

**Philadelphia Corporation for Aging  
Meal Services for Congregate Meal Program  
FY2027 – FY2029 (July 1, 2026, through June 30, 2029)**

**Bid Price Sheet - Nonkosher**

The bid price and unit cost analysis sheet must be fully completed for each meal category. The forms cannot be altered. Any substantive alteration to the RFP forms will automatically disqualify an applicant. The submitted forms will be kept confidential, and information shared therein will not be shared with other applicants. Prices submitted must remain at a firm maximum for a period of 90 days after submission of price bids.

Applicants should stamp or label these forms with the word “Confidential” and submit them as a separate encrypted file.

Name of Applicant: \_\_\_\_\_

The average number of days per year for this category is 250.

Number of Meals Per Day	Total Unit Price*
900 – 1,000	

**\*Total Unit Price must match Total Unit Price on Unit Price Analysis Sheet**

\_\_\_\_\_  
Authorized Signature and Title of Applicant

\_\_\_\_\_  
Date

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**Unit Price Analysis Sheet – Nonkosher**

The Unit Price Analysis Sheet must accompany the Bid Price Sheet.

Name of Applicant: \_\_\_\_\_

Food Cost	Unit Cost	%
A. Meat		
B. Vegetable/Fruit		
D. Bread/Grain		
E. Dessert		
F. Butter/Substitute		
G. Milk		
H. Miscellaneous Foods		
<b>Total Food Cost</b>		
Non-food Cost		
A. Labor		
B. Paper Goods/Packaging Materials		
C. Transportation		
D. Delivery Equipment		
E. Overhead		
F. Profit		
G. Nutrition Education		
<b>Total Non-food Cost</b>		
<b>Total Unit Price*</b>		

**\*Total Unit Price = Total Food Cost + Total Non-food Cost**

\_\_\_\_\_  
Authorized Signature and Title of Applicant

\_\_\_\_\_  
Date



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**Bid Price Sheet – Nonkosher Grab and Go**

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Name of Applicant: \_\_\_\_\_

The average number of days per year for this category is 250.

Number of Meals Per Week	Total Unit Price*
1,000 – 3,000	

**\*Total Unit Price must match Total Unit Price on Unit Price Analysis Sheet**

\_\_\_\_\_  
Authorized Signature and Title of Applicant

\_\_\_\_\_  
Date

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**Unit Price Analysis Sheet – Nonkosher Grab and Go**

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G. Milk		
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<b>Total Food Cost</b>		
Non-food Cost		
A. Labor		
B. Paper Goods/Packaging Materials		
C. Transportation		
D. Delivery Equipment		
E. Overhead		
F. Profit		
G. Nutrition Education		
<b>Total Non-food Cost</b>		
<b>Total Unit Price*</b>		

**\*Total Unit Price = Total Food Cost + Total Non-food Cost**

\_\_\_\_\_  
Authorized Signature and Title of Applicant

\_\_\_\_\_  
Date

