Page 13	
Subtotal Page 14	
Subtotal Page 15	
Subtotal Page 16	
Subtotal Page 17	
Subtotal Page 18	
Subtotal Page 19	
Subtotal Page 20	
Total:	$ 657,308.48

For Fixed Price Contracts Only

Number of Meals **Cost Per Meal**

FSMC Labor

Labor to be completed by FSMC for FSMC Staff

Worksheet must accurately reflect any and all employees employed by the FSMC

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District

Site Name	Position	Hourly Rate	Daily Hours	# of Days Paid	Total Wages
Arcola	Kitchen Manager	$ 24.70	7.75	200	$ 38,278.80
Arcola	Head Cook	$ 21.98	7.00	199	$ 30,617.71
Arcola	Assistant Cook	$ 21.10	6.75	199	$ 28,349.01
Arcola	FSW	$ 18.62	3.00	199	$ 11,119.07
Arcola	FSW	$ 21.05	6.25	199	$ 26,185.09
Arcola	FSW	$ 18.62	3.50	199	$ 12,972.24
Arcola	FSW	$ 18.62	3.50	199	$ 12,972.24
Arcola	FSW	$ 20.54	6.25	199	$ 25,545.18
Arcola	FSW	$ 20.54	4.00	199	$ 16,348.92
Skyview	FSW	$ 18.62	6.00	199	$ 22,238.13
Skyview	FSW	$ 18.62	6.00	199	$ 22,238.13
Skyview	FSW	$ 18.62	6.00	199	$ 22,238.13
Skyview	FSW	$ 18.62	4.00	199	$ 14,825.34
Arrowhead	Kitchen Manager	$ 27.78	7.75	200	$ 43,063.65
Arrowhead	FSW	$ 21.05	4.00	199	$ 16,758.19

Sub Total: $ 343,749.83

Enter on Summary of FSMC Labor

FSMC Labor

Labor to be completed by FSMC for FSMC Staff

Worksheet must accurately reflect any and all employees employed by the FSMC

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District

Site Name	Position	Hourly Rate	Daily Hours	# of Days Paid	Total Wages
Eagleville	Kitchen Manager	$ 27.78	7.75	200	$ 43,063.65
Eagleville	FSW	$ 18.62	6.00	199	$ 22,237.06
Eagleville	FSW	$ 18.62	4.00	199	$ 14,824.70
Woodland	Kitchen Manager	$ 27.78	7.75	200	$ 43,063.65
Woodland	FSW	$ 18.62	4.00	199	$ 14,824.70
Worcester	Kitchen Manager	$ 27.78	7.75	200	$ 43,063.65
Worcester	FSW	$ 18.62	4.00	199	$ 14,823.91
Office	Admin	$ 25.73	8.00	114	$ 23,461.20
Office	Food Service Director	$ 37.11	8.00	170	$ 50,463.81
Office	Chef Manager	$ 32.16	8.00	170	$ 43,732.32
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00

Sub Total: $ 313,558.65

Enter on Summary of FSMC Labor

Summary of FSMC Fringe Benefits

Enter the subtotals from the FSMC Fringe Benefits Worksheets.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District K8 NSLP

Subtotal Page 1	$ 53,997.80
Subtotal Page 2	$ 91,811.84
Subtotal Page 3	
Subtotal Page 4	
Subtotal Page 5	
Subtotal Page 6	
Subtotal Page 7	
Subtotal Page 8	
Subtotal Page 9	
Subtotal Page 10	
Subtotal Page 11	
Subtotal Page 12	
Subtotal Page 13	
Subtotal Page 14	
Subtotal Page 15	
Subtotal Page 16	
Subtotal Page 17	
Subtotal Page 18	
Subtotal Page 19	
Subtotal Page 20	
Total:	$ 145,809.64

For Fixed Price Contracts Only

Number of Meals | **Cost Per Meal**

FSMC Benefits

Fringe Benefits to be completed by FSMC for FSMC Staff
Worksheet must accurately reflect any and all employees employed by the FSMC.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District K8 NSLP

