

**Virginia WIC Program
Replacement Pages - Acknowledgement Form
Immediate Follow Up Action Required!**



Attention Store Manager/Owner:

This Acknowledgement Form must be completed and returned to the Virginia WIC Program by September 1, 2008 or an alternative date specified by your Vendor Liaison, if applicable.

I acknowledge that I have received the 2008 Vendor Manual for the Virginia WIC Program. This Manual is subject to change and the most current version of this resource can be downloaded via the website:

<http://www.vahealth.org/wic/retailstorepubs.asp>.

This enclosed replacement pages must be stored in your teal colored Vendor Manual for the Virginia WIC Program.

I understand my WIC Program binder will only be considered complete if it has the enclosed replacement pages, Cashier Training Guide and WIC Approved Food List stored in it. I agree to file all of these references in my Virginia WIC Program binder. I also understand that during onsite monitoring visits, State Agency staff will confirm my compliance with this requirement.

Store Name: _____ **WIC #** _____

Store Manager's/Owner's Name (printed): _____

Telephone #(_____) _____ **Date:** _____

Return to: Attn: Vendor Management
Virginia Department of Health
Division of WIC/Community Nutrition Services
109 Governor Street, 9th Floor
Richmond, VA 23219

Please return this signed Acknowledgement Form by September 1, 2008 or the designated due date to ensure your store's WIC Program authorization status remains in good standing.