MASSACHUSETTS WIC NUTRITION PROGRAM



VENDOR APPLICATION PACKET

FISCAL YEARS 2025 - 2027

October 1, 2024 - September 30, 2027

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mass.gov/wic

MASSACHUSETTS WIC PROGRAM 2025-2027 – VENDOR APPLICATION PACKET

CONTENTS

[INTRODUCTION 1](#_bookmark0)

[RETAILER ENABLEMENT 2](#_bookmark1)

[2025-2027 VENDOR APPLICATION PROCESSING SCHEDULE 5](#_bookmark2)

[THE VENDOR SELECTION CRITERIA 7](#_bookmark3)

[HOW DOES THE WIC PROGRAM EVALUATE COMPETITIVE PRICING? 10](#_bookmark4)

[HOW DOES THE WIC PROGRAM EVALUATE “ABOVE 50% VENDORS” 11](#_bookmark5)

[WHAT IS THE WIC MANDATORY MINIMUM INVENTORY FOR FOOD VENDORS? 12](#_bookmark7)

[WHAT IS THE WIC MANDATORY MINIMUM INVENTORY FOR PHARMACIES? 16](#_bookmark8)

[HOW TO FILL OUT THE WIC VENDOR APPLICATION 18](#_bookmark9)

ATTACHMENTS

1. WIC Vendor Application
2. Food Vendor Price List
3. Pharmacy Price List
4. WIC Mandatory Minimum Inventory Requirements
5. List of Approved Infant Formula Suppliers

This institution is an equal opportunity provider.

# INTRODUCTION

**MASSACHUSETTS WIC NUTRITION PROGRAM**

WIC is a supplemental food program funded by the United States Department of Agriculture and administrated through the Massachusetts Department of Public Health and the Bureau of Family Health and Nutrition. WIC is a unique health and nutrition program serving women and children with or at risk of developing nutrition related health problems. WIC provides nutrition education counseling, free nutritious food, and referrals to healthcare and other services to low-to-moderate income pregnant women, infants, and children under five.

|  |  |
| --- | --- |
| **PROVEN EFFECTIVE SERVICES** | WIC works! WIC is widely acknowledged to be effective in the prevention of immediate health problems and in the improvement of long-term health outcomes. Research and evaluation studies have shown that:   * Women participating in WIC have improved diets, receive prenatal care earlier, and have improved pregnancy outcomes. * Infants born to WIC mothers have better birth weights, larger head size, and are less likely to be premature. * WIC infants and children consume more iron, vitamin C and other nutrients, resulting in improved growth and nutritional status. * Children enrolled in WIC are more likely to have regular medical care and immunizations and demonstrate better cognitive performance. * WIC families buy more nutritious foods than non-WIC families.   And WIC saves money! Studies have shown that WIC is cost effective. Each dollar spent on WIC saves three dollars on future health care costs. |
| **WIC BENEFITS** | Each month, a WIC nutritionist determines participants' dietary needs and counsels them on their nutritional concerns. Participants receive monthly benefits for nutritious foods prescribed for their individual needs. WIC benefits are redeemed only at those retail grocery stores and pharmacies that have been selected by the WIC Program to serve as authorized WIC vendors.  Massachusetts currently authorizes over 850 stores and pharmacies to participate in WIC. |

WIC vendors are an important part of the Massachusetts WIC Nutrition Program, and it is necessary that all retailers who apply to become WIC vendors understand the WIC Program rules and regulations. The Vendor Application packet provides an overview of the Massachusetts WIC Nutrition Program as well as specific instructions for completing the enclosed application.

Please read all the information contained in the application packet. All applications MUST be complete, and all supporting documentation MUST be submitted with the application to accurately assess the eligibility of each retail store for a WIC Vendor Agreement.

# RETAILER ENABLEMENT

The Massachusetts WIC Nutrition Program issues food benefits through an Electronic Benefit Transfer (EBT) system called the WIC Card. The system benefits both the retailer and the WIC customer by delivering seamless WIC transactions at each cash register, making the transactions like other debit or credit card transactions, and removing any stigma for the WIC customer.

Retailers wishing to apply to become a WIC vendor must have the capability to operate either an integrated or non-integrated multi-function system to accept WIC benefits. In either system, when a WIC Card is swiped, the device will obtain the benefit balance for the WIC customer and match the scanned food/formula items against the Massachusetts Approved Product List (APL) to accept the WIC customer’s purchases. The two different types of systems that enable vendors to accept WIC benefits are:

* Integrated – the WIC software is part of the store’s cash register system. Integrating WIC into the POS system and normal business processes is the preferred solution as it allows retailers to manage inventory, payment, and settlement for WIC items within the same system that manages transactions for cash and other tenders. The integrated system also provides a more streamlined purchase experience for the WIC customer.
* Non-Integrated Multi-Function System - the WIC Card software is on the Point-of-Sale (POS) device. The POS device must be capable of supporting WIC and other payment types such as the Supplemental Nutrition Assistance Program (SNAP). Retailers will need to reconcile the WIC transactions to their Electronic Cash Register (ECR) system.

## Integrated POS

## Upgrade Current System

This option is for vendors that choose to upgrade their current POS system with an integrated WIC EBT certified Electronic Cash Register (ECR) system. An integrated ECR system, upgraded to accept WIC Card transactions, allows the vendor to maintain their current POS and business processes while integrating WIC redemptions with other payment types. An upgrade to an integrated ECR:

* + may have been tested and certified by USDA in another State.
  + allows vendors to maintain their existing POS and business processes.
  + supports seamless WIC transactions at the POS.
  + eliminates the need for WIC customers to separate items at the checkout (mixed basket).
  + integrates WIC into vendor’s existing inventory, redemption, and settlement processes.

The vendor is responsible for all the costs associated with the upgrade of their current Point-of-Sale (POS) system’s hardware and/or software.

## Integrated POS Replacement System

This option is for vendors that currently have no WIC EBT capability available in their existing system or are currently planning to update their POS systems. System replacement with an integrated ECR has all the advantages of a system upgrade. A full system replacement with an integrated ECR:

* + may have been tested and certified by USDA in another State.
  + allows vendors to upgrade out-of-date equipment and processes while achieving WIC Card enablement.
  + supports seamless WIC transactions at the POS.
  + eliminates the need for WIC customers to separate items at the checkout (mixed basket).
  + integrates WIC into vendors’ existing inventory, redemption, and settlement processes.

The vendor is responsible for all the costs associated with system replacement of their current POS system with an integrated WIC EBT certified ECR system.

## Certification Process for Integrated Systems

If the store is integrated, a certification process must be completed to conduct WIC transactions. There are three certification levels:

* Level I is a pre-certification process where the software provider runs several transaction scripts and verifies the results.
* Level II certification occurs at the software provider’s location and is conducted by Custom Data Processing (CDP) (WIC Card contractor) and the State WIC staff. The transaction scripts are run once again, and the results are verified by CDP and WIC staff. This certifies that the cash register software will correctly handle WIC transactions.
* Level III certification is a live in-store test to verify the proper installation and set-up of the store’s cash register system. Level III tests include various scenarios for WIC transactions.

For more information about Retailer Enablement, visit USDA's posted guidelines for the development and implementation of Electronic Benefit Transfer (EBT) systems for the Special Supplemental Nutrition Program for Women, Infants and Children (WIC). <https://www.fns.usda.gov/wic/wic-electronic-benefits-transfer-ebt-guidance>.

## Non-Integrated POS Multi-Function System

The non-integrated multi-function system consists of a terminal and item scanner that operates independently of vendors’ ECR system. The non-integrated multi-function POS communicates with the EBT system through a phone line or internet connection and is entirely separate from the store’s overall inventory. A non-integrated multi-function POS system:

* supports other EBT payment tender types such as SNAP transactions.
* requires a ‘double scan’ – first against the multi-function POS device and second through the vendor’s ECR system.
* does not support mixed basket transactions (WIC items are the only items that can be transacted).

FIS Government Solutions is the host/processor that will be handling the non-integrated multi- function terminals for stores that will be utilizing this type of POS system. Any vendor requiring the non-integrated multi-function terminal must complete the Application and Agreement for Benefits Redemption with FIS to be able to participate in the WIC Program.

The vendor is responsible for all the costs associated with the non-integrated multi-function system as outlined in the Fidelity Information Services LLC (FIS) Government Solutions EBT Agreement for Benefits Redemption, EBT Quest and/or WIC Operating Rules Monthly Service and Fees Addendum.