		PLACE AN X IN THE APPROPRIATE BOXES														
Site Name	Position	Single	Single +1	Family	Dental	Disability	Hospitalization	Life	Longevity or Annuity	Retirement	Social Security	Unemployment	Vision	Worker's Comp	Other	Total Fringe Benefits
Arcola	Kitchen Manager		X		X						X	X		X		$ 15,830.13
Arcola	Head Cook										X	X		X		$ 3,407.02
Arcola	Assistant Cook										X	X		X		$ 3,223.86
Arcola	FSW										X	X		X		$ 1,910.85
Arcola	FSW										X	X		X		$ 3,058.19
Arcola	FSW										X	X		X		$ 2,051.83
Arcola	FSW										X	X		X		$ 2,051.83
Arcola	FSW										X	X		X		$ 3,008.80
Arcola	FSW										X	X		X		$ 2,309.08
Skyview	FSW										X	X		X		$ 2,757.72
Skyview	FSW										X	X		X		$ 2,757.72
Skyview	FSW										X	X		X		$ 2,757.72
Skyview	FSW										X	X		X		$ 2,192.80
Arrowhead	Kitchen Manager										X	X		X		$ 4,339.29
Arrowhead	FSW										X	X		X		$ 2,340.98

Sub Total: $ 53,997.80

Enter on Summary of FSMC Fringe Benefits

FSMC Benefits

Fringe Benefits to be completed by FSMC for FSMC Staff
Worksheet must accurately reflect any and all employees employed by the FSMC.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District K8 NSLP

		PLACE AN X IN THE APPROPRIATE BOXES														
Site Name	Position	Single	Single +1	Family	Dental	Disability	Hospitalization	Life	Longevity or Annuity	Retirement	Social Security	Unemployment	Vision	Worker's Comp	Other	Total Fringe Benefits
Eagleville	Kitchen Manager		X								X	X		X		$ 16,212.92
Eagleville	FSW										X	X		X		$ 2,757.72
Eagleville	FSW										X	X		X		$ 2,192.80
Woodland	Kitchen Manager				X						X	X		X		$ 4,246.68
Woodland	FSW										X	X		X		$ 2,192.80
Worcester	Kitchen Manager										X	X		X		$ 4,339.29
Worcester	FSW										X	X		X		$ 2,192.80
Office	Admin			X	X						X	X		X		$ 13,394.83
Office	Food Service Director				X			X			X	X		X		$ 23,959.24
Office	Chef Manager				X			X			X	X		X		$ 20,322.76

Sub Total: $ 91,811.84

Enter on Summary of FSMC Fringe Benefits

SNP Cost Reimbursable

Projected Operating Costs - Nonparticipating Sites

SFA : Methacton School District Non NSLP MHS
FSMC: Aramark Educational Services, LLC

Contract Begin Date: 07/01/2025
Contract End Date: 06/30/2026
Days of Service: 180

Section 1 - Actual "In-School" Revenue

To be completed by SFA (include SSO Reimbursements, if applicable)

	MEALS	RATES	REVENUE
BREAKFASTS:			
Student Paid			$ 0.00
Student Tiered Paid			$ 0.00
Student Reduced Price			$ 0.00
Adult Paid			$ 0.00
A la Carte Sales	20,000	$ 1.00	$ 20,000.00
Subtotal Breakfasts			$ 20,000.00
LUNCHES:			
Student Paid			$ 0.00
Student Tiered Paid			$ 0.00
Student Reduced Price			$ 0.00
Adult Paid			$ 0.00
A la Carte Sales	350,000	$ 1.00	$ 350,000.00
Subtotal Lunches			$ 350,000.00
SNACKS/SUPPLEMENTS:			
Paid			$ 0.00
Reduced Price			$ 0.00
Adult Paid			$ 0.00
A la Carte Sales	0		$ 0.00
Subtotal Snacks/Supplements	0		$ 0.00
OTHER:			
Special Milk			
Vending Machine Sales			
Subtotal Other			$ 0.00
Total "In-School" Revenue	0		$ 370,000.00

Section 4 - Other Income

To be completed by SFA

Other Income: Internal Catering (Special Functions)	
Other Income: External Catering (To Outside Organizations)	
Other Income:	
Interest Income	
Total Other Income	$ 0.00

Cannot comingle revenue and expenses between participating sites and non-participating sites.

