PREAUTHORIZATION SITE VISIT REPORT

Store Name / Address / County / 4-Digit Store Number	Date of Visit	# of cash registers	Time of Visit
			a.m./p.m.

1. Does the vendor have invoices or other documentation for infant formula purchases? If yes, Date of invoice: Name of supplier:	YES	NO
2. Does the store appear clean and sanitary? If no, state reasons.	YES	NO
3. Are prices clearly marked on WIC authorized food items, shelves, or coolers? If no, list items not priced.	YES	NO
4. Do WIC authorized food items appear to be fresh? If no, list outdated items.	YES	NO

Additional Comments:

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

Sample

(Rev. 11/06/12)

# of registers _____

Cereal (3 types; 1 type must be whole grain)

1-3 REGISTERS - 72 oz. total

Whole Grain Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Meets Whole Grain Requirement? YES NO Does vendor have 3 types? YES NO Meets Ounce Requirements? YES NO

4-7 REGISTERS - 108 oz. total

Whole Grain Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Meets Whole Grain Requirement? YES NO Does vendor have 3 types? YES NO Meets Ounce Requirements? YES NO

8 OR MORE REGISTERS - 216 oz. total

Whole Grain Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Brand_____ Price_____

# of containers_____ X # of ounces_____ = Total ounces_____

Meets Whole Grain Requirement? YES NO Does vendor have 3 types? YES NO Meets Ounce Requirements? YES NO

Eggs (Grade A - White Only)

1-3 REGISTERS 2 dozen large	4-7 REGISTERS 3 dozen large	8 OR MORE REGISTERS 6 dozen large
Brand_____	Brand_____	Brand_____
Price_____ # of dozens_____	Price_____ # of dozens_____	Price_____ # of dozens_____
Meets Requirements? YES NO	Meets Requirements? YES NO	Meets Requirements? YES NO

Sample

# of registers _____

Juice - 2 flavors

1-3 REGISTERS - *2* ~ 64 oz. bottles *or* 2 ~ 11.5 oz. or 12 oz. frozen (1 ~ 11.5 oz. or 12 oz. frozen = 48 oz.)

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor _____ # of containers_____ Price_____

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor_____ # of containers_____ Price_____

Meets Flavors Requirement? YES NO Meets Total Container Requirement? YES NO

4 -7 REGISTERS - *3* ~ 64 oz. bottles *or* 3 ~ 11.5 oz. or 12 oz. frozen (1 ~ 11.5 oz. or 12 oz. frozen = 48 oz.)

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor _____ # of containers_____ Price_____

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor_____ # of containers_____ Price_____

Meets Flavors Requirement? YES NO Meets Total Container Requirement? YES NO

8 OR MORE REGISTERS- *6* ~ 64 oz. bottles *or* 6 ~ 11.5 oz. or 12 oz. frozen (1 ~ 11.5 oz. or 12 oz. frozen = 48 oz.)

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor_____ # of containers_____ Price_____

Brand_____ (Shelf Stable / Frozen / Refrigerated Carton)

Flavor_____ # of containers_____ Price_____

Meets Flavors Requirement? YES NO Meets Total Container Requirement? YES NO

Milk (reduced fat, 1/2%, 1%, 2%, or skim liquid in gallon containers only)

1-3 REGISTERS 4 gallons	4-7 REGISTERS 6 gallons	8 OR MORE REGISTERS 12 gallons
Brand_____	Brand_____	Brand_____
Type (1/2%, 1%, 2%, skim)	Type (1/2%, 1%, 2%, skim)	Type (1/2%, 1%, 2%, skim)
# of gallons_____ Price_____	# of gallons_____ Price_____	# of gallons_____ Price_____
Meets Requirement? YES NO	Meets Requirement? YES NO	Meets Requirement? YES NO

Sample

# of registers _____

Whole Grains - 1 type of food

1-3 REGISTERS - 64 oz. total

Brand_____ Circle: Bread, Brown Rice, Oatmeal, Corn/Whole Wheat Tortilla Price_____

# of containers_____ X # of ounces_____ = Total # of ounces_____

Meets Total Ounces Requirement? YES NO

4-7 REGISTERS - 96 oz. total

Brand_____ Circle: Bread, Brown Rice, Oatmeal, Corn/Whole Wheat Tortilla) Price_____

# of containers_____ X # of ounces_____ = Total # of ounces_____

Meets Total Ounces Requirement? YES NO

8 OR MORE REGISTERS - 192 oz. total

Brand_____ Circle: Bread, Brown Rice, Oatmeal, Corn/Whole Wheat Tortilla) Price_____

# of containers_____ X # of ounces_____ = Total # of ounces_____

Meets Total Ounces Requirement? YES NO

Dried/Canned Beans~Peas

1-3 REGISTERS 2 ~ 1 lb pkgs. dry or 128 oz. canned	4-7 REGISTERS 3 ~ 1 lb pkgs. dry or 192 oz. canned	8 OR MORE REGISTERS 6 ~ 1 lb pkgs. dry or 384 oz. canned
Brand_____ Type_____ Price_____ # cans_____ size_____ # of bags_____ (16oz. only) Total Meets Requirement? YES NO	Brand_____ Type_____ Price_____ # cans_____ size_____ # of bags_____ (16oz. only) Total Meets Requirement? YES NO	Brand_____ Type_____ Price_____ # cans_____ size_____ # of bags_____ (16oz. only) Total Meets Requirement? YES NO

Peanut Butter (any brand, 16 to 18 oz. jar)

1-3 REGISTERS 2 Jars	4-7 REGISTERS 3 Jars	8 OR MORE REGISTERS 6 Jars
Brand _____ # of containers_____ Price_____ Container Size _____ Meets Requirement? YES NO	Brand _____ # of containers_____ Price_____ Container Size _____ Meets Requirement? YES NO	Brand _____ # of containers_____ Price_____ Container Size _____ Meets Requirement? YES NO

