

ZACHARY COMMUNITY SCHOOLS MILK BID JULY1, 2009 - JUNE 30, 2010

Stock Number	Description	Unit Pack	Est. Qty	Bid Unit	Price	Comment
02-225-3200	Milk, 1% Fresh, unflavored, 8 oz Homogenized, Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Half pint. 96/case Price per carton/per case unit	Number Per Case	8 oz. Each	1/2 pt	.2850	Plastic pouch Case count 68 Paper carton
02-225-3201	Milk, 1% Fresh, unflavored, 8 oz Homogenized, Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint plastic bottle container. Half pint. 50/case Price per carton/per case unit	Number Per Case	8 oz. Each	1/2 pt	.2679 .2623	Plastic bottle Brown's/ LuVel Case count 50
02-225-3230	Milk Fat Free, Fresh, unflavored, 8 oz. Homogenized, Grade A, containing 0% butterfat. Vitamin A and D added. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Half pint. 96/case Price per carton/per case unit	Number Per Case	8 oz. Each	1/2 pt	.2850	Plastic pouch Case count 68 Paper carton
02-225-3231	Milk, Fat Free, Fresh, unflavored, 8 oz. Homogenized, Grade A, containing 0% butterfat. Vitamin A and D added. One half pint plastic container. Half pint. 50/case. Price per carton/per case unit	Number Per Case	8 oz. Each	1/2 pt	.2679 .2623	Plastic bottle or Paper carton Case count 50

<p>02-225-3240</p> <p>Milk, 1% Fresh, Chocolate flavored, 8 oz.</p> <p>Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Half pint. 96/case</p> <p>Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2850</p>	<p>Plastic pouch Case count 68 Paper carton Case count 50</p>
<p>02-225-3241</p> <p>Milk, 1% Fresh, Chocolate flavored, 8 oz.</p> <p>Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint plastic container. Half pint. 50/case.</p> <p>Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2679 K2 .2623</p>	<p>Plastic bottle Brown's/ Luvel</p>
<p>02-225-3250</p> <p>Milk, Whole, fresh, Strawberry flavored, 8 oz.</p> <p>Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Half pint. 96/case</p> <p>Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2850</p>	<p>Plastic pouch Case count 68 Paper carton Case count 50</p>
<p>02-225-3251</p> <p>Milk, Whole, fresh, Strawberry flavored, 8 oz.</p> <p>Grade A, containing 1.0% butterfat. Vitamin A and D fortified. One half pint plastic container. Half pint. 50/case</p> <p>Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2679 K2 .2623</p>	<p>Plastic bottle Brown's/ Luvel</p>

<p>02-225-3290 Milk, Whole, Fresh, unflavored, 8 oz. Grade A containing 3.25% butterfat. Vitamin A and D fortified. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Half pint 96/case Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2850</p>	<p>Plastic pouch Case count 68 Paper carton Case count 50</p>
<p>02-225-3291 Milk, Whole, Fresh, unflavored, 8 oz. Grade A containing 3.25% butterfat. Vitamin A and D fortified. One half pint plastic container. Half Pint. 50/case Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>8 oz. Each</p>	<p>1/2 pt</p>	<p>.2679 KD .2623</p>	<p>Plastic bottle Brown's/ Luvel</p>
<p>02-225-3260 Grade A, containing 3.25% butterfat. Vitamin A and D fortified. Sixteen ounce container; packaged in plastic container. Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>16 oz. Each</p>	<p>Pint</p>	<p>.75</p>	<p>Plastic bottle Brown's Dairy</p>
<p>02-225-3270 Milk, 1%, Fresh, Strawberry Flavored, 16 oz Grade A, containing 1% butterfat. Vitamin A and D fortified. One half pint container; poly-coated paperboard cartons or plastic milk pouches. Pint. Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>16 oz. Each</p>	<p>Pint</p>	<p>.75</p>	<p>Plastic bottle Brown's Dairy/ Foremost / Nestle</p>
<p>02-225-3280 Grade A, containing 3.25% butterfat. Vitamin A and D fortified. Sixteen ounce container; packaged in plastic container. Price per carton/per case unit</p>	<p>Number Per Case</p>	<p>16 oz. Each</p>	<p>Pint</p>	<p>.75</p>	<p>Plastic bottle Brown's Dairy</p>

