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20. Vendor Form Letters

Vendor Form Letters are letters associated with a specific Vendor that are generated by the Vendor Management system, either automatically or upon user request. When a letter is generated by the system or when a letter is sent outside the system (and so indicated on the Sending Letter dialog), the Vendor Folder will include an Event or Follow-up Activity that indicates that a letter was generated, as well as the date and description (entered by the user) of the letter generated. No electronic copies of the actual letter will be kept by the system.

Each of the following sections includes the purpose of each letter, the circumstances under which the letter is generated, identification of the fields merged into the letter text from the system database entities, and the contents of the letter.

The following table lists the letters and their IDs.

ID	Letter Title
	Applications
1	Application Letter - Vendors
2	Application Letter - Chain
3	Application Letter - Pharmacy
4	Application Letter - Pharmacy Chain
5	Waiting Letter
6	Interim Application Letter
7	Application Approval
8	Application Denial
9	Expiration of Contract
	Checks/Compliance Buys
20	Check State Approval
21	Check State Denial

ID	Letter Title
22	Compliance Buys to Investigator
23	Compliance Buy Meeting Letter
24	Compliance Buy - Meeting Documentation
25	Manufacturer Check State Approval
26	Manufacturer Check State Denial
	Disqualification
40	Contract Termination - Store Closing
41	Contract Termination - Ownership Change
42	Contract Termination - Withdrawal from Program
43	Notification to Food Stamps
44	Civil Money Penalty
45	Disqualification Notification - Final Notice
46	Pending Disqualification Notification
	Monitoring
60	Onsite Letter
61	Onsite Warning (sanction)
	Notification General Information
80	CPL Notification - CPL Survey
	Stamps
100	Vendor New Stamp

ID	Letter Title
101	Vendor Replacement Stamp
102	Fee for Replacement of Lost Stamp
	Training
120	Annual Training – Standard
	Labels
	Avery template 5160 or 5163

20.1 Vendor Letter Generation – Sending Letter

The Vendor Management system automatically generates letters. Additionally, the user will be able to print letters on demand. The Sending Letter dialog will list the letters that can be manually generated and will allow the user to generate those letters. The letters that are generated by the Vendor Management system are described later in this document. The Sending Letter dialog is invoked in response to the following user actions:

- Selection of the Letter Sent event on the Events dialog as described in [Chapter 4 – Vendor Folder](#).
- Selection of the Letter Sent follow-up activity on the Follow-up Activities dialog as described as described in [Chapter 4 – Vendor Folder](#).
- Selection of the Send button on the Send Group Letters dialog described in this document

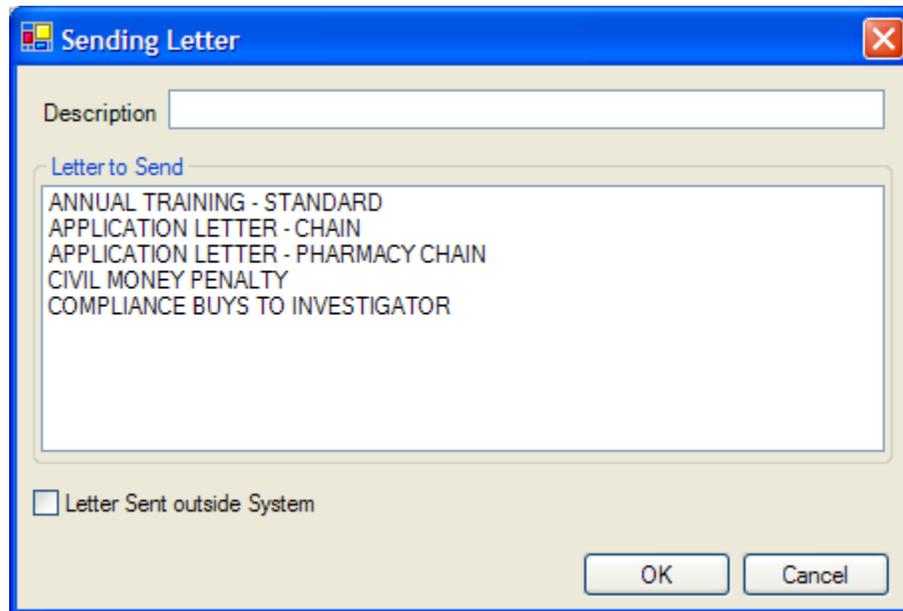


Figure 1 - Sending Letter Dialog

20.1.1 Controls

This section describes the behavior of the controls on the Sending Letter dialog.

20.1.1.1 Description Text Box

This control allows the user to enter a description for the letter. The text box will be enabled when the Sending Letter dialog is active. The control will accept only alphanumeric characters. Alphabetic characters may be entered in upper or lower case. Special characters may also be entered. The maximum size of the control will be fifty (50) characters. If the Sending Letter dialog was invoked by selecting the Letter Sent event on the Events dialog, the text box will default to the value that the user entered in the Description field on the Events dialog, but can be changed. Otherwise, the field will be blank.

20.1.1.2 Letter to Send List Box

This control allows the user to select which letter to send to the vendor. The list box will be enabled when the Sending Letter dialog is active. The list will consist of all letters within the system by name and sorted alphabetically. This list will be single selection only. The system will default to the first selection in the list.

A selection is required when the Letter Sent outside System checkbox is not checked.

20.1.1.3 Letter Sent outside System Check Box

This control allows the user to indicate that the letter was sent to the Vendor but not generated by the Vendor Management system; the letter is documented in the system as being sent but written and mailed outside the system processes. The check box will be enabled when the Sending Letter dialog is active. The check box will initially be blank.

20.1.1.4 OK Button

This control allows the user to instruct the system to close the Sending Letter dialog and to save the letter information. The OK button will be enabled when the Sending Letter dialog is active. Characteristics for the OK button are defined in *Consistencies*.

20.1.1.5 Cancel Button

This control allows the user to exit the Sending Letter dialog without saving the letter information. The Cancel button will be enabled when the Sending Letter dialog is active. Characteristics for the Cancel button are defined in *Consistencies*.

20.1.2 Processing

This section describes the processes (navigation) that take place as a result of the actions taken on the Sending Letter dialog.

20.1.2.1 Initializing the Interface

Upon initial presentation of the dialog:

- The title bar text will be set to “Sending Letter”
- The Description will be initially blank
- The first letter in the Letter to Send list will be initially selected
- The Letter Sent outside System will initially be un-checked.

20.1.2.2 Edits

Upon selection of the OK button:

- If an entry has not been made in the Description text box, the system will invoke a standard error message with the text “An entry is required for the <control label>.”
- If a selection is not made in the Letter to Send List, the system will invoke a standard error message with the text “A selection is required in the <control label>.”

20.1.2.3 Saving the Data

Upon successful completion of the above listed edits:

- If the Letter Sent outside System check box is checked:
 - The system will save the Letter sent Event or Follow-up Activity to the vendor’s event log
 - If the user opened the dialog from the Send Group Letters function, the system will return to the Vendor List window
 - If the user opened the dialog from the Event or Follow-up Activity dialog, the system will return to the vendor’s Event Log.
- If the Letter Sent outside System check box is not checked:
 - The system will save the Letter Sent event or follow-up activity to the vendor’s event log
 - The system will invoke the [Send Letter](#) dialog described in this document.

20.1.2.4 Cancel

Upon selection of the Cancel button, the system will dismiss the Sending Letter dialog without generating a letter and return the user to the Event Log tab of the Vendor Folder, if the Sending Letter dialog was invoked from the Events or the Follow-up Activities dialog. If the Sending Letter dialog was invoked from the Send Group Letters dialog, the system will return the user to the Vendor List window.

20.2 Send Letter

The Send Letter dialog allows the user to select which address will receive a copy of the letter, and who at the address will be the recipient of the letter. After the user identifies these items, the system will generate the required letters. If indicated by the user, the system will also generate a mailing label for each letter generated. For each selected recipient, the system will generate a letter and mailing label for every selected address. The Send Letter dialog is invoked in response to the following actions:

- When the user selects the OK button on the Sending Letter dialog as described in this document (provided the Letter Sent outside System check box is not checked).
- When the user selects the OK button on an Event that generates a letter
- When the user selects the OK button on a Follow-up Activity that generates a letter.
- When the user selects the OK button on the Schedule Group Training dialog.

