UNITED STATES DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES REHABILITATION SERVICES ADMINISTRATION WASHINGTON, DC 20202

> POLICY DIRECTIVE RSA-PD-04-03 RSM-3015 Date: September 21, 2004

ADDRESSEES: STATE VOCATIONAL REHABILITATION AGENCIES (GENERAL) STATE VOCATIONAL REHABILITATION AGENCIES (BLIND) CLIENT ASSISTANCE PROGRAMS REGIONAL REHABILITATION CONTINUING EDUCATION PROGRAMS (RRCEPS) RSA SENIOR MANAGEMENT TEAM

**SUBJECT:** Form RSA-15, Report of Vending Facility Program for Reporting Fiscal Year 2004 Data

POLICY

**STATEMENT:** The Office of Management and Budget (OMB) has approved the RSA-15 Reporting Form for use by the Rehabilitation Services Administration (RSA) until July 31, 2005, under the Paperwork Reduction Act of 1995. The OMB number is 1820-0009.

> All State agencies that are responsible for the administration of the Randolph-Sheppard Vending Facility Program are required to submit the completed Form RSA-15 within 60 days after the close of the period covered by the report. Attached for your assistance is a copy of the Form with its instructions for use in submitting FY 2004 data.

Please forward one copy of the completed report to your RSA Regional Commissioner and one copy to the U.S. Department of Education, Office of Special Education and Rehabilitative Services, Blind and Visually Impaired Division, ATTN: Cynthia K. Lewis, Room 5033, 400 Maryland Avenue, SW, Washington, DC 20202-2800.

If you have any questions about the completion of the Form RSA-15, contact the Randolph-Sheppard Program Specialist in your RSA Regional Office.

CITATIONS

**IN LAW:** Randolph-Sheppard Act Section 3(4)

CITATIONS IN REGULATIONS: 34 CFR 395.3

INQUIRIES TO: RSA REGIONAL COMMISSIONERS

Joanne M. Wilson Commissioner, RSA

Attachments

\_\_\_\_\_

#### Form RSA – 15: REPORT OF VENDING FACILITY PROGRAM

#### **REPORTING INSTRUCTIONS**

#### I. EARNINGS AND EMPLOYMENT

Part I will provide a summary of the earnings and employment generated by the Vending Facility program during the fiscal year. Its informational value cannot be overstressed.

All data elements in Part I are broken down into the following four categories of vending facilities established under the authority of the Act--Cafeteria, Snack Bar, Vending Machines, and Other.

#### Definitions:

Cafeteria,

A food dispensing facility capable of providing a broad variety of prepared foods and beverages (including hot meals) primarily through the use of a line where the customers serve themselves from displayed selections.

#### Snack Bar,

A facility engaged in selling limited lines of refreshment and prepared food items necessary for a light meal service, such as soups, salads and sandwiches. Food and refreshment items may be prepared on or off the premises and usually are wrapped or placed in containers at point of sale. There is an on-site manager and customers may or may not be provided with eating accommodations.

#### Vending Machine,

An automated coin or currency operated facility which dispenses a variety of food and refreshment items and services. The licensed vendor is responsible for the complete management of the machines and the area in which they are located. The vendor must provide such functions as loading and servicing such machines and other necessary customer-related services. Included in this category would be interstate highway locations and vending machine routes.

Other,

All types of facilities which are not included under the cafeteria, snack bar or vending machine definitions.

#### Gross Sales (Line1)

Enter, by the type of facility, the gross sales, that is, the total amount of money received from customers for goods and services sold.

#### Less Merchandise Purchases (Line 2)

Enter, by type of facility, the cost of merchandise purchases, that is, the total value of the inventory on hand at the beginning of the year, in terms of the cost paid for the goods; add the dollar amount of goods purchased during the year; and then subtract the total value of goods on hand at the close of the year.

#### Gross Profit (Line 3)

Enter, by type of facility, the gross profit, that is, the difference between what the goods were sold for and what was paid for them (Line 1 minus Line 2).

#### Less Other Operating Expenses (Line 4)

Enter, by type of facility, other operating expenses, that is, all other costs excluding merchandise purchases incurred in carrying on the business.

