Rural Grocery Store Owner Survey distributed by K-State’s Center for Engagement and Community Development.

1. What major products and services does your store offer? Check all that apply.

- ___ ATM/Bank
- ___ books/cards/gifts
- ___ café/restaurant
- ___ catering
- ___ delicatessen
- ___ fuel
- ___ groceries
- ___ other (specify)
- ___ hunting/fishing/camping supplies
- ___ institutional supply (school, hospital)
- ___ pharmacy
- ___ photo development
- ___ pre-packaged snacks
- ___ self-serve snacks/drinks
- ___ video rental

2. Who is/are your primary grocery supplier(s)?

_____________________________________________________________________________________

3. What products do your secondary suppliers supply?

_____________________________________________________________________________________

4. Do minimum (purchasing/ordering) buying requirements create a problem for your grocery store?

- ___ yes
- ___ no

If yes, how?

5. If minimum buying requirements are a problem, what solutions might you suggest?

6. As an independent grocer, do you feel you are getting fair pricing from your suppliers compared to chain stores?

- ___ yes
- ___ no

Comments:

7. Have you had problems getting products delivered because of your location?

- ___ yes
- ___ no

Comments:

8. Do you sell locally produced food in your store?

- ___ yes
- ___ no

If yes, what products?
9. Which of the following are major challenges for your store? *Check all that apply.*

- ____ availability of satisfactory labor
- ____ competition with large chain grocery stores
- ____ debt and/or high payments
- ____ government regulations
- ____ high inventory costs/ low turnover
- ____ shortage of working capital
- ____ high operating costs (utilities, building lease, repairs/maintenance, etc)
- ____ lack of community support
- ____ low sales volume
- ____ narrow profit margins
- ____ required minimum buying requirements from vendors
- ____ shoplifting/bad checks/internal theft/unpaid accounts
- ____ taxes
- ____ other (specify) _______________________

Which of the above do you feel is the most significant for you and your store?

_________________________________________________________________________

10. Do you collaborate with other small independently owned stores?

- ____ yes  ____ no

If yes, for which purposes? *Check all that apply.*

- ____ cooperative advertising/marketing
- ____ grocery distribution purposes
- ____ sharing concerns and/or ideas
- ____ to achieve minimum buying requirements
- ____ other __________________________________________________________________________

If no, would you be interested in doing this?

- ____ yes  ____ no

Why or why not?

11. Do you feel that a statewide alliance of small, independently owned grocery store owners may have value?

- ____ yes  ____ no

If yes, how could it help?
12. What marketing strategies have you used in your grocery stores that have been effective in drawing in customers?

Advertising
- Newspapers
- Radio
- TV
- Flyers/inserts
- Internet/WWW
- Promotions
- Word of mouth
- OTHER: Please identify

When running a grocery store, how important is it to you to offer each of the following? Rate the importance of each by circling the number that best fits your response.

<table>
<thead>
<tr>
<th></th>
<th>Not Very Important</th>
<th>Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Quality of food</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Availability of food (variety, brand choices)</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Prices of items offered</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Customer service</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Business hours</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Buying locally</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Which of the above do you feel is the most significant for you and your store?
How does your store do at providing the following to customers? Rate your store by circling the number that best fits your response.

<table>
<thead>
<tr>
<th>Service</th>
<th>Not Very Well</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>Very Well</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Quality of food</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Availability of food</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(variety, brand choices)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Prices of items offered</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Customer service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Business hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Buying locally</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Which of the above do you feel is the most significant for you and your store?

____________________________________________________________________________

How do you assess the buying needs of your customer?

Is your stocking of products responsive to customer requests?

**What other concerns or comments do you have?**
Tell us about your store:

How long have you been in the grocery business as an owner?  __________

How long has there been a grocery store at your current location?  __________

Do you have more than one location?  _____  How many?  _____

What are your hours of operation?
  Mon _____ to _____
  Tues _____ to _____
  Wed _____ to _____
  Thur _____ to _____
  Fri _____ to _____
  Sat _____ to _____
  Sun _____ to _____

Are you open on the major holidays (Christmas, New Years, Thanksgiving, etc.)?  _____

Are there other grocery outlets in your community?
  _____ a ‘quick shop’
  _____ another full service grocery

How far is it to the nearest discount grocery (Wal-Mart, etc.)?  _____

How many employees do you have, not counting yourself?
  _____ full-time (40 hrs/week minimum)  _____ part-time (less than 40hrs/week)

What are your average weekly gross sales?
  _____ Less than $5,000
  _____ Between $5,000 and $10,000
  _____ Between $10,000 and $20,000
  _____ Greater than $20,000