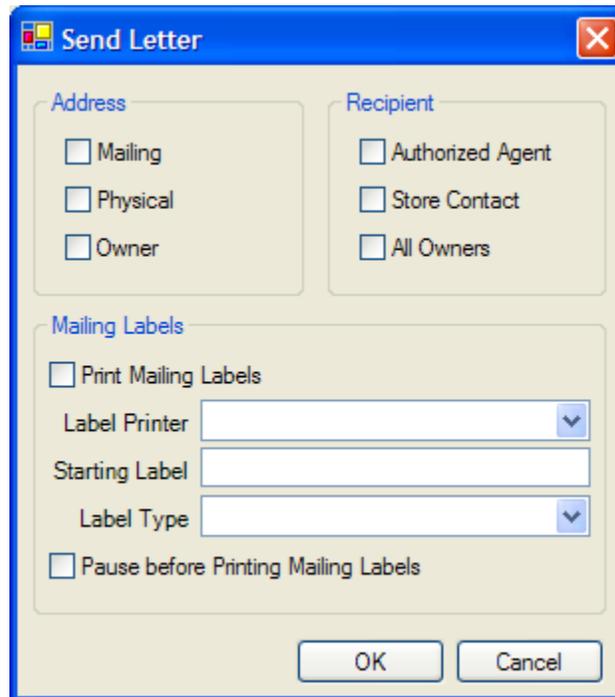


Figure 2 - Send Letter Dialog

20.2.1 Controls

This section describes the behavior of the controls on the Send Letter dialog.

20.2.1.1 Mailing Address Check Box (Mailing)

This control allows the user to instruct the system to generate a letter to send to the mailing address of the Vendor. The check box will be enabled when the Send Letter dialog is active.

20.2.1.2 Physical Address Check Box (Physical)

This control allows the user to instruct the system to generate a letter to send to the physical address of the Vendor. The check box will be enabled when the Send Letter dialog is active.

20.2.1.3 Owner Address Check Box (Owner)

This control allows the user to instruct the system to generate a letter to send to the address of the owner of the Vendor. The check box will be enabled when the Send Letter dialog is active.

20.2.1.4 Authorized Agent Check Box

This control allows the user to instruct the system to generate a letter for the Vendor authorized agent for every selected address. The check box will be enabled when the Send Letter dialog is active.

20.2.1.5 Store Contact Check Box

This control allows the user to instruct the system to generate a letter for the Vendor store contact for every selected address. The check box will be enabled when the Send Letter dialog is active.

20.2.1.6 All Owners Check Box

This control allows the user to instruct the system to generate a letter for all Vendor store owners for every selected address. The check box will be enabled when the Send Letter dialog is active.

20.2.1.7 Print Mailing Labels Check Box

This control will allow the user to specify that the system should generate address labels for all of the recipients of the letters after the letters are produced. The control will be enabled when the Send Letter dialog is active.

Upon selecting the Print Mailing Labels check box, the Label Printer dropdown and Pause before Printing Mailing Labels check box will become enabled. Upon removing the mark from the Print Mailing Labels check box, the Label Printer dropdown and Pause before Printing Mailing Labels check box will be cleared and disabled.

20.2.1.8 Label Printer Dropdown

This control will allow the user to select the system-configured printer to print mailing labels. The control will be enabled when the Print Mailing Labels check box is checked. It will be filled with a list of the locally defined printers.

20.2.1.9 Starting Label Text Box

This control will allow the user to select which mailing label to start with on the label sheet. The control will be enabled when a laser printer is selected from the Label Printer dropdown (M-). The control allows entry of numeric digits. The minimum value is 1. The maximum value will vary depending on the selection made in the Label Type dropdown.

20.2.1.10 Label Type Dropdown

This control will allow the user to select the mailing label type. The control will be enabled when the Print Mailing Labels check box is checked. It will display the ReferenceDictionary.Description where the ReferenceDictionary.Category = "LASERLABEL". The control will default to blank when enabled.

20.2.1.11 Pause before Printing Mailing Labels Check Box

This control will allow the user to instruct the system to pause before printing mailing labels on the printer so that mailing label stock may be loaded into the printer for producing the mailing labels. The control will be enabled when the Print Mailing Labels check box is checked. When enabled, it will be initially checked.

20.2.1.12 OK Button

This control allows the user to instruct the system to close the Send Letter dialog and generate the letters and mailing labels. The OK button will be enabled when the Send Letter dialog is active. Characteristics for the OK button are defined in *Consistencies*.

20.2.1.13 Cancel Button

This control allows the user to exit the Send Letter dialog without generating the letters and mailing labels. The Cancel button will be enabled when the Send Letter dialog is active. Characteristics for the Cancel button are defined in *Consistencies*.

20.2.2 Processing

This section describes the processes that take place as a result of the actions taken on the Send Letter dialog.

20.2.2.1 Initializing the Interface

Upon initial presentation of the dialog:

- The title bar will be set to "Send Letter"
- All controls will be initially blank.
- The following controls will initially be disabled:
 - Label Printer
 - Starting Label
 - Label Type

- Pause before Printing Mailing Labels

20.2.2.2 Edits

Upon selection of the OK button:

- At least one of the following Address controls must be selected:
 - Mailing Address check box
 - Physical Address check box
 - Owner Address check box

If none of the above controls has been selected, the system will invoke a standard error message with the text “You must select at least one address to receive the letter.”. Upon dismissal of the error message box, the system will return the user to the Send Letter dialog.

- At least one of the following Recipient controls must be selected:
 - Authorized Agent check box
 - Store Contact check box
 - All Owners check box

If none of the above controls has been selected, the system will invoke a standard error message with the text “You must select at least one recipient for the letter.” Upon dismissal of the error message box, the system will return the user to the Send Letter dialog.

- If no selection is made in the Label Printer dropdown and the control is enabled, the system will invoke a standard error message with the text “You must select a label printer to print address labels.”
- If the Label Type selected is Avery 5160 and the text box enabled and the value entered is less than 1 or greater than 30, the system will invoke a standard message with the text, “Starting Label range is 1 through 30.”
- If the Label Type selected is Avery 5163 and the text box enabled and the value entered is less than 1 or greater than 10, the system will invoke a standard message with the text, “Starting Label range is 1 through 10.”
- If the Starting Label text box is enabled and is blank, a message is displayed, “An entry is required for the Starting Label.”
- If the Label Type dropdown is enabled and no selection is made, the system will invoke a standard error message with the text “A selection is required in the Label Type.”

20.2.2.3 Saving the Data

Upon successful completion of the above listed edits:

- A letter will be generated for each Address/Recipient combination selected. A letter will be printed for each recipient selected at each address selected. For example, if the Authorized Agent is selected as the recipient and all address types are selected, a letter should be generated for the Authorized Agent with each of the following address:
 - Vendor's mailing address
 - Vendor's physical address
 - All the owner's addresses for the vendor
- If the Print Mailing Labels check box is selected:
 - If the Pause before Printing check box is checked, the system will pause and invoke a standard message with the text "Load mailing labels for printing and press OK when ready." This provides time for the user to load the label stock and instruct the system when ready to print.
 - If the Pause before Printing check box is un-checked, the system will immediately print the labels following the letters without pausing.
 - Printing of labels will begin on the specified number filling in the first column down then moving to the second column and then to the third column.
- A Letter Sent Event or Follow-up Activity will be added to the Event Log of the Vendor Folder.
- If the SaveVendorLetters business rule is true, the system will automatically save a copy of each letter generated in the PrintedLetters directory.
- If the Send Letter dialog was invoked from an Event or Follow-up Activity, the system will return the user to the Event Log tab of the Vendor Folder. The Vendor Events tree view on the Event Log tab of the Vendor Folder will be refreshed.
- If the Send Letter dialog (invoked from the Send Group Letters), the system will return the user to the Vendor List window.

20.2.2.4 Cancel

Upon selection of the Cancel button:

- The system will dismiss the Send Letter dialog without generating letters.
- The system will return the user to the Event Log tab of the Vendor Folder dialog, if the Send Letter dialog was invoked from the Events or the Follow-up Activities dialog.
- If the Send Letter dialog was invoked from the Send Group Letters dialog, the system will return the user to the Vendor List window.

20.2.2.5 Data Map

The Letter Sent Event or Follow-up Activity will be saved to the vendor's event log by storing the action either the Event or FollowUpActivity entity as defined in the Data Maps for the respective Event or Follow-up Activity that is invoked.

20.3 Vendor Letter Format

The Vendor letters are formatted as standard business letters. Each letter contains a tracking number in the footer of the first page which prints on all letters generated by the system. Using this tracking number, changes that need to be made to the letters or problems associated with a particular letter can be traced to the proper letter and file in the system.

