

An Annual Purchase Survey is only allowable when a cycle menu is used.

1. The Annual Purchase Survey list of products must be developed no less than one time per year.
2. The Annual Purchase Survey must include **no less than 75%** of items that are:
 - a. most frequently purchased
 - b. products that make up the largest part of the budget
3. Prices must be obtained for the products on the Annual Purchase Survey from two or more vendors.
4. Food items will be purchased from the vendor/store based on the results of the current Annual Purchase Survey. The Annual Purchase Survey must be completed annually.
5. Vendor/store selection will be to the lowest and best quote based upon quality, service availability, but primarily price. If other criteria is used, this must be documented.
6. Documentation of records must be maintained to show selection of vendor, reasons for selection, names of all vendors contacted, price quotes from each vendor, and **written specifications**.
7. Documentation must be maintained that the actual product specified is received.
8. Documentation must be maintained to reflect that the food items purchased support the cycle menu.
9. If the cycle menu is significantly altered in the course of the year, a new Purchase Survey must be conducted.
10. Non-food items not included in the Annual Purchase Survey should follow standard Informal Procurement requirements by obtaining two or more quotes.

Annual Purchase Survey

Agency Name: _____ Date: _____

This form may be used by CACFP and SFSP sponsors of Child Nutrition Programs or smaller NSLP sponsors. This form should make-up at least 75% of the food items found on the cycle menu. You may attach additional sheets as necessary.

Quotes must be obtained from two or more vendors.

	Product Name (describe – Examples: 5 lbs. golden delicious apples)	Vendor 1 <hr/> Price	Vendor 2 <hr/> Price	Vendor 3 <hr/> Price
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

	Product Name (describe – Examples: 5 lbs. golden delicious apples)	Vendor 1 <hr/> Price	Vendor 2 <hr/> Price	Vendor 3 <hr/> Price
16				
17				
18				
19				
20				

Vendor Selected: _____

If the vendor selected did not provide the lowest quote/cost, please attach an explanation for the determinations.

Signature of Agency Representative: _____ Date: _____