



NEW HAVEN PUBLIC SCHOOLS

Baron Young, Executive
Director NHPS Food Service

P: (475) 220-1610

F: (203) 946-7650

To: New Haven Board of Education Finance and Operations Committee
From: Thomas Lamb, Chief Operating Officer
Gail Sharry, Executive Director
Michael Gormany, City Budget Director
Date: Thursday, July 20, 2023
Re: Approval of Change for Thurston Foods Inc.

Executive Summary:

Approval is requested for change order number # 2 for the below mentioned vendor. The purpose of the change order is to increase the original amount of the contract. Thurston foods is the main food supplier for the Food and Nutrition program. Based on the number of meals served and current menu, Food service is projected to exceed the overall value of the contract.

Vendor Number: 43356
Vendor Name: Thurston Foods
Vendor Address: 30 Thurston Drive, Wallingford CT 06492

Change Order Purpose ☒ Increase Compensation ☐ Time Extension
 ☐ Decrease Compensation ☐ Time Decrease

Original Contract Amount \$2,200,000
Change Order #1 \$150,000.00
Change Order #2 \$ ~~107,000~~

New Amount of Contract \$2,457,000

Funding Source: 25215200-5558
 7 Food Service

CITY OF NEW HAVEN CONTRACT CHANGE ORDER (CO)

1	Please provide an overview of this CO (please pay particular attention to sections 17,18,19)											
	Increase needed to fulfill financial obligation of fiscal year 2023 invoices.											
2	CONTRACT TITLE:		Grocery									
3	CONTRACT #:		2022-04-1442		CO#		2		CO DATE:		7/20/2023	
4	CONTRACTOR:		Thurston Foods						VENDOR CODE:		43356	
5	Contractor EMAIL:		tim.thurston@thurstonfoods.com						PROJECT No.:			
6	7-1-2022		X						6/30/2023			
	CONTRACT START DATE:		DATE UNCHANGED		DATE INCREASED		DATE DECREASED		CONTRACT END DATE:			
7	FUNDING SOURCE OF CONTRACT:		25215200-55587						CAPO #:		20231539	
8	FUNDING SOURCE CO:		25215200-55587						CAPO #:		20231539	
9	ORIGINAL AWARDED AMOUNT:		2,200,000.00									
10	CONTRACT AMOUNT PRIOR TO THIS CO:		2,350,000.00									
11	AMOUNT OF THIS CO:		107,000.00						ACTUAL		<input type="checkbox"/>	
									ESTIMATE		<input checked="" type="checkbox"/>	
									INCREASE		<input type="checkbox"/>	
									DECREASE		<input type="checkbox"/>	
12	NEW CONTRACT AMOUNT:		2,457,000.00									


13	What is the total percentage increase/decrease over the original contract, including the current CO?	11.6818	%
	<i>Please place an X in one box on each line</i>	YES	NO
14	Is this Change Order a final close-out of the Contract?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
15	Has the cost of this contract been increased from the original amount?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	Is this a Time and Material change order because of increase/decrease funding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
17	Is any part of this Change Order outside of the scope of the original bid documents? IF YES you MUST elaborate in memo section above	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18	Has any of the work described in this Change Order been ordered to be done? IF YES you MUST elaborate in memo section above	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19	Are there any unit prices or lump-sum amounts in this Change Order that were not taken from the Contractor's original bid for the project? If the answer is yes, approved quotes and prices, with back-up, must be appended hereto along with certification by the person who approved the reasonableness of the prices, and elaborate in memo section above	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20	COMPANY HOLDING PERFORMANCE BOND: (If Applicable)		


21	CHANGE ORDER HISTORY		CONTRACT #	2022-04-1442
22 CO #	Date	PREVIOUS CHANGE ORDERS: DESCRIPTION in lieu of CO memo If you need more line attach a separate page	AMOUNT INCREASE	AMOUNT (DECREASE)
1	3/16/2023	Increase in funds needed to continue to provide meals to the NHPS district	150,000.00	
SUB TOTALS			150,000.00	
NET INCREASE / (DECREASE)			150,000.00	

23 ITEM	THIS CHANGE ORDER Brief description (attach quotes etc.)	AMOUNT INCREASE	AMOUNT (DECREASE)
1	Increase needed to fulfill financial obligation of fiscal year 2023 invoices.	107,000.00	
SUB TOTALS		107,000.00	-
NET INCREASE / (DECREASE)		107,000.00	

Signature Page to follow

24	2022-04-1442	2	7/20/2023
	Contract Number:	CO #	DATE:

ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT.		
	Account Representative	7/24/23
DULY AUTHORIZED CONTRACTOR'S SIGNATURE:	TITLE:	DATE:

BY SIGNING BELOW, WE CERTIFY THAT THIS CHANGE ORDER HAS BEEN REVIEWED BY THE APPROPRIATE PARTIES AND FOUND TO BE IN COMPLIANCE WITH THE RULES, REGULATIONS AND POLICIES OF OUR INDIVIDUAL DEPARTMENTAL REQUIREMENTS.	
	7/25/2023
REQUESTING AGENCY DEPARTMENT HEAD SIGNATURE:	DATE
SMALL CONTRACTOR DEVELOPMENT SIGNATURE:	DATE
COMMISSION ON EQUAL (CEO) SIGNATURE:	DATE
CAPO REVISED AND APPROVED SIGNATURE:	DATE
PURCHASING AGENT SIGNATURE:	DATE
OFFICE OF CORPORATION COUNSEL: - APPROVED TO FORM & CORRECTNESS.	DATE
CONTROLLER: - CERTIFIED AS TO SUFFICIENCY OF APPROPRIATION OR AVAILABILITY OF FUNDS	DATE