20.3.1 Merged fields

Merged fields within the letter text are represented in this document by descriptive text within square brackets ([]). Merged fields preceded by text in italics indicate that all of the subsequent merged fields belong together in place of the italicized entity. For example, this:

- Recipient [Salutation] [First Name] [Last Name], [Title]

indicates that the Salutation, First Name, Last Name and Title merged fields are all part of the Recipient for the letter. A comma will print between the Last Name and Title merged fields. The common merged fields that exist in many of the Vendor letters are described below. The additional merged fields are described with each letter. Each merged field will print as its literal value, except where noted.

20.3.2 Common Merged Fields

20.3.2.1 Date

This value is the date the letter was generated. The source for this value is the present system date. The value will print in MM/DD/CCYY format.

20.3.2.2 Salutation

This value is the salutation for the recipient. The following table describes the source for this value depending on the store type of the Vendor and the Recipient selection on the Send Vendor Application Letter dialog.

Recipient	Store Type	Source for value
Authorized Agent	Sole Ownership Partnership Commissary	Authorized-Agent-Salutation attribute of the VENDOR entity
	Corporation	Authorized-Agent-Salutation attribute of the CORPORATE PARENT entity
Store Contact	All	Contact-Person-Salutation attribute of the VENDOR entity

All Owners	All	This value does not apply to owners
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20.3.2.3 First Name

This value is the first name of the recipient. The following table describes the source for this value depending on the store type of the Vendor and the Recipient selection on the Send Vendor Application Letter dialog.

Recipient	Store Type	Source for value
Authorized Agent	Sole Ownership Partnership Commissary	Authorized-Agent-First-Name attribute of the VENDOR entity
	Corporation	Authorized-Agent-First-Name attribute of the CORPORATE PARENT entity
Store Contact	All	WIC-Contact-First-Name attribute of the VENDOR entity
All Owners	Sole Ownership Partnership	First-Name attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.4 Last Name

This value is the last name of the recipient. The following table describes the source for this value depending on the store type of the Vendor and the Recipient selection on the Send Vendor Application Letter dialog.

Recipient	Store Type	Source for value
Authorized Agent	Sole Ownership Partnership Commissary	Authorized-Agent-Last-Name attribute of the VENDOR entity
	Corporation	Authorized-Agent-Last-Name attribute of the CORPORATE PARENT entity
Store Contact	All	WIC-Contact-Person-Last-Name attribute of the VENDOR entity

All Owners	Sole Ownership Partnership	Last-Name attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.5 Title

This value is the title of the recipient. The following table describes the source for this value depending on the store type of the Vendor and the Recipient selection on the Send Vendor Application Letter dialog.

Recipient	Store Type	Source for value
Authorized Agent	Sole Ownership Partnership Commissary	Authorized-Agent-Title attribute of the VENDOR entity
	Corporation	Authorized-Agent-Title attribute of the CORPORATE PARENT entity
Store Contact	All	WIC-Contact-Person-Title attribute of the VENDOR entity
All Owners	All	This value does not apply to owners

20.3.2.6 Vendor

This value is the Vendor name from the Vendor-Trade-Name attribute of the VENDOR entity.

20.3.2.7 Address Line 1

This value is the first line of the address that will receive a copy of the letter. The following table describes the source for this value depending on the store type of the Vendor and the Address selection on the Send Vendor Application Letter dialog.

Address	Store Type	Source for value
Mailing	Sole Ownership Partnership Commissary	Mailing-Address-1 attribute of the VENDOR entity

	Corporation	Mailing-Address-1 attribute of the CORPORATE PARENT entity
Physical	All	Physical-Address-1 attribute of the VENDOR entity
Owner	Sole Ownership Partnership	Address-1 attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.8 Address Line 2

This value is the second line of the address that will receive a copy of the letter. The following table describes the source for this value depending on the store type of the Vendor and the Address selection on the Send Vendor Application Letter dialog.

Address	Store Type	Source for value
Mailing	Sole Ownership Partnership Commissary	Mailing-Address-2 attribute of the VENDOR entity
	Corporation	Mailing-Address-2 attribute of the CORPORATE PARENT entity
Physical	All	Physical-Address-2 attribute of the VENDOR entity
Owner	Sole Ownership Partnership	Address-2 attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.9 City

This value is the city the address is located in that will receive a copy of the letter. The following table describes the source for this value depending on the store type of the Vendor and the Address selection on the Send Vendor Application Letter dialog.

Address	Store Type	Source for value
Mailing	Sole Ownership Partnership Commissary	Mailing-City attribute of the VENDOR entity
	Corporation	Mailing-City attribute of the CORPORATE PARENT entity
Physical	All	Physical-City attribute of the VENDOR entity
Owner	Sole Ownership Partnership	City attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.10 State (ST)

This value is the state the address is located in that will receive a copy of the letter. The following table describes the source for this value depending on the store type of the Vendor and the Address selection on the Send Vendor Application Letter dialog.

Address	Store Type	Source for value
Mailing	Sole Ownership Partnership Commissary	Mailing-State attribute of the VENDOR entity
	Corporation	Mailing-State attribute of the CORPORATE PARENT entity
Physical	All	Physical-State attribute of the VENDOR entity
Owner	Sole Ownership Partnership	State attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.11 ZIP Code

This value is the ZIP code for the address that will receive a copy of the letter. The following table describes the source for this value depending on the store type of the Vendor and the Address selection on the Send Vendor Application Letter dialog.

Address	Store Type	Source for value
Mailing	Sole Ownership Partnership Commissary	Mailing-ZIP-Code attribute of the VENDOR entity
	Corporation	Mailing-ZIP-Code attribute of the CORPORATE PARENT entity
Physical	All	Physical-ZIP attribute of the VENDOR entity
Owner	Sole Ownership Partnership	ZIP attribute of the OWNER entity for all owners of the Vendor
	Corporation	This selection is not applicable to Corporations
	Commissary	{Undefined at present time}

20.3.2.12 User

This value is the initials of the user who was logged in the system and took the actions that generated this letter. These initials are recorded as part of the user profile.

20.4 Application Letter - Franchise/Independent Vendors

20.4.1 Purpose of Letter

This letter is sent to retail grocery store vendors who operate under an independent owner or as a franchise that have requested applications for the contract cycle. The letter identifies the required information and forms that a vendor needs to complete to be considered for the contract cycle.

20.4.2 How Generated

This letter is generated when an application is required for these types of stores:

- CO-OP
- Franchise
- Independent
- Large Independent
- WIC only
- Other

This letter is generated by the Send Vendor Application Letter dialog as described in [Chapter 03 - Entry of New Applicants](#). The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Application Letter - Franchise/Independent is selected on the Send Letter dialog.
- The Renewal event is selected on the Events dialog and the vendor in the Vendor Folder is one of the above store types.
- The Send Application button is selected on the Applicant Information dialog as described in [Chapter 03 - Entry of New Applicants](#) and the applicant is one of the above store types.
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is one of the above store types and the Application Letter - Franchise/Independent is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is one of the above store types and the Application Letter - Franchise/Independent is selected on the Send Letter dialog.

20.4.3 Merged Fields

All merged fields in the Application Letter - Franchise/Independent Vendor are described in the Common Merged Fields section.

20.4.4 Letter Sample

The following is the complete text of the Application Letter - Franchise/Independent Vendor with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Application - Due Date Postmarked by April 15, 20XX

Dear *Recipient* [Salutation] [Last Name]:

The State Supplemental Nutrition Program for WIC is now accepting applications from retail food stores and pharmacies for participation during FY 20XX-20XX (contract period extends from October 1, 20XX through September 30, 20XX). WIC (which stands for Women, Infants and Children) provides nutritious foods to pregnant, postpartum and breastfeeding women, infants and children up to five years of age. The program is administered at the Federal level by the Food and Consumer Service of the United States Department of Agriculture (USDA). In State, USDA makes funds available to the Department of Health to administer and coordinate the WIC program.

Terms and conditions of the State WIC Program operations are explained in the enclosed sample copy of the Vendor Agreement. The specific new system requirements are included but are effective upon implementation of the new system in your area.

The State Agency, as required by Federal regulations, authorizes a limited number and appropriate distribution of WIC retail stores. This is in order to assure that Program staff can effectively monitor and review WIC store performance. The State Agency has, therefore, established criteria for WIC retail store selection. These criteria are detailed in the enclosed "Selection Criteria for FY 20XX-20XX WIC Retail Vendors." The State Agency **cannot** authorize stores that do not have the required foods at the time of the application and at the time of the state visit to the store. Vendors who are not selected have the right to request a fair hearing.

