



Interoffice Memorandum

APPROVED
BY ORANGE COUNTY BOARD
OF COUNTY COMMISSIONERS
AUG 19 2014 NP/KH

AGENDA ITEM

July 25, 2014

TO: Mayor Teresa Jacobs
and
Board of County Commissioners

THRU: Lonnie C. Bell, Jr., Director
Family Services Department

FROM:  Sonya Hill, Acting Manager
Head Start Division 
Contact: Khadija Pirzadeh, (407) 836-8912
Sonya Hill, (407) 836-7409

SUBJECT: Florida Department of Health, Child Care Food Program (CCFP) Budget for the Sponsor of Affiliated Child Care Centers related to the Child Care Food Program Permanent Contract
BCC Meeting 8/19/14 Consent Agenda/All Districts

The Head Start Division requests Board approval of the Florida Department of Health, Child Care Food Program (CCFP) Budget for the Sponsor of Affiliated Child Care Centers; Supplemental Budget for Special Cost Items; Management Plan; 2014 CCFP Annual Training Certification; Building for the Future; and Delegation of Signing Authority for the Child Care Food Program.

The Child Care Food Program is a part of the National School Lunch Program, which provides children in public and private schools with balanced meals and snacks to meet the USDA minimum daily nutritional requirements. All grantees must utilize USDA funds as primary payment for meals, as mandated by Head Start Child Nutrition Performance Standard §1304.23 (b)(i). The Child Care Food Program Permanent Contract was previously approved by the Board of County Commissioners on September 11, 2012. The Florida Department of Health will reimburse Orange County, the Head Start grantee, up to an estimated amount of \$1,729,260 for meals served to eligible children enrolled in the Head Start Program.

The County Attorney's Office and Risk Management Division have reviewed this standard agreement for legality and compliance with County requirements. The term of this contract is from October 1, 2014 through September 30, 2015.

ACTION REQUESTED: Approval of Florida Department of Health, Child Care Food Program Budget for Sponsor of Affiliated Child Care Centers; Supplemental Budget for Special Cost Items; Management Plan; 2014 CCFP Annual Training Certification; Building for the Future; and Delegation of Signing Authority to accept the Child Care Food Program reimbursement to Orange County up to an estimated amount of \$1,729,260 for nutritional meals served to eligible children enrolled in the Head Start Program for FY 2014-15.

SH/kp
Attachments

C: George A. Ralls, M.D., Acting Deputy County Administrator
Wanzo Galloway, Assistant County Attorney, County Attorney's Office
John Petrelli, Manager, Risk Management Division
Yolanda Brown, Manager, Fiscal Division, Family Services Department
Jamille Clemens, Grants Supervisor, Finance Department
Patria Morales, Grants Coordinator, Office of Management and Budget

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 OF COUNTY COMMISSIONERS

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Florida Department of Health

Child Care Food Program

Budget for Sponsor of Affiliated Child Care Centers

7/24/2014
3:43PM

S - 734 Region: C RPS: 3 Fiscal Year: ²⁰¹⁵~~2014~~ Termination Date:

Legal Name: ORANGE COUNTY BOARD OF COUNTY COMMISSIONERS FEIN: 596000773159 ^{10/01/2014}

D/B/A: ORANGE COUNTY HEAD START DIVISION Payment Start Date: ~~10/01/2013~~ # File(s) Uploaded: 0

Food Service (Operational) Costs	CCFP Funds	Description of Costs	Funding from Other Sources	Name(s) of Other Funding Source(s)	Total Funding
Food Purchases:	\$1,281,788		\$0		\$1,281,788
Food Service Labor and Benefits:	\$266,667		\$0		\$266,667
Non-Contracted Purchased Services:	\$0		\$0		\$0
Non-Food Supplies:	\$20,000		\$0		\$20,000
Food Service Equipment:	\$0		\$0		\$0
Transportation:	\$0		\$0		\$0
Other (Includes Special Cost Items):	\$10,283	SELF-INSURANCE-3740, INDIRECT COSTS-6543	\$0		\$10,283
Total Food Service (Operational) Costs:	\$1,578,738		\$0		\$1,578,738
Administrative Costs	CCFP Funds	Description of Costs	Funding from Other Sources	Name(s) of Other Funding Source(s)	Total Funding
Administrative Salaries and Benefits:	\$145,981		\$0		\$145,981
Non-Contracted Purchased Services:	\$0		\$0		\$0
Training:	\$1,100		\$0		\$1,100
Travel:	\$2,000		\$0		\$2,000
Rent and Utilities:	\$0		\$0		\$0
Office Supplies:	\$1,441		\$0		\$1,441
Other (Includes Special Cost Items):	\$0		\$0		\$0
Total Administrative Costs:	\$150,522		\$0		\$150,522
Budget Grand Total:	\$1,729,260		\$0		\$1,729,260