Other operating expenses, as far as the Vending Facility program is concerned, are the non-reimbursed expenditures by the vendors for the State agency-approved payments for the following: equipment, maintenance and repairs, supplies, wages to assistants and relief workers, rent, utilities, pest control, delivery services, cleaning services, insurance,

licenses, and state and local taxes. Operating expenses should not include levied set-aside charges or expenses defrayed by the State licensing agencies.

#### Operating Profit (Line 5)

Enter, by type of facility, the operating profit, that is, the amount gained from the operation of the business (Line 3 minus Line 4).

#### Vending Machine and Other Income (Line 6)

Enter, by type of facility, the vending machine income (not part of direct sales) distributed to the vendors, and any income accruing to the vending facilities from subsidies or other sources. Do not include fair minimum return paid to the vendors.

#### Net Proceeds (Line 7)

Enter, by type of facility, the net proceeds, that is, operating profit plus the income from vending machines and other sources (Line 5 + Line 6).

#### Less Funds Set Aside (Line 8)

Enter, by type of facility, the amount of funds set aside. Set-aside funds are assessed against the net proceeds of each vending facility and accrue to the State-licensing agency for the program purposes set forth in the State's regulations.

Set-aside funds are an item in the financial statement unique to the Vending Facility program. The amount reported in Column (1) should agree with the amount shown in part IV, Line 2, Column (4). If the figures don't agree, please provide an explanation.

#### Net profit to Vendors (Line 9)

Enter, by type of facility, the amount of net profit to the vendors. Net profit to vendors equals net proceeds less funds set aside (Line 7 minus Line 8).

Fair Minimum Return to Vendors (Line 10)

Enter, by type of facility, the fair minimum return payments to vendors. Fair minimum return, which is optional with each State agency, is the amount which may be paid to vendors from set-aside funds in order to provide a uniform minimum income to all vendors under the program.

#### Vendors Earnings (Line 11)

Enter, by type of facility, the amount of vendors earnings. One of the most important data elements in the financial statement, vendors earnings equal net profit to vendors plus fair minimum return (Line 9 + Line 10).

If you wish to determine the vendors average annual earnings, divide the vendors total earnings (Line 11) by the number of vendor person years (Line 12).

#### Vendor Person Years of Employment (Line 12)

Enter, by type of facility, the number of vendor person years. To compute the number of vendor person years, add the number of months each vendor worked (disregard fractions of a month of two weeks or less) and divide by 12. Example: vendor A worked 12 months, vendor B 6 months, and vendor C 9 months, total months worked, 27; 27 divided by 12 equals 2.25; number of vendor person years equals 2.25.

#### Number of Other Visually Disabled Persons (Line 13)

Enter, by type of facility, the actual number of visually disabled persons provided employment in the program. Please note, this is not "person years" but the actual integer number of visually disabled persons provided employment as of September 30 (the end of the fiscal year).

#### Number of Other Disabled Persons (Line 14)

Enter, by type of facility, the actual number of other disabled persons provided employment in the program. Please note this is not "person years" but the actual integer number of other disabled persons provided employment as of September 30 (the end of the fiscal year).

#### Number of Non-Disabled Persons Employed (Line 15)

Enter, by type of facility, the total integer number of non-disabled persons employed.

#### II. NUMBER OF VENDING FACILITIES AND VENDORS

The numbers of vending facilities and vendors are indicators of program growth, and are reported by type of facility and by Federal, public and private locations. Part II contains seven sections.

#### **Definitions**

Federal property,

A facility operated by a blind vendor under the Vending Facility program on "any building, land or... real property owned, leased or occupied by any department, agency or instrumentality of the U.S..." (Regs. Sect. 395.1).

Public Property,

A facility operated by a blind vendor under the Vending Facility program on State, municipal or county property.

Private Property,

A facility operated by a blind vendor under the Vending Facility program on private property.

### A. VENDING FACILITIES ON FEDERAL PROPERTY

Facilities at Beginning of the Year (Line 1)

Enter, by type, the number of facilities at the beginning of the fiscal year. This number must equal the number of facilities at the end of the previous fiscal year.

#### Number Established During Year (Line 2)

Enter, by type, the number of facilities established during the fiscal year. The number of facilities established should include both new facilities and the acquisition of existing facilities previously not in the program.

Number Closed During Year (Line 3)

Enter, by type, the number of facilities closed during the fiscal year.

Number at End of the Year (Line 4)

Enter, by type, the number of facilities remaining at the end of the fiscal year. This number equals Line 1 + Line 2, minus Line 3. The numbers shown on Line 4, Columns (1), (2), (3), (4) and (5) should be the same as the numbers shown in Part II. B. Line 6, Columns (1) through (5).

B. FEDERAL LOCATIONS, BY FEDERAL AGENCY

Enter, by type, the number of vending facilities remaining at the end of the fiscal year for each Federal agency listed that grants the permit or contract by which the SLA is authorized to establish a vending facility, namely:

<u>General Services Administration</u> (Line 1) <u>U.S. Postal Service</u> (Line 2) <u>Department of Defense</u> (Line 3) <u>Health and Human Services</u> (Line 4) <u>All Other Federal Agencies</u> (Line 5)

Total (Line 6)

Enter, by type of facility, the total of lines 1 through 5. These totals should be the same as the totals in Part II. A. Line 4, Columns (1) through (5).

C. VENDORS ON FEDERAL PROPERTY

Number at Beginning of Year (Line 1)

Enter, by type of facility, the number of vendors at the beginning of the year. This number must equal the number of vendors at the end of the previous fiscal year.

Number Entering During Year (Line 2)

Enter, by type of facility, the number of vendors entering the program during the fiscal year.

Number Leaving During Year (Line 3)

Enter, by type of facility, the number of vendors leaving during the fiscal year.

Do not report as "Vendors leaving" when a vendor transfers from facilities on Federal property to facilities on non-Federal property during the fiscal year. Transfers will be reflected in the end of year balance.

Number at End of the Year (Line 4)

Enter, by type of facility, the number of vendors remaining at the end of the fiscal year (Line 1 + Line 2 minus Line 3).

The number on Line 4 may not agree if there were transfers between Federal and public or private locations which would affect the actual count. If this has occurred, simply asterisk the figure and explain the transfer in an attachment to the form.

D. FACILITIES ON PUBLIC PROPERTY (STATE, COUNTY, MUNICIPAL)

Lines 1, 2, 3, 4 use the same instructions as for Lines I, 2, 3, 4 of Part II A.

#### E. VENDORS ON PUBLIC PROPERTY

Lines 1, 2, 3, 4 use the same instructions as for Lines 1, 2, 3, 4 of Part II C.

#### F. FACILITIES ON PRIVATE PROPERTY

Lines 1, 2, 3, 4 use the same instructions as for Lines 1, 2, 3, 4 of Part II A.

#### G. VENDORS ON PRIVATE PROPERTY

Lines 1, 2, 3, 4 use the same instructions as for Lines 1, 2, 3, 4 of Part II C.

#### **III. PROGRAM EXPENDITURES**

Part III contains two sections.

#### A. <u>Selected Categories by Type of Facility</u>

This section is designed to collect specific data by facility type for four categories of expenditure. The purpose is to evaluate cost-effectiveness of establishment, maintenance, equipment replacement and refurbishment of the various types of facilities.

NOTE: For definitions see Section B under this part.

#### Establish New Facilities (Line 1)

Enter, by type of facility, the total cost of establishing all the facilities that were opened during the fiscal year. Include costs incurred in the prior year for facilities opened during the current fiscal year. Any cost figures reported in A, Line 1, Columns (1)(2)(3)(4) (5) must be supported by number of facilities established in Columns (1)(2)(3)(4) (5) of Part II A2, D2 and F2.

#### Maintenance of Equipment (Line 2)

Enter, by type of facility, the cost of maintaining the equipment in good repair. The cost amount in Line 2, Col. (1) of Section A should be identical to that of Section B, Line 2, Col. (1).

#### Replacement of Equipment (Line 3)

Enter, by type of facility, the cost of replacement of equipment. The cost amount of Line 3, Col. (1) of Section A should be identical to that of Section B, Line 3, Col. (1).

#### Refurbish Facilities (Line 4)

Enter, by type of facility, the cost of refurbishing the facilities. Include costs incurred in prior year refurbished facilities which were completed and counted during this current fiscal year. Therefore, the cost amount in Line 4, Col. (1) of Section A may be different from that in Section B, Line 4, Col. (1).

#### B. All Categories by Source of Funds

This section is designed to collect, for accountability purposes, comprehensive information on all program expenditure categories by source of funds during the fiscal year. The Vending Facility program has four different sources of funding expenditure categories. They are: set-aside funds from the net proceeds of the vending facilities (levied set-aside), the machine income that is not assigned to the vendors, the appropriately matched Federal funds, and State funds. Federal law and regulations set forth the purposes for which funds from the different sources may be used. The four funding sources are used for the expenditure categories as follows:

#### Purchase of New Equipment (Line 1)

Enter, by source of funds, the cost of new equipment purchased for the program during the fiscal year. This would include equipment purchased for new facilities and new equipment for existing facilities. All four sources of funding may be used to finance the cost of new equipment.

#### Maintenance of Equipment (Line 2)

Enter, by source of funds, the cost (except when paid directly by the vendor) of maintaining the equipment in good repair. Report the cost of normal maintenance,

that is, the cost for repairs directed primarily at keeping the facilities operational in their various components. Examples would include the purchase of a new compressor

for a refrigerator, the replacement of glass in a showcase, the painting of counters and shelves not for refurbishing purposes but as simple normal maintenance. Figures reported on Line 2, Col. (1) of Section B should be identical to those reported on Line 2, Col. (1) of Section A.

#### Replacement of Equipment (Line 3)

Enter, by source of funds, the cost for replacement equipment. Only total replacements--a new refrigerator, various units of equipment replaced at one time, counters replaced in total and the like--will be considered replacement for our purpose. The purpose of replacement is to keep the facility operational. Federal funds may be used for replacement of equipment. The figures reported on Line 3, Col. (1) of Section B should be identical to the ones reported on Section A, Line 3, Col. (1).

#### Refurbishing Facilities (Line 4)

Enter, by source of funds, the cost of refurbishing the existing facilities which were expended only during the current fiscal year. Painting, remodeling, changing the

layout design, upgrading the equipment as part of a process whereby the facilities are being redecorated or renovated for the purpose of improving their appearance and efficiency would be typical examples of refurbishing. Expenditures shown in this category should not be repeated or duplicated on any other line in this section.

#### Management Services (Line 5)

Enter, by source of funds, the amount of expenditures made during the year for management services. Management services include supervision, inspection, regulating,

quality control, consultation, accounting, in-service training and related services necessary to support and improve the operation. These costs include salary and expenses of all management services staff, such as supervisors, BEP counselors, accountants, secretaries, etc. This category also includes the development of new locations, and activities related to the selection and operation of the State Committee of Blind Vendors. Costs for the ongoing operation of the facility, after it has been established, should not be charged to management services.

#### Fair Minimum Return (Line 6)

Enter, by source of funds, the amount of expenditures made during the year for the payment of a fair minimum return to vendors that provides a uniform minimum income to all vendors under the program. Federal funds are not allowed for fair minimum return payments. The amount shown on Line 6, Column (1) should equal the amount shown in Part I, Section A, Line10, Column (1).

#### Retirement/Pension Programs (Line 7)

Enter, by source of funds, the amount of expenditures made during the fiscal year for a retirement or pension program. Note that Federal funds may not be used for this purpose.

#### Health Insurance Programs (Line 8)

Enter, by source of funds, the amount of expenditures made during the fiscal year for a health insurance program for vendors. Note that Federal funds may not be used for this purpose.

#### Paid Sick Leave/Vacation Time (Line 9)

Enter, by source of funds, the amount of expenditures made during the fiscal year for paid sick leave and vacation time for vendors. Note that Federal funds may not be used for this purpose.

#### Initial Stock and Supplies (Line 10)

Enter, by source of funds, the amount of expenditures made during the fiscal year for initial stock and supplies for facilities. Also, when a change in vendors occurs in a facility, this Line item should reflect funds expended to bring inventory to an acceptable operating level. Note that set-aside funds and machine income accruing from machines on Federal property may

not be used for this purpose.

#### All Other Expenditures (Line 11)

Enter all other expenditures made during the fiscal year from State funds and non-Federal vending machine income.

Totals (Line 12)

Enter, by source of funds, the sum of lines 1 through 11. Make sure of the following:

- Line 12, Column (2) equals the figure shown in Part IV, Line 4, Column (2).

- Line 12 Column (3) equals figure shown in Part IV, Line 4, Column (3).

- Line 12, Column (4) must equal the figure shown in Part IV, Line 4, Column (4).

- The totals of Line 12, Columns (2), (3), and (4) must equal the figure shown in Part IV, Line 4, Column (1).

#### IV. ACCOUNTABILITY OF PROGRAM FUNDS COLLECTED

The accountability applies to the two sources of program funds, namely, vending machine income and levied set-aside fees. Vending machine income is separated into two columns showing Federal and non-Federal.

Vending machine income is revenue accruing to a State licensing agency from vending machines located on Federal property (Federal Regulations) and non-Federal property (State Regulations). The non-Federal category would include vending machine income from interstate highway rest stops authorized by the Surface Transportation Assistance Act.

Levied set-aside fees are funds which accrue to a State-licensing agency from an assessment against the net proceeds of each Federal and non-Federal location under the Program.

#### Amount on Hand at Beginning of Year (Line 1)

Enter, by source of funds, the amount on hand at the beginning of the fiscal year. This amount should equal the amount remaining at the end of the previous fiscal year.

#### Funds Added During Year (Line 2)

Enter, by source of program funds, the amount added during the fiscal year. The amount reported on Line 2, Column (2) should be the same as the amount reported in Part V, Line 3, Column (2) and the amount on Line 2, Column (3) should be the same as reported in Part V, Line 3, Column (4).

Total Funds Available (Line 3)

Enter, by source of program funds, the sum of lines 1 and 2.

Total Funds Expended (Line 4)

Enter, by source of program funds, the amount expended during the fiscal year.

Make sure that the amount in Part IV Column (2) Line 4 equals the amount in Part III B Column (2) Line 12, and that the amount in Part IV Column (3) Line 4 equals the amount in Part III B Column (3) Line 12. The amount reported in Part IV Column (4) Line 4 must equal the amount in Part III B Column (4) Line 12. Please note that Line 3 minus Line 4 will be the beginning figure for next year's report.

#### V. VENDING MACHINE INCOME COLLECTED

The data collected in Part V relates to the assignment and distribution of income from vending machines. The Act and Regulations are quite specific regarding vending machine income on Federal property.

NOTE: When reporting vending machine income funds collected, do not include the income from vending machines that are part of a vending facility.

Also note, the required additional information, namely, a total for vending machine income collected in all Federal property (Column 2) and the specific amount collected from <u>GSA</u> (General Services Administration) controlled property (Column 3). This change is necessary because State licensing agencies contract directly with private companies to provide vending machine services in GSA-controlled buildings. This figure still should not

include the income from machines that are part of a facility operated by a blind vendor.

#### Total (Line 1)

Enter the sum of Line 2 (Machine income distributed to vendors) and Line 3 (Machine income retained by the State agency).

#### Amount Distributed to Vendors (Line 2)

Enter, by type of property, the amount of machine income included in line 1 that was distributed directly to vendors (for Federal property, this is the amount assigned pursuant to the machine income distribution provision under the Act).

#### Amount Retained by the State Agency for Set-Aside and other Purposes (Line 3)

Enter, by type of property, the amount of vending machine income that is being retained by the State agency for fringe benefits, set-aside, or other purposes. The amounts reported in Columns (2) and (4) should be the same as that reported in Section IV Columns (2) and (3) Line 2.

It should be noted that there is no requirement that unassigned income accruing from vending machines on non-Federal property be retained by the State agency only for set-aside purposes.

#### VI. NUMBER OF SITES SURVEYED

The Act (Section 2(a) (2), (4)) requires the Secretary of Education to "...make annual surveys of concession vending opportunities for blind vendors on Federal and other property..." and to "... make available to the public ... information obtained as a result of such surveys". Part VI of the form RSA-15 reports the number and the outcome of the sites surveyed on Federal and non-Federal property during the fiscal year.

At a minimum, a site survey requires an on-site visit and a consultation between the State licensing agency and the management of the property being surveyed.

#### Total (Line 1)

Enter, by type of property, the total number of sites surveyed during the fiscal year (sum of Lines 2 through 7).

#### Accepted for Vending Facility Site (Line 2)

Enter, by type of property, the number of sites surveyed that were accepted by the State-licensing agency as vending facility sites.

Please note that some sites may be accepted as vending facility sites but not established during this reporting period.

#### Not Accepted Due to Infeasibility of Site (Line 3)

Enter, by type of property, the number of sites surveyed that were not accepted by the State licensing agency as vending facility sites, due to the lack of potential of the site itself.

#### Not Accepted Due To Lack of Funds by State (Line 4)

Enter, by type of property, the number of sites surveyed that were not accepted by the State licensing agency as vending facility sites, due to the State agency's lack of funds.

#### Denied by Property Management Official (Line 5)

Enter, by type of property, the number of sites surveyed that the State agency found feasible for vending facility sites but were not approved by the property management.

#### Not Accepted Due to Lack of Qualified Vendors (Line 6)

Enter, by type of property, the number of sites surveyed that were not accepted for vending facility sites by the State agency due to the lack of qualified vendors.

#### Decision Pending (Line 7)

Enter, by type of property, the number of surveys made during the fiscal year that the decision as to their acceptability is pending.

#### **VII. TRAINING**

This information is needed to determine the effectiveness of the State agencies' training programs (including vocational, on-the-job, upward mobility, and post-employment), that may help the vendors to achieve their maximum employment potential, as set forth in Section 8 of the Act.

#### 1. Individuals Provided Initial Training

#### Number Licensed and Placed as Vendors (Line 1a)

Enter the number of trainees who were licensed to operate a vending facility and were placed as vendors. This will be the total of the figures shown in Column (1) of Part II. C.2, Part II. E. 2, and Part II. G. 2.

#### Number Certified Awaiting Placement as Vendors (Line1b)

Enter the number of trainees who were certified as qualified to operate a vending facility and were waiting to be placed as vendors.

#### Number Placed as Employees in the VF Program (Line 1c)

Enter the number of trainees who were not licensed but placed as employees in the vending facility program.

#### Number Employed in Allied Food Service Occupations (Line 1d)

Enter the number of trainees who were not licensed but placed as employees in allied food service occupations.

#### Number of Vendors Provided In-Service Training (Line 2)

Enter the number of vendors who were provided in-service training during the fiscal year. In-service training is designed to maintain vendor skill levels and improve current operations. This training would generally be of short duration, such as the annual vendors' meeting during which some generic training is provided to all in attendance.

#### Number of Vendors Provided Upward Mobility Training (Line 3)

Enter the number of vendors who were provided upward mobility training during the fiscal year. Upward mobility refers to training which would enable a vendor to achieve increased skill levels necessary for transfer and promotion to more complex facilities.

#### Number Advanced in the Program (Line 3a)

Enter the number of vendors who received such training during the fiscal year and moved to a more lucrative and/or more complex facility.

#### Number Awaiting Advancement (Line 3b)

Enter the number of Vendors who were provided upward mobility training and are waiting for advancement in the program.

#### VIII. STATE AND NOMINEE AGENCY PERSON YEARS

#### **Definitions**

A State licensing agency is a State agency designated by the Commissioner of the RSA to issue licenses to blind persons for the operation of vending facilities on Federal and non-Federal property.

A Nominee agency is an agency or organization designated by the State licensing agency to act as its agent in providing services to blind licensees under the State's Vending Facility Program.

Enter the number of State and nominee agency positions in person years assigned to the Vending Facility Program. This would include persons assigned part time to the program.

Person years assigned to the Vending Facility program are the actual time the staffs were engaged in providing services to the Vending Facility Program.

Person years are developed (as in part I Line 12) by adding up the number of months each position worked for the Vending Facility Program and dividing by 12, and rounding to the nearest tenth.

Part VIII data will be indicative of manpower training needs, for a planned growth of the Vending Facility Program.

# IX. VENDING LOCATIONS UNDER THE INTERSTATE HIGHWAY PROGRAM

(Surface Transportation Assistance Act amended by the Intermodal Surface Transportation Efficiency Act of 1991 amended by the Transportation Equity Act for the 21<sup>st</sup> Century of June 9, 1998) Those amendments do not alter the content of Section 111 of the earlier legislation.

This part of the form is designed to collect specific data on vending machine locations placed in safety rest areas of the national system of interstate highways. State licensing agencies designated under the Randolph-Sheppard Act shall be given priority by the State to operate such vending machine locations.

The data in this part will provide a summary of activities directly resulting from the above-cited legislation. The information is important to determine the impact of that legislation on our program in terms of employment and revenue.

#### Total Vending Locations (Line 1)

Enter the number and total receipts of all vending locations operated under the Interstate Highway Program. Column (2) shows total vending machine receipts or profit which is generated at these locations and does not consider the gross sales of the machines.

#### Locations Operated by Vendors (Line 2)

Enter the number and total earnings of those locations shown on Line 1 which are operated by blind vendors. A vendor may operate more than one location. Note, the information on Line 2 should be included in appropriate totals under Parts I and II of the report.

#### Vendors Employed in Highway Program (Line 3)

Enter the number of blind vendors who are operating the locations shown on Line 2 of this part. Total earnings are not needed for this line.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1820-0009. The time required to complete this information collection is estimated to average 13.5 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write to the Program Specialist in your RSA Regional Office.

State	Agency	October 1, 20	003 to Septer	nber 30, 200	4	
I.	EARNINGS AND EMPLOYME			-		-
		TOTAL	CAFE.	SNACK	VEND.	OTHER
		(1)	(2)	BAR	MACH.	(5)
				(3)	(4)	
1.	Gross Sales					
2.	Less: Merchandise Purchases					
3.	Gross Profit (L. 1-2)					
4.	Less: Other Oper. Expenses					
5.	<b>Operating Profit (L. 3-4)</b>					
6.	Vending Machine & Other Income					
7.	Net Proceeds (L. 5+6)					
8.	Less: Funds Set Aside					
9.	Net Profit to Vendors (L. 7-8)					
10.	Fair Min. Return to Vendors					
11.	Vendors Earnings (L. 9+10)					
12.	Vendor Person Years of Employment					
13.	Number of Other Visually Disabled Persons Employed					
14.	Number of Other Disabled Persons Employed					
15.	Number of Non-Disabled Persons Employed					

State A	Agency	October 1, 2003 to September 30, 2004					
II. VENDI	NG FACILITIES A	AND VENI	OORS				
		TOTAL (1)	CAFE. (2)	SNACK BAR (3)	VEND. MACH. (4)	OTHER (5)	
A. FACILITIE	ES ON FEDERAL PRO	OPERTY					
1. Number at B	eginning of Year						
2. Number Esta	blished during Year						
3. Number Clos	sed during Year						
4. Number at E	nd of Year						
B. FEDERAL	LOCATIONS BY FEI	DERAL AGE	NCY, END	OF YEAR			
1. General Serv	ices Administration						
2. U.S. Postal S	ervice						
3. Department of	of Defense						
4. Health and H	Iuman Services						
5. All Other Fee (Identify Below	deral Agencies v)-names spelled out						
6. Total (lines 1	through 5)						
C. VENDORS	ON FEDERAL PROP	PERTY					
1. Number at B	eginning of Year						
2. Number Ente	ering during Year						
3. Number Leav	ving during Year						
4. Number at E	nd of Year						
						•	

State Agency		r 1, 2003 to	September	30, 2004	
	TOTAL (1)	CAFE. (2)	SNACK BAR (3)	VEND. MACH. (4)	OTHER (5)
D. FACILITIES ON PUBLIC PROP	PERTY (State	e, County, N	(Junicipal)		
1. Number at Beginning of Year					
2. Number Established during Year					
3. Number Closed during Year					
4. Number at End of Year					
E. VENDORS ON PUBLIC PROPE	RTY (State, G	County, Mu	nicipal)		
1. Number at Beginning of Year					
2. Number Entering during Year					
3. Number Leaving during Year					
4. Number at End of Year					
F. FACILITIES ON PRIVATE PRO	PERTY				
1. Number at Beginning of Year					
2. Number Established during Year					
3. Number Closed during Year					
4. Number at End of Year					
G. VENDORS ON PRIVATE PROP	ERTY				
1. Number at Beginning of Year					
2. Number Entering during Year					
3. Number Leaving during Year					
4. Number at End of Year					
III. PROGRAM EXPENDITU	JRES				

State Agency	0	ctobe	er 1, 200	3 to S	Septe	mber 3	30, 2	004	
	<b>TOTA</b> (1)	L	CAF (2)		B	ACK AR 3)		END. ACH. (4)	OTHER (5)
A. SELECTED CATEGORIES	BY TYPE C	)F FA	CILIT	Y					
1. Establish New Facilities									
2. Maintenance of Equipment									
3. Replacement of Equipment									
4. Refurbish Facilities									
	TOTAL (1)	J	END.MAC FED (2)	N-I	C. FED 3)	SET ASII (4)	DE	STATE (5)	FED (6)
<b>B. ALL CATEGORIES BY SC</b> 1. Purchase of New Equipment	OURCE OF F	FUND	S						
2. Maintenance of Equipment									
3. Replacement of Equipment									
4. Refurbish Facilities									
5. Management Services									
6. Fair Minimum Return									
7. Retirement/Pension Programs									
8. Health Insurance Programs									
9. Paid Sick Leave/Vacation									
10. Initial Stock & Supplies									
11. All Other Expenditures 12. TOTAL (Sum lines 1-11)									

State \_\_\_\_\_

Agency \_

October 1, 2003 to September 30, 2004

#### IV. ACCOUNTABILITY OF PROGRAM FUNDS COLLECTED

			VEND. MACH.INC.		LEVIED
		TOTAL (1)	FED (2)	N-FED (3)	SET-ASIDE (4)
1.	Amount on Hand at Beginning of Year				
2.	Funds Added during Year				
3.	Total Funds Available (lines 1+2)				
4.	Total Funds Expended				

#### V. VENDING MACHINE FUNDS COLLECTED

		TOTAL	FEDERAL PROPERTY		NON- FEDERAL
		(1)	ALL (2)	<b>GSA (3)</b>	PROPERTY (4)
1.	Total (lines 2+3)				
2.	Amount Distributed to Vendors				
3.	Amount Retained by Agency for Set-Aside and Other Purposes				

State

Agency

October 1, 2003 to September 30, 2004

#### VI. NUMBER OF SITES SURVEYED

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

#### VII. TRAINING

<ol> <li>Individuals Provided Initial Training: (lines a+b+c+d)</li> </ol>	
a. Number Licensed and Placed as Vendors	
b. Number Certified Awaiting Placement as Vendors	
c. Number Placed as Employees in the VF Program	
d. Number Employed in Allied Food Service Occupations	
2. Number of Vendors Provided In-Service Training	
3. Number of Vendors Provided Upward Mobility Training: (Total)	
a. Number Advanced in the Program	
b. Number Awaiting Advancement	

State

Agency

October 1, 2003 to September 30, 2004

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

#### IX. VENDING LOCATIONS UNDER THE INTERSTATE HIGHWAY PROGRAM (Transportation Equity Act for the 21st Century of June 1998)

	TOTAL NUMBER (1)	TOTAL VENDING MACHINE RECEIPTS (2)
1. Total Vending Locations		
2. Locations Operated by Vendors		
3. Vendors Employed in Highway Program		

**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