Sample

# of registers _____

Fruits - 2 varieties

1-3 REGISTERS - 160 oz. canned or frozen OR 10 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO
Meets Total Pounds? YES NO

Price_____

4-7 REGISTERS - 240 oz. canned or frozen OR 15 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO
Meets Total Pounds? YES NO

Price_____

8 OR MORE REGISTERS - 480 oz. canned or frozen OR 30 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Apples, Bananas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO
Meets Total Pounds? YES NO

Price_____

Sample

# of registers _____

Vegetables - 2 varieties

1-3 REGISTERS - 160 oz. canned or frozen OR 10 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO

Price_____ Meets Total Pounds? YES NO

4-7 REGISTERS - 240 oz. canned or frozen OR 15 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO

Price_____ Meets Total Pounds? YES NO

8 OR MORE REGISTERS - 480 oz. canned or frozen OR 30 pounds fresh

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Price_____

Brand_____ Circle: Frozen/Canned/Fresh Variety (ex. Corn, Peas, etc.)_____

# of containers_____ ***X*** # of container ounces _____ = Total # of ounces_____ / 16 = #_____lb

Meets 2 Varieties? YES NO

Price_____ Meets Total Pounds? YES NO

Sample

# of registers _____

Infant Cereal - Gerber - 1 variety

1-3 REGISTERS *2* ~ 8 oz. box	4-7 REGISTERS *4* ~ 8 oz. boxes	8 OR MORE REGISTERS *6* ~ 8 oz. boxes
Circle: Rice, Barley, Oatmeal, Mixed, Whole Wheat # of boxes_____ Price_____ Meets Requirement? YES NO	Circle: Rice, Barley, Oatmeal, Mixed, Whole Wheat # of boxes_____ Price_____ Meets Requirement? YES NO	Circle: Rice, Barley, Oatmeal, Mixed, Whole Wheat # of boxes_____ Price_____ Meets Requirement? YES NO

Beech~Nut Infant Fruits ~ Infant Vegetables - 2 varieties each

1-3 REGISTERS - Combined Total of 16 ~ 4 oz. Jars

Infant Fruits Brand_____ Type _____ Total #_____ Price_____

Infant Fruits Brand_____ Type _____ Total #_____ Price_____
Meets 2 Types? YES NO

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____
Meets Total Jars Requirement? YES NO Meets 2 Types? YES NO

4-7 REGISTERS - Combined Total of 32 ~ 4 oz. Jars

Infant Fruits Brand_____ Type _____ Total #_____ Price_____

Infant Fruits Brand_____ Type _____ Total #_____ Price_____
Meets 2 Types? YES NO

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____
Meets Total Jars Requirement? YES NO Meets 2 Types? YES NO

8 OR MORE REGISTERS - Combined Total of 48 ~ 4 oz. Jars

Infant Fruits Brand_____ Type _____ Total #_____ Price_____

Infant Fruits Brand_____ Type _____ Total #_____ Price_____
Meets 2 Types? YES NO

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____

Infant Vegetables Brand_____ Type _____ Total #_____ Price_____
Meets Total Jars Requirement? YES NO Meets 2 Types? YES NO

Sample

# of registers _____

REQUIRED FORMULA STOCKING COMBINATIONS

Total number of 13 oz. cans of concentrate *vs.* Total number of 12.4 oz. cans of powder

CIRCLE APPROPRIATE QUANTITY

1-3 REGISTERS

Acceptable Combinations

24 Concentrate ~ 0 Powder 8 Concentrate ~ 4 Powder

20 Concentrate ~ 1 Powder 4 Concentrate ~ 5 Powder

16 Concentrate ~ 2 Powder 0 Concentrate ~ 6 Powder

12 Concentrate ~ 3 Powder

Similac Soy Isomil Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Similac Advance Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Total Meets Requirement? YES NO

Total # of Concentrate_____ Powder_____

4-7 REGISTERS

Acceptable Combinations

36 Concentrate ~ 0 Powder 12 Concentrate ~ 6 Powder

32 Concentrate ~ 1 Powder 8 Concentrate ~ 7 Powder

28 Concentrate ~ 2 Powder 4 Concentrate ~ 8 Powder

24 Concentrate ~ 3 Powder 0 Concentrate ~ 9 Powder

20 Concentrate ~ 4 Powder

16 Concentrate ~ 5 Powder

Similac Soy Isomil Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Similac Advance Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Total Meets Requirement?

Total # of Concentrate_____

8 OR MORE REGISTERS

Acceptable Combinations

72 Concentrate ~ 0 Powder 32 Concentrate ~ 10 Powder

68 Concentrate ~ 1 Powder 28 Concentrate ~ 11 Powder

64 Concentrate ~ 2 Powder 24 Concentrate ~ 12 Powder

60 Concentrate ~ 3 Powder 20 Concentrate ~ 13 Powder

56 Concentrate ~ 4 Powder 16 Concentrate ~ 14 Powder

52 Concentrate ~ 5 Powder 12 Concentrate ~ 15 Powder

48 Concentrate ~ 6 Powder 8 Concentrate ~ 16 Powder

44 Concentrate ~ 7 Powder 4 Concentrate ~ 17 Powder

40 Concentrate ~ 8 Powder 0 Concentrate ~ 18 Powder

36 Concentrate ~ 9 Powder

Similac Soy Isomil Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Similac Advance Early Shield	Conc	Pwd
# Containers	_____	_____
Price	_____	_____

Total Meets Requirement? YES NO Total # of Concentrate_____ Powder_____

Sample