Identify the source(s) of funds your organization has available to repay potential over claims of CCFP reimbursement (choose at least one):

Tuition/Fees
 Savings/Checking
 Credit/Loan
 Other (Describe) GENERA, COUNTY & HEADSTART FUNDS

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Child Care Food Program

SUPPLEMENTAL BUDGET FOR SPECIAL COST ITEMS

Authorization No.: S-734 Name of Organization: Orange County, Florida

Mark one: Original budget Amended budget For Fiscal Year Ending 2015

- Use this form to list any special cost items for which you are requesting prior written approval (per current revision of FNS Instruction 796-2) in your budget; **failure to receive prior approval means that these cost items must not be charged to the CCFP.**
- Documentation to support these CCFP costs must be maintained by your organization and are subject to review prior to and after approval.
- **Before completing this form, refer to the guidance and instructions provided on page 4.**

SPECIAL COST ITEMS	DOLLAR AMOUNT Administrative	DOLLAR AMOUNT Operational (Food Service)
I. Special Compensation		
(A) Compensation to nonprofit organization's trustees, directors, officers, or family members thereof for CCFP services performed.....		\$ 6,543.00
(B) Stipends to compensate board members for the costs of attending corporate meetings when CCFP business is conducted.....		
(C) A substantial increase in the organization's level of compensation to an individual or all employees funded from CCFP monies.....		
II. Overtime, Holiday Pay and Compensatory Leave		
(A) Payment of overtime, holiday pay for work performed on a non-work holiday, and compensatory leave.....		
(B) Incentive payments and awards exceeding \$500 made to CCFP funded employees.....		
(C) Severance pay for CCFP funded employees when it does not constitute excess compensation.....		
(D) Deferred compensation for CCFP funded employees when the deferral is in best interest of the CCFP (other restrictions also apply; see current FNS Instruction 796-2....		
(E) Amendments or modifications to approved deferral plans for CCFP funded employees		
III. Contributions and Donation Costs		
Costs required to make goods or services donated to the organization usable for the CCFP (donated or volunteer labor is unallowable).....		
IV. Depreciation and Use Allowance-Equipment and Improvements \$5,000 or more		
(A) Using a <u>different</u> method of depreciation for space and facility other than the 30 year straight line method or a method accepted by the IRS.....		
(B) For publicly owned buildings, the amount assigned as the acquisition cost.....		
(C) Unknown acquisition cost.....		
(D) Using a <u>different</u> method of depreciation for equipment other than the 15 year straight line method or a method accepted by the IRS.....		
(E) A use allowance can be claimed but cannot exceed six and two-thirds percent of the acquisition cost.....		
V. Direct Expensing - Equipment and Other Property \$5,000 or more		
The program's share of the cost of equipment or property purchased by the organization for use in the CCFP (typically this applies to large food service equipment; see current FNS Instruction 796-2 for a list of exclusions).....	\$ Amount (Adm.)	\$ Amount (Op.)

