WIC Proof of Delivery

☐ I received all my foods for the month of: _____

☐ I did not receive all my foods for the month of: _____

These foods were missing: _____ _____

_____ _____ _____

Signature: _____ Date: _____

Please print your name and address clearly.

Name: _____

Street Address: _____

Town: _____

If you have any questions, please call your vendor or local health office:

Barre:	1-888-253-8786	Newport:	1-800-952-2945
Bennington:	1-800-637-7347	Rutland:	1-888-253-8802
Brattleboro:	1-888-253-8805	St. Albans:	1-888-253-8801
Burlington:	1-888-253-8803	St. Johnsbury:	1-800-952-2936
Middlebury:	1-888-253-8804	Springfield:	1-888-296-8151
Morrisville:	1-888-253-8798	White River Jct.:	1-888-253-8799

WIC is an Equal Opportunity Program. Persons seeking to file discrimination complaints should write to USDA, Director, Office of Adjudication and Compliance, 1400 Independence Avenue, SW., Washington, DC 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). **VDH 119c**

For Vendor's Use Only:_____