# 2025-2027 VENDOR APPLICATION PROCESSING SCHEDULE

Applications received by the Massachusetts WIC Program will be processed in order of receipt. The schedule for the application process is as follows:

|  |  |  |
| --- | --- | --- |
| **APPLICATIONS RECEIVED BY 4:00 P.M. ON THIS DATE** | **PROJECTED DATE CONTRACTS WILL BEGIN** | **CONTRACTS WILL EXPIRE ON\*** |
| **FY’25 (October 1, 2024 – September 30, 2025)** | | |
| July 1, 2024 | October 1, 2024 | September 30, 2025 |
| October 14, 2024 | January 1, 2025 | September 30, 2025 |
| November 11, 2024 | February 1, 2025 | September 30, 2025 |
| December 9, 2024 | March 1, 2025 | September 30, 2025 |
| January 13, 2025 | April 1, 2025 | September 30, 2025 |
| February 10, 2025 | May 1, 2025 | September 30, 2025 |
| March 10, 2025 | June 1, 2025 | September 30, 2025 |
| April 14, 2025 | July 1, 2025 | September 30, 2025 |
| May 12, 2025 | August 1, 2025 | September 30, 2025 |
| **FY’26 (October 1, 2025 – September 30, 2026)** | | |
| July 14, 2025 | October 1, 2025 | September 30, 2026 |
| August 11, 2025 | November 1, 2025 | September 30, 2026 |
| September 8, 2025 | December 1, 2025 | September 30, 2026 |
| October 13, 2025 | January 1, 2026 | September 30, 2026 |
| November 10, 2025 | February 1, 2026 | September 30, 2026 |
| December 8, 2025 | March 1, 2026 | September 30, 2026 |
| January 12, 2026 | April 1, 2026 | September 30, 2026 |
| February 9, 2026 | May 1, 2026 | September 30, 2026 |
| March 9, 2026 | June 1, 2026 | September 30, 2026 |
| April 13, 2026 | July 1, 2026 | September 30, 2026 |
| May 11, 2026 | August 1, 2026 | September 30, 2026 |

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| **FY’27 (October 1, 2026 – September 30, 2027)** | | |
| July 13, 2026 | October 1, 2026 | September 30, 2027 |
| August 10, 2026 | November 1, 2026 | September 30, 2027 |
| September 14, 2026 | December 1, 2026 | September 30, 2027 |
| October 12, 2026 | January 1, 2027 | September 30, 2027 |
| November 9, 2026 | February 1, 2027 | September 30, 2027 |
| December 14, 2026 | March 1, 2027 | September 30, 2027 |
| January 11, 2027 | April 1, 2027 | September 30, 2027 |
| February 8, 2027 | May 1, 2027 | September 30, 2027 |
| March 8, 2027 | June 1, 2027 | September 30, 2027 |
| April 12, 2027 | July 1, 2027 | September 30, 2027 |

\*The WIC Agreement will expire in accordance with the above schedule. The WIC Program may renew this Agreement for no more than two (2) consecutive one (1) year renewal periods if the WIC Program is satisfied that the vendor continues to meet: the customer service qualifying criteria; business integrity criteria; quality standards including compliance with the rules, regulations, policies and procedures governing the WIC Program; continued compliance with state and local sanitary codes and food safety requirements; WIC sales volume criteria; cost containment requirements; and records retention requirements of the WIC Program.

\*\****New Retailers Only***: If using a non-integrated multi-function system, the contract projected date will vary depending on when the vendor returns the completed FIS Application and Agreement for Benefits Redemption. This agreement is between FIS and the vendor for the non-integrated multi- function system. Vendors will ***not*** be allowed to participate in WIC until FIS has a complete and signed agreement with the vendor.

# THE VENDOR SELECTION CRITERIA

Vendor authorization will be based on the following requirements:

## Customer Service Qualifying Criteria:

1. **VALID BUSINESS LICENSE** - The applicant must have a valid business license to operate in the Commonwealth of Massachusetts and any other legally required State, City, or Town licenses or permits.
2. **HOURS OF OPERATION** - The applicant’s store must be open at least 8 hours a day, 6 days a week.
3. **FIXED LOCATION** - The applicant must operate a permanent, fixed retail establishment located in the Commonwealth of Massachusetts.
4. **FRESH PRODUCTS** - The applicant must provide fresh products and infant formula (within expiration dates) in a clean and sanitary environment.
5. **STAPLE FOODS** - The applicant must provide a variety of staple foods for sale including fresh, frozen, and/or canned fruits and vegetables, fresh and/or frozen meats, dairy products, and grain products such as bread, rice, and pasta. Pharmacies are excluded.
6. **MANDATORY MINIMUM INVENTORY REQUIREMENTS** - The mandatory minimum inventory requirements of approved WIC foods and infant formula must always be available on the shelves. All applicants will be inspected by the WIC Program to verify that the Mandatory Minimum Inventory Requirements of WIC items are in stock. Failure to stock and maintain the mandatory minimum inventory requirements of WIC food items, in required quantities, after submission of a vendor application will be grounds for denial.
7. **INFANT FORMULA SUPPLIERS** – The applicant is required to purchase infant formula solely from a list of suppliers approved by the Massachusetts WIC Program. (See Attachment 6 for a listing of approved infant formula suppliers). This list includes wholesalers, distributors, and retailers authorized in Massachusetts, or formula manufacturers registered with the Food and Drug Administration. No other sources may be used to obtain infant formula. Invoices for the infant formula purchase must be maintained for at least the three previous years plus the current year.
8. **E-MAIL ADDRESS** – The applicant must have an e-mail address to do business with the Massachusetts WIC Program. Failure to have and/or maintain an e-mail address for the store will be grounds for denial or termination of the Vendor Agreement.
9. **TRAINING** - The applicant must agree that the manager of the store or an authorized representative, such as the person at the store who is responsible for WIC, will attend mandatory WIC training sessions as scheduled by the Massachusetts WIC Nutrition Program. The applicant must agree to train all staff using WIC approved training materials.
10. **PERCENTAGE OF FOOD SALES FROM WIC** – WIC sales cannot make up more than 50% of vendor’s total annual food sales. Applicants will not be accepted if it is expected that food sales from WIC comprise more than 50% of total food sales. Currently authorized vendors’ volume of WIC redemptions will be monitored to determine if they exceed 50% of total annual food sales.
11. **WIC BENEFITS** – The applicant must be able to accept WIC benefits using a Massachusetts WIC approved integrated or non-integrated multi-function system. Refer to page 2 for details.
12. **MINIMUM LANE COVERAGE** – Stores with three or more cash registers are required to have an integrated system and equip all cash registers with the software to process WIC benefits. Stores with one to two cash registers must equip one cash register if the monthly WIC sales is less than or equal to $8,000 or both cash registers if the monthly sales exceed

$8,000.

1. **SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) PARTICIPATION -**

The applicant, except for pharmacies, must participate in SNAP. Please note participation in SNAP satisfies only one WIC selection criteria and, by itself, shall not constitute compliance with all other necessary WIC selection criteria.

1. **COMPLIANCE WITH WIC AND SNAP REGULATIONS** - The owners and managers listed on the application must have an acceptable history of compliance with WIC, SNAP, and other Food and Nutrition Services (FNS) Programs. Current and prior compliance or prior non-compliance with WIC, SNAP, and other FNS Programs will be considered. WIC will consider whether owners or managers listed on this application owned, managed or were responsible for WIC, SNAP or other FNS Programs at a store that is or was subject to enforcement actions. The following are grounds for denial:
   1. Current disqualification from WIC, SNAP or an FNS Program.
   2. Past disqualification from WIC, SNAP or an FNS program, depending on the nature and severity of the reasons for past disqualification.
   3. Failure to comply with federal WIC or SNAP regulations.
   4. Failure to pay in full any monetary claims assessed by the WIC Program, SNAP or any other FNS Program.
   5. Warnings and sanction points, depending on the nature and severity of the violations. Cumulative sanction points at all stores owned or managed by applicant(s) or at stores where applicants were responsible for WIC will be considered.
   6. Attempt to circumvent a period of disqualification from the WIC Program, SNAP, or other FNS Program, a civil monetary penalty imposed for violations of these programs, or sanction points issued under the WIC Program.
   7. Failure to keep and/or produce inventory records.
2. **BUSINESS INTEGRITY** - The applicant must demonstrate business integrity and a sound reputation. WIC will consider business integrity and sound reputation of the following: owners, officers, partners or the immediate family of owners, officers, or partners involved in the operation of the businesses, the corporate entity, the manager, or any stockholder who has a 5% or greater ownership interest. For each of these the applicant must disclose the following:
   1. Criminal records (current charges and/or past convictions or forfeited collateral for any crime. Does not include: offenses committed before an 18th birthday which were adjudicated in a juvenile court or under a youth offender law, convictions for which the record has been expunged under Federal or State law, or any conviction set aside under the Federal Youth Corrections Act or similar State Authority, or minor traffic violations.)
   2. Official records of removal from other Federal, State, or local programs including whether above mentioned people or corporation ever had a license denied,

withdrawn, or suspended or been fined for license violations, such as business or health licenses.

* 1. Judicial determinations in civil litigation reflect adversely on the integrity of the above-mentioned people.
  2. Evidence of attempts to circumvent disqualification from the WIC or SNAP a civil monetary penalty imposed for violations of WIC or SNAP.

Evidence of prior fraudulent behavior of the above-mentioned people, corporations, or their managers.

* 1. Other evidence reflects the business integrity and reputation of the above-mentioned people or corporation.

If the Vendor Application reveals any of the above, the applicant will be given an opportunity to attach a written explanation giving the name of the person(s) charged or convicted and their relationship to the owner, officer, partner or corporate entity, and their current or past position, if any, in the store or corporation, the court and court docket number, the crime(s) and date(s) committed, the penalty and time served, and any other relevant information.

1. **ACCURACY** - The applicant must submit a complete and accurate Vendor Application. Inaccurate or incomplete information in the Vendor Application or price list may be cause for denial or later termination or/and disqualification from the WIC Program. All applicants will be inspected by the WIC Program to verify the accuracy of the Application.
2. **COMPETITIVE PRICES -** The applicant prices must be competitive with other authorized vendors within the same Peer Group. (See page 10 for further information on price issues).
3. **CONTINUING QUALITY STANDARDS**:

* **Continued compliance** with WIC regulations including consideration of business integrity standards.
* **Continued compliance** with state and local sanitary codes, licensure requirements, and food safety requirements.
* **Not-to-Exceed (NTE) -** The NTE is the maximum amount that Massachusetts WIC will pay for specific food items identified by their Universal Product Code (UPC). The NTE is calculated from the actual prices paid for food redeemed through the WIC Card transactions. NTE may be reevaluated for price competitiveness at any time during the authorization period and vendors may be terminated for non-price competitiveness.
* **WIC sales volume** - The State will review the volume of WIC sales at each authorized WIC vendor on a periodic basis. Low or zero volume of WIC sales may result in loss of WIC authorization.