VI. Facilities and Space Costs			
The costs for rearrangement and alterations to facilities owned by the organization that are necessary for efficient and effective CCFP operations but do not result in capital improvements.....			
VII. Insurance			
(A) Costs of other insurance maintained by the organization in connection with the general activities of the CCFP when the type, extent and cost of coverage is in accordance with the general state or local government policy and sound business practices.....			
(B) Costs of insurance or contributions to any self-insurance reserve covering the risk, loss, or damage to Federal Government property to the extent that the organization is liable for such loss or damage.....		\$ 3,740.00	
(C) Contributions to a reserve for self-insurance to the extent that the reserve meets state insurance requirements and the type of coverage, extent of coverage and the rates and premiums that would have been allowed had insurance been purchased to cover the risks.....			
VIII. Employee Morale, Health, and Welfare Costs and Credits			
(A) The cost of professional crisis intervention counseling and emergency medical care when the costs are a direct result of participation in the CCFP.....			
(B) Cost of current benefits provided to program employees if these benefits were provided to the same class of employees prior to participation in the CCFP.....			
(C) Cost of new or expanded benefit programs if existing benefit programs were provided to the same class of employees prior to participation in the CCFP.....			
IX. Interest and Other Financial Costs			
(A) Stop payment charges for reimbursement payments and other CCFP disbursements, whether by check or EFT.....			
(B) CCFP account reconciliation and analysis fees, including the allocated share of fees charged for commingled accounts.....			
(C) Interest on organizational debt incurred after 10/1/1998 for non-profit private organizations and after 10/1/1980 for public organizations, used to acquire or replace allowable CCFP equipment or other property or make allowable CCFP improvements are allowable <u>if</u> the following documentation requirements are met and forwarded to DOH: --a financing arrangement, which is a bona-fide arms-length transaction between unrelated parties, requires full disclosure to DOH --a financing arrangement, which is not an arms-length transaction, requires full disclosure to DOH and the Federal Regional Office			
X. Tier I Day Care Home Licensing Costs (up to \$300 per home)			
Costs for the following items are allowable <u>only</u> if the items are necessary for unlicensed Tier I eligible day care homes to meet licensing requirements:			
(A) Supplies such as smoke detectors and fire extinguishers.....			
(B) Minor alternations such as adding handrails.....			
(C) The costs of fire and safety inspections and licensing fees.....			
XI. Legal Expenses and Other Professional Services			
(A) The sponsoring organization's cost to pursue administrative and judicial recovery of CCFP funds due from sponsored facilities when the costs are reasonable in relation to the amount of the funds due.....			
(B) The organization's costs for CCFP-related services performed by individuals who <u>are not</u> officers, employees or members of the organization but who are members of a particular profession or possess a particular skill.....			
XII. Purchased Services for Program Operation – Other (Excluding Professional Services as listed above)			
(A) Transactions that are not arms-length and involve related parties for purchased services.....			
(B) Maintenance and service repair <u>contracts</u> on CCFP equipment.....			
(C) All other purchased service costs needed for CCFP operation.....			
XIII. Proposal Costs		\$ Amount (Adm.)	\$ Amount (Op.)
The costs of preparing proposals for potential FNS Child Nutrition Program grants.....			
XIV. Membership in Civic and Other Organizations			
Costs of public and not-for-profit organizations memberships in civic or community organizations for CCFP funded employees; requires full disclosure to DOH and the Federal Regional Office with accompanying documentation.....			

XV. Meetings and Conferences		
The prorated share of travel and registration fees when the CCFP is only a portion of a larger child care related agenda.....		
XVI. Management Studies		
The cost of studies directly related to the program that are performed by entities other than the organization itself.....		
XVII. CCFP Rental Costs		
Special lease arrangements – capital leases, sale-with-lease-back leases, less-than-arms-length transactions, and lease with option-to-purchase (documentation must accompany this form).....		
TOTAL	\$ 0.00	\$ 10,283.00

Prepared by: Raymond Carmichael (Program Manager Fiscal)
(Name and Title)

Preparer's Signature: *Raymond Carmichael* Date: 07/24/2014

For DOH Use Only:	
Approved by: _____ (Program Specialist Signature)	Date Approved: _____
Approved by: _____ (Headquarters Approver Signature)	Date Approved: _____

Florida Department of Health
 Child Care Food Program

MANAGEMENT PLAN

(For Sponsors of Affiliated Child Care Centers, Afterschool Meals Programs, and Homeless Children Nutrition Programs)

Authorization Number: S-734 Sponsoring Organization Name: Orange County, FL

Instructions: Complete the following Management Plan information. Follow the directions provided for each table to be completed. Attach additional sheets and other documentation as requested.

1. ADMINISTRATIVE STAFFING for CCFP - Complete this table listing all personnel who will perform CCFP administrative duties. Administrative duties include program management, monitoring, compiling meal counts, classifying meal applications, maintaining enrollment rosters, training, accounting, reviewing & filing the claim, etc. Administrative duties do not include preparing or serving meals. Attach additional sheets as needed using the following table format.