All new applicant stores, as well as many others, will be visited by state staff who will verify the types and amounts of the WIC foods actually in the store and verify prices. Because of the number of stores that must be visited, state staff will be making unannounced visits to the applicant stores any time from April through August 20XX.

Another requirement of the Federal Regulations is for the WIC Program to notify Food Stamps whenever a WIC vendor is disqualified. Food Stamps may take action to disqualify the vendor. WIC, also, can disqualify a store from WIC based on disqualification from Food Stamps.

WIC vendors play a vital role in service to the community, and in return, the WIC Program makes a significant contribution to vendor food sales. We welcome your application and hope that we will be able to offer you an opportunity to participate in this important nutrition program. Vendors who are selected will be notified in September, 20XX.

Retail store owners who wish to apply must complete and return the enclosed Vendor Application and Commodity Price List Survey (CPL) no later than April 15, 20XX to:

WIC Coordinator Name
State Department of Health
WIC Program
50 East State Street
PO Box 364
Anytown, ST 46204-0364

Note: No consideration will be given to applications postmarked after April 15, 20XX. Owners applying for more than one store must complete a separate Vendor Application for each store. There is no need to complete individual CPL's unless prices differ.

Please read all the enclosed materials carefully in order to ensure your understanding of the WIC Program. An instruction page is enclosed which tells you what to mail to the State WIC office.

Complete and return the following three documents. Keep the color page indicated below for your records.

- 8 page Vendor Application (keep pink)
- 3 page CPL (keep pink)
- 1 page selection criteria (keep yellow)

Retain the following documents for your records. Do not return them to the state office with the application. They are for you to keep for your information.

- | | |
|----------------------------|---------------------------|
| Federal Regulations | Check Replacement Policy |
| Vendor Agreement (copy) | WIC authorized food list |
| Minimum stock requirements | New system correspondence |

If you have any questions, did not receive the enclosures listed, or need additional applications or CPL's, please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.5 Application Letter - Chain

20.5.1 Purpose of Letter

This letter is sent to retail grocery chain store vendors (those who operate 11 or more stores spread over a large geographic area) that have requested applications for the contract cycle. The letter identifies the required information and forms that a corporate chain office needs to complete to be considered for the contract cycle.

20.5.2 How Generated

This letter is generated when an application is required for these types of stores:

- Chain
- Chain w/ Pharmacy
- Commissary

This letter is generated by the Send Vendor Application Letter dialog as described in [Chapter 03 - Entry of New Applicants](#). The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Application Letter - Chain is selected on the Send Letter dialog
- The Renewal event is selected on the Events dialog as described in [Chapter 03 - Entry of New Applicants](#) and the vendor in the Vendor Folder is one of the above store types
- The Send Application button is selected on the Applicant Information dialog as described in [Chapter 03 - Entry of New Applicants](#) and the applicant is one of the above store types
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is one of the above store types and the Application Letter - Chain is selected on the Send Letter dialog
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is one of the above store types and the Application Letter - Chain is selected on the Send Letter dialog

20.5.3 Merged Fields

All merged fields in the Application Letter - Chain are described in the Common Merged Fields section.

20.5.4 Letter Sample

The following is the complete text of the Chain Application letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Application - Chain/Commissary - Due Date Postmarked by April 15, 20XX

Dear *Recipient* [Salutation] [Last Name]:

The State Supplemental Nutrition Program for WIC is now accepting applications from retail food stores and pharmacies for participation during FY 20XX-20XX (contract period extends from October 1, 20XX through September 30, 20XX). WIC (which stands for Women, Infants and Children) provides nutritious foods to pregnant, postpartum and breastfeeding women, infants and children up to five years of age. The program is administered at the Federal level by the Food and Consumer Service of the United States Department of Agriculture (USDA). In State, USDA makes funds available to the Department of Health to administer and coordinate the WIC program.

Terms and conditions of the State WIC Program operations are explained in the enclosed sample copy of the Vendor Agreement. The specific new system requirements are included but are effective upon implementation of the new system in your area.

The State Agency, as required by Federal regulations, authorizes a limited number and appropriate distribution of WIC retail stores. This is in order to assure that Program staff can effectively monitor and review WIC store performance. The State Agency has, therefore, established criteria for WIC retail store selection. These criteria are detailed in the enclosed "Selection Criteria for FY 20XX-20XX WIC Retail Vendors". The State Agency **cannot** authorize stores that do not have the required foods at the time of the application and at the time of the state visit to the store. Vendors who are not selected have the right to request a fair hearing.

All new applicant stores, as well as many others, will be visited by state staff who will verify the types and amounts of the WIC foods actually in the store and verify prices. Because of the number of stores that must be visited, state staff will be making unannounced visits to the applicant stores any time from April through August 20XX.

Another requirement of the Federal Regulations is for the WIC Program to notify Food Stamps whenever a WIC vendor is disqualified. Food Stamps may take action to disqualify the vendor. WIC, also, can disqualify a store from WIC based on disqualification from Food Stamps.

WIC vendors play a vital role in service to the community, and in return, the WIC Program makes a significant contribution to vendor food sales. We welcome your application and hope that we will be able to offer you an opportunity to participate in this important nutrition program. Vendors who are selected will be notified in September, 20XX.

Owners with multiple store must complete separate forms for each store currently on the program or on the waiting list that is applying. The Vendor Applications and Commodity Price Lists (CPL) no later than April 15, 20XX to:

WIC Coordinator Name
State Department of Health
WIC Program
50 East State Street
PO Box 364
Anytown, ST 46204-0364

Note: No consideration will be given to applications postmarked after April 15, 20XX. Owners applying for more than one store must complete a separate Vendor Application for each store. There is no need to complete individual CPLs unless prices differ.

Please read all the enclosed materials carefully in order to ensure your understanding of the WIC Program. An instruction page is enclosed which tells you what to mail to the State WIC office.

Complete and return the following three documents. Keep the color page indicated below for your records.

- 8 page Vendor Application (keep pink)
- 3 page CPL (keep pink)
- 1 page selection criteria (keep yellow)

Retain the following documents for your records. Do not return them to the state office with the application. They are for you to keep for your information.

- | | |
|----------------------------|---------------------------|
| Federal Regulations | Check Replacement Policy |
| Vendor Agreement (copy) | WIC authorized food list |
| Minimum stock requirements | New system correspondence |

If you have any questions, did not receive the enclosures listed, or need additional applications or CPLs, please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.6 Application Letter - Independent Pharmacy

20.6.1 Purpose of Letter

This letter is sent to independent pharmacy vendors that have requested applications for the contract cycle. The letter identifies the required information and forms that a pharmacy needs to complete to be considered for the contract cycle.

20.6.2 How Generated

This letter is generated by the Send Vendor Application Letter dialog as described in [Chapter 03 - Entry of New Applicants](#) when an application is required for an Independent Pharmacy. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Application Letter - Independent Pharmacy is selected on the Send Letter dialog
- The Renewal event is selected on the Events dialog as described in [Chapter 03 - Entry of New Applicants](#) and the vendor in the Vendor Folder is an Independent Pharmacy
- The Send Application button is selected on the Applicant Information dialog as described in [Chapter 03 - Entry of New Applicants](#) and the applicant is an Independent Pharmacy
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is an Independent Pharmacy and the Application Letter - Independent Pharmacy is selected on the Send Letter dialog
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is an Independent Pharmacy and the Application Letter - Independent Pharmacy is selected on the Send Letter dialog

20.6.3 Merged Fields

All merged fields in the Application Letter - Independent Pharmacy are described in the Common Merged Fields section.

20.6.4 Letter Sample

The following is the complete text of the Application Letter - Independent Pharmacy with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]

[City], [ST] [ZIP Code]

SUBJECT: Vendor Application - Pharmacy - Due Date Postmarked by April 15, 20XX

Dear *Recipient* [Salutation] [Last Name]:

The State Supplemental Nutrition Program for WIC is now accepting applications from retail food stores and pharmacies for participation during FY 20XX-20XX (contract period extends from October 1, 20XX through September 30, 20XX). WIC (which stands for Women, Infants and Children) provides nutritious foods to pregnant, postpartum and breastfeeding women, infants and children up to five years of age. The program is administered at the Federal level by the Food and Consumer Service of the United States Department of Agriculture (USDA). In State, USDA makes funds available to the Department of Health to administer and coordinate the WIC program.

Terms and conditions of the State WIC Program operations are explained in the enclosed sample copy of the Vendor Agreement. The specific new system requirements are included but are effective upon implementation of the new system in your area.