**FAIR HEARINGS**

If a Vendor Application is not selected for any reason except incompleteness and a vendor wishes to appeal the decision, the vendor must request a fair hearing in writing within 30 days of receiving the non-selection letter to the following address:

Vendor Specialist Massachusetts WIC Nutrition Program

Department of Public Health 250 Washington Street, 6th floor

Boston, MA 02108

# HOW DOES THE WIC PROGRAM EVALUATE COMPETITIVE PRICING?

Food costs are the main determinant of the number of women, infants, and children that WIC can serve. Therefore, pricing and cost containment are critical factors in the authorization and monitoring of WIC vendors.

To ensure that the maximum number of participants have reasonable access to the WIC products they require WIC will pay a “fair and competitive” price for WIC products. WIC defines “fair and competitive” as prices that are within a reasonable range of prices charged by comparable Massachusetts retailers for the same or similar items. In support of cost containment, the WIC Program must be able to classify vendors into peer groups. Vendors are assigned into peer groups for selection/authorization as well as to establish reimbursement prices based on the assumption that stores with similar characteristics should be charging comparable prices for WIC foods.

To measure the ‘fair and competitive’ standard, WIC compares food costs within ‘peer groups’ of stores authorized to do business with the WIC Program. The peer group assignments are currently based on information captured on the Vendor Application. A peer group is defined by the WIC Program according to a few common characteristics such as:

* Type of business (major or small chain, independent, chain or independent pharmacy, commissary)
* Type of ownership (sole proprietorship, partnership, corporation, cooperative)
* Size (sales volume, food inventory, number of checkout lanes)
* Location (urban, suburban, rural, special district)

The Not-to-Exceed (NTE) is the maximum amount that Massachusetts WIC will pay for specific food items identified by their Universal Product Code (UPC). An average redemption price is calculated for each peer group and for each UPC using the previous three (3) months’ worth of redemption data. This calculation is performed on a bi-weekly basis.

The WIC Program reviews the prices charged for WIC foods and assigns a NTE to each food item. Each WIC Card transaction is reviewed against this NTE. The prices submitted on the Price List (Attachment 2 & 3) are compared to the current NTE prices of WIC authorized vendors within the same Peer Group for the following food items:

Milk – gallon (whole, 2%, 1%, skim) Beans (canned)

Cheese 100% Whole Wheat Bread

Eggs Brown Rice/Whole Wheat Pasta

Cereal Whole Wheat Tortillas

Juice Dry Infant Cereal

Peanut Butter Infant Fruits & Vegetables

Dry Beans (bag) Infant Formula

If one food item’s price exceeds the vendor’s assigned Peer Group, the application will not be automatically rejected. Rather, the WIC Program will advise the applicant that their prices are too high and give the applicant an opportunity to resubmit a more competitive price list. Failure to submit a competitive price list, after being given the opportunity to do so, shall be deemed a withdrawal of the applicant’s WIC Vendor Application.

**VENDOR COST CONTAINMENT**

# HOW DOES THE WIC PROGRAM EVALUATE “ABOVE 50% VENDORS”

The Child Nutrition and WIC Reauthorization Act of 2004, Public Law 108-265 incorporates into the WIC Program regulations new legislative requirements for vendor cost containment that affect the selection, authorization, and reimbursement of WIC vendors.

Federal regulations require Massachusetts WIC to evaluate vendors at the time of authorization, reassess new vendors within six months after authorization, and then annually to determine if the vendor should be designated as an “above-50 percent vendor”.

Massachusetts WIC will not authorize active vendors, newly authorized vendors, and vendors that are expected to derive more than fifty (50%) of their annual food sales revenue from the redemption of WIC benefits.

Applicants applying to WIC are asked whether they expect to derive more than 50-percent of their annual food sales revenue from the redemption of WIC benefits. If vendor’s answers “yes”, the store must be classified as above-50 percent vendor and will not be accepted to participate in the WIC Program.

Any current vendor who is found to meet this criterion will be notified that their WIC Vendor Agreement will be terminated for the remainder of the contract cycle unless it is determined that this vendor is needed due to inadequate participant access.

Vendors must provide the state WIC Vendor Unit with documentation of the store’s actual gross food sales[1](#_bookmark6) to ensure that the store is fairly assessed. All vendors must maintain a record of all documented food sales for a period of three years and must provide this information for evaluation purposes upon request.

Failure to provide documentation requested by Massachusetts WIC within the timeframe specified will result in termination of the store’s WIC Vendor Agreement. The following documents are used to verify the store’s actual gross food sales:

* Financial Statements
* Accounting Reports
* Tax Forms
* Mass. Dept. of Revenue Webfile for Business File Returns - Sales Tax Monthly/Quarterly
* Any other records sufficient to verify the store’s food sales amount.

If a vendor is asked to provide documentation of the store’s food sales amount and is unable to prove that the store is not an “above-50-percent vendor” or if there is not a response to the request for documentation, the store will be classified as an “above-50-percent vendor” and will be terminated from the program for the remainder of the contract cycle.

1 Massachusetts WIC presently defines ‘food sales’ as sales of SNAP Program-eligible foods. The SNAP regulations at 7 CFR 271.2 defines ‘eligible foods’ as:

1. Any food or food product intended for human consumption except alcoholic beverages, tobacco and hot foods and hot food products prepared for immediate consumption.
2. Seeds and plants to grow foods for the personal consumption of eligible households. Food sales do not include sales of any items that cannot be purchased with SNAP benefits, such as hot foods or food that will be eaten in the store.

# WHAT IS THE WIC MANDATORY MINIMUM INVENTORY FOR FOOD VENDORS?

For a Vendor Application to be considered, the applicant must stock all categories of WIC foods as described below the Mandatory Minimum Inventory Requirements. These foods must be fresh and must be in adequate supply for WIC participants to purchase them whenever the vendor is open for business**. Failure to stock and maintain the WIC mandatory minimum inventory requirements of WIC food items in the required quantities after submission of the Vendor Application will be grounds for denial.**

Mandatory Minimum Inventory Requirements are included as Attachment 4. The WIC Program strongly recommends that the list is used to make sure the Vendor Application is complete.

For a complete listing of all the WIC approved foods, please review the MA WIC Approved Food Guide [**WIC Approved Food Guide (PDF)**](https://www.mass.gov/doc/wic-food-guide/download)or for more information about the WIC Program please visit our website at [**www.mass.gov/WIC**](http://www.mass.gov/WIC).

NOTE: The WIC Mandatory Minimum Inventory Requirements may be amended by the WIC Program during the Agreement period.

**THE MANDATORY MINIMUM INVENTORY REQUIREMENTS OF WIC FOODS:**

1. **CHEESE**

16-ounce packages only

### Must have 2 varieties

### Minimum stock: 3 pounds in each variety - 6 pounds total

## EGGS – Least expensive brand

Grade A, Brown or White

### Minimum stock: 6 dozen total, any combination

1. **CEREAL**

11-ounce or larger boxes only

### Must have 5 varieties

### Minimum stock: 2 boxes of each variety - 10 boxes total

1. **LEGUMES - PEANUT BUTTER**

16-18-ounce jar only

### Minimum stock: 4 jars total

1. **LEGUMES - DRIED BEANS/PEAS OR CANNED BEANS**

1-pound bags only

**LEGUMES - CANNED BEANS**

15-16-ounce cans only

### Must have 2 varieties - dry beans or canned beans or combination of both Minimum stock: 4 (1lb) bags or 8 cans of canned beans, any combination

1. **CANNED FISH**

5oz. Chunk Light Tuna **or** 3.75oz. Sardines **or** 5oz. Pink Salmon

### Minimum stock: 4 cans total, any combination

1. **INFANT CEREAL**

8-ounce boxes only

### Minimum stock: 6 boxes total

1. **BABY FOOD FRUITS & VEGETABLES**

4-ounce jars or 2-Packs of 4-ounce tubs

### Must have 3 types or varieties

### Minimum stock: 64 (4oz) jars/32 (2-packs) total

1. **BREAD/WHOLE GRAIN OPTIONS**

**100% WHOLE WHEAT BREAD -** 16-ounce package only

***Minimum stock***: **6 packages total**, 16oz. 100% Whole Wheat Bread

**TORTILLAS -** 16-ounce package only **OATMEAL -** 16-ounce package only **BROWN RICE -** 14-16-ounce packages only **WHOLE GRAIN PASTA -**16-ounce package

***Minimum stock:* 3 packages total**, any combination (tortillas, oatmeal, brown rice, or whole grain pasta)

1. **FRUITS – FRESH, CANNED OR FROZEN**

**FRESH** – any variety of fresh fruits, whole or cut.

**CANNED** – any brand and size packed in water or juice, plain fruit, plain fruit mixtures (except fruit cocktails), any container type (metal, plastic, glass), 100% canned pumpkin, applesauce – ‘No sugar added’ or ‘unsweetened varieties only.

**FROZEN** – any brand with no added sugar, any plain fruit, plain fruit mixtures.

### Must have at least 3 varieties of fruits – two must be fresh, and one can be canned or frozen

### Minimum stock: $25.00 worth of fresh AND $10.00 worth of canned or frozen,

### $35.00 total dollar amount

1. **VEGETABLES – FRESH, CANNED OR FROZEN**

**FRESH** – any variety of fresh vegetables, bagged salad mixtures, bagged vegetables, whole or cut.

**CANNED** – any brand and size, any plain vegetables, plain vegetables mixtures, any container type (metal, plastic, glass), regular or low sodium.