(A) Employee Name	(B) Position Title	(C) List of Specific CCFP Administrative Duties Performed	(D) Hours per Month Spent on CCFP	(E) X # of CCFP Operating Months per Year	(F) = Annual Hours Spent on CCFP	(G) / Total Annual Hours Worked	(H) = % Time Spent on CCFP
Philip A. Stapp	Sr.Coordinator	Supervises staff,coordinate nutrition and monitor meals for children	173.3300	12	2,080	2,080	1
Daisy Flores	Asst. Nutrition Coordinator	Monitor and provide technical assistance to center/staff	163.3300	12	1,960	1,960	1
Deja Barnes	Asst. Nutrition Coordinator	Monitor and provide technical assistance to center/staff	163.3300	12	1,960	1,960	1
							NaN
							NaN
							NaN
							NaN
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							NaN

Authorization Number: S-734

Sponsoring Organization Name: Orange County, FL

2. ADMINISTRATIVE SALARIES & BENEFITS - Complete this table listing all personnel listed above in table 1. The total administrative costs charged to the CCFP cannot exceed 15% of projected or actual meal reimbursements. The amounts listed in column G cannot be more than the amounts listed in column F, and may need to be less in order to stay within the 15% administrative cost limit. Attach additional sheets as needed using the following table format.

(A) Employee Name	(B) Annual Salary	(C) + Annual Insurance & Other Benefit Costs Paid by Employer					(D) =Total Annual Salary & Benefits	(E) X % Time Spent on CCFP (from column H in Table 1)	(F) =Total Annual Salary & Benefits Cost for Time Spent on CCFP	(G) Amount to be Charged to the CCFP	(H) Amount to be Charged to Other Funds (difference of column F minus Column G amount)
		Health	Dental	Life	Retirement	Other					
Philip A. Stapp	\$ 44,433.00	\$ 9,000.00	\$ 0.00	\$ 0.00	\$ 3,088.00	\$ 0.00	\$ 56,521.00	1	\$ 56,521.00	\$ 56,521.00	\$ 0.00
Daisy Flores	\$ 35,770.00	\$ 9,000.00	\$ 0.00	\$ 0.00	\$ 2,486.00	\$ 0.00	\$ 47,256.00	1	\$ 47,256.00	\$ 47,256.00	\$ 0.00
Deja Barnes	\$ 31,046.00	\$ 9,000.00	\$ 0.00	\$ 0.00	\$ 2,158.00	\$ 0.00	\$ 42,204.00	1	\$ 42,204.00	\$ 42,204.00	\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
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							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
							\$ 0.00	NaN	\$ 0.00		\$ 0.00
									TOTAL	CCFP Funds	Other Funds
									\$ 145,981.00	\$ 145,981.00	\$ 0.00

Note: Transfer these totals to the applicable columns on the Administrative Salaries & Benefits row of the Budget. ➤

If Other under column C is filled out, describe below the specific benefit(s) being provided to the employee(s):

Authorization Number: S-734 Sponsoring Organization Name: Orange County, FL

3. The sponsor conducts MONITORING REVIEWS at least as often as required by 7 CFR, Part 226.16(d)(4). Yes No

A yes answer indicates that the sponsoring organization, at a minimum, conducts unannounced CCFP monitoring reviews as follows:

- Each new site is reviewed within the first four weeks of CCFP operations.
- Each existing site is reviewed three times yearly with not more than a six-month lapse between reviews. If using review averaging, contractor meets review averaging requirements.
- Follow-up reviews are conducted within 30 days of issuing a disallowance and/or identifying areas of noncompliance.

4. How many sites do you currently sponsor? 19

5. MONITORING STAFF - Complete this section **only if your organization sponsors 25 or more sites or if you anticipate sponsoring 25 or more sites during this fiscal year.**

In the table below, list all employees who perform monitoring activities and describe the specific activities each employee performs. Monitoring activities include, but are not limited to, conducting on-site reviews, planning the review schedule, travel for reviews, supervisory oversight of monitors, writing review reports, follow-up reviews, pre-approval visits, household contacts, technical assistance, and desk reviews of claim documentation. For each employee listed, indicate the total monthly hours spent on the CCFP (refer back to table 1, column D), and the percentage of those hours spent on monitoring; then multiply the two figures to obtain the number of hours per month spent on monitoring. Add the monitoring hours of all employees listed to obtain the total for the sponsoring organization. Attach additional sheets as needed using the following table format. **Please Note:** Monitoring ratios for sponsors must equal at least one FTE (2080 hours/year or 173.33 hours/month) for 25 to 150 sites. See below for more detail.

