

REPORT OF VENDING FACILITY PROGRAM

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State INDIANA Agency FSSA/DDARS/BVIS October 1, 2003 to September 30, 2004

I. EARNINGS AND EMPLOYMENT

	TOTAL (1)	CAFE (2)	SNACK BAR (3)	VEND. MACH. (4)	OTHER (5)
1. Gross Sales	\$7,992,784.00	\$0.00	\$1,167,146.00	\$6,825,638.00	\$0.00
2. Less: Merchandise Purchases	\$3,975,766.00	\$0.00	\$589,804.00	\$3,385,962.00	\$0.00
3. Gross Profit	\$4,017,017.00	\$0.00	\$577,341.00	\$3,439,676.00	\$0.00
4. Less: Other Oper. Expenses	\$1,738,286.00	\$0.00	\$233,255.00	\$1,505,031.00	\$0.00
5. Operating Profit	\$2,278,731.00	\$0.00	\$344,086.00	\$1,934,645.00	\$0.00
6. Vending Machine & Other Income	\$22,369.00	\$0.00	\$151.00	\$22,218.00	\$0.00
7. Net Proceeds	\$2,301,100.00	\$0.00	\$344,237.00	\$1,956,863.00	\$0.00
8. Less: Funds Set Aside	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9. Net Profit to Vendors	\$2,301,100.00	\$0.00	\$344,237.00	\$1,956,863.00	\$0.00
10. Fair Min. Return to Vendors	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11. Vendors Earnings (L. 9+10)	\$2,301,100.00	\$0.00	\$344,237.00	\$1,956,863.00	\$0.00
12. Vendors Person Years of Employment	65.50	0.00	5.00	60.50	0.00
13. Number of Other Visually Handicap. Persons Employed	5	0	1	4	0
14. Number of Other Handicap. Persons Employed	3	0	0	3	0
15. Number of Non-Handicap. Persons Employed	72	0	5	67	0

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II. VENDING FACILITIES AND VENDORS

	TOTAL (1)	CAFE (2)	SNACK BAR (3)	VEND MACH. (4)	OTHER (5)
A. FACILITIES ON FEDERAL PROPERTY					
1. Number at Beginning of Year	46	0	3	43	0
2. Number Established during Year	0	0	0	0	0
3. Number Closed during Year	0	0	0	0	0
4. Number at End of Year	46	0	3	43	0
B. FEDERAL LOCATIONS BY FEDERAL AGENCY, END OF YEAR					
1. General Services Administration	16	0	2	14	0
2. U.S. Postal Service	25	0	1	24	0
3. Department of Defense	2	0	1	1	0
4. Health and Human Services	0	0	0	0	0
5. All Other Federal Agencies (Identify Below)-names spelled out	3	0	2	1	0
6. Total (lines 1 through 5)	46	0	5	41	0
C. VENDORS ON FEDERAL PROPERTY					
1. Number at Beginning of Year	30	0	3	27	0
2. Number Entering during Year	0	0	0	0	0
3. Number Leaving during Year	0	0	0	0	0
4. Number at End of Year	30	0	3	27	0

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	TOTAL (1)	CAFE (2)	SNACK BAR (3)	VEND MACH. (4)	OTHER (5)
D. FACILITIES ON PUBLIC PROPERTY (State, County, Municipal)					
1. Number at Beginning of Year	85	0	7	78	0
2. Number Established during Year	6	0	0	6	0
3. Number Closed during Year	2	0	2	0	0
4. Number at End of Year	89	0	5	84	0
E. VENDORS ON PUBLIC PROPERTY (State, County, Municipal)					
1. Number at Beginning of Year	42	0	6	36	0
2. Number Entering during Year	6	0	0	6	0
3. Number Leaving during Year	1	0	1	0	0
4. Number at End of Year	47	0	5	42	0
F. FACILITIES ON PRIVATE PROPERTY (State, County, Municipal)					
1. Number at Beginning of Year	4	0	0	4	0
2. Number Established during Year	1	0	0	1	0
3. Number Closed during Year	0	0	0	0	0
4. Number at End of Year	5	0	0	5	0
G. VENDORS ON PRIVATE PROPERTY (State, County, Municipal)					
1. Number at Beginning of Year	3	0	0	3	0
2. Number Entering during Year	1	0	0	1	0
3. Number Leaving during Year	0	0	0	0	0
4. Number at End of Year	4	0	0	4	0

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III. PROGRAM EXPENDITURES

	TOTAL (1)	CAFE (2)	SNACK BAR (3)	VEND. MACH. (4)	OTHER (5)
A. SELECTED CATEGORIES BY TYPE OF FACILITY					
1. Establish New Facilities	300,000.00	\$0.00	\$0.00	300,000.00	\$0.00
2. Maintenance of Equipment	\$8536.00	\$0.00	\$0.00	\$0.00	8536.00
3. Replacement of Equipment	1,351,345.00	\$0.00	\$0.00	\$300,000.00	\$0.00
4. Refurbish Facilities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

	TOTAL (1)	VEND. MACH.INC.		SET- ASIDE (4)	STATE (5)	FED (6)
		FED (2)	N-FED (3)			
B. ALL CATEGORIES BY SOURCE OF FUNDS						
1. Purchase of New Equipment	300,000.00					300,000.00
2. Maintenance of Equipment	8536.00				1818.00	6718.00
3. Replacement of Equipment	1,351,345.0		287836.00			1063509.00
4. Refurbish Facilities	0					
5. Management Services	241,376.00				51,414.00	189,962.00
6. Fair Minimum Return	0					
7. Retirement/Pension Programs	0					
8. Health Insurance Programs	0					
9. Paid Sick Leave/Vacation Time	0					
10. Initial Stock & Supplies	0					
11. All Other Expenditures	0					
12. TOTAL (Sum lines 1 through 11)	1,901,257.0		287,836.00		53,232.00	1,560,189.0

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IV. ACCOUNTABILITY OF PROGRAM FUNDS COLLECTED

	TOTAL (1)	VEND. MACH.INC.		SET- ASIDE (4)
		FED (2)	N-FED (3)	
1. Amount on Hand at Beginning of Year	864,190.00		864,190.00	
2. Funds Added during Year	226,712.00		226,712.00	
3. Total Funds Available (lines 1÷2)				
4. Total Funds Expended	287,836.00		287,836.00	

V. VENDING MACHINE FUNDS COLLECTED

	TOTAL (1)	FEDERAL PROPERTY		NON- FEDERAL PROPERTY (4)
		ALL (2)	GSA (3)	
1. Total (lines 2÷3)	226,712.00			226,712.00
2. Amount Distributed to Vendors				
3. Amount Retained by Agency for Set- Aside and Other Purposes	*226,712.00			226,712

* WE DO NOT HAVE AGENCY SET ASIDE.

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VI. NUMBER OF SITES SURVEYED

	TOTAL (1)	FEDERAL PROPERTY (2)	N-FED PROPERTY (3)
1. Total (Sum lines 2 through 7)	10	0	10
2. Accepted for Vending Facility Site	7		7
3. Not Accepted Due to Infeasibility of Site	3	3	
4. Not Accepted Due to Lack of Funds by State	0		
5. Denied by Property Management Official	0		
6. Not Accepted Due to Lack of Qualified Vendors	0		
7. Decision Pending	0		

VII. TRAINING

1. Individuals Provided Initial Training: (lines A+B+C+D)	4	
a. Number Licensed and Placed Vendors	1	McClearly
b. Number Certified Awaiting Placement as Vendors	3	Thompson, Huckabee, Smith
c. Number Placed as Employees in the VF Program	0	
d. Number Employed in Allied Food Service Occupations	0	
2. Number of Vendors Provided In-Service Training	5	
3. Number of Vendors Provided Upward Mobility Training: (Total)	1	Randy McCullough FWD
a. Number Advanced in the Program	4	Schafer, Sutton, McCullough, McClearly
b. Number Awaiting Advancement	0	

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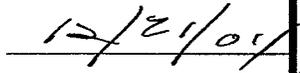
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VIII. STATE AND NOMINEE AGENCY PERSON YEARS ASSIGNED TO THE VENDING FACILITY PROGRAM 6.2

IX. VENDING LOCATIONS UNDER THE INTERSTATE HIGHWAY PROGRAM (Intermodal Surface Transportation Efficiency Act)

	TOTAL NUMBER (1)	TOTAL VENDING MACHINE RECEIPTS (2)
1. Total Vending Locations	35	\$3,151,034.80
2. Locations Operated by Vendors	25	\$2,559,308.75
3. Vendors Employed in Highway Program	24	

CERTIFICATION: I do hereby certify that, to the best of my knowledge, the information given in this report is complete and accurate.

	
Signature of Authorized Official	Date