<p>02-225-1350 Buttermilk Grade A, cultured, contains not more than 1-1/2% butterfat. 1/2 Gallon Price per 1/2 Gallon Low fat milk, gallon</p>	<p>Number Per Case 9</p>	<p>1/2 Gallon Each</p>	<p>1/2 Gallon</p>	<p>1.79</p>	<p>Plastic container</p>
<p>02-225-4970 Homogenized, Grade A, containing 2.0 % butterfat. Vitamin A and D fortified. Plastic milk containers. Price per carton/per case unit</p>	<p>Gallon</p>	<p>Gallon</p>	<p>Gallon</p>	<p>2.79</p>	
<p>02-225-4420 Sour Cream. Regular Cultured, and not less than .02% acidity expressed as lactic acid. Packaged in 5 lb. cartons Price per carton/per case unit</p>	<p>5 Lb Carton</p>	<p>Cartons</p>	<p>5 pound</p>	<p>6.50</p>	
<p>02-225-4961 Yogurt, 5 lb Non-fat, fortified, Vanilla Reduced sugar-blended Upstate Farms brand or prior approved</p>	<p>5 lb carton</p>	<p>Cartons</p>		<p>No bid</p>	
<p>02-225-4990 Yogurt, 8 oz. Plain Low fat, commercially prepared coagulated milk products obtained by the fermentation of specific bacteria to meet milk solid requirements and to which flavoring foods or ingredients may be added. Products to be covered by FDA definition and standard of identity for low fat yogurt, 21 CFR 131.203. Dannon, Yoplait or Equal Price per carton/per case unit</p>	<p>6/ 32 oz. 12/8 oz per case</p>	<p>8 oz. 6</p>		<p>56 .76</p>	<p>Dannon Bid as 6oz.</p>

02-225-4991 Yogurt, 4 oz. Plain

No bid

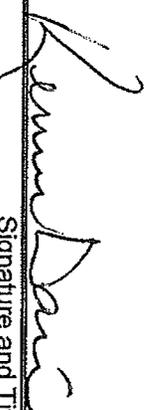
Low fat, commercially prepared coagulated milk products obtained by the fermentation of specific bacteria to meet milk solid requirements and to which flavoring foods or ingredients may be added. Products to be covered by FDA definition and standard of identity for low fat yogurt, 21 CFR 131.203. Dannon, Yoplait or Equal
Price per carton/per case unit

his form is sent for information purposes only. It is not a request for a bid under the public bid law, and may not list all desired specification
The Zachary Community School Board reserves the right not to contract with any of the businesses providing quotation in response to this request.

No individual shall be excluded from participation in, denied the benefit of, subjected to discrimination under, or denied employment in the administration or in connection with any such program because of race, color, religion, sex, national origin, age handicap, or political application or belief."

PLEASE FILL IN AND SIGN

In compliance with the above request for quotations and subject to all conditions imposed by Instructions,
General Rules and Conditions, the undersigned offers and agrees to furnish any or all of the items at the price set opposite each item.

Brown's Dairy  General Manager 504-529-2221 504-592-3619
Company Name Signature and Title Phone Fax

Prototype Certificate of Independent Price Determination

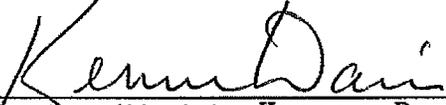
Both the school food authority and the Vendor (offeror) shall execute this Certificate of Independent Price Determination.

Brown's Dairy
(Name of Vendor)

Zachary Community Schools
(Name of School Food Authority)

- (A) By submission of this offer, the offeror certifies and in the case of a joint offer, each party thereto certifies as to its own organization, that in connection with this procurement:
- (1) The prices in this offer have been arrived at independently, without consultation, communication or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other offer or with any competitor;
 - (2) Unless otherwise required by law, the prices which have been quoted in this offer have not been knowingly disclosed by the offeror and will not knowingly be disclosed by the offeror prior to opening in the case of an advertised procurement, or prior to award in the case of a negotiated procurement, directly or indirectly to any other offeror or to any competitor; and
 - (3) No attempt has been made or will be made by the offeror to induce any person or firm to submit or not to submit, an offer for the purpose of restricting competition.
- (B) Each person signing this offer on behalf of the Vendor certifies that:
- (1) He or she is the person in the offeror's organization responsible within the organization for the decision as to the prices being offered herein and has not participated, and will not participate, in any action contrary to (A)(1) through (A)(3) above; or
 - (2) He or she is not the person in the offeror's organization responsible within the organization for the decision as to the prices being offered herein, but that he or she has been authorized in writing to act as agent for the persons responsible for such decision in certifying that such persons have not participated and will not participate, in any action contrary to (A)(1) through (A)(3) above, and as their agent does hereby so certify; and he or she has not participated, and will not participate, in any action contrary to (A)(1) through (A)(3) above.

