

# PREAUTHORIZATION SITE VISIT REPORT

1-3 Registers

<u>Store Name / Address / County / 4-Digit Store Number</u>	<u>Date of Visit</u>	<u>Time of Visit</u>  _____ a.m. _____ p.m.
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1. Does the vendor have invoices or other documentation for infant formula purchases? If yes, date of invoice: _____ Name of Supplier: _____	<input type="checkbox"/>	<input type="checkbox"/>	YES	NO									
2. Does the store appear clean and sanitary? If no, state reasons.	<input type="checkbox"/>	<input type="checkbox"/>	YES	NO									
3. Are prices clearly marked on WIC authorized food items, shelves, or coolers? If no, list items not priced.	<input type="checkbox"/>	<input type="checkbox"/>	YES	NO									
4. Do WIC authorized food items appear to be fresh? If no, list outdated items. <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>Item(s)</u></th> <th style="text-align: left; width: 33%;"><u>Quantity</u></th> <th style="text-align: left; width: 33%;"><u>Date Expired</u></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>	<u>Item(s)</u>	<u>Quantity</u>	<u>Date Expired</u>	_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	YES	NO
<u>Item(s)</u>	<u>Quantity</u>	<u>Date Expired</u>											
_____	_____	_____											
_____	_____	_____											

5. What is the program that runs your cash register? <b>(New Vendor Only)</b>
6. Who do you call if you have a problem with the registers not working? <b>(New Vendor Only)</b> (List company name, name of contact, and phone number)

Additional Comments

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**Your signature indicates that the WIC representative has reviewed and discussed this report with you, and the vendor understands the findings. The vendor may receive a letter from the Department of Health as a result of this report.**

Print Name of Vendor Representative		
Signature of Vendor Representative	Title	Date
Signature of WIC Representative	Title	Date

**Peanut Butter**  
*2 jars (16 to 18 oz)*

Brand: \_\_\_\_\_

Size: \_\_\_\_\_

Price: \$ \_\_\_\_\_

Quantity: \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Dried/Canned Beans ~ Peas**  
*(2) 16 oz pkgs dry or 128 ozs canned*

Brand: \_\_\_\_\_

Size: \_\_\_\_\_

Price: \$ \_\_\_\_\_

# of bags/ozs: \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Juice**  
*2 flavors, (2) 64 oz bottles or (2) 11.5 oz or 12 oz frozen (each flavor)*

Brand: \_\_\_\_\_ Shelf Stable / Frozen / Refrigerated Carton

Flavor: \_\_\_\_\_ Quantity: \_\_\_\_\_ Price: \$ \_\_\_\_\_

Brand: \_\_\_\_\_ Shelf Stable / Frozen / Refrigerated Carton

Flavor: \_\_\_\_\_ Quantity: \_\_\_\_\_ Price: \$ \_\_\_\_\_

2 Varieties      Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐      Y ☐ N ☐

**Cereal**  
*3 types, 1 must be whole grain, 72 ozs total*

Whole Grain Brand: \_\_\_\_\_ Price: \$ \_\_\_\_\_ # of Boxes: \_\_\_\_\_ Size: \_\_\_\_\_ oz Total Ounces: \_\_\_\_\_

Brand: \_\_\_\_\_ Price: \$ \_\_\_\_\_ # of Boxes: \_\_\_\_\_ Size: \_\_\_\_\_ oz Total Ounces: \_\_\_\_\_

Brand: \_\_\_\_\_ Price: \$ \_\_\_\_\_ # of Boxes: \_\_\_\_\_ Size: \_\_\_\_\_ oz Total Ounces: \_\_\_\_\_

Whole Grain Cereal      3 Varieties      Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐      Y ☐ N ☐      Y ☐ N ☐

**Whole Grains**  
*1 type of food, 64 ozs total, 16 oz pkgs only*

Brand: \_\_\_\_\_ Price: \$ \_\_\_\_\_

Bread / Brown Rice / Oatmeal / Corn Tortilla / Whole Wheat (Tortilla or Pasta)

# of Containers \_\_\_\_\_ X # of Ozs: \_\_\_\_\_ Total Ozs: \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Fruits (2 varieties)**  
*combination of 160 ozs canned, fresh, or frozen*

