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LETTER OF AGREEMENT

This agreement is hereby made and entered into this 4th day of December 2020, by and between the Aging and Disability Resource Center (ADRC) of Racine County, Senior Nutrition Program and Mulligan's Mini Golf, Inc. dba Buddy's Sports Grill, whose address is 6633 Douglas Avenue, Racine, Wisconsin 53402.

It is agreed that site participation in the Racine County Senior Nutrition Program shall be conditioned upon compliance with the following and that any non-compliance by either party shall constitute grounds for termination. This agreement may also be terminated by either party with 30 days' written notice to the other party.

It is mutually agreed that:

Mulligan's Mini Golf, Inc. dba Buddy's Sports Grill Shall:

1. Cooperate with the staff of the ADRC and the administration of the Racine County Senior Nutrition Program.
2. Designate a Program Liaison whose responsibility will involve coordinating activities and requirements with the Racine County Senior Nutrition Program.
3. Provide delivered or curb-side pick-up meals to our participants.
4. Provide up to 100 meals per day at a cost including delivery fee of \$10.00 per meal.
5. Provide meals Monday-Friday between the hours of 10:30am-3:30pm.
6. Provider to choose a mixture of breakfast, lunch and dinner items as long as it meets criteria (Appendix A) defined by the Nutrition Program.
7. Site shall meet fire and safety code requirements and the meal service area must pass a Health Department Inspection and a periodic inspection by the Racine County Department of Health and Fire Department if requested.
8. A 5-day menu that includes milk must be supplied that meets the criteria (Appendix A) defined by the Nutrition Program.
9. Provider will receive the participants' names, addresses and number of weekly meals to provide within your zip code as well as a daily communication on the number of meals and cancellations for the next day.
10. Provide a report on meals delivered at the end of each day to the Nutrition Office, no exchange of money will occur at time of delivery.
11. Provider will notify Nutrition Office if they had to leave a meal at the home of a participant who is either not home or did not answer.
12. Provider will notify Nutrition office by 6am the day of if they are unable to provide delivered means due to "Inclement Weather"

APPENDIX "A"



Dietary Criteria

Meal Component	Minimum # of Servings per Meal	Serving Size Examples*
Grains	1	1 regular slice bread, 1/2 cup cooked, 1 cup ready-to-eat cereal, 1 - 6" tortilla, 1/2 regular size bun
Fruit and/or Vegetables	3	1/2 cup fresh, frozen, or canned (cooked or raw), 1/4 cup dried fruit, 1 cup raw leafy greens, 1/2 cup 100% fruit or vegetable juice
** Include a variety of colors of fruits and/or vegetables through the week		
Fluid milk	1	8 fluid ounces or 1 cup
Protein	1	3 oz. equivalent
Fats and oils	1	1 teaspoon served on side or used in cooking
Additional Required Item (Dessert)	1	1/2 cup serving of fruit/vegetable
* Serving sizes may be altered slightly when a full nutrient analysis ensuring 1/3 DRI is on record with the nutrition program.		

Mulligan's Mini Golf, Inc. dba Buddy's Sports Grill - 2021 Meal Site Agreement MOU COVID 19

Final Audit Report

2020-12-21

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