The State Agency, as required by Federal regulations, authorizes a limited number and appropriate distribution of WIC retail stores. This is in order to assure that Program staff can effectively monitor and review WIC store performance. The State Agency has, therefore, established criteria for WIC retail store selection. These criteria are detailed in the enclosed "Selection Criteria for FY 20XX-20XX WIC Retail Vendors". The State Agency **cannot** authorize stores that do not have the required foods at the time of the application and at the time of the state visit to the store. Vendors who are not selected have the right to request a fair hearing.

All new applicant stores, as well as many others, will be visited by state staff who will verify the types and amounts of the WIC foods actually in the store and verify prices. Because of the number of stores that must be visited, state staff will be making unannounced visits to the applicant stores any time from April through August 20XX.

Another requirement of the Federal Regulations is for the WIC Program to notify Food Stamps whenever a WIC vendor is disqualified. Food Stamps may take action to disqualify the vendor. WIC, also, can disqualify a store from WIC based on disqualification from Food Stamps. WIC vendors play a vital role in service to the community, and in return, the WIC Program makes a significant contribution to vendor food sales. We welcome your application and hope that we will be able to offer you an opportunity to participate in this important nutrition program. Vendors who are selected will be notified in September, 20XX.

Owners with multiple store must complete separate forms for each store currently on the program or on the waiting list that is applying. The Vendor Applications and Commodity Price Lists (CPL) no later than April 15, 20XX to:

WIC Coordinator Name
State Department of Health
WIC Program
50 East State Street
PO Box 364
Anytown, ST 46204-0364

Note: No consideration will be given to applications postmarked after April 15, 20XX. Owners applying for more than one store must complete a separate Vendor Application for each store. There is no need to complete individual CPLs unless prices differ.

Please read all the enclosed materials carefully in order to ensure your understanding of the WIC Program. An instruction page is enclosed which tells you what to mail to the State WIC office.

Complete and return the following three documents. Keep the color page indicated below for your records.

- 8 page Vendor Application (keep pink)
- 1 page CPL (keep pink)
- 1 page selection criteria (keep yellow)

Retain the following documents for your records. Do not return them to the state office with the application. They are for you to keep for your information.

- | | |
|----------------------------|---------------------------|
| Federal Regulations | Check Replacement Policy |
| Vendor Agreement (copy) | WIC authorized food list |
| Minimum stock requirements | New system correspondence |

If you have any questions, did not receive the enclosures listed, or need additional applications or CPLs, please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.7 Application Letter - Pharmacy Chain

20.7.1 Purpose of Letter

This letter is sent to pharmacy chain store vendors that have requested applications for the contract cycle. The letter identifies the required information and forms that a Vendor needs to complete to be considered for the contract cycle.

20.7.2 How Generated

This letter is generated by the Send Vendor Application Letter dialog as described in [Chapter 03 - Entry of New Applicants](#) when an application is required for a Pharmacy Chain. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Application Letter - Pharmacy Chain is selected on the Send Letter dialog
- The Renewal event is selected on the Events dialog as described in [Chapter 03 - Entry of New Applicants](#) and the vendor in the Vendor Folder is a Pharmacy Chain
- The Send Application button is selected on the Applicant Information dialog as described in [Chapter 03 - Entry of New Applicants](#) and the applicant is a Pharmacy Chain
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is a Pharmacy Chain and the Application Letter - Pharmacy Chain is selected on the Send Letter dialog
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) when the vendor in the Vendor Folder is a Pharmacy Chain and the Application Letter - Pharmacy Chain is selected on the Send Letter dialog

20.7.3 Merged Fields

All merged fields in the Application Letter - Pharmacy Chain are described in the Common Merged Fields section.

20.7.4 Letter Sample

The following is the complete text of the Application Letter - Pharmacy Chain with all merged fields identified.

DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Application - Pharmacy Chain - Due Date Postmarked by April 15, 20XX

Dear *Recipient* [Salutation] [Last Name]:

The State Supplemental Nutrition Program for WIC is now accepting applications from retail food stores and pharmacies for participation during FY 20XX-20XX (contract period extends from October 1, 20XX through September 30, 20XX). WIC (which stands for Women, Infants and Children) provides nutritious foods to pregnant, postpartum and breastfeeding women, infants and children up to five years of age. The program is administered at the Federal level by the Food and Consumer Service of the United States Department of Agriculture (USDA). In State, USDA makes funds available to the Department of Health to administer and coordinate the WIC program.

Terms and conditions of the State WIC Program operations are explained in the enclosed sample copy of the Vendor Agreement. The specific new system requirements are included but are effective upon implementation of the new system in your area.

The State Agency, as required by Federal regulations, authorizes a limited number and appropriate distribution of WIC retail stores. This is in order to assure that Program staff can effectively monitor and review WIC store performance. The State Agency has, therefore, established criteria for WIC retail store selection. These criteria are detailed in the enclosed "Selection Criteria for FY 20XX-20XX WIC Retail Vendors". The State Agency **cannot** authorize stores that do not have the required foods at the time of the application and at the time of the state visit to the store. Vendors who are not selected have the right to request a fair hearing.

All new applicant stores, as well as many others, will be visited by state staff who will verify the types and amounts of the WIC foods actually in the store and verify prices. Because of the number of stores that must be visited, state staff will be making unannounced visits to the applicant stores any time from April through August 20XX.

Another requirement of the Federal Regulations is for the WIC Program to notify Food Stamps whenever a WIC vendor is disqualified. Food Stamps may take action to disqualify the vendor. WIC, also, can disqualify a store from WIC based on disqualification from Food Stamps.

WIC vendors play a vital role in service to the community, and in return, the WIC Program makes a significant contribution to vendor food sales. We welcome your application and hope that we will be able to offer you an opportunity to participate in this important nutrition program. Vendors who are selected will be notified in September, 20XX.

Owners with multiple store must complete separate forms for each store currently on the program or on the waiting list that is applying. The Vendor Applications and Commodity Price Lists (CPL) no later than April 15, 20XX to:

WIC Coordinator Name
State Department of Health
WIC Program
50 East State Street
PO Box 364
Anytown, ST 46204-0364

Note: No consideration will be given to applications postmarked after April 15, 20XX. Owners applying for more than one store must complete a separate Vendor Application for each store. There is no need to complete individual CPLs unless prices differ.

Please read all the enclosed materials carefully in order to ensure your understanding of the WIC Program. An instruction page is enclosed which tells you what to mail to the State WIC office.

Complete and return the following three documents. Keep the color page indicated below for your records.

- 8 page Vendor Application (keep pink)
- 1 page CPL (keep pink)
- 1 page selection criteria (keep yellow)

Retain the following documents for your records. Do not return them to the state office with the application. They are for you to keep for your information.

- | | |
|----------------------------|---------------------------|
| Federal Regulations | Check Replacement Policy |
| Vendor Agreement (copy) | WIC authorized food list |
| Minimum stock requirements | New system correspondence |

If you have any questions, did not receive the enclosures listed, or need additional applications or CPLs, please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.8 Waiting Letter

20.8.1 Purpose of Letter

This letter is sent to Vendors who request applications for the WIC program, but are put on the waiting list.

20.8.2 How Generated

This letter is generated by the Send Letter dialog described in this document. The following actions invoke the dialog to generate this letter:

- The Waiting List button is selected on the Applicant Information dialog as described in [Chapter 03 - Entry of New Applicants](#)
- The Send button is selected on the Send Group Letters dialog described in this document and the Waiting Letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Waiting Letter is selected on the Send Letter dialog
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Waiting Letter is selected on the Send Letter dialog

20.8.3 Merged Fields

All merged fields in the Waiting Letter are described in the Common Merged Fields section.

20.8.4 Letter Sample

The following is the complete text of the Waiting Letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Waiting List

Dear *Recipient* [Salutation] [Last Name]:

You have indicated an interest in becoming a WIC vendor for the State WIC Program. Our deadline date for accepting applications for the contract period October 1, 20XX through September 30, 20XX has been past. The State WIC Office will keep your name and address on a waiting list.

If there is a need for a vendor or additional vendors in your geographic area due to participant increase, vendor closing, change in ownership, contract termination, or disqualifications, an application will be sent to you to complete and return to the State WIC Office for review. If your store meets the initial criteria a

store visit will be conducted by a state representative to verify the vendor application. Vendor selection is based on the Selection Criteria and Minimum Stock requirements.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.9 Interim Application Letter

20.9.1 Purpose of Letter

This letter is sent to waiting list vendors, or vendors who request applications that are located in areas that have no vendors or an insufficient number of vendors; this letter is used after the start of a contract period.

20.9.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Interim Application Letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Interim Application Letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Interim Application Letter is selected on the Send Letter dialog.