Brand: _____	Brand: _____
Canned / Fresh / Frozen	Canned / Fresh / Frozen
Variety: _____	Variety: _____
# of Containers: _____	# of Containers: _____
X # of Ozs: _____	X # of Ozs: _____
Total Ozs: ____ Price: \$ _____	Total Ozs: ____ Price: \$ _____

2 Varieties      Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐      Y ☐ N ☐

**Eggs (store brand only)**  
*2 dozen, Large, Grade A or AA, White only*

Brand: \_\_\_\_\_

Price: \$ \_\_\_\_\_

# of dozens: \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Milk (store brand only)**  
*4 gallons, 1%, ½%, or skim (fat-free) liquid in gallon containers only*

Brand: \_\_\_\_\_

Type: 1% / ½% / skim

# of gallons: \_\_\_\_ Price: \$ \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Vegetables (2 varieties)**  
*combination of 160 ozs canned, fresh, or frozen*

Brand: _____	Brand: _____
Canned / Fresh / Frozen	Canned / Fresh / Frozen
Variety: _____	Variety: _____
# of Containers: _____	# of Containers: _____
X # of Ozs: _____	X # of Ozs: _____
Total Ozs: ____ Price: \$ _____	Total Ozs: ____ Price: \$ _____

2 Varieties      Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐      Y ☐ N ☐

**Gerber Infant Cereal**  
*(2) 8 oz boxes*

Rice / Barley / Oatmeal / Multi-Grain / Whole Wheat

# of Boxes \_\_\_\_\_ Price: \$ \_\_\_\_\_

Min Stock      Prices  
 Y ☐ N ☐      Y ☐ N ☐

**Required Formula Stocking Combinations**

*Total number of 8.1 oz cans of concentrate vs. total number of 12.7 or 12.9 oz cans of powder*

Acceptable Combinations

24 conc ~ 0 pwd

20 conc ~ 1 pwd

16 conc ~ 2 pwd

12 conc ~ 3 pwd

8 conc ~ 4 pwd

4 conc ~ 5 pwd

0 conc ~ 6 pwd

**Gerber Good Start Soy - Stage 1**

# conc      Price      # pwd      Price

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Gerber Good Start Gentle - Stage 1**

# conc      Price      # pwd      Price

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Total conc      Total pwdMin Stock      PricesY ☐ N ☐      Y ☐ N ☐**Gerber Infant Fruits ~ Infant Vegetables**

*Two varieties each, combined total of (16) 8 oz packages*

**Infant Fruits**Type      Total #      Price

\_\_\_\_\_

\_\_\_\_\_

2 Varieties Y ☐ N ☐      Prices Y ☐ N ☐**Infant Vegetables**Type      Total #      Price

\_\_\_\_\_

\_\_\_\_\_

2 Varieties Y ☐ N ☐      Prices Y ☐ N ☐Min Stock Y ☐ N ☐**ADDITIONAL COUNTED ITEMS TO MEET MINIMUM STOCKING REQUIREMENTS**

*3 types, 1 must be whole grain, 72 ozs total*

Category: \_\_\_\_\_

Category: \_\_\_\_\_

Category: \_\_\_\_\_

Category: \_\_\_\_\_

Brand: \_\_\_\_\_

Brand: \_\_\_\_\_

Brand: \_\_\_\_\_

Brand: \_\_\_\_\_

Type: \_\_\_\_\_

Type: \_\_\_\_\_

Type: \_\_\_\_\_

Type: \_\_\_\_\_

# of Containers: \_\_\_\_\_

# of Containers: \_\_\_\_\_

# of Containers: \_\_\_\_\_

# of Containers: \_\_\_\_\_

# of Ounces: \_\_\_\_\_

# of Ounces: \_\_\_\_\_

# of Ounces: \_\_\_\_\_

# of Ounces: \_\_\_\_\_

Total Ounces: \_\_\_\_\_

Total Ounces: \_\_\_\_\_

Total Ounces: \_\_\_\_\_

Total Ounces: \_\_\_\_\_

Price: \$ \_\_\_\_\_

Price: \$ \_\_\_\_\_

Price: \$ \_\_\_\_\_

Price: \$ \_\_\_\_\_