To the best of my knowledge, this Vendor, its affiliates, subsidiaries, officers, directors and employees are not currently under investigation by any governmental agency and have not in the last three years been convicted or found liable for any act prohibited by State or Federal law in any jurisdiction, involving conspiracy or collusion with respect to bidding on any public contract, except as follows:


Signature of Vendor's Kennon Davis
Authorized Representative

General Manager
Title

6/1/09
Date

In accepting this offer, the SFA certifies that no representative of the SFA has taken any action which may have jeopardized the independence of the offer referred to above.

Signature of School Food Authority's
Authorized Representative

Title

Date

Note: Accepting a bidder's offer does not constitute award of the contract.

Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017, subpart c- Responsibilities of Participants. The regulations were published in the November 26, 2003, Federal Register (pages 66534-66566). Copies of the regulations may be obtained by contacting the Department of Agriculture.

(BEFORE COMPLETING CERTIFICATION, READ ATTACHED NSTRUCTIONS)

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.

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

Brown's Dairy

Zachary Community Schools bid

Organization Name

PR/Award Number or Project Name

Kennon Davis, General Manager

Name and Title of Authorized Representative


Signature

6/1/09

Date

INSTRUCTIONS TO BIDDERS FOR COMPLETING CERTIFICATION FORM

NOTE: Each responsive bidder must include this certification statement with its bid on each contract equaling or exceeding \$25,000 or any contract for audit services regardless of amount.

1. By signing and submitting this form, the prospective lower tier participant is providing the certification set out on the reverse side in accordance with these instructions.
2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
4. The terms *covered transaction*, *debarred*, *suspended*, *ineligible*, *lower tier covered transaction*, *participant*, *person*, *primary covered transaction*, *principal*, *proposal*, and *voluntarily excluded*, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the U. S. Department of Agriculture regulations 7 CFR 3017 implementing Executive Order 12 549. (Contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.)
5. The prospective lower tier participant agrees by submitting this form that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency with which this transaction originated.
6. The prospective lower tier participant further agrees by submitting this form that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transaction" without modification in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. A participant in a covered transaction may rely upon a certification that a prospective participant in a lower tier covered transaction has not been debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless the participant knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
9. Except for transactions authorized under Paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.

Approved by OMB
0348-0046

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See attached for public burden disclosure)

<p>1. Type of Federal Action: (enter letter of choice)</p> <p><input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance</p>	<p>2. Status of Federal Action: (enter letter of choice)</p> <p><input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award</p>	<p>3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change</p> <p>For material change only: Year _____ quarter _____ Date of last report _____</p>
<p>4. Name and Address of Reporting Entity:</p> <p>_____ Prime _____ Subawardee Tier _____, if known:</p> <p>Congressional District, if known:</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</p> <p>Congressional District, if known:</p>	
<p>6. Federal Department/Agency:</p>	<p>6. Federal Program Name/Description:</p> <p>CFDA Number, if applicable:</p>	
<p>8. Federal Action Number, if known:</p>	<p>9. Award Amount, if known: \$ _____</p>	
<p>10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):</p>	<p>b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):</p>	
<p>11. Amount of Payment (check all that apply):</p> <p>\$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned</p>	<p>13. Type of Payment (check all that apply):</p> <p><input type="checkbox"/> a. retainer <input type="checkbox"/> b. one-time fee <input type="checkbox"/> c. commission <input type="checkbox"/> d. contingent fee <input type="checkbox"/> e. deferred <input type="checkbox"/> f. other; specify: _____</p>	
<p>12. Form of Payment (check all that apply):</p> <p><input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____</p>	<p>14. Brief Description of Services Performed or to be Performed and Date(s) of Service, including officer(s), employee(s), or Member(s) contacted, for Payment Indicated in Item 11:</p> <p>(Attach Continuation Sheet(s) SF-LLL-A, if necessary)</p>	
<p>15. Continuation Sheet(s) SF-LLL-A attached: _____ Yes _____ No</p>		
<p>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.</p>	<p>Signature: <u>Kennon Davis</u> Print Name: <u>Kennon Davis</u> Title: <u>General Manager</u> Telephone No.: <u>504-529-2221</u> Date: <u>6/1/09</u></p>	
<p>Federal Use Only</p>	<p>Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)</p>	

Office of Chief Financial Officer, USDA

Pt. 3018, App. B

DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET

Approved by OMB
0348-0046

Reporting Entity: Brown's Dairy Page 1 of 1

N/A

Kenneth 6/1/09

CM

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Standard Form - LLL-A

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; contract, grant, or loan award number; 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 boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes 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 or not a SF-LLL-A Continuation Sheet(s) is attached.
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 (0348-0046), Washington, DC 20503