Revised November 6, 2024

SNP Cost Reimbursable

Projected Operating Costs - Nonparticipating Sites

SFA Name: Methacton School District Non NSLP MHS Contract Begin Date: 07/01/2025

Revenue Summary

Total "In-School Revenue"	$ 370,000.00
Total Other Income	$ 0.00
Total Revenue	$ 370,000.00

Section 5 - Meal Equivalents

A la Carte Meal Equivalents

Enter Meal Equivalent Rate from Attachment CR3 - Participating Sites $ 4.9200

Student Revenue	$ 0.00
A la carte revenue	$ 370,000.00
Adult meal revenue	$ 0.00
Vending Sales	
	$ 370,000.00

Projected Meal Equivalents 75,203

Section 6 - SFA Costs

To be completed by SFA (if applicable)

EXPENSES:	**TOTAL COST**
Direct Labor and Benefits	
SFA Labor Costs (must equal to grand total on Attachment 6)	
SFA Fringe Costs (must equal to grand total on Attachment 7)	
Subtotal Labor and Benefits	$ 0.00
Direct Costs (Must itemize)	
Subtotal Direct Costs	$ 0.00
Indirect Costs (Must Itemize)	
Subtotal Indirect Costs	$ 0.00
Subtotal SFA Costs	$ 0.00

SNP Cost Reimbursable

Projected Operating Costs - Nonparticipating Sites

SFA Name: Methacton School District Non NSLP MHS Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs
To be completed by FSMC

EXPENSES:		**TOTAL COST**
Food Costs		$ 326,351.51
Enter the amounts of food and milk purchased and received. (Do not include rebates, discounts and credits)		
	Subtotal Food Costs	$ 326,351.51
Direct Labor and Benefits		
FSMC Labor Costs (must equal grand total on Attachment 4		$ 331,675.43
FSMC Fringe Costs (must equal grand total on Attachment 5		$ 83,734.27
	Subtotal Labor and Benefits	$ 415,409.70
Direct Costs		
Accounting		
Background Checks, Fingerprinting, and/or Drug Testing		$ 61.35
Car/Truck Rental and/or Mileage		$ 975.31
China, Silverware, Glassware		
Cleaning and Janitorial Supplies		$ 1,731.42
Computer and Technology		$ 1,722.37
Courier Services (Air & Ground)		
Dues/Subscriptions		
Employee Meals		
Employee Recruitment and Advertising		$ 1,110.35
Equipment Depreciation/Rental/Buy Back Investment		$ 2,570.94
Equipment Maintenance		
Equipment Repairs		
Equipment Replacement - Expendable		
Freight and Delivery Charges		
Insurance (Liability, Workman's Compensation, Vehicle, etc.)		$ 3,168.55
Licenses and/or Permits		$ 478.79
Office Supplies and Printing		$ 6,064.72
Paper Products and Disposable Supplies		$ 18,325.03
Payroll Processing		
Performance Bond		
POS Systems, Support and Service		$ 1,469.36
Postage		
Promotional Materials (Program Specific)		$ 3,350.13
Smallware/Replacement Wares		$ 2,087.53

SNP Cost Reimbursable

Projected Operating Costs - Nonparticipating Sites

SFA Name: Methacton School District Non NSLP MHS Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs (continued)

Staff Training and Certification	$ 1,212.94
Storage Costs (Food and/or supplies)	
Taxes (sales and other)	
Telephone, including Mobile and Internet	$ 922.05
Tickets, tokens	
Trash Removal and Pest Control	
Uniforms, Linens, and Laundry	$ 2,759.26
Vending Rental	
Wellness Programs and materials	
Subtotal Direct Costs	$ 48,010.09

Other Costs included in the RFP (Section Q) required of the FSMC by the SFA (Must Itemize)

Subtotal Other Costs	$ 0.00

Internal Catering (Special Functions)	$ 2,840.84
External Catering (To Outside Organizations)	$ 3,191.96

Administrative Fee: Cannot include any costs already covered in other categories. Documentation must must be provided outlining all methodologies used to calculate the Administrative Fee on Attachment 9.

Billed Over: 12 months **Fees charged on the basis of:** Per Meal Fees Only

		flat fee	
		flat fee	
		flat fee	
		flat fee	
Reimb. Meals Plus Equivalents:	75,203	per-meal fee	$ 8,798.75
Per-Meal Rate: (if applicable)	$ 0.1170	**Subtotal Administrative Fee**	$ 8,798.75
Total per-meal fees:	$ 8,798.75		

FSMC Management Fee (enter the fee that will be charged to manage the program)

Billed Over: 12 months **Fees charged on the basis of:** Per Meal Fees Only

		flat fee	
Reimb. Meals Plus Equivalents:	75,203	per-meal fee	$ 8,001.60
Per-Meal Rate: (if applicable)	$ 0.1064	**Subtotal Management Fee**	$ 8,001.60
Total per-meal fees:	$ 8,001.60		

SNP Cost Reimbursable

Projected Operating Costs - Nonparticipating Sites

SFA Name: Methacton School District Non NSLP MHS Contract Begin Date: 07/01/2025

Section 7 - FSMC Costs (continued)

Subtotal FSMC Costs		$ 812,604.45
Less Rebates, Discounts and Applicable Credits (Enter as a negative number)		-$ 35,798.80
	Total FSMC Costs	$ 776,805.65

Select the Guarantee Option:

Breakeven

Enter amount of Guaranteed Loss or Profit (if applicable):

Section 8 - Contract Summary

	SUMMARY
Total Revenue	$ 370,000.00
SFA Costs	$ 0.00
Total FSMC Costs	$ 776,805.65
Nonparticipating Site(s) - Profit or (Loss)	-$ 406,805.65

Cannot comingle revenue and expenses between participating sites and non-participating sites.

Summary of FSMC Labor

Enter the subtotals from the FSMC Labor Worksheets.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District Non NSLP MHS

Subtotal Page 1	$ 331,675.43
Subtotal Page 2	
Subtotal Page 3	
Subtotal Page 4	
Subtotal Page 5	
Subtotal Page 6	
Subtotal Page 7	
Subtotal Page 8	
Subtotal Page 9	
Subtotal Page 10	
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Subtotal Page 12	
Subtotal Page 13	
Subtotal Page 14	
Subtotal Page 15	
Subtotal Page 16	
Subtotal Page 17	
Subtotal Page 18	
Subtotal Page 19	
Subtotal Page 20	
Total:	$ 331,675.43

For Fixed Price Contracts Only

Number of Meals | **Cost Per Meal**

FSMC Labor

Labor to be completed by FSMC for FSMC Staff

Worksheet must accurately reflect any and all employees employed by the FSMC

FSMC: Aramark Education Services, LLC

For SFA: Methacton School District Non NSLP MHS

Site Name	Position	Hourly Rate	Daily Hours	# of Days Paid	Total Wages
MHS	Kitchen Manager	$ 27.78	7.75	200	$ 43,063.65
MHS	Head Cook	$ 22.08	7.75	199	$ 34,056.49
MHS	Assistant Cook	$ 21.10	7.75	199	$ 32,548.86
MHS	FSW	$ 18.62	6.00	199	$ 22,238.13
MHS	FSW	$ 18.62	6.00	199	$ 22,238.13
MHS	FSW	$ 18.62	4.00	199	$ 14,825.42
MHS	FSW	$ 18.62	4.00	199	$ 14,825.42
MHS	FSW	$ 20.80	6.00	199	$ 24,830.53
MHS	FSW	$ 18.88	4.00	199	$ 15,030.19
MHS	FSW	$ 19.71	6.00	199	$ 23,528.19
MHS	FSW	$ 18.62	4.50	199	$ 16,678.60
MHS	Admin	$ 25.73	7.75	90	$ 17,943.19
MHS	Food Service Director	$ 37.11	8.00	90	$ 26,716.13
MHS	Chef Manager	$ 32.16	8.00	90	$ 23,152.50
					$ 0.00

