

**SUMMARY END PRODUCT DATA SCHEDULE  
WITH COMMERCIAL PRICING**

**PRODUCT: Pork**

**Quote 1006**

THIS IS AN ORIGINAL SUMMARY SCHEDULE UNLESS CHECKED BELOW:

- Reflects Change in Formulation
- Additional Products Listed
- Correction

**PROCESSOR**

**NAME: AdvancePierre Foods**

Value Pass

- Direct Sales
- Refund to Recipient Agency
- Net Price Through Distributor
- Fee for Service (billed by Processor)
- Fee for Service (billed by Distributor)

**Information Certified as Accurate from Approved EPDS**

(requires signature from agency that approved EPDS)

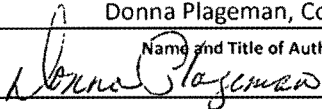
**Direct Ship to School System Warehouse**

End Product Code	Description	Net Weight Per Case	Servings Per Case	Net Weight Per Serving	Commodity Code	Commodity (Use Commodity code and Short Title)	Commodity Inventory Drawdown per Case	When Applicable Maximum Percent Breeding	By Products Produced (none unless box is checked)	Value Per Pound of Commodity (Contract Value)	Delivered Gross Price per Case	Delivered Gross Price Per Portion	FFS Net Price Case	FFS Net Price Per Portion
3750	Pk Sausage Patty	18.75	250	1.2	100193	Pork Picnics, Frz	22.45			25.87			\$ 22.50	\$ 0.09
3787	Honey BBQ PK Rib	18.75	100	3.00	100193	Pork Picnics, Frz	15.26			17.58			\$ 21.89	\$ 0.22
69019	Breaded Pk Patties	19.38	100	3.10	100193	Pork Picnics, Frz	9.51	.75 gr		10.96			\$ 27.50	\$ 0.28
69040	County Fried PK Steaks	20.45	85	3.85	100193	Pork Picnics, Frz	15.55			17.92			\$ 23.38	\$ 0.28
69142	Pk Crumbles	40	260	2.46	100193	Pork Picnics, Frz	32.96			37.98			\$ 42.15	\$ 0.16
69168	Shredded PK unsauced	28	190	2.35	100193	Pork Picnics, Frz	42.9			49.43			\$ 48.14	\$ 0.25
1-24640-0	Breaded Pk Patties w/apis	30.55	130	3.75	100193	Pork Picnics, Frz	13.99	1.00 gr		16.12			\$ 35.75	\$ 0.28

**PROCESSOR:**

\*If by products are produced, provide value and method credit will be given

**APPROVAL:**

AdvancePierre Foods	
Name of Company	
Donna Plageman, Commodity Specialist	
Name and Title of Authorized Representative	
 Signature	2/02/16 Date Signed

Caldwell County Schools Child Nutrition Program	
Name of Company	
Guy Garner, Director	
Name and Title of Authorized Representative	
Signature	Date Signed

By my signature I certify that I have read pages 1-13 and agree with all items in quote Document.

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