Employee Name	Description of Monitoring Activities	Total Hours per Month Spent on CCFP (from table 1, column D)	% of Monthly CCFP Hours Spent Monitoring	# of Hours per Month Spent on Monitoring* (Total monthly CCFP hours x % of hours monitoring)
Daisy Flores	Monitor food temperature, food preparation, serving, and cleaning	163.3300	100.00%	163.33
Deja Barnes	Monitor food temperature, food preparation, serving, and cleaning	163.3300	100.00%	163.33
			0.00%	0.00
			0.00%	163.33
			TOTAL =	489.99

* Sponsors with twenty-five (25) or more sites are required to employ at least one full time equivalent (FTE) monitor per 25-150 sites. However, to ensure adequate monitoring, there should be approximately one FTE monitor for not more than 85 sites. An FTE equals one staff year (2080 hours) or a staff month (173.33 hours) and could be one full time staff person who monitors full time; two half time staff who spend all of their time monitoring; two full time staff who spend half of their time monitoring; three full time staff, one of whom monitors 40% of the time, with the other two each spending 30% of their time monitoring, etc.

Authorization Number: S-734 Sponsoring Organization Name: Orange County, FL

6. Complete the table below outlining your proposed TRAINING SCHEDULE for administrative staff (such as, monitors, trainers, clerks, secretaries, bookkeepers), and food service personnel (such as, cooks and meal assistants). Attach additional sheets as needed using the following table format. A sign-in sheet and an agenda must be maintained for each session. **Training on all required topics must be conducted at least once per year.**

Date of Proposed Training	Instructor Name(s)
8/4/2014	Philip A. Stapp
8/5/2014	Philip A. Stapp
8/7/2014	Philip A. Stapp

<p>Required Training Topics</p> <ul style="list-style-type: none"> • Menu Planning & Meal Pattern Requirements • Meal Count Procedures • Claim Review & Submission Procedures • Reimbursement System • Civil Rights Requirements
<p>Recommended Training Topics</p> <ul style="list-style-type: none"> • Food Safety & Sanitation • Nutrition Education

7. The sponsor reviews all CCFP records for accuracy and compliance. Yes No

8. List the Florida address(s) where CCFP records will be maintained:
2100 East Michigan Street, Orlando, Florida 32806

I certify that all information on the Management Plan is true and correct.

Sonya Hill
 Signature of Sponsor Representative

Sonya Hill
 Printed Name

7/24/14
 Date

Program Manager
 Title

2014 CCFP Annual Training Certification

Instructions: Find the section(s) that apply to your organization. Insert your initials next to all trainings you have completed. Complete the signature box and be sure to save a copy of this form for your records.

(Note: If your organization has multiple authorization numbers, you may complete one form for all trainings, but you must submit a copy of the form with each renewal and list all applicable authorization numbers below.)

If Receiving Catered Meal Service: complete appropriate module(s) based on the following

- SH _____ Part 1 – Overview (required if receiving catered meals in fiscal year 2014-15)
- _____ Part 2 – Informal Competitive Procedure (required if initial catering contract totals less than \$100,000)
- SH _____ Part 3 – Formal Competitive Procedure (required if initial catering contract totals \$100,000 or more)
- SH _____ Part 4 – Renewal (required if renewing a catering contract)

Independent Centers (I's) and Sponsors of Affiliated Centers (S's)

Note: When completed, you will upload this Certification form to your Renewal Screen in MIPS.

- _____ Independent Centers Renewal Module
- SH _____ Sponsor of Affiliated Centers Renewal Module
- SH _____ Read and Understand CCFP 2014 Annual Training Handbook

Afterschool Meals Programs (A's) and Homeless Children Nutrition Programs (H's)

Note: When completed, you will enclose this Certification in your Renewal Packet. Step-by-step renewal instructions are provided for you in the July 14th memo and in MIPS.

- _____ Read and Understand CCFP 2014 Annual Training Handbook

Sponsors of Day Care Homes (D's) and Sponsors of Unaffiliated Centers (U's)

Note: When completed, you will enclose this Certification in your Renewal Packet. Step-by-step renewal instructions are provided for you in the July 14th memo and in MIPS.