**CANNED TOMATO PRODUCTS** – any brand and size, metal cans only, pastes, purees, whole, or crushed tomatoes.

**FROZEN** – any brand and size, any plain vegetables, plain vegetables mixtures, any package type (bag, box).

### Must have at least 3 varieties of vegetables – two must be fresh, and one can be canned or frozen

### Minimum stock: $25.00 worth of fresh AND $10.00 worth of canned or frozen,

### $35.00 total dollar amount

1. **IRON-FORTIFIED INFANT FORMULA**

Similac Advance, 12.4 ounce powdered

### Minimum stock: 3 cases total (18 cans)

1. **YOGURT**

32-ounce, 16-ounce, 8-pack-2oz tubes, 16-pack-2oz tubes, 4-pack-16oz, and 8-pack-32oz containers only, No Artificial Sweeteners

***Minimum stock: 64*oz total, 2-32oz or 4-16oz containers, any combination**

## MILK – Whole & Lowfat/Fat Free -Least expensive brand

### Minimum stock: 8 gallons of fat free/1% lowfat fluid milk 2 gallons of whole milk

### 16 cans of evaporated fat free/lowfat milk OR

### 3 quarts of long-life fat free/1% lowfat milk, any combination

1. **BOTTLED JUICE**

100% juice, 64-ounce plastic bottles

### Must have 2 flavors on shelf

### Minimum stock: 6 bottles of each flavor, 12 bottles total

1. **OTHER FOODS** - Below is a list of other foods that the WIC Program issues to participants. The issuance of these foods is limited and based on the participant’s needs. There is currently no mandatory minimum requirement for these foods:

**SOY-MILK**

Quarts or half-gallon containers

**LACTOSE FREE MILK**

96-ounce Jug or Half-gallon containers

**TOFU**

16-ounce packages only

**FROZEN JUICE**

100% juice, 11.5-12-ounce cans

# WHAT IS THE WIC MANDATORY MINIMUM INVENTORY FOR PHARMACIES?

A pharmacy must stock two (2) of the following categories of infant formulas: 1) iron-fortified formula, and 2) special prescription formulas and adult/pediatric nutritionals. The formulas must be fresh (within expiration date), and in adequate supply for WIC participants to purchase them whenever the pharmacy is open for business. The pharmacy must be willing and able to provide any special formulas within 48 hours (see below for more details). **Failure to stock and maintain a WIC mandatory minimum inventory of WIC products in required quantities after submission of the Vendor Application will be grounds for denial.**

Mandatory Minimum Inventory Requirements is included as Attachment 4. The WIC Program strongly recommends that the list is used to make sure the Vendor Application is complete.

NOTE: The WIC Mandatory Minimum Inventory Requirements may be amended by the WIC Program during the Agreement period.

**THE MANDATORY MINIMUM INVENTORY FOR PHARMACIES:**

1. **IRON-FORTIFIED INFANT FORMULA**

Similac Advance, 12.4 ounce powdered

### Minimum stock: 3 cases total (18 cans)

Similac Advance, 13-ounce concentrate – ***upon request*** Similac Advance, 32-ounce ready-to-feed – ***upon request*** Similac Soy Isomil, 13-ounce concentrate – ***upon request*** Similac Soy Isomil, 12.4-ounce powdered – ***upon request*** Similac Soy Isomil, 32-ounce ready-to-feed – ***upon request***

1. **SPECIALIZED INFANT FORMULA AND ADULT/PEDIATRIC NUTRITIONALS**

Specialized infant formulas and adult/pediatric nutritionals must be available within **48 hours** of notification by the local WIC program or a participant with current WIC benefits. Such products include:

|  |  |  |
| --- | --- | --- |
| Abbott Similac NeoSure | Abbott RCF | Nestle Vivonex Pediatric |
| Abbott Similac Alimentum | Mead Nutramigen | Nestle Boost Kid Essentials 1 Cal |
| Abbott Similac PM 60/40 | Mead Johnson Nutramigen | Nestle Boost Kid Essentials 1.5 Cal |
| Abbott EleCare Infant DHA/ARA | Mead Pregestimil | Nestle Compleat Pediatric Standard  1.0 Cal |
| Abbott EleCare Jr | Mead Product 3232A | Nestle Alfamino Jr |
| Abbott Similac Special Care 30 Cal | Mead PurAmino DHA/ARA | Nutricia Neocate Infant Syneo |
| Abbott Ensure | Mead Nutramigen w/Enflora LGG | Nutricia Fortini Infant Formula |
| Abbott Ensure Plus | Mead Enfaport | Nutricia Neocate Jr |
| Abbott Pediasure | Mead Enfamil NeuroPro EnfaCare | Nutricia PKU Maxamum |
| Abbott PediaSure w/Fiber | Mead PurAmino Jr | Nutricia KetoCal 4:1 |
| Abbott Pulmocare | Nestle Extensive HA | Nutricia Neocate Jr w/Prebiotics |
| Abbott PediaSure Peptide 1.0 Cal | Nestle Alfamino Infant | Nutricia Neocate Splash |
| Abbott PediaSure 1.5 Cal | Nestle Peptamen Jr | Nutricia Neocate Infant DHA&ARA |
| Abbott Osmolite 1.5 Cal |  |  |

# HOW TO FILL OUT THE WIC VENDOR APPLICATION

1. If applying as a food vendor, attach a completed food vendor price list **(Attachment 2)** to the application. If applying as a pharmacy, attach a completed pharmacy price list **(Attachment 3)** to the application. If applying as both a food vendor and a pharmacy, attach a food vendor and pharmacy price list **(Attachments 2 and 3)** to the application.
2. **PLEASE TYPE OR PRINT ALL ITEMS CLEARLY**. The WIC Program will not consider Vendor Applications that are incomplete. Fill out all parts of the application and do not leave any questions blank. Attach all required documents to the application. The Vendor Application must be complete and accurate, and it must be signed by the owner, manager, or other individual with legal authority to obligate the vendor. If a Vendor Application is rejected for incompleteness, the vendor may not appeal the decision by requesting a fair hearing.
3. List the names of all owners of the store or business (item 17 on the application). If the business is a corporation, give the corporate name in item 16 and list the names of the President, Vice President, and Treasurer in item 17. If there is more than one Vice President, list the Vice President who is chiefly responsible for the operation of the store. List the names and addresses of all shareholders holding a 5% or greater interest in the corporation.
4. Complete the information at the top of the price list.
5. Fill out the price list carefully and completely. Do not estimate or project prices. The prices must reflect **THE STORE’S CURRENT ACTUAL SHELF PRICES.** When the price list does not specify the brand name for the WIC food item, select the brand with the HIGHEST price. **ACTUAL SHELF PRICES** are necessary for the WIC Program to evaluate prices charged by vendors for the purposes of characterizing stores by peer group and to monitor compliance. Fill in the price of the item and indicate the brand name of the item in the space provided.
6. When filling out the price list, only give prices for items currently on the shelf. When prices are given for WIC Mandatory Minimum Inventory requirement items in the quantities specified, do not list the sale price. Write the actual price or the Vendor Application will be considered inaccurate and will be denied.
7. The corporate office may complete the application and price list for each outlet of a chain store. **APPLICATION AND PRICE LIST MUST BE COMPLETED FOR EACH LOCATION WITHIN THE CHAIN.**

## IF A SPACE IS LEFT BLANK ON THE PRICE LIST, THE WIC PROGRAM WILL ASSUME THAT THE VENDOR DOES NOT CARRY THAT PARTICULAR ITEM. Please provide prices

for all the WIC foods/formula available in the store, not just for the WIC Mandatory Minimum Inventory Requirement. Applicants use Attachment 4 for the WIC Mandatory Minimum Inventory Requirements to see if the price list is complete. The application will be denied if prices are not provided for Mandatory Minimum Inventory of WIC items.

1. Sign and date the last page of the application(s) and the price list. **THE APPLICATION AND PRICE LIST ARE INVALID IF THEY ARE NOT SIGNED AND DATED.**
2. IF ASSISTANCE IS NEEDED IN FILLING OUT THE VENDOR APPLICATION AND PRICE LIST, PLEASE CONTACT THE VENDOR STAFF OF THE MASSACHUSETTS WIC NUTRITION

PROGRAM AT 1-800-552-9425 OR email to: [masswicretailers@mass.gov](mailto:masswicretailers@mass.gov).

1. Applications can be submitted by mail or email to:

## Vendor Specialist Massachusetts WIC Nutrition Program

## 250 Washington Street, 6th floor Boston, MA 02108 [masswicretailers@mass.gov](mailto:masswicretailers@mass.gov)

**ATTACHMENT 1**

**FISCAL YEARS 2025-2027**

**MASSACHUSETTS WIC NUTRITION PROGRAM**

**WOMEN, INFANTS AND CHILDREN NUTRITION PROGRAM VENDOR APPLICATION**

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK AND COMPLETE ALL ITEMS

1. Store Name
2. Store Address

Street City State Zip

1. Mailing Address (if different from store address):

Street or PO Box

City State Zip

1. Does the applicant own the real estate where the store is located?  Yes  No

***If no***, give the name and address of the landlord:

Landlord’s Name Street or Box

City State Zip

1. Store Telephone Number
2. Store/Owner E-mail Address
3. Store Owner’s Name
4. Store Manager’s Name – person with primary on-site responsibility for daily operations

if different from owner

1. Name of person at store responsible for WIC
2. When did the store open for business under current ownership?

Month Day Year

1. How long have you owned, operated, or managed this store at the present site?
2. Has this store ever operated under a different name/location, or have you ever owned, operated, or managed this store under another name?  Yes  No

***If yes***, what was the name/location when it was in operation?

**VENDOR APPLICATION (CON’T) PAGE 2 OF 5**

1. Type of Business  Major Chain  Pharmacy I (Independent pharmacy)
   * Small Chain  Pharmacy II (Chain Pharmacy)
   * Independent  Commissary
2. Days and Hours of Business:

MON. FRI. TUES. SAT. WED. SUN. THURS.