CERTIFICATION REGARDING LOBBYING

CERTIFICATION FOR CONTRACTS, GRANTS, LOANS, AND COOPERATIVE AGREEMENTS EXCEEDING \$100,000 IN FEDERAL FUNDS

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 any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any 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 contract, grant, loan, 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 subawards (exceeding \$100,000 in Federal funds) at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

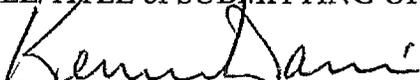
This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to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

Brown's Dairy
P.O. Box 52559
New Orleans, LA 70152

NAME/ADDRESS of VENDOR

General Manager

TITLE/TITLE of SUBMITTING OFFICIAL



SIGNATURE Kennon Davis

6/1/09

DATE

CERTIFICATE OF NON-COLLUSION/INDEPENDENT PRICE DETERMINATION

The undersigned certifies that the preparation and submission of the attached bid have been conducted independently, without consultation, communication or agreement with any other bidder or potential bidder outside of Southern Foods Group, L.L.C. and that there will be no consultation, communication, or agreement on the price, terms and conditions of this bid by or on behalf of Southern Foods Group, L.L.C. with any other bidder or potential bidder outside of Southern Foods Group, L.L.C. prior to the official opening of the bid.

Southern Foods Group, L.L.C.

Date

6/1/09

Brown's Dairy

By:



Title: General Manager

Escalation/De-Escalation

Escalation/De-Escalation: Product specifications included herein shall be made firm for the entire period of the contract. The prices for milk specifications included herein shall be firmed for Thirty (30) days from the date of the bid opening.

Subsequently prices for these milk products may escalate or de-escalate in accordance with the changes in the Class I monthly total raw milk price components (Skim Milk and Butterfat) to the manufacturer as stated by the Announcement of Class Prices for 3.5% Milk for the New Orleans, Louisiana area. The vendor awarded the contract shall provide seven (7) days prior written notice to any change. A copy of the Milk Market Administrator's Announcement and any other announced price changes shall be furnished with the written notification. Any change in price will commence on the 1st day of the month subsequent to the receipt of the written notification. For bid purposes, the present cost of components for the month of June 2009 is \$12.4582/cwt for skim and \$4.6260lb. for butterfat to equal \$17.0842 cwt. Of 3.5% Class I Milk.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

9/30/2009

DATE (MM/DD/YYYY)

5/15/2009

PRODUCER
 LOCKTON COMPANIES, LLC-N DALLAS
 717 N. HARWOOD, LB#27
 DALLAS TX 75201
 214-969-6700

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
 124017 Southern Foods Group, LLC
 d/b/a Brown's Dairy
 Dean Foods Company
 1300 Baronne St.
 New Orleans LA 70113

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: ACE American Insurance Company	22667
INSURER B: Indemnity Insurance Company of North America	43575
INSURER C: National Union Fire Insurance Company of Pittsburgh, Pa.	19445
INSURER D:	
INSURER E:	

COVERAGES DEAF001 EI

THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND THE CERTIFICATE HOLDER.

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
<input checked="" type="checkbox"/>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$1,000,000 EBL GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	HDO G23745847	9/30/2008	9/30/2009	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> **	ISA H08248485	9/30/2008	9/30/2009	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO	NOT APPLICABLE			AUTO ONLY - EA ACCIDENT \$ XXXXXXXX OTHER THAN EA ACC AGG \$ XXXXXXXX AUTO ONLY: \$ XXXXXXXX
	EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> UMBRELLA FORM <input checked="" type="checkbox"/> RETENTION \$ 10,000	6358792	9/30/2008	9/30/2009	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$ XXXXXXXX \$ XXXXXXXX \$ XXXXXXXX
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below No	WLR C42850743(AOS) SCF C42850652(WI) WLR C42850755(CA) WCU C4285069A(XS OH ONLY)	9/30/2008 9/30/2008 9/30/2008 9/30/2008	9/30/2009 9/30/2009 9/30/2009 9/30/2009	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000	
OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 INSURED IS SELF-INSURED ON PHYSICAL DAMAGE FOR ALL OWNED, LEASED AND RENTED AUTOS.

CERTIFICATE HOLDER

10544790

Zachary Community Schools
 Attn: Kathryn Valentine
 4656 Main St.
 Zachary LA 70791

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Frank S. Sullivan