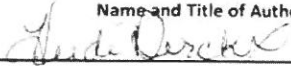




**SUMMARY END PRODUCT DATA SCHEDULE  
WITH COMMERCIAL PRICING**

**PROCESSOR:**

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

Schwan's Food Service, Inc.	
Name of Company	
Heidi Dirckx - Assistant Treasurer	
Name and Title of Authorized Representative	
	1/26/2018
Signature	Date Signed

**APPROVAL:**

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.

[sfsibids@schwans.com](mailto:sfsibids@schwans.com)

E-Mail address of Authorized Representative