

# Longs Drugs : WIC Special Formula Return Form

Date:

\_\_\_\_\_

To:

Longs Drugs Regional Business Office (RBO)

From:

Local Agency Name

Staff Name

## Product Return Details

Client Name:

\_\_\_\_\_

Client ID No:

\_\_\_\_\_

Product Name:

\_\_\_\_\_

Unit Size:

\_\_\_\_\_

Quantity:

\_\_\_\_\_

Product Type:

(Powder/Conc/RTU)

\_\_\_\_\_

Benefit Start Date:

\_\_\_\_\_

## Reason for Return

Reason:

Damaged in Transit

(Check one)

Wrong Product Shipped

Product Expired

MD Prescription Change

Comments:

\_\_\_\_\_

Will the product require replacement?

Yes

No

**Instructions:** 1) E-mail completed form to Longs Drugs RBO with a copy to WIC Branch Clinic Operations

2) Longs RBO will arrange for Formula Return to Longs Drugs store

## Longs Drugs RBO Contact Information

E-mail: HIWICRBO@cvscaremark.com

Oahu Phone: (808) 690-8500, Select 2#

Neighbor Island Toll-Free Phone: 1 (844) 225-2317, Select 2#

Fax: 1 (401) 216-3103

WIC Branch Clinic Operations E-mail: iris.takahashi@doh.hawaii.gov