



MONTANA STATE PRISON POLICIES AND PROCEDURES

Policy No.: MSP 3.1.106	Subject: VENDING MACHINES
Chapter 3: INSTITUTIONAL OPERATIONS	Page 1 of 3 + 1 attachment
Section 1: Security and Control	Revision Date:
Signature: /s/ Mike Mahoney	Effective Date: 7/1/97

I. POLICY: It is the policy of Montana State Prison to establish criteria and rules for all staff, groups, and/or organizations that request authorization to have vending machine(s) on prison property.

II. AUTHORITY: MSP 1.1.3 Organization and Responsibility

III. DEFINITIONS:

None.

IV. PROCEDURES:

The procedural guidelines of this policy contain requirements for the installation, management, and accounting for any vending machine on Montana State Prison property.

A. Any employee or inmate organization wishing to have a vending machine on Prison property will be required to obtain a permit to do so. A permit may be granted to a candidate who successfully completes the application process. The application process consists of the following:

1) The application will contain the following:

- a) What group or organization wishes to obtain a permit.
- b) The name and title of the person that will be responsible for the vending machine(s) and adherence to this policy.
- c) That the group or organization acknowledges that it is the responsibility of the vendor to stock the machine(s) and is responsible for any stock maintained on site.
- d) The vendor will be responsible for all revenue and will submit a monthly check to the appropriate account in accordance with the procedures stipulated in this policy.

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- e) If any profit is realized from these machine(s), the application will delineate the projects these funds may be applied to and the process for procuring these funds.
 - f) The name of the company who is providing the vending machine.
 - g) The proposed location of the vending machine.
 - h) The bank account number in which the monies will be held.
- 2) The application must receive the approval of the appropriate Deputy Warden and Warden. The Warden must approve the:
- a) Location of the vending machine.
 - b) Projects the monies may be used to fund.
- B. When agreements between employee groups or inmate organizations and a vending machine provider is intended to result in revenue for the group or organization, that group or organization must:
1. Report to the Accounting Office at least quarterly (September, December, March, and June) an accounting of all bank account activity on a bank reconciliation form provided by the Accounting Office.
 2. Maintain a bank account (for employee groups) or an inmate trust account (for inmate organizations) in the name of the group or organization through which all deposits and withdrawals of money belonging to the group or organization will be made.
 3. Maintain a general ledger of account activity and be able to provide the ledger to the Accounting Office immediately upon request.
- C. No inmate will have keys to or will in any way maintain any vending machine on prison property.
- D. No staff member of the Montana State Prison or the Department of Corrections will have keys to or will in any way maintain any vending machine on Prison property.

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- E. The permits will be reviewed on an annual basis or as needed determined by the Warden or his designee. The Warden may cancel any or all permits at any time. The Warden's decision is final and there is no appeal for any application that is denied or permit that is canceled.

CLOSING:

Questions concerning this policy shall be directed to the Warden's Office.

PS/gmb

**MONTANA STATE PRISON
VENDING MACHINE AUTHORIZATION REQUEST**

1. Name of group or organization requesting authorization.

2. Name and job title of person responsible for vending machine(s) requested.

Name: _____
Title: _____

3. Name of company providing vending machine(s).

Company Name: _____ Company Name: _____
Address: _____ Address: _____
Contact Person: _____ Contact Person: _____
Phone Number: _____ Phone Number: _____
Machine #1 to be provided: _____ Machine #2 to be provided: _____

Company Name: _____ Company Name: _____
Address: _____ Address: _____
Contact Person: _____ Contact Person: _____
Phone Number: _____ Phone Number: _____
Machine #3 to be provided: _____ Machine #4 to be provided: _____

4. Total number of machines requested: _____

5. Proposed location(s) of machine(s): (Please specify type and proposed location of each machine.)

<u>Building</u>	<u>Room or Area</u>
a. <u>Machine #1</u>	_____
b. <u>Machine #2</u>	_____
c. <u>Machine #3</u>	_____
d. <u>Machine #4</u>	_____

I understand that the following conditions will be adhered to if this application is approved: (Please note that both the applicant and the vendor must initial each item).

1. No one except the vendor will have a key to the machines. _____

- 2. No one except the vendor will ever open the machine. _____
- 3. Any stock maintained on site is the responsibility of the vendor. _____
- 4. No group/organization member will ever handle the revenue generated by the machines. _____
- 5. A bank account will be established to pay out any debt since associated with the operation of the above mentioned vending machine(s). _____
- 6. Quarterly reports (September, December, March & June) will be submitted to the accounting office regarding this account. _____
- 7. A general ledger will be maintained on this account and be part of the quarterly report. _____

Is it the intent of your group/organization to provide a profit from the operation of these vending machines?

_____ YES _____ NO

If yes, please list the types of activities and/or programs that you intend to use these profits on:

APPROVED BY THE WARDEN
YES NO

APPLICATION REVIEW BY DEPUTY WARDEN

APPROVED _____ DISAPPROVED

COMMENTS: _____

WARDEN

APPROVED _____ DISAPPROVED

COMMENTS: _____

ANNUAL REVIEW DATES:
