



Date: Nov. 8, 2018
Addressee Contact Name: Nelly Yang, Assistant Superintendent – Admin Services
Company Name: Campbell Union School District
Address: 155 North Third Street
City, State & Zip Code: Campbell, CA 95008

The intent of this letter is for informational and planning purposes to establish and maintain a working relationship between the **Campbell Union School District** and the **American Red Cross**. The terms set forth herein shall not become effective and enforceable until a definitive agreement or order is executed by all parties following all negotiations.

Campbell Union School District will provide to the Red Cross products and services as outlined on the attached sheet (Restaurant Capability Survey) in preparing for and responding to disaster relief situations at all levels. The Restaurant Capability Survey provides the broad framework for cooperation between the two entities in rendering assistance and service to victims of disaster, as well as other services for which cooperation may be mutually beneficial. The Red Cross mission is to mitigate suffering by meeting the urgent needs of victims and emergency workers immediately after a disaster has struck, or in advance of a potential disaster.

You may be called upon in the time of a disaster or emergency to prepare, provide, load, and possibly transport meals and/or other feeding related products or services to victims and/or responders/workers affected by an event. Products and/or services will be provided at the previously agreed upon price.

The Red Cross, a charitable organization and an instrument of the federal government, is exempt from the payment of, and therefore will not pay, any state and local taxes, including use taxes (Tax Exempt Certificate available upon request).

This letter does not create a partnership or a joint venture, and neither party has the right to bind the other.

By signing and returning this letter, you are confirming for the Red Cross that the above and any referenced attachments provide an accurate estimation of products and services that will be available to support the immediate emergency response efforts of the above-named chapter of the American Red Cross.

Signature

1/9/2019

Date

If you have any questions, please do not hesitate to contact me at 650-224-3580 or via email at Jim.Mollerus@redcross.org.

Sincerely,
Jim Mollerus
Volunteer & Mass Care Coordinator
American Red Cross, Silicon Valley Chapter



Use this template to determine restaurant meal or catering capability.
This job tool should be used in conjunction with the *Feeding Standards and Procedures*.

Entity Name: **Campbell Union School District**

Address: 155 North Third Street, Campbell, CA 95008

Telephone Number/Email: (408) 364-4200 x 6214, nyang@campbellusd.org

Name and Title of Contact: Nelly Yang, Assistant Superintendent of Admin Services

1. Number of Each Type of Meal You Can Provide Per Day:

Meal	Yes or No?	# of Hot Meals	# of Cold Meals (aka Box Lunches)	Describe typical contents and portion sizes of meal
Breakfast	yes	2	5000	see attached
Lunch	yes	3000	3000	see attached
Dinner	yes	3000	3000	see attached

2. How much prior notice is required for a meal request?

Two days

3. Rates per meal (indicate if price varies between meals):

Breakfast rate is \$2.75 per meal.
Please see attachment for additional pricing.

4. Can your business accommodate special diets (vegetarian, kosher, halal, gluten-free, etc.)? If so, what meals can you provide?

We can accommodate vegetarian and gluten-free meals

5. Preferred meal delivery method: Pick up X Drop Off Both

Other (if so, indicate your preferred method):

6. Will your company accept Red Cross purchase orders and credit cards as a method of payment?

Yes No X If No, please explain: We can accept purchase orders, we can not accept credit card payments.

Billing: Invoices will be submitted to the Red Cross. A direct point of contact name and number will be supplied to you at time of order.

The above information and pricing will be valid through

Date: 6/28/2019

Brian Coleman
Signature and Title of Management Completing This Form

Date: 1/9/2019