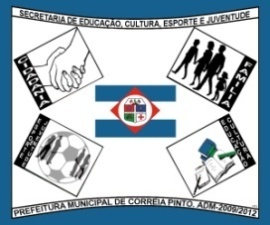
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| PREFEITURA MUNICIPAL DE CORREIA PINTO  **SECRETARIA DE EDUCAÇÃO, CULTURA,**  **ESPORTE E JUVENTUDE**  **Av. Duque de Caxias, 1569 - Fone (0\*\*49) 243 11 50 - Corre**  **ia Pinto - SC** |



**PROJETO DE VENDA DE GÊNEROS ALIMENTÍCIOS DA AGRICULTURA FAMILIAR PARA ALIMENTAÇÃO ESCOLAR**

**PROGRAMA NACIONAL DE ALIMENTAÇÃO ESCOLAR**

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| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Identificação da proposta de atendimento ao edital/chamada pública nº----------- | | | | | | | | | | | | **I – IDENTIFICAÇÃO DOS FORNECEDORES** | | | | | | | | | | | | **A – Grupo Formal** | | | | | | | | | | | | 1. Nome do Proponente | | | | | | | 2. CNPJ | | | | | 3. Endereço | | | 4. Município | | | | 5.CEP | | | | | 6. Nome do representante legal | | | 7.CPF | | | | 8.DDD/Fone | | | | | 9.Banco | | | 10.Nº da Agência | | | | 11.Nº da Conta Corrente | | | | | **B – Grupo Informal** | | | | | | | | | | | | 1. Nome do Proponente : | | | | | | | | | | | | 3. Endereço: | | | | 4. Município: **Correia Pinto** | | | | | 5.CEP:**88535-000** | | | 6. Nome da Entidade Articuladora:  **Secretaria Municipal de Educação, Cultura, Esportes e Juventude** | | | | | 7.CPF : | | | | 8.DDD/Fone: | | | **C – Fornecedores participantes (Grupo Informal)** | | | | | | | | | | | | 1. Nome | 2. CPF | 3. DAP | | | | 4. Nº. da Agência | | Banco | | 5. Nº. Conta Corrente | |  |  |  | | | |  | |  | |  | |  |  |  | | | |  | |  | |  | |  |  |  | | | |  | |  | |  | |  |  |  | | | |  | |  | |  | |  |  |  | | | |  | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **II – IDENTIFICAÇÃO DA ENTIDADE EXECUTORA DO PNAE/FNDE/MEC** | | | | | | | | | | | | | | | | 1. Nome da Entidade  **Prefeitura Municipal de Correia Pinto** | | | | | | | | 2. CNPJ  **75438655/0001-45** | | | 3 .Município  **Correia Pinto** | | | | | 4. Endereço  **Av. Duque de Caxias, 1569** | | | | | | | | | | | 5. DDD/Fone  **(49) 32431150** | | | | | 6. Nome do representante e e-mail  **Secretaria Municipal de Educação /Setor de merenda escolar / educaçãocp@hotmail.com** | | | | | | | | | | | | | 7 .CPF  ------------------- | | | **III – RELAÇÃO DE FORNECEDORES E PRODUTOS** | | | | | | | | | | | | | | | |  | 1. Nome do Agricultor Familiar | | 2. Produto | | 3.Unidade | | 4.Quantidade | | 5.Preço/Unidade | | | 6.Valor Total | | | |  |  | |  | |  | |  | |  | | |  | | | |  |  | |  | |  | |  | |  | | |  | | | |  |  | |  | |  | |  | |  | | | Total agricultor | |  | | **Total do projeto** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | **IV – TOTALIZAÇÃO POR PRODUTO** | | | | | | | | | | | | | | | |  | | 1. Produto | | 2.Unidade | | 3.Quantidade | | | | 4.Preço/Unidade | | 5.Valor Total por Produto | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |  | |  | |  | |  | | | |  | |  | | | |
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