

WIC VENDOR ORDER FORM

INSTRUCTIONS: Indicate the amount requested for any of the following training aids/materials and **mail** or **email** your order to:

WIC Vendor Management Unit
235 South Beretania Street, Suite 701
Honolulu, Hawaii 96813-2419
Fax: (808) 586-8189

Email: doh.wic.vendors@doh.hawaii.gov

Call VMU at (808) 586-4776 or 1-(888) 820-6425 from Neighbor Islands regarding your order.

Amount Requested

- _____ WIC Vendor Complaint Form V-001 (*for complaints against WIC customers*)
- _____ WIC Least Expensive Brand (LEB) Declaration and Price Survey Form V-003
- _____ WIC Check Appeal Form V-006 (*Only form accepted for processing appeals*)
- _____ Hawaii WIC Food List (*brochure*)
- _____ WIC ALLOWED SHELF TALKERS (*Blue & White Shelf Talkers to visually aid WIC customers*)
- _____ WIC ALLOWED FOOD LEAST EXPENSIVE (LEB) SHELF TALKERS (*Red & White Shelf Talkers to visually aid WIC customers*)
- _____ Hawaii WIC Vendor Manual
- _____ WIC Check (*sample used to educate cashiers*)
- _____ WIC ID Folder (*sample used to educate cashiers*)
- _____ WIC Vendor Sign 5 ½" X 8 ½" Laminated (*required to identify your store as an authorized WIC store*)

Mailing Instructions:

Store Name: _____ ID# _____ Attn: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____