Sub Total: $ 331,675.43

Enter on Summary of FSMC Labor

Summary of FSMC Fringe Benefits

Enter the subtotals from the FSMC Fringe Benefits Worksheets.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District Non NSLP MHS

Subtotal Page 1	$ 83,734.27
Subtotal Page 2	
Subtotal Page 3	
Subtotal Page 4	
Subtotal Page 5	
Subtotal Page 6	
Subtotal Page 7	
Subtotal Page 8	
Subtotal Page 9	
Subtotal Page 10	
Subtotal Page 11	
Subtotal Page 12	
Subtotal Page 13	
Subtotal Page 14	
Subtotal Page 15	
Subtotal Page 16	
Subtotal Page 17	
Subtotal Page 18	
Subtotal Page 19	
Subtotal Page 20	
Total:	$ 83,734.27

For Fixed Price Contracts Only

Number of Meals | **Cost Per Meal**

FSMC Benefits

Fringe Benefits to be completed by FSMC for FSMC Staff
Worksheet must accurately reflect any and all employees employed by the FSMC.

FSMC: Aramark Educational Services, LLC

For SFA: Methacton School District Non NSLP MHS

		PLACE AN X IN THE APPROPRIATE BOXES														
Site Name	Position	Single	Single +1	Family	Dental	Disability	Hospitalization	Life	Longevity or Annuity	Retirement	Social Security	Unemployment	Vision	Worker's Comp	Other	Total Fringe Benefits
MHS	Kitchen Manager			X	X						X	X		X		$ 24,532.39
MHS	Head Cook										X	X		X		$ 3,741.44
MHS	Assistant Cook										X	X		X		$ 3,542.85
MHS	FSW										X	X		X		$ 2,757.72
MHS	FSW										X	X		X		$ 2,757.72
MHS	FSW										X	X		X		$ 2,263.80
MHS	FSW										X	X		X		$ 2,192.80
MHS	FSW										X	X		X		$ 2,955.29
MHS	FSW										X	X		X		$ 2,209.26
MHS	FSW										X	X		X		$ 2,855.48
MHS	FSW										X	X		X		$ 2,333.77
MHS	Admin										X	X		X		$ 6,697.41
MHS	Food Service Director			X	X						X	X		X		$ 14,732.96
MHS	Chef Manager										X	X		X		$ 10,161.38

Sub Total: $ 83,734.27

Enter on Summary of FSMC Fringe Benefits

Revised November 6, 2024

SFA Site Listing

General Data and Services to be Provided

SFA: Methacton School District

Site Name	Address	Grade Levels	Self-Prep or Satellite	# of Serving Periods (Lunch)	Meal Service Times			Services to be Provided										# of Serving Days
								Breakfast				Lunch				After School Snack	Special Milk Program	
					Breakfast	Lunch	Afterschool Snack	Meal	Offer vs. Serve	A la Carte	Adult Meals	Meal	Offer vs. Serve	A la Carte	Adult Meals		Pre-K and/or Kindergarten	
Arrowhead	272 Level Rd., Collegeville, PA 19426	K-4	SP	4	8:50-9:05	11:00-1:30		X	X	X	X	X	X	X	X			180
Eagleville	125 Summit Ave. Eagleville, PA 19403	K-4	SP	4	8:50-9:05	11:00-1:30		X	X	X	X	X	X	X	X			180
Woodland	2700 Woodland Ave., Eagleville, PA 19403	K-4	SP	4	8:50-9:05	11:00-1:30		X	X	X	X	X	X	X	X			180
Worcester	3017 Skippack Pk., Lansdale, PA 19446	K-4	SP	4	8:50-9:05	11:00-1:30		X	X	X	X	X	X	X	X			180
Skyview	4001B Eagleville Rd., Eagleville, PA 19403	5-6	SP	2	7:50-8:15	10:30-11:30		X	X	X	X	X	X	X	X			180
Arcola	4001B Eagleville Rd., Eagleville, PA 19403	7-8	SP	2	7:50-8:15	11:30-1:30		X	X	X	X	X	X	X	X			180
Methacton High School	1005 Kriebel Mill Rd., Eagleville, PA 19403	9-12	SP	3	7:15-7:45	10:17-1:29				X	X			X	X			180