



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 WIC AND NUTRITION SERVICES
WIC RETAILER ORDER FORM

STORE NAME:	WIC VENDOR NUMBER:	
SEND TO THIS ADDRESS:	TELEPHONE:	
CITY, STATE:	ZIP:	
ATTN: (PLEASE TYPE OR PRINT)	DATE:	
FORM	FORM NO.	QUANTITY
Checkout Procedures for Cashiers—Laminate Card		
WIC Approved Food List	WIC-640	
WIC Approved Food List (Spanish)	WIC-640-SP	
WIC Approved Shelf Tags (sheet of 40 tags)		
WIC Door Decals		
WIC Retailer Manual		
<p>Orders may be made by telephone to (573) 751-6204 OR emailed to:</p> <p style="color: blue; text-decoration: underline;">MOWICVENDORGROUP@HEALTH.MO.GOV</p> <p>or may be sent to the following address: Missouri Department of Health and Senior Services WIC and Nutrition Services P.O. Box 570 Jefferson City, MO 65102</p> <p>Send to the attention of the Retailer Compliance Team</p>		

STORES SHOULD PHOTOCOPY FOR THEIR RECORDS.

This institution is an equal opportunity provider.