1. Type of Ownership (check one type)
   * Sole Proprietorship  Partnership  Co-Operative
   * Corporation  Limited Liability Co. (LLC) Other If a Corporation or LLC, please provide the name of Corporation or LLC:
2. Provide the corporate name and address if different from the store address? (For example, enter address of corporate headquarters for a parent corporation or chain store or franchise)

Business Name Street or PO Box City State Zip Telephone Contact Person Name Email

1. Owners’ Names and Home Addresses

All owners of the business must be listed.[1](#_bookmark10) DO NOT enter information for publicly owned corporations. Enter information for owners of proprietorships, partnerships, officers and principal shareholders of private corporations. If the business is a corporation, list the names of the president, vice president and treasurer. If there is more than one vice president, list the vice president who is chiefly responsible for the operation of the store. (Attach additional sheets if necessary)

Name Title/Office Street or PO Box City State Zip

Name Title/Office Street or PO Box City State Zip

1. How many people work in the store? (include paid and unpaid, full and part-time, owners and family)
2. How many people will be handling WIC transactions?
3. How many cash registers does the store have?

1 For purposes of this application, “owners” includes natural persons and, in the case of a sole proprietorship, any sole proprietor, in the case of a partnership, any limited partner owning 5% or more and any general partner, in the case of a corporation, any shareholder owning 5% or more, any officer and any director, any trustee of any trust, any mortgagee in possession, and any executor or administrator of any vendor which is an estate.

**VENDOR APPLICATION (CON’T) PAGE 3 OF 5**

1. What system will the store be using to process WIC Card transactions?
   * Integrated POS System (required if a store has 3 or more cash registers)
   * Non-Integrated Multi-Function POS System (stores with 1-2 cash registers) - One device if the store does less than $8,000 on WIC sales monthly **OR** 2 devices if the store exceeds

$8,000 and has 2 cash registers.

1. If using integrated system, please provide the name of the system? (ie: DUMAC, Retalix, NCR ACS, LOC + MTX, etc)
2. Who is the store’s Third-Party Processor (TPP)?  FiServ  Vantiv  Worldpay
   * Other
3. Does the store expect to derive more than 50% of food sales from WIC sales?  Yes  No
4. Please indicate staple food items sold at this store:

Bread/Cereal Dairy Products Fruits/Vegetables Meat, Poultry, Fish

* + Bread  Milk  Fresh Fruits/Vegetables  Beef/Chicken
  + Cereal  Cheese  Canned Fruits/Vegetables  Pork/Bacon/Ham
  + Pasta  Butter  Frozen Fruits/Vegetables  Eggs
  + Rice  Yogurt  100% Fruit/Vegetables Juices  Lunch Meats/Hot Dogs
  + Flour  Other  Other  Canned Meats/Fish
  + Other  Other

1. Please check the services at this store from choices listed below:
   * Store is primarily a convenience store featuring a limited number of brands and relatively low inventory of each item
   * Store features a full, well-stocked line of grocery items with 3 or more brands to choose among (most food lines)
   * Store sells gasoline as a major product line
   * Store sells liquor as a major product line
   * Store features non-grocery items as its major retail product
   * Store has its own bakery
   * Store has its own deli
   * Store employs a full time butcher
   * Store employs a full time pharmacist
   * Store features an extensive fresh produce section
   * Store sells lottery tickets
2. List supplier from whom WIC foods are purchased:

Name Street address: City/State/Zip:

Phone:

1. List supplier from whom infant formula is purchased: Infant formula must be purchased from the list of infant formula wholesalers, distributors and retailers licensed in Massachusetts or formula manufacturers registered with the FDA.

Name Street address: City/State/Zip:

Phone:

**VENDOR APPLICATION (CON’T) PAGE 4 OF 5**

1. Related WIC and SNAP Program History
2. How many stores are under the same ownership? (Include this store)
3. How many of these stores are currently authorized for the MA WIC Program?
4. Has the store or applicant ever previously applied to participate in the WIC Program and had your application non-selected?  Yes  No

***If yes***, list date and reason for non-selection.

1. Has the store or applicant ever been terminated from the WIC program for failing to provide copies of the invoices for infant formula purchase or for failing to provide food sales information?  Yes  No, ***If yes***, attach an explanation.
2. Does this store now participate in SNAP?  Yes  No

***If yes***, enter your SNAP Number:

1. Including this store, have the owners, the corporation or the manager ever owned, operated or managed any store(s) which withdrew from the WIC, SNAP or another FNS Program or a store which received a warning, was suspended, disqualified, withdrawn or assessed a civil monetary penalty by the WIC or SNAP or other FNS Programs?  Yes  No

***If yes***, attach an explanation identifying the person or corporation, the store name and location, the reason(s) for the withdrawal, violation, or sanction, and the date of the withdrawal, violation, or sanction.

1. Business Integrity — Applicant must demonstrate business integrity and sound reputation.
2. Please check below regarding any of the following people: owners; officers; partners; or immediate family of owners, officers, and partners involved in the operation of the business; corporate entity; managers; or any stockholder who has a substantial role in the operation of the store. Are there any of the following:

|  |  |
| --- | --- |
| (i) Criminal records—current charges and/or past convictions or forfeited collateral for any crime. (Do not include: offenses committed before an 18th birthday which were finally adjudicated in a juvenile court or under a youth offender law, convictions for which the record has been expunged under Federal or State law, or any conviction set aside under the Federal Youth Corrections Act or similar State Authority, or traffic violations.) | * YES  NO |
| (ii) Official records of removal from other Federal, State, or local programs including whether the above-mentioned people or the corporation ever had a license denied, withdrawn, or suspended or been fined for license violation, i.e., business or health licenses. | * YES  NO |
| (iii) Judicial determinations in civil litigation adversely reflecting on the integrity of the above-mentioned people or the corporation. | * YES  NO |
| (iv) Evidence of attempt to circumvent disqualification from WIC or SNAP or a civil monetary penalty imposed for violations of the WIC or SNAP. | * YES  NO |

**VENDOR APPLICATION (CON’T) PAGE 5 OF 5**

|  |  |
| --- | --- |
| (v) Evidence of prior fraudulent behavior by the above-mentioned people or corporation or their employees. | * YES  NO |
| (vi) Other evidence reflecting on the business integrity and reputation of the above-mentioned people or the corporation. | * YES  NO |
| ***If yes***, to the above, attach a written explanation, giving the names of the person(s) charged or convicted and their relationship to the owner, officer, partner, manager or corporate entity, and their current or past position, if any, in the store or corporation, the court and court docket number, the crime(s) and date(s) committed; the penalty and/or time served, and any other information  you want considered related thereto. | |

1. Have the owners, managers, or corporation ever had a license  YES  NO denied, withdrawn or suspended or fined for license violations

i.e., business or health licenses?

***If yes***, attach an explanation, listing the type of license, the reason for and date of denial, fine or suspension or withdrawal.

1. Quality Standards — Attach current business, health and other state or local licenses.
2. Certification and Signature of Owner — By the person who has the authority to apply on behalf of the store:

I hereby certify that the information supplied by me on this application and Price List are correct. If it is determined that the information supplied is not correct or that, in review of the information supplied, the Massachusetts WIC Program finds that my store does not meet the criteria to be a WIC vendor, my store will not be approved for a contract.

I understand that if this store is selected for a WIC Agreement, I will be bound by the WIC Program regulations and policies including but not limited to:

1. Charging the correct prices on WIC benefits at the time of purchase. The prices for the WIC approved foods shall be competitive with and not exceed the average shelf price of other vendors in the same peer group;
2. Attending vendor education sessions;
3. Training employees about WIC procedures using WIC approved training materials;
4. Being periodically monitored;
5. Accepting responsibility on behalf of the store and its owner(s), manager(s), and employees to prevent violations of the WIC Program rules and regulations;
6. Accepting responsibility on behalf of the store and its owner(s), manager(s), and employees including new, full and part-time, paid or unpaid employees, for violations of WIC procedures committed;
7. Updating information on this Application as required by the WIC Program;
8. I understand that this is only a request for a WIC Vendor Agreement and, except as specified herein, does not constitute an Agreement.

Signed by the individual with legal authority to obligate the owner(s) of this store.

Signed Date

Print Name Title

Return to: Vendor Specialist Massachusetts WIC Nutrition Program 250 Washington Street, 6th Floor Boston, MA 02108 [masswicretailers@mass.gov](mailto:masswicretailers@mass.gov)

This institution is an equal opportunity provider.

|  |  |
| --- | --- |
| **ATTACHMENT 2 - FOOD VENDOR PRICE LIST** | |
| **Vendor ID #:** |  |
| **Vendor Name:** |
| **Address:** |  |