20.9.3 Merged Fields

These are the additional merged fields in the Interim Application Letter.

20.9.3.1 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.9.4 Letter Sample

The following is the complete text of the Interim Application Letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Interim Application Letter

Dear *Recipient* [Salutation] [Last Name]:

Enclosed is a State WIC vendor application packet for [Vendor] located in [VCity], IN. Please complete the application and the Commodity Price List forms and return them to the state WIC office within 30 days. Upon receipt of the information, a state representative will visit your store to verify the information on the application and CPL.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.10 Application Approval

20.10.1 Purpose of Letter

This letter informs the vendor that he/she is approved to participate as a WIC Vendor and to sign the enclosed Vendor Agreement and return it to the state office.

20.10.2 How Generated

The following actions generate this letter:

- The Finish button is selected on the Contract Approval dialog as described in [Chapter 9 – Application Wizard](#). This invokes the Send Contract Signature Page Letter dialog as described in [Chapter 9 – Application Wizard](#) that generates the letter.
- The Print button is selected on the Application Wizard dialog as described in [Chapter 9 – Application Wizard](#). This invokes the Send Contract Signature Page Letter dialog as described in [Chapter 9 – Application Wizard](#) that generates the letter.

20.10.3 Merged Fields

These are the additional merged fields in the Application Approval letter.

20.10.3.1 Contract Start Date

This value is the date that the Vendor contract becomes effective. The value comes from the Contract-Start-Date attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.10.3.2 Contract End Date

This value is the date that the Vendor contract expires. The value comes from the Contract-End-Date attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.10.4 Letter Sample

The following is the complete text of the Application Approval letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Application Approval

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program has approved your Vendor Application to participate as a State WIC Vendor beginning [Contract Start Date] through [Contract End Date].

Enclosed is the signature page of your Vendor Agreement. Please sign and date the form, then return both copies to:

WIC Coordinator Name
State WIC Program
50 E. State Street
PO Box 364
Anytown, ST 46204-0364

The State WIC Program must receive your signed vendor signature page in order for the contract to be valid, therefore we request that you return it within two (2) weeks from the date of receipt.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.11 Application Denial

20.11.1 Purpose of Letter

This letter informs the vendor that his/her application has been denied. The letter gives the reasons for the denial, and appeal rights information.

20.11.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Deny Vendor dialog as described in [Chapter 13 – Vendor Denial](#). This invokes the Send Vendor Denial Letter dialog as described [Chapter 13 – Vendor Denial](#) that generates the letter.
- The Print button is selected on the Deny Vendor dialog as described in [Chapter 13 – Vendor Denial](#). This invokes the Send Vendor Denial Letter dialog as described in [Chapter 13 – Vendor Denial](#) that generates the letter.
- The OK button is selected on the First Deny Letter Returned dialog as described in [Chapter 13 – Vendor Denial](#). This invokes the Send Second Vendor Denial Letter dialog as described [Chapter 13 – Vendor Denial](#) that generates the letter.
- The Print button is selected on the First Deny Letter Returned dialog as described in [Chapter 13 – Vendor Denial](#). This invokes the Send Second Vendor Denial Letter dialog as described in [Chapter 13 – Vendor Denial](#) that generates the letter.

20.11.3 Merged Fields

These are the additional merged fields in the Application Denial letter.

20.11.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.11.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.11.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.11.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.11.3.5 Denied Reason

This value is the reason why the Vendor application was denied. The value comes from the Reasons-Type-Description attribute of the REASONS TYPE entity.

20.11.4 Letter Sample

The following is the complete text of the Application Denial letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Application Denial

Dear *Recipient* [Salutation] [Last Name]:

The application for your store [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], State [VZIP Code] for the contract period FY 20XX-20XX has been reviewed to determine if the vendor selection criteria was met as stipulated by the State State WIC Program.

The store did not meet the following criteria:
[Denied Reason]

Please see the enclosures for additional information. Since your store does not meet the requirements for participation in the WIC Program, the application is being denied.

You have the right to appeal this decision within 20 days of receipt of this notice. You may request a hearing by calling or writing Legal Representative Name, Office of Legal Services, State Department of Health, PO Box 360, Anytown, ST 46204-0360. The telephone number is (000) 000-0000.

Sincerely,

Program Manager Name
Program Manager
State WIC Services

JM/[user]
Enclosures

20.12 Expiration of Contract

20.12.1 Purpose of Letter

This letter is sent to a currently enrolled vendor who did not apply for the new contract authorization period. The letter advises the vendor not to cash checks as of a specified date and to return the vendor stamp.

20.12.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Expiration of Contract. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Expiration of Contract. This invokes the Send Letter dialog that generates the letter.

20.12.3 Merged Fields

These are the additional merged fields in the Expiration of Contract letter.

20.12.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.12.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.12.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.12.3.4 Contract End Date

This value is the date that the Vendor contract expires. The value comes from the Contract-End-Date attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.12.3.5 Bank Effective Date of Termination

This value is the date the bank will stop accepting WIC checks for redemption from this Vendor. The value comes from the Termination-Effective-Date-At-Bank attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.12.3.6 Bank Effective Date of Termination + 5 days

This value is the bank effective date of termination plus five calendar days. The value will print in MM/DD/CCYY format.

20.12.4 Letter Sample

The following is the complete text of the Expiration of Contract letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Expiration of Contract

Dear *Recipient* [Salutation] [Last Name]:

Your contract for [Vendor] located at, [VAddress Line 1] [VAddress Line 2], [VCity], State terminates on [Contract End Date]. You are not authorized to accept checks after this date.

In accordance with the Federal Regulations 246.12 (f)(xviii) expiration of a contract or agreement with a food vendor is not subject to appeal.

Your vendor code will be terminated at the bank, effective [Bank Effective Date of Termination]. Checks will be rejected after that date. You must deposit any checks prior to that date in order to receive payment.

Return the vendor stamp to this office by [Bank Effective Date of Termination + 5 days]. Sanction points will be applied if you do not return the stamp.

Thank you for your participation in the program.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.13 Check State Approval

20.13.1 Purpose of Letter

This letter advises the vendor that checks have been approved for resubmission to the bank.

20.13.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Approved Checks dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- The Print button is selected on the Approved Checks dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- The OK button is selected on the Approved Checks Adjusted Pay Amount dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Adjusted Pay Amount Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- The Print button is selected on the Approved Checks Adjusted Pay Amount dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Adjusted Pay Amount Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.

20.13.3 Merged Fields

All merged fields in the Check State Approval letter are described in the Common Merged Fields section.

20.13.4 Letter Sample

The following is the complete text of the Check State Approval letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: WIC Checks Submitted for Replacement - Redeposit

Dear *Recipient* [Salutation] [Last Name]:

We have reviewed the check(s) you sent to the State Office with a request for replacement. Your check(s) have been approved, and you must redeposit them immediately.

In order for you to redeposit a previously rejected check, we have stamped each check with the following seal:

Check Number	Issue date
--------------	------------

A check cannot be redeposited unless it bears this stamp

Note: If today's date is beyond the vendor's last day to deposit, you are authorized to redeposit the check(s) with the above shown State approved stamp and seal for payment. Our bank will not reject them. Should your bank of deposit have any questions, show them this letter for authorization for payment.

If you have any questions regarding this notice, please telephone me at the State Office (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.14 Check State Approval - Manufacturer

20.14.1 Purpose of Letter

This letter advises the manufacturer that checks have been approved for resubmission to the bank.

20.14.2 How Generated

The following actions generate this letter:

- If the Vendor store type is Manufacturer, when the OK button is selected on the Approved Checks dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- If the Vendor store type is Manufacturer, when the Print button is selected on the Approved Checks dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- If the Vendor store type is Manufacturer, when the OK button is selected on the Approved Checks Adjusted Pay Amount dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Adjusted Pay Amount Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- If the Vendor store type is Manufacturer, when the Print button is selected on the Approved Checks Adjusted Pay Amount dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Approved Checks Adjusted Pay Amount Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.

20.14.3 Merged Fields

All merged fields in the Check State Approval letter are described in the Common Merged Fields section.

20.14.4 Letter Sample

The following is the complete text of the Check State Approval letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: WIC Checks Submitted for Replacement - Redeposit

Dear *Recipient* [Salutation] [Last Name]:

We have reviewed the check(s) you sent to the State Office with a request for replacement. Your check(s) have been approved, and you must redeposit them immediately.