This section is utilized when and as needed:		
24	ENGINEER/ARCHITECT:	COMPANY/FIRM:
		DATE:



NEW HAVEN PUBLIC SCHOOLS

Gail Sharry, Executive Director
NHPS Food Service
P: (475) 220-1610
F: (203) 946-7650

To: New Haven Board of Education Finance and Operations Committee
From: Thomas Lamb, Chief Operating Officer
Gail Sharry, Executive Director
Michael Gormany, City Budget Director
Date: Thursday, March 16, 2022
Re: Approval of Change for Thurston Foods Inc.

Executive Summary:

Approval is requested for change order number # 1 for the below mentioned vendor. The purpose of the change order is to increase the original amount of the contract. Thurston foods is the main food supplier for the Food and Nutrition program. Based on the number of meals served and current menu, Food service is projected to exceed the overall value of the contract.

Vendor Number: 43356
Vendor Name: Thurston Foods
Vendor Address: 30 Thurston Drive, Wallingford CT 06492

Change Order Purpose ☒ Increase Compensation ☐ Time Extension
 ☐ Decrease Compensation ☐ Time Decrease

Original Contract Amount	\$2,200,000
Change Order #1	\$ 150,000

New Amount of Contract	\$2,350,000

Funding Source: 25215200-55587
Food Service

CITY OF NEW HAVEN

CONTRACT CHANGE ORDER (CO)


1	Please provide an overview of this CO (please pay particular attention to sections 17,18,19)												
	Increase in funds needed to continue to provide nutritious meals to the New Haven Public School district.												
2	CONTRACT TITLE:		Grocery										
3	CONTRACT #.:		2022-04-1442		CO#				CO DATE:				
4	CONTRACTOR:		Thurston Foods						VENDOR CODE: 43356				
5	Contractor EMAIL:		tim.thurston@thurstonfoods.com						PROJECT No.:				
6	7-1-2022								6-30-2023				
	CONTRACT START DATE:		DATE UNCHANGED		DATE INCREASED		DATE DECREASED		CONTRACT END DATE:				
7	FUNDING SOURCE OF CONTRACT:		25215200-55587						C A P O #:				
8	FUNDING SOURCE CO:		25215200-55587						C A P O #:				
9	ORIGINAL AWARDED AMOUNT:		2,200,000.00										
10	CONTRACT AMOUNT PRIOR TO THIS CO:		2,200,000.00										
11	AMOUNT OF THIS CO:		150,000.00					ACTUAL		<input type="checkbox"/>	ESTIMATE		<input checked="" type="checkbox"/>
INCREASE								<input checked="" type="checkbox"/>	DECREASE		<input type="checkbox"/>		
12	NEW CONTRACT AMOUNT:		2,350,000.00										

21	CHANGE ORDER HISTORY		CONTRACT #	2022-04-1442
22	PREVIOUS CHANGE ORDERS:		AMOUNT	AMOUNT
CO #	Date	DESCRIPTION in lieu of CO memo If you need more line attach a separate page	INCREASE	(DECREASE)
SUB TOTALS				
NET INCREASE / (DECREASE)				

23 ITEM	THIS CHANGE ORDER Brief description (attach quotes etc.)	AMOUNT INCREASE	AMOUNT (DECREASE)
	Increase in funds needed to continue to provide nutritious meals to the New Haven Public School district.	150,000.00	
SUB TOTALS		150,000.00	-
NET INCREASE / (DECREASE)		150,000.00	

Signature Page to follow

24	2022-04-1442		
	Contract Number:	CO #	DATE:

ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT.		
 Timothy J. Thurston	Account Representative	3/17/23
DULY AUTHORIZED CONTRACTOR'S SIGNATURE:	TITLE:	DATE:

BY SIGNING BELOW, WE CERTIFY THAT THIS CHANGE ORDER HAS BEEN REVIEWED BY THE APPROPRIATE PARTIES AND FOUND TO BE IN COMPLIANCE WITH THE RULES, REGULATIONS AND POLICIES OF OUR INDIVIDUAL DEPARTMENTAL REQUIREMENTS.	
REQUESTING AGENCY DEPARTMENT HEAD SIGNATURE:	DATE
SMALL CONTRACTOR DEVELOPMENT SIGNATURE:	DATE
COMMISSION ON EQUAL (CEO) SIGNATURE:	DATE
CAPO REVISED AND APPROVED SIGNATURE:	DATE
PURCHASING AGENT SIGNATURE:	DATE
OFFICE OF CORPORATION COUNSEL: - APPROVED TO FORM & CORRECTNESS.	DATE
CONTROLLER: - CERTIFIED AS TO SUFFICIENCY OF APPROPRIATION OR AVAILABILITY OF FUNDS	DATE

This section is utilized when and as needed:		
24	ENGINEER/ARCHITECT:	COMPANY/FIRM:
		DATE: