



(Year) BUSINESS ENTERPRISES PROGRAM
ANNUAL BUSINESS REVIEW

Business Number: _____

Doing Business As: _____

Licensed Blind Vendor Name: _____

Business Phone Number _____

Email: _____

Business Mailing Address: _____

Business Locations: _____

list additional locations _____

For RSA purposes;

This business is defined as a State, Federal, Private location.

What is your desired way to receive information from the BEP?

Phone, Mail, Email

Does the Licensed Blind Vendor request copies any of the following documents?

Agreements: Location agreements, Federal Permits, Operator Agreements, or Letters of Understanding

Laws and Rules: Code of Federal Regulations, Randolph Sheppard Act, MN Statute 248, MN Rule Chapter 3321

BEP Policy and Procedure Manual

P&L Ledger Review

Information Type	(Current Year)	(Prior Year)	Difference
Net Sales:			\$0.00
Sales Tax Collected:			\$0.00
Gross Sales:			\$0.00
Other Income			\$0.00
Merch. Purchases:			\$0.00
Business Expense:			\$0.00
Hired Help:			\$0.00
Commissions:			\$0.00
Operational Charges:			\$0.00
Net Profit:			\$0.00
Personal Withdrawal:			\$0.00
Rest Area Sales			\$0.00
Net Profit Margin:	#DIV/0!	#DIV/0!	\$0.00
Hired Help percentage to Net Sales (if applicable)	#DIV/0!	#DIV/0!	

Net Profit Margin is the percentage of revenue remaining after all operating expenses, interest and taxes are paid. Formula: Net Profit divided by Gross Income

Hired Help percentage to Net Sales is the percentage of net sales used to pay for hired help. It is important to be aware of this because this is income that would otherwise be the operators. While hired help may be needed more in certain BEP business models, it should be limited in others. The BEP operator is the owner of the business and should be the primary representative. Hired help expenses should never exceed the income of the BEP operator. This type of situation would be contradictory to the spirit of what the Randolph-Sheppard program was meant to be.

Licensed Blind Vendor comments on the following:

Gross Sales compared to last year-

Business Expenses compared to last year-

Does Hired Help exceed Net Profit? If yes, explain-

Do Personal Withdrawals exceed Net Profit? If answered yes, why?

Opportunities and challenges with this business; any expected changes in the upcoming year?

Are inspection stickers placed on machines?

What has been the impact of any expansions or machine changes, if applicable?

Are you interested in expanding this business? If so, what opportunities exist?

Do you have Calorie Disclosure Information posted on vending machines? (20 or more machines). If no, explain.

Is vendor current on their financial obligations to the BEP? (If no, explain):

Are monthly commission/utility payments up to date (if applicable)?

Additional vendor comments (communication requests, assistive technology needs, ideas, equipment training, etc.):

Equipment request(s) and justification(s)

Please provide the following to Management Coordinator:

Workers' Compensation Insurance Requirement Form

Workers' Compensation, ACORD (If applicable)

Personal Asset Inventory Form

Copy of Food Handlers License, Department of Agriculture
(651-201-6062 or 1-800-967-2474), mda.licensing@state.mn.us

Emergency Contact Form

Proof of vending machine inspection stickers

Ask for spare parts that need to be returned

Other:

Vendor Fringe Benefit balance:

Asset Inventory: See Attachment

Management Coordinator comments:

<u>Follow Up Item(s)</u>	<u>Responsible Party</u>	<u>Due Date</u>	<u>Completed</u>