- _____ Administrative Budget Training
- _____ Read and Understand CCFP 2014 Annual Training Handbook

By signing below, I certify that I have received the CCFP annual training materials and have completed the trainings initialed above.

Sonya Hill Sonya Hill 7/25/14
Signature of Program Manager or authorized representative Printed Name Date

S734 _____ Orange County Head Start
Authorization #(s) Organization Name

2100 E. Michigan Street Orlando, FL 32806
Organization's Address, City, Zip

Building for the Future

This facility participates in the Child Care Food Program (CCFP), a Federal program that provides healthy meals and snacks to children in child care settings.

Each day more than 2.6 million children participate in the CCFP at day care homes, child care centers, and afterschool programs across the country. Providers are reimbursed for serving nutritious meals that meet USDA requirements. The program plays a vital role in improving the quality of child care and making it more affordable for low-income families.

Meals

CCFP facilities follow meal requirements established by USDA.

Breakfast	Lunch or Supper	Snacks (Two of the four)
Milk Fruit or vegetable Grains or bread	Milk Meat or meat alternate Grains or bread Two different servings of fruits or vegetables	Milk Meat or meat alternate Grains or bread Fruit or vegetable

Participating

Facilities

Many different homes and centers operate the CCFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- **Child Care Centers:** Licensed or approved public or private nonprofit child care centers, Head Start programs, and some for-profit centers.
- **Family Day Care Homes:** Licensed or approved private homes.
- **Afterschool Programs:** Sites in low-income areas provide free snacks and/or meals to school-age children and youth.
- **Homeless Shelters:** Emergency shelters provide food services to homeless children.

Eligibility

State agencies reimburse facilities that offer non-residential child care to the following children:

- children age 12 and under,
- migrant children age 15 and younger, and
- youth through age 18 in afterschool programs in needy areas.

Civil

Rights

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or if all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (in Spanish). USDA is an equal opportunity provider and employer.

Contact

Information If you have questions about the CCFP, please contact one of the following:

Sponsoring Organization/Facility:

Orange County Head Start
 2100 E. Michigan Street
 Orlando, FL 32806

State Agency:

Florida Department of Health
 Bureau of Child Care Food Programs
 4052 Bald Cypress Way, Bin A-17
 Tallahassee, Florida 32399-1727
 850.245.4323



Organization Name: Orange County, Florida

Authorization #: S-734

APPROVED

BY ORANGE COUNTY BOARD
OF COUNTY COMMISSIONERS

Delegation of Signing Authority for the Child Care Food Program

AUG 19 2014 NP/KH

By means of this letter, I, Teresa Jacobs, Orange County Mayor (the Delegating Official, which is the Board Chairman, Executive Director, President or Majority Owner), delegate the authority herein described, to Lonnie C. Bell, Jr. (my representative), on the following terms and conditions:

1. My representative may sign, on my behalf, any documents pertaining to the Child Care Food Program (CCFP).
2. The designated effective time period of this delegation is as follows:
 - a. For a prospective contractor, this delegation will be in effect from the date that the CCFP application checklist or contract is signed, whichever date occurs earlier, through September 30, 2015 or until revoked in writing by the delegating official, whichever date occurs earlier.
 - b. For a renewing contractor, this delegation will be in effect from the date that the CCFP Annual Information Update and Certification or contract amendment (when applicable) is signed, whichever date occurs earlier, through September 30, 2015 or until revoked in writing by the delegating official, whichever date occurs earlier.
3. The authority delegated is not subject to sub-delegation without my prior and written consent.
4. I understand that this delegation does not relieve me of responsibility to manage and supervise operation of the Child Care Food Program, that I may be liable for repayment of funds received and that I may be subject to disqualification from future participation in the Child Care Food Program should the terms of the contract with DOH for participation in the Child Care Food Program not be fulfilled.



Teresa Jacobs
Signature (Delegating Official)

Teresa Jacobs, Orange County Mayor
Name

Title (Board Chairman, Executive Director,
President or Majority Owner)

8.19.14
Date

Acknowledged and agreed:

Lonnie C Bell Jr
Signature (Representative)

Lonnie C. Bell, Jr.
Name

Director
Title

8-1-14
Date