

MISSOURI WIC RETAILER
EXTRA STAMP ORDER FORM

WIC VENDOR STAMP

(Place WIC Vendor Stamp Impression in box above)

Number of Stamps @ \$13.00 each =

\$

Store Name: _____

Approved by: _____ Date: _____

Ship to Attention: _____

Address: _____

City, State, Zip Code: _____

PLEASE MAIL A COPY OF THIS FORM, ALONG WITH CHECK OR MONEY ORDER MADE
PAYABLE TO:

SCHRIEFER'S OFFICE EQUIPMENT
P.O. BOX 145
JEFFERSON CITY, MO 65102
ATTENTION: BECKY M. HEINRICH

This institution is an equal opportunity provider.