|  |
| --- |
| **To complete this attachment, give HIGHEST ACTUAL SHELF PRICES for the following WIC authorized foods that are normally stocked in the store.** |
| **If the store carries brands not listed use the blank spaces provided to fill out the information.** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **CEREAL - 11oz boxes or larger** | |  |  |  |
| 016000492349 | General Mills | Blueberry Chex | 12 |  |
| 016000487727 | General Mills | Cheerios | 12 |  |
| 016000170032 | General Mills | Cheerios | 18 |  |
| 016000163928 | General Mills | Cheerios | 21.7 |  |
| 016000189157 | General Mills | Cheerios Oat Crunch Berry | 18 |  |
| 016000200043 | General Mills | Cheerios-BlendsAppleStrawberry | 18 |  |
| 016000200050 | General Mills | Cheerios-BlendsBluberryBanana | 18 |  |
| 016000103719 | General Mills | Cinnamon Chex | 12 |  |
| 016000170995 | General Mills | Cinnamon Chex | 19.2 |  |
| 016000487963 | General Mills | Corn Chex | 12 |  |
| 016000171084 | General Mills | Corn Chex | 18 |  |
| 016000157651 | General Mills | Fiber One Honey Clusters | 17.5 |  |
| 016000275676 | General Mills | Kix | 12 |  |
| 016000171046 | General Mills | Kix | 18 |  |
| 016000169661 | General Mills | Kix Berry Berry | 18 |  |
| 016000487697 | General Mills | MultiGrain Cheerios | 12 |  |
| 016000168756 | General Mills | MultiGrain Cheerios | 18 |  |
| 016000487949 | General Mills | Rice Chex | 12 |  |
| 016000171022 | General Mills | Rice Chex | 18 |  |
| 016000275638 | General Mills | Total | 16 |  |
| 016000200814 | General Mills | Vanilla Spice Cheerios | 12 |  |
| 016000275492 | General Mills | Wheat Chex | 14 |  |
| 016000275652 | General Mills | Wheaties | 15.6 |  |
| 038000198410 | Kellogg's | All Bran - Original | 18.6 |  |
| 038000596674 | Kellogg's | Complete All Bran Wheat Flakes | 18 |  |
| 038000001109 | Kellogg's | Corn Flakes | 12 |  |
| 038000001208 | Kellogg's | Corn Flakes | 18 |  |
| Page 1 of 4 | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **CEREAL - 11oz boxes or larger** | |  |  |  |
| 038000231452 | Kellogg's | Corn Flakes | 24 |  |
| 038000280290 | Kellogg's | Corn Flakes-Honey | 11.4 |  |
| 038000924224 | Kellogg's | Crispix | 18 |  |
| 038000281464 | Kellogg's | Frosted Mini Wheat-Golden Honey | 14.3 |  |
| 038000318344 | Kellogg's | Frosted Mini Original | 24 |  |
| 038000199349 | Kellogg's | Frosted Mini Wheats-Original | 18 |  |
| 038000199387 | Kellogg's | Frosted Mini Wheats-Blueberry | 14.3 |  |
| 038000199400 | Kellogg's | Frosted Mini Wheats-Blueberry | 22 |  |
| 038000199554 | Kellogg's | Frosted Mini Wheats- LittleBites | 15.9 |  |
| 038000199509 | Kellogg's | Frosted Mini Wheats-Strawberry | 22 |  |
| 038000245664 | Kellogg's | Frosted Mini Wheats-Cinnamon Roll | 14.3 |  |
| 038000202117 | Kellogg's | Frosted Mini Wheats-Little Bites | 23 |  |
| 038000199943 | Kellogg's | Rice Krispies | 12 |  |
| 038000200038 | Kellogg's | Rice Krispies | 18 |  |
| 038000231537 | Kellogg's | Rice Krispies | 24 |  |
| 038000016219 | Kellogg's | Special K - Original | 18 |  |
| 038000199462 | Kellogg's | Special K Protein-Almond | 14.3 |  |
| 038000200663 | Kellogg's | Special K Protein -Original | 13.3 |  |
| 038000143670 | Kellogg's | Special K Protein -Original | 19 |  |
| 064144080373 | Maypo | Instant Maple Oatmeal | 14 |  |
| 013130006989 | Nabisco | Cream of Rice | 14 |  |
| 013130006125 | Nabisco | Cream of Wheat - 1 Minute | 28 |  |
| 013130006224 | Nabisco | Cream of Wheat - Instant | 28 |  |
| 013130006118 | Nabisco | Cream of Wheat 2 1/2 Minute | 12 |  |
| 013130060257 | Nabisco | Cream of Wheat Instant | 12 |  |
| 042400137559 | Farina Mills | Farina | 14 |  |
| 042400137320 | Farina Mills | Farina | 28 |  |

**FOOD VENDOR PRICE LIST, CONTINUED**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **CEREAL - 11oz boxes or larger (con't)** | | |  |  |
| 884912116505 | Post | Banana Nut Crunch | 15.5 |  |
| 884912109101 | Post | Grape Nuts Flakes | 18 |  |
| 884912126016 | Post | Great Grains Crunchy Pecan | 16 |  |
| 884912014276 | Post | Honey Bunches Of Oats-Almonds | 18 |  |
| 884912359162 | Post | Honey Bunches of Oats-Almonds | 12 |  |
| 884912249265 | Post | Honey Bunches of Oats-Almonds | 28 |  |
| 884912359414 | Post | Honey Bunches of Oats-Cinnamon Bunches | 12 |  |
| 884912359155 | Post | Honey Bunches of Oats-Honey Roasted | 12 |  |
| 884912014269 | Post | Honey Bunches Of Oats-Honey Roasted | 18 |  |
| 884912249272 | Post | Honey Bunches of Oats-Honey Roasted | 28 |  |
| 884912359421 | Post | Honey Bunches of Oats-Maple Pecans | 12 |  |
| 884912377142 | Post | Honey Bunches of Oats-Vanilla Bunches | 12 |  |
| 030000567319 | Quaker | Instant Oatmeal-Original | 9.8 |  |
| 030000560839 | Quaker | Life-Vanilla | 13 |  |
| 030000063545 | Quaker | Life-Original | 13 |  |
| 030000061190 | Quaker | Life-Original | 18 |  |
| 030000571842 | Quaker | Life-Original | 22.5 |  |
| **Store Brand Cereal - 11oz or larger boxes** | | |  |  |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Canned Fish** |  |  |  |  |
| 086600000206 | Bumble Bee | Chunk Light Tuna | 5 |  |
| 080000006738 | Starkist | Chunk Light Tuna | 5 |  |
| 048000002457 | Chicken of the Sea | Chunk Light Tuna | 5 |  |
| 086600750705 | Bumble Bee | Sardines in Oil | 3.75 |  |
| 066613000059 | Brunswick | Sardines in Oil | 3.75 |  |
| 086600000992 | Bumble Bee | Pink Salmon | 5 |  |
| 048000000866 | Chicken Of the Sea | Pink Salmon | 5 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Dry Beans/Peas - 1-LB Bag** | | |  |  |
| 041331024792 | Goya | Dry Black Beans | LB |  |
| 041331025034 | Goya | Dry Central American Red Beans | LB |  |
| 041331024723 | Goya | Dry Pinto Beans | LB |  |
| 041331024839 | Goya | Dry Roman Beans | LB |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Peanut Butter - 16-18oz Jar** | | |  |  |
| 051500255162 | Jif | Creamy Peanut Butter | 16 |  |
| 051500255377 | Jif | Crunchy Peanut Butter | 16 |  |
| 034000400126 | Reese's | Creamy Peanut Butter | 18 |  |
| 037600110754 | Skippy | Creamy Peanut Butter | 16 |  |
| 037600110723 | Skippy | Super Chunk Peanut Butter | 16 |  |
|  |  |  |  |  |
| **Canned Beans - 15-16oz** | | |  |  |
| 041331124669 | Goya | Black Beans | 16 |  |
| 041331124065 | Goya | Pink Beans | 16 |  |
| 041331124201 | Goya | Small Red Beans | 16 |  |
| 041331124379 | Goya | Pinto Beans | 16 |  |
| 041331124027 | Goya | Red Kidney Beans | 16 |  |
| 041331124164 | Goya | Roman Beans | 16 |  |
|  |  |  |  |  |
| **Eggs - Any Size, Grade A - Least Expensive** | | |  |  |
| 090595000325 | Giroux's | Large Brown Cage Free Eggs | doz |  |
| 039222030069 | Mitlitsky | Large Brown Cage Free Eggs | doz |  |
| 039222030052 | Mitlitsky | Large White Cage Free Eggs | doz |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Dry Milk - 1 LB. Box** | |  |  |  |
| 050000605644 | Carnation | Instant Nonfat Dry Milk | 9.6 |  |
| **Evaporated Milk - 12 oz. Can** | | |  |  |
| 050000010110 | Carnation | Whole Evaporated Milk | 12 |  |
| 050000159918 | Carnation | Lowfat Evaporated Milk | 12 |  |
| 050000160112 | Carnation | Fat Free Evaporated Milk | 12 |  |

**FOOD VENDOR PRICE LIST, CONTINUED**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Whole Wheat Bread - 16oz. Pkg** | |  |  |  |
| 073410022504 | Arnold | Stone Ground 100% Whole Wheat Bread | 16 |  |
| 074323092301 | Bimbo | 100% Whole Wheat Bread | 16 |  |
| 835841001066 | Gold Medal | 100% Whole Wheat | 16 |  |
| 014100071662 | Pepperidge Farm | Light Style Soft Wheat Bread | 16 |  |
| 014100085430 | Pepperidge Farm | WW Cinnamon W/ Raisins Swirl | 16 |  |
| 072945611030 | Sara Lee | 100% Whole Wheat Bread | 16 |  |
| 072250011365 | Wonder | 100% Whole Wheat Bread | 16 |  |
|  |  |  | 16 |  |
|  |  |  | 16 |  |
|  |  |  | 16 |  |
| **Tortillas - 16oz. Pkg** | |  |  |  |
| 043354007905 | Chi-Chi's | Whole Wheat Tortillas | 16 |  |
| 048564060054 | Guerrero | Corn White Tortillas | 16 |  |
| 027331000493 | La Banderita | Corn Tortillas | 16 |  |
| 027331000486 | La Banderita | Whole Wheat Tortillas | 16 |  |
| 027331032227 | La Banderita | 100% WW Tortillas | 16 |  |
| 027331010546 | La Banderita | Corn Tortillas | 16 |  |
| 035305228040 | Mayan Farms | Whole Wheat Tortillas | 16 |  |
| 073731003282 | Mission | Yellow Corn Tortillas | 16 |  |
|  |  |  |  |  |
| **Oatmeal - 14-16oz. Pkg** | |  |  |  |
| 072463000217 | McCann's | Irish Oatmeal-Quick Cooking | 16 |  |
| **Brown Rice - 14-16oz Pkg** | |  |  |  |
| 017400100780 | Success | Brown Rice 10 Minute Boil In Bag | 14 |  |
| 041331026130 | Goya | Brown Rice | 16 |  |
| 017400118457 | Minute | Instant Brown Rice 14oz | 14 |  |
|  | | | |  |
| **Whole Grain Pasta - 16oz. Pkg** | |  |  |  |
| 076808005851 | Barilla | Whole Grain Penne | 16 |  |
| 072368508511 | Delallo Organic | Capellini 100% Whole Wheat | 16 |  |
| 071518000165 | Hodgson Mill | Whole Wheat Spagetti | 16 |  |
| 033400721145 | Ronzoni | Healthy Harvest Penne Rigate | 16 |  |
|  |  |  | 16 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Fluid Milk - Least Expensive** | | |  |  |
|  |  | Whole | 128 |  |
|  |  | Whole | 64 |  |
|  |  | Whole | 32 |  |
|  |  | 1% Lowfat | 128 |  |
|  |  | 1% Lowfat | 64 |  |
|  |  | 1% Lowfat | 32 |  |
|  |  | Fat Free (Skim) | 128 |  |
|  |  | Fat Free (Skim) | 64 |  |
|  |  | Fat Free (Skim) | 32 |  |
| **Lactose Free Milk** | |  |  |  |
| 041383090738 | Lactaid | Lactose Free Whole | 96 |  |
| 041383090707 | Lactaid | Lactose Fat Free Milk | 96 |  |
| 041383090714 | Lactaid | Lactose Free 1% | 96 |  |
|  |  |  | 96 |  |
| 041383090233 | Lactaid | Lactose Free 1% w/Calcium | 64 |  |
| 041383090226 | Lactaid | Lactaid Lactose Free 1% | 64 |  |
|  |  |  | 64 |  |
| **Soymilk** |  |  |  |  |
| 025293600393 | Silk | Original Soymilk | 64 |  |
| 053859070663 | 8th Continent | Original Soymilk | 64 |  |
|  |  |  |  |  |
| **Long-Life Milk - Quart** | |  |  |  |
| 857065007037 | Parmalat | Long Life 1% Lowfat Milk | 32 |  |
| 071505023962 | Schreiber | Long Life 1% Lowfat milk | 32 |  |
|  |  |  | 32 |  |
| 0857065007013 | Parmalat | Whole Long Life Milk | 32 |  |
| 071505023993 | Schreiber | Whole Long Life Milk | 32 |  |
|  |  |  |  |  |
| **YOGURT - 32oz. or 16oz Containers** | | |  |  |
| 052159005207 | Stonyfield | Lowfat French Vanilla | 32 |  |
| 070470004303 | Yoplait | Lowfat Strawberry | 32 |  |
|  |  |  |  |  |
| 052159000134 | Stonyfield | Whole Strawberry | 32 |  |

