[INSERT SFA LETTERHEAD]

# Modification to an Existing Contract

This document acts as a modification to an existing contract to provide meals under the National School Lunch Program (NSLP), School Breakfast Program (SBP), After-School Snack Program (ASSP), and At-Risk Supper Program.

This document is in reference to a contract agreement dated \_\_\_\_/\_\_\_\_/\_\_\_\_ between the following parties [insert name of SFA] and [insert name of Contractor].

May it be known that the undersigned parties, for good consideration, do hereby agree to make the following changes and /or additions outlined below. These additions shall be made valid as if they are included in the original stated contract.

## Stated contract for:

[Insert name of Contractor] hereby agree to adhere to the following two provisions:

### Buy American Provision

The Contractor agrees to assume the responsibility of adhering to the Buy American provision on behalf of the SFA. The SFA participates in the NSLP and SBP and is required to use the nonprofit food service funds, to the maximum extent practicable, to buy domestic commodities or products for Program meals. A ‘domestic commodity or product’ is defined as one that is either produced in the U.S. or is processed in the U.S. substantially using agricultural commodities that are produced in the U.S. as provided in 7 CFR 210.21(d). “Substantially” means over 51% from American products. The Contractor must be able to provide product label information that clearly shows country of origin for all food and beverage products in the meal program. For products which do not have country of origin labels, the Contractor must provide certification of domestic origin. In the event that the FSMC cannot obtain a domestic product due to availability and/or a significantly higher cost, and cannot find an appropriate substitute, the FSMC may request an exception from the SFA. Exceptions may be requested at any point during the school year, are approved at the discretion of the SFA, must be submitted prior to the purchase of the non-domestic food, and limited exceptions will be allowed. To request an exception, the Contractor must submit in writing to the SFA:

* Alternative substitute(s) that are domestic and meet the required specifications:
	+ Price of the domestic food alternative substitute(s); and
	+ Availability of the domestic alternative substitute(s) in relation to the quantity ordered.
* Reason for exception: limited/lack of availability or price (include price):
	+ Price of the domestic food product; and
	+ Price of the non-domestic product that meets the required specification of the domestic product.
* The time period for which the Contractor is requesting to purchase this item from a non-domestic source.

### Byrd Anti-Lobbying

Byrd Anti-Lobbying Amendment (31 U.S.C. 1352)—Contractors who apply or bid for an award of $100,000 or more shall file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the recipient. For any contract over $100,000, the contractor must complete and sign the anti-lobbying statement, provided here in Appendix I.

No other terms or conditions of the above mentioned contract shall be negated or changed as a result of this here stated modification.

This modification of agreement shall be binding upon and attest to the benefit of parties, their successors and assigns:

**Name of SFA**:

**Printed name and title of SFA Official**:

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_

  *(Signature of SFA Official)*

Address:

Phone Number:

Email address:

**Name of Contractor**:

**Printed name and title of Contractor Official:**

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_

  *(Signature of Contractor Official)*

Address of Contractor:

Phone Number:

Email address:

# Appendix I: Disclosure of Lobbying Activities Supplemental Documentation for contracts exceeding $100,000

Approved by OMB

0348-0046

**Disclosure of Lobbying Activities**

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

(See reverse for public burden disclosure)

|  |  |  |
| --- | --- | --- |
| 1. **Type of Federal Action:**

 a. contract \_\_\_\_ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance  | 1. **Status of Federal Action:**

 a. bid/offer/application \_\_\_\_\_ b. initial award c. post-award | 1. **Report Type:**

 a. initial filing \_\_\_\_\_ b. material change**For material change only:**Year \_\_\_\_\_\_\_ quarter \_\_\_\_\_\_\_Date of last report\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Name and Address of Reporting Entity:**

 \_\_\_\_ Prime \_\_\_\_\_ Subawardee Tier\_\_\_\_\_\_, if Known: **Congressional District*,*** *if known***:**  | 1. **If Reporting Entity in No. 4 is Subawardee,**

 Enter Name and Address of Prime:  **Congressional District*,*** *if known***:**  |
| 1. **Federal Department/Agency:**
 | 1. **Federal Program Name/Description:**

CFDA Number, *if applicable*: \_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Federal Action Number,** *if known:*
 | 1. **Award Amount**, *if known:*

**$**  |
| **10. a. Name and Address of Lobbying Registrant** *(if individual, last name, first name, MI):*  | **b. Individuals Performing Services** *(including address if different from No. 10a)* *(last name, first name, MI):*  |
| **11. 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Print Name: \_\_\_\_\_****Title: \_\_\_\_\_****Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_** |
| **Federal Use Only** | **Authorized for Local Reproduction****Standard Form - LLL (Rev. 7-97)** |

**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. 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 followup 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; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included 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 registrant under the Lobbying Disclosure Act of 1995 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. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 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 (0348-0046), Washington, DC 20503