**FOOD VENDOR PRICE LIST, CONTINUED**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Cheese - 16oz Pkg Only** | |  |  |  |
| 021000602704 | Kraft | Deli Deluxe American White Slices | 16 |  |
| 021000602698 | Kraft | Deli Deluxe American Cheese | 16 |  |
| 041716232163 | Frigo | String Cheese | 16 |  |
|  |  | Cheddar | 16 |  |
|  |  | Colby | 16 |  |
|  |  | Monterey Jack | 16 |  |
|  |  | Mozzarella Whole Milk | 16 |  |
|  |  | Mozzarella Part-Skim | 16 |  |
|  |  | Shredded | 16 |  |
|  |  | Muenster | 16 |  |
| **Tofu - 16oz Pkg** | |  | 16 |  |
| 025484006577 | Nasoya | Organic Super Firm Tofu | 16 |  |
| 025484000131 | Nasoya | Organic Silken Tofu | 16 |  |
|  |  |  | 16 |  |
| **Frozen Juice - 11.5 or 12 oz cans** | |  |  |  |
| 041800116003 | Welchs | 100% Grape | 12 |  |
| 025000025198 | Minute Maid | Orange Original | 12 |  |
| 048500001455 | Tropicana | Orange Juice Pulp Free | 12 |  |
|  |  |  |  |  |
| **Bottled Juice - 100% fruit juice only - 64oz** | | |  |  |
| 076301722125 | Apple&Eve | 100% Apple Juice | 64 |  |
| 889497008245 | Juicy Juice | 100% Apple Juice | 64 |  |
| 041755001065 | Langers Apple | 100% Apple | 64 |  |
| 014800000344 | Mott's | 100% Apple Juice | 64 |  |
| 031200034694 | Ocean Spray | 100% Cranberry Juice | 64 |  |
| 041800207503 | Welch's | 100% Grape Juice | 64 |  |
|  |  |  | 64 |  |
|  |  |  | 64 |  |
|  |  |  | 64 |  |
|  |  |  | 64 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Infant Cereal - 8oz Boxes** | |  |  |  |
|  | Beech-Nut |  | 8 |  |
|  | Beech-Nut Org |  | 8 |  |
|  | Earth's Best Org |  | 8 |  |
|  | Gerber |  | 8 |  |
|  | Gerber Org |  | 8 |  |
| **Baby Food - Fruits & Vegetables - Stage 2 - 4oz Jar** | | |  |  |
|  | Beech-Nut |  | 4 |  |
|  | Full Circle Org |  | 4 |  |
|  | Happy Baby Org |  | 4 |  |
|  |  |  | 4 |  |
| **Baby Food - Fruits & Vegetables - 2nd foods (2-Pack)** | | | |  |
|  | Gerber |  | 2-pk |  |
|  |  |  | 2-pk |  |
|  |  |  | 2-pk |  |
| **Baby Food - Meats - 2.5oz Jar** | |  |  |  |
|  | Beech-Nut |  | 2.5 |  |
|  | Gerber |  | 2.5 |  |
| **Infant Formula** | |  |  |  |
| 070074569741 | Abbott | Similac Advance | 13 |  |
| 070074559582 | Abbott | Similac Advance | 12.4 |  |
| 070074533643 | Abbott | Similac Advance | 32 |  |
| 070074586137 | Abbott | Similac Pro-Advance | 6-Pk |  |
| 070074569765 | Abbott | Similac Soy Isomil | 13 |  |
| 070074559643 | Abbott | Similac Soy Isomil | 12.4 |  |
| 070074559681 | Abbott | Similac Soy Isomil | 32 |  |
| 070074586038 | Abbott | Similac Soy Isomil | 6-Pk |  |
| 070074575414 | Abbott | Similac Sensitive | 12.5 |  |
| 070074575346 | Abbott | Similac Sensitive | 32 |  |
| 070074509600 | Abbott | Similac for Spit-Up | 12.5 |  |
| 070074626000 | Abbott | Similac Total Comfort | 12.6 |  |

**I CERTIFY THAT THE PRICES ON ALL PAGES OF THIS PRICE LIST ARE THE CURRENT ACTUAL SHELF PRICES.**

|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
| **This institution is an equal opportunity provider.** | | |
| Page 4 of 4 |  |  |

**ATTACHMENT 3 - PHARMACY PRICE LIST**

|  |  |
| --- | --- |
| **Vendor ID#:** |  |
| **Vendor Name:** | |
| **Address:** |  |

**To complete this attachment, give HIGHEST ACTUAL SHELF PRICES for the following WIC authorized formulas.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Infant Formula** | |  |  |  |
| 070074569741 | Abbott | Similac Advance | 13 |  |
| 070074559582 | Abbott | Similac Advance | 12.4 |  |
| 070074533643 | Abbott | Similac Advance | 32 |  |
| 070074586137 | Abbott | Similac Pro-Advance | 6-Pk |  |
| 070074509600 | Abbott | Similac for Spit-Up | 12.5 |  |
| 070074575414 | Abbott | Similac Sensitive | 12.5 |  |
| 070074575346 | Abbott | Similac Sensitive | 32 |  |
| 070074569765 | Abbott | Similac Soy Isomil | 13 |  |
| 070074559643 | Abbott | Similac Soy Isomil | 12.4 |  |
| 070074559681 | Abbott | Similac Soy Isomil | 32 |  |
| 070074586038 | Abbott | Similac Soy Isomil | 6-Pk |  |
| 070074626000 | Abbott | Similac Total Comfort | 12.6 |  |
| **Special Infant Formulas** | |  |  |  |
| 070074574318 | Abbott | Similac NeoSure | 13.1 |  |
| 070074574561 | Abbott | Similac NeoSure | 32 |  |
| 070074575131 | Abbott | Similac Alimentum (RTF) | 32 |  |
| 070074608501 | Abbott | Similac PM 60/40 | 14.1 |  |
| 070074535111 | Abbott | EleCare Infant DHA/ARA | 14.1 |  |
| 070074552545 | Abbott | Elecare Jr. | 14.1 |  |
| 070074562766 | Abbott | Similac Special Care 30 Cal | 2 |  |
| 070074607504 | Abbott | Ensure | 14 |  |
| 070074407074 | Abbott | Ensure Plus | 8 |  |
| 070074580500 | Abbott | Pediasure | 8 |  |
| 070074580623 | Abbott | PediaSure with Fiber | 7.4 |  |
| 070074580630 | Abbott | PediaSure with Fiber | 8 |  |
| 070074648101 | Abbott | Pulmocare | 8 |  |
| 070074674148 | Abbott | PediaSure Peptide 1.0 Cal | 8 |  |
| 070074673868 | Abbott | Pediasure 1.5 Cal. | 8 |  |
| 070074648354 | Abbott | Osmolite 1.5 Cal | 8 |  |
| 070074647128 | Abbott | Similac Alimentum | 12.1 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UPC** | **Brand** | **Product Name** | **Size** | **Price** |
| **Special Infant Formulas** | |  |  |  |
| 070074401089 | Abbott | RCF | 13 |  |
| 300870498014 | Mead | Nutramigen | 13 |  |
| 300875115640 | Mead | Nutramigen | 32 |  |
| 300870367013 | Mead | Pregestimil | 16 |  |
| 300870425416 | Mead | Product 3232A | 16 |  |
| 300875104804 | Mead | PurAmino DHA/ARA | 14.1 |  |
| 300871239418 | Mead | Nutramigen with Enflora LGG | 12.6 |  |
| 300875105252 | Mead | Enfaport | 6-6pk |  |
| 300875122082 | Mead | Enfamil NeuroPro EnfaCare | 13.6 |  |
| 300875122440 | Mead | PurAmino Jr | 14.1 |  |
| 300875131473 | Mead | Nutramigen | 8-6pk |  |
| 0050000598526 | Nestle | Extensive HA | 14.1 |  |
| 7613034788214 | Nestle | Alfamino Infant | 14.1 |  |
| 0798716062534 | Nestle | Peptamen Junior | 8.45 |  |
| 043900713199 | Nestle | Vivonex Pediatric | 1.7 |  |
| 043900335117 | Nestle | Boost Kid Essentials 1 Cal | 8 |  |
| 043900335407 | Nestle | Boost Kid Essentials 1.5 Cal | 8 |  |
| 043900335001 | Nestle | Boost Kid Essen 1.5 Cal W/F | 8 |  |
| 043900175096 | Nestle | Compleat Pediatric Standard 1.0 Cal | 8.45 |  |
| 050000415694 | Nestle | Carnation Breakfast Essentials | 8-6pk |  |
| 7613034787958 | Nestle | Alfamino Junior | 14.1 |  |
| 749735014363 | Nutricia | Neocate Infant Syneo | 14.1 |  |
| 749735112120 | Nutricia | Fortini Infant Formula | 30x4oz |  |
| 749735017906 | Nutricia | Neocate Junior | 14.1 |  |
| 749735023013 | Nutricia | PKU Maxamum | 16 |  |
| 749735166703 | Nutricia | KetoCal 4:1 | 11 |  |
| 749735029121 | Nutricia | Neocate Junior w/Prebiotics | 14.1 |  |
| 749735000595 | Nutricia | Neocate Splash | 8 |  |
| 7497350-25956 | Nutricia | Neocate Infant DHA & ARA | 14.1 |  |

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|  |  |  |
| --- | --- | --- |
| Signature |  | Date |
| **This institution is an equal opportunity provider.** | | |

**ATTACHMENT 4**

**WIC MANDATORY MINIMUM INVENTORY REQUIREMENTS**

For food vendors, **all food items below** are required to be carried in all food stores. For pharmacies, **only ‘INFANT FORMULA’** is required to be carried in all pharmacies.

The mandatory minimum inventory requirements of approved WIC foods and infant formulas must be always available on the shelves. These foods must be fresh and must be in adequate supply for WIC participants to purchase them whenever the vendor is open for business.

***Notice to applicants***: applicants will be inspected by the WIC Program to verify that the Mandatory Minimum Inventory Requirements of WIC items are in stock, and the application will be non-selected if the store does not carry all these items as they are listed below. See Minimum Inventory requirements section on page 12 for more information.

|  |  |  |
| --- | --- | --- |
| **Food Category** | **Size/Type** | **Mandatory Minimum Requirement** |
| Cheese | 16oz. Packages | 2 varieties – 3 lbs. in each variety  **6 lbs. total** |
| Eggs (Brown or White) | Dozen, Grade A – medium, Large, X-Large, Jumbo | **6 dozen total, any combination** |
| Cereal | 11oz or larger boxes | 5 varieties –2 boxes of each variety –  **10 boxes total** |
| Legumes (Peanut Butter) | 16oz to 18oz | **4 jars total** |
| Legumes (Dry beans/ Canned Beans) | 1LB. bags or 15-16oz cans | 2 varieties - dry beans or canned beans  ***4 (1lb) bags or 8 cans of canned beans, any combination*** |
| Canned Fish | 5oz. chunk light tuna in water or  3.75oz. sardines or 5oz. pink salmon | **4 cans total, any combination** |
| Infant Cereal | 8oz boxes, plain only | **6 boxes total** |
| Infant Fruits & Vegetables | 4oz or 2-pack | 3 varieties of any combination (fruits, vegetables, or fruits & vegetables) **64 (4oz) jars/32 (2-pack)** |
| Bread/Whole Grains Options | 16oz. 100% Whole Wheat Bread | **6 packages total** |
| 16oz. Tortillas or 16oz. Oatmeal or  16oz. Whole Wheat Pasta or 14-16oz. Brown Rice | **3 packages total,** any combination |
| Fruits – Cash Value | Fresh and  Canned or frozen Fruits | 3 varieties total, 2 varieties must be fresh  **$25.00/Fresh**  **$10.00/Canned or Frozen** |
| Vegetables – Cash Value | Fresh and  Canned or frozen Vegetables | 3 varieties total, 2 varieties must be fresh  **$25.00/Fresh**  **$10.00/Canned or Frozen** |
| Infant Formula | 12.4oz Similac Advance | **18 cans (**3 cases) |
| Yogurt | 32oz or 16oz containers whole, lowfat/nonfat | 2-32oz or 4-16oz containers,  **64oz total any combination** |
| Milk – Whole | Gallons | **2 gallons total** |
| Milk – Lowfat/Fat Free | Gallons | **8 gallons total** |
| Milk – Lowfat/Fat Free | 12oz evaporated lowfat milk or Quarts – Long Life 1%/Fat free | **16 cans total or**  **3 qts. total, any combination** |
| Juice | 64oz. Bottle | 2 flavors (or varieties) – **12 bottles total** |

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| **Attachment 5 - List of Approved Infant Formula Suppliers** |
| **Manufacturers/Wholesalers/Distributors/Retailers** |

All infant formula must be purchased from a supplier on this list.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Approved Infant Formula Suppliers** | **Address** | **City** | **State** | **Zip** | **Telephone** |
| Abbott Laboratories Inc. | PO Box 18065 | Columbus | OH | 43216 |  |
| Mead Johnson Nutrition | 2400 West Lloyd Expressway | Evansville | IN | 47721-0001 |  |
| Nestle Health Science | 1007 US Hwy 202/206, Bldg JR-2 | Bridgewater | NJ | 08807 |  |
| Nutricia North America | 77 Upper Rock Circle, Suite 303 | Rockville | MD | 20850 |  |
| PBM Nutritionals, LLC (a wholly owned subsidiary of Perrigo Company) | 652 Peter Jefferson Parkway, Suite 300 | Charlottesville | VA | 22911 |  |
| A&J Food Wholesalers, Inc. | Brooklyn Terminal Market, Foster & Remsen Ave | Brooklyn | NY | 11236 | (718) 251-7144 |
| Amerisourcebergen Corp | 101 Norfolk St | Mansfield | MA | 02048 | (508) 337-8750 |
| Associated Grocers of New England, Inc. | 11 Cooperative Way | Pembroke | NH | 03275 | (603) 223-6710 |
| Bozzuto's Inc. | 275 Schoolhouse Road | Cheshire | CT | 06410-1241 | (203) 272-3511 |
| C&S Wholesale Grocers | Hatfield South, 142 Elm Street | Hatfield | MA | 01038 | (413) 247-0258 |
| C&S Wholesale Grocers | 7 Corporate Drive | Keene | NH | 03431 | (603) 354-7000 |
| C&S Wholesale Grocers | 1120 Harvey Lane | Suffield | CT | 06078 | (860) 623-4360 |
| C&S Wholesale Grocers | 47 Old Ferry Road | Brattleboro | VT | 05301 | (802) 257-4371 |
| C&S Wholesale Grocers | 1500 Corporate Blvd. | Newburgh | NY | 12550 | (845) 567-6800 |
| C&S Wholesale Grocers | 500 North Street | Windsor Lock | CT | 06096 | (860) 627-4120 |
| Cardinal Distribution d/b/a Cardinal Health | 11 Centennial Drive | Peabody | MA | 01960 | (978) 532-6900 |
| Cash & Carry | 110 Advocado Street | Springfield | MA | 01104 | (413) 733-6182 |
| Core-Mark Midcontinent, Inc. | 355 Main Street | Whitinsville | MA | 01588 | (508) 234-9000 |
| DeMoulas Super Market Warehouse | 875 East Street | Tewksbury | MA | 01876 | (978) 851-8000 |
| F & J Master Sales Corp. | 528 Drake Street | Bronx | NY | 10474-6102 | (718) 292-6464 |
| Genere Food Corp. | 100 Niantic Ave | Providence | RI | 02907 | (401) 490-3811 |
| Hannaford Bros Co. | 145 Pleasant Hill Road | Scarborough | ME | 04074 | (207) 883-2911 |
| Harold Levinson Associates | 21 Banfi Plaza | Farmingdale | NY | 11735 | (800) 325-2512 |
| J. Polep Distribution Services | 705 Meadow Street | Chicopee | MA | 01013 | (413) 592-4141 |
| James J. Duffy Inc. | 390 Beacham Street | Chelsea | MA | 02150 | (617) 242-0094 |
| Krasdale Food Distribution Center | 400 Food Center Drive | Bronx | NY | 10474 | (718) 378-1100 |
| McKesson Drug Co. | 9 Aegean Drive | Methuen | MA | 01844 | (978) 685-3930 |
| McLane Eastern, Inc. dba McLane/Northeast-Concord | 932 Maple Street | Contoocook | NH | 03229 | (603) 746-8000 |
| Pine State Trading Co. | 47 Market Street | Gardiner | ME | 04345 | (207) 622-3741 |
| Rosev Dairy Foods, Inc. | 220 Second Street | Chelsea | MA | 02150 | (617) 889-7444 |
| Stop & Shop Distributor Center | 136 S Main Street | Assonet | MA | 02702 | (508) 977-5125 |
| Supervalu | 3900 Industrial Road | Harrisburg | PA | 17110 | (717) 232-6821 |
| T.B.I Corp | 700 E Industrial Park Drive | Manchester | NH | 03109 | (603) 668-6223 |
| Wakefern Food Corporation | 8301 Industrial Blvd | Breinigsville | PA | 18031 |  |
| Yell-O-Glow Corp | 21 Arlington Street | Chelsea | MA | 02150 | (617) 394-0300 |