In order for you to redeposit a previously rejected check, we have stamped each check with the following seal:

Check Number	Issue date
--------------	------------

A check cannot be redeposited unless it bears this stamp

Note: If today's date is beyond the vendor's last day to deposit, you are authorized to redeposit the check(s) with the above shown State approved stamp and seal for payment. Our bank will not reject them. Should your bank of deposit have any questions, show them this letter for authorization for payment.

If you have any questions regarding this notice, please telephone me at the State Office (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.15 Check State Denial

20.15.1 Purpose of Letter

This letter advises the vendor that checks are not approved for payment.

20.15.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Checks Not Approved dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Checks Not Approved Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- The Print button is selected on the Checks Not Approved dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Checks Not Approved Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.

20.15.3 Merged Fields

These are the additional merged fields in the Check State Denial letter.

20.15.3.1 Check Number

This value is the number on the check. The value comes from the Checks-Number attribute of the CHECKS entity. The value will be up to 8 numeric characters and print in “99999999” format.

20.15.3.2 Issue Date

This value is the date the check was issued. The value comes from the Checks-Issue-Date attribute of the CHECKS entity. The value will print in MM/DD/CCYY format.

20.15.3.3 Reason

This value is the reason the check was denied. The value comes from the Checks-Reason-Denied attribute of the CHECKS entity.

20.15.4 Letter Sample

The following is the complete text of the Check State Denial letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name] [Title]
[Vendor]
[Address Line 1]
[Address Line 2]

[City], [ST] [ZIP Code]

SUBJECT: WIC Checks Submitted for Replacement - Not Replaced

Dear *Recipient* [Salutation] [Last Name]:

We have reviewed the check(s) you sent to the State Office with a request for replacement. The following cannot be approved for the reason(s) listed:

Check Number	Issue date	Reason
--------------	------------	--------

If you have any questions regarding this notice, please telephone me at the State Office (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.16 Check State Denial - Manufacturer

20.16.1 Purpose of Letter

This letter advises the Manufacturer that checks are not approved for payment.

20.16.2 How Generated

The following actions generate this letter:

- If the Vendor store type is Manufacturer, when the OK button is selected on the Checks Not Approved dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Checks Not Approved Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.
- If the Vendor store type is Manufacturer, when the Print button is selected on the Checks Not Approved dialog as described in [Chapter 17 – Approving and Denying Checks](#). This invokes the Send Checks Not Approved Letter dialog as described in [Chapter 17 – Approving and Denying Checks](#) that generates the letter.

20.16.3 Merged Fields

These are the additional merged fields in the Check State Denial letter.

20.16.3.1 Check Number

This value is the number on the check. The value comes from the Checks-Number attribute of the CHECKS entity. The value will be up to 8 numeric characters and print in “99999999” format.

20.16.3.2 Issue Date

This value is the date the check was issued. The value comes from the Checks-Issue-Date attribute of the CHECKS entity. The value will print in MM/DD/CCYY format.

20.16.3.3 Reason

This value is the reason the check was denied. The value comes from the Checks-Reason-Denied attribute of the CHECKS entity.

20.16.4 Letter Sample

The following is the complete text of the Check State Denial letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name] [Title]
[Vendor]
[Address Line 1]

[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: WIC Checks Submitted for Replacement - Not Replaced

Dear *Recipient* [Salutation] [Last Name]:

We have reviewed the check(s) you sent to the State Office with a request for replacement. The following cannot be approved for the reason(s) listed:

Check Number	Issue date	Reason
--------------	------------	--------

If you have any questions regarding this notice, please telephone me at the State Office (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.17 Compliance Buys to Investigator

20.17.1 Purpose of Letter

This letter provides the compliance buy contractor with detailed information for conducting compliance buys.

20.17.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Compliance Buy to Investigator letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog described in [Chapter 4 – Vendor Folder](#) and the Compliance Buys to Investigator letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog described in [Chapter 4 – Vendor Folder](#) and the Compliance Buys to Investigator letter is selected on the Send Letter dialog.

20.17.3 Merged Fields

These are the additional merged fields in the Compliance Buys to Investigator letter.

20.17.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.17.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.17.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.17.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.17.3.5 VTelephone

This value is the telephone number of the Vendor. The value comes from the Telephone attribute of the VENDOR entity. The value will print in “(999)999-9999” format.

20.17.4 Letter Sample

The following is the complete text of the Compliance Buys to Investigator letter with all merged fields identified.

[DATE]

Ms. C. Lawrence, CEO
Blind Detective Agency
Suite 3
44 New Street
East Orange, IN 07017

SUBJECT: Compliance Buy

Dear Ms. Lawrence:

Enclosed are compliance buy checks for [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code]. The telephone number is [VTelephone]. In addition, instructions, reports, WIC ID Folders, and WIC Food Receipts are included.

Please have the Authorized Representative print and sign their names on the WIC ID folders. After all buys have been completed please return unused WIC checks and WIC ID folders to the State Office.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.18 Compliance Buy Meeting Letter

20.18.1 Purpose of Letter

This letter advises the vendor that a compliance buy was performed and the vendor is required to meet with the State to address the areas of contract non-compliance.

20.18.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Meeting dialog as described in [Chapter 16 – Compliance Buys](#). This invokes the Send Compliance Buy Meeting Letter dialog described in [Chapter 16 – Compliance Buys](#) that generates the letter.
- The Print button is selected on the Returned Compliance Buy Checks dialog and then selecting the OK button on the Meeting dialog described in [Chapter 16 – Compliance Buys](#). This invokes the Send Compliance Buy Meeting Letter dialog described in [Chapter 16 – Compliance Buys](#) that generates the letter.

20.18.3 Merged Fields

These are the additional merged fields in the Compliance Buy Meeting Letter.

20.18.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.18.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.18.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.18.3.4 First Date of Use

This value is the first day the compliance buy check could be used. The value comes from the Compliance-Buy-First-Day-Of-Use attribute of the COMPLIANCE BUY entity. The value will print in MM/DD/CCYY format.

20.18.3.5 Number of Checks with Violations

This value is the count of the compliance buy checks that have violations. The value is the accumulated total of the COMPLIANCE BUY RETURNED entities where the Compliance-Buy-Returned-Violations attribute is true. The value will print in “99” format.

20.18.3.6 Amount of Checks

This value is the total value of the compliance buys checks that have associated violations. The value is the accumulated total of the Compliance-Buy-Returned-Check-Redeemed-Amount attribute on the COMPLIANCE BUY RETURNED entities where the Compliance-Buy-Returned-Violations attribute is true. The value will print in “\$999,999,999,999,999.99” format.

20.18.3.7 Compliance Buy Check Number

This value is the number on the compliance buy check. The value comes from the Compliance-Buy-Returned-Check-Number attribute of the COMPLIANCE BUY RETURNED entity. The value will print in “99999999” format.

20.18.3.8 Violations Associated with Compliance Buy Check

This value is the violations associated with the compliance buy check. The value comes from the Violation-Description attribute of the VIOLATION TABLE entity.

20.18.3.9 Meeting Date

This value is the date for the Compliance Buy meeting as entered on the Meeting dialog described in [Chapter 16 – Compliance Buys](#). The value will print in MM/DD/CCYY format.

20.18.3.10 Meeting Time

This value is the time for the Compliance Buy meeting as entered on the Meeting dialog described in [Chapter 16 – Compliance Buys](#). The value will print in HH:MM AM/PM format.

20.18.4 Letter Sample

The following is the complete text of the Compliance Buy Meeting Letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Compliance Buy Meeting Letter

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program performed compliance buys at [Vendor] located at [Vaddress Line 1] [VAddress Line 2], [VCity], State beginning [First Date of Use]. [Number of Checks with Violations] checks totaling [Amount of Checks] were found in violation of WIC policy. The vendor was not in compliance in the following areas:

Check #[Compliance Buy Check Number]
[Violations Associated with Compliance Buy Check]

The Vendor Agreement Appendix A specifies these as violations.

A meeting has been scheduled at the State WIC Office for:

[Meeting Date] [Meeting Time]

Should you have any questions or need directions to the State WIC Office, please telephone me at the State Office (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.19 Contract Termination - Store Closing

20.19.1 Purpose of Letter

This letter informs the vendor of the last date to deposit checks and requests the return of vendor stamp due to a store closing.

20.19.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Store Closing. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Store Closing. This invokes the Send Letter dialog that generates the letter.

20.19.3 Merged Fields

These are the additional merged fields in the Contract Termination - Store Closing letter.

20.19.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.19.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.19.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.19.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.19.3.5 Date of Termination

This value is the date of the Vendor termination from the WIC program. The value comes from the Termination-Date attribute of the TERMINATION entity. The value will print in MM/DD/CCYY format.

20.19.3.6 Bank Effective Date of Termination

This value is the date the bank will stop accepting WIC checks for redemption from this Vendor. The value comes from the Termination-Effective-Date-At-Bank attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.19.3.7 Bank Effective Date of Termination + 5 days

This value is the bank effective date of termination plus five calendar days. The value will print in MM/DD/CCYY format.

20.19.4 Letter Sample

The following is the complete text of the Contract Termination - Store Closing letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Contract Termination - Store Closing

Dear *Recipient* [Salutation] [Last Name]:

Your contract for [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code] terminates on [Date of Termination]. You are not authorized to accept checks after this date.

Your vendor code will be terminated at the bank, effective[Bank Effective Date of Termination]. Checks will be rejected after that date. You must deposit any checks prior to that date in order to receive payment.

Return the vendor stamp to this office by [Bank Effective Date of Termination + 5 days]. Sanction points will be applied if you do not return the stamp.

Thank you for your participation in the program.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.20 Contract Termination - Ownership Change

20.20.1 Purpose of Letter

This letter informs the vendor of the last date to deposit checks and requests the return of vendor stamp due to a change of ownership.

20.20.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Ownership Change. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Ownership Change. This invokes the Send Letter dialog that generates the letter.

20.20.3 Merged Fields

These are the additional merged fields in the Contract Termination - Ownership Change letter.

20.20.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.20.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.20.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.20.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.20.3.5 Date of Termination

This value is the date of the Vendor termination from the WIC program. The value comes from the Termination-Date attribute of the TERMINATION entity. The value will print in MM/DD/CCYY format.

20.20.3.6 Bank Effective Date of Termination

This value is the date the bank will stop accepting WIC checks for redemption from this Vendor. The value comes from the Termination-Effective-Date-At-Bank attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.20.3.7 Bank Effective Date of Termination + 5 days

This value is the bank effective date of termination plus five calendar days. The value will print in MM/DD/CCYY format.

20.20.4 Letter Sample

The following is the complete text of the Contract Termination - Ownership Change letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Contract Termination - Change in Ownership

Dear *Recipient* [Salutation] [Last Name]:

Your contract for [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code] terminates on [Date of Termination]. You are not authorized to accept checks after this date.

In accordance with Federal Regulation 246.12(f)(2)(xix) the contract is null and void if ownership changes.

Your vendor code will be terminated at the bank, effective [Bank Effective Date of Termination]. Checks will be rejected after that date. You must deposit any checks prior to that date in order to receive payment.

Return the vendor stamp to this office by [Bank Effective Date of Termination + 5 days]. Sanction points will be applied if you do not return the stamp.

Thank you for your participation in the program.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.21 Contract Termination - Withdrawal from Program

20.21.1 Purpose of Letter

This letter informs the vendor of the last date to deposit checks and requests the return of vendor stamp due to a withdrawal from the WIC Program by the vendor.

20.21.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Withdrawal from Program. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Termination dialog as described in [Chapter 11 – Penalties Assessed](#) and the selected Reason for Termination is Withdrawal from Program. This invokes the Send Letter dialog that generates the letter.

20.21.3 Merged Fields

These are the additional merged fields in the Contract Termination - Withdrawal from Program letter.

20.21.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.21.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.21.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.21.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.21.3.5 Bank Effective Date of Termination

This value is the date the bank will stop accepting WIC checks for redemption from this Vendor. The value comes from the Termination-Effective-Date-At-Bank attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.21.3.6 Bank Effective Date of Termination + 5 days

This value is the bank effective date of termination plus five calendar days. The value will print in MM/DD/CCYY format.

20.21.4 Letter Sample

The following is the complete text of the Contract Termination - Withdrawal from Program letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Contract Termination - Withdrawal from Program

Dear *Recipient* [Salutation] [Last Name]:

Your contract for [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code] terminates on [Date of Termination]. You are not authorized to accept checks after this date.

Your vendor code will be terminated at the bank, effective [Bank Effective Date of Termination]. Checks will be rejected after that date. You must deposit any checks prior to that date in order to receive payment.

Return the vendor stamp to this office by [Bank Effective Date of Termination + 5 days]. Sanction points will be applied if you do not return the stamp.

Thank you for your participation in the program.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.22 Notification to Food Stamps

20.22.1 Purpose of Letter

This letter is sent to Food Stamps advising them of vendors disqualified from WIC for one of the 7 WIC/Food Stamps reciprocal abuses.

20.22.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Notification to Food Stamps letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Notification to Food Stamps letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Notification to Food Stamps letter is selected on the Send Letter dialog.

20.22.3 Merged Fields

These are the additional merged fields in the Notification to Food Stamps letter.

20.22.3.1 Date of Termination

This value is the date of the Vendor termination from the WIC program. The value comes from the Termination-Date attribute of the TERMINATION entity. The value will print in MM/DD/CCYY format.

20.22.3.2 Contract End Date

This value is the date that the Vendor contract expires. The value comes from the Contract-End-Date attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.22.3.3 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.22.3.4 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.22.3.5 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.22.3.6 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.22.4 Letter Sample

The following is the complete text of the Notification to Food Stamps letter with all merged fields identified.

[DATE]

Mr. Gerald Repasky, OIC
Philadelphia Field Office
US Customs House - Room 600
Second and Chestnut Streets
Philadelphia, PA 19106

SUBJECT: Notification to Food Stamps of WIC Disqualification

Dear Mr. Repasky:

This is to inform you that the following WIC/Food Stamps store has been disqualified from the WIC program effective [Date of Termination] through [Contract End Date].

[Vendor]
[VAddress Line 1]
[VAddress Line 2]
[VCity], IN [VZIP Code]

It is our judgment (as documented in the enclosed disqualification notice) that disqualification from WIC was based on the violations outlined in Section 278.1 (O) of the Food Stamp Program Retailer Regulations.

We are sending this information in accordance with Section II.D. of the WIC/Food Stamp Agreement. Also enclosed is a copy of the vendor disqualification letter, vendor agreement, and decision rendered by the Appeals Board. We hope it will assist you in making a determination regarding withdrawal of FSP authorization.

If you have any questions regarding this disqualification action or require further documentation, please contact me at the State WIC Program at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

cc:USDA
SC/[user]

Enclosures

20.23 Civil Money Penalty

20.23.1 Purpose of Letter

This letter advises the vendor that the State will impose a civil money penalty for program abuse in lieu of disqualification.

20.23.2 How Generated

This letter is generated outside of the Vendor Management system. The user documents that the letter was sent to the vendor through the Send Letter dialog. The following actions invoke the dialog to document that the letter was sent:

- The Send button is selected on the Send Group Letters dialog described in this document and the Civil Money Penalty letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#), when the Civil Money Penalty letter and the Letter Sent outside System check box are selected on the Send Letter dialog described in this document.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#), when the Civil Money Penalty letter and the Letter Sent outside System check box are selected on the Send Letter dialog.

20.23.3 Merged Fields

There are no merged fields in the Civil Money Penalty letter because it is generated outside of the system.

20.24 Disqualification Notification - Final Notice

20.24.1 Purpose of Letter

This letter is sent after hearing rights have been completed and provides the vendor with specific details of the disqualification dates.

20.24.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The OK button is selected on the Disqualification dialog as described in [Chapter 11 – Penalties Assessed](#). This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Disqualification dialog as described in [Chapter 11 – Penalties Assessed](#). This invokes the Send Letter dialog that generates the letter.

20.24.3 Merged Fields

These are the additional merged fields in the Disqualification Notification - Final Notice letter.

20.24.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.24.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.24.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.24.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.24.3.5 Disqualification Time

This value is the number of years the vendor will be disqualified from the WIC program if the penalty is not paid. This value depends on the total number of sanction points assessed:

Sanction Points	Disqualification Time
-----------------	-----------------------

15 to 20	1 year
21 to 24	2 years
25 or more	3 years

20.24.3.6 Date of Termination

This value is the date of the Vendor termination from the WIC program. The value comes from the Termination-Date attribute of the TERMINATION entity. The value will print in MM/DD/CCYY format.

20.24.3.7 Date of Termination + Disqualification Time

This value is the date of termination plus the disqualification time, as described in this document. The value will print in MM/DD/CCYY format.

20.24.3.8 Bank Effective Date of Termination

This value is the date the bank will stop accepting WIC checks for redemption from this Vendor. The value comes from the Termination-Effective-Date-At-Bank attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.24.3.9 Bank Effective Date of Termination + 5 days

This value is the bank effective date of termination plus five calendar days. The value will print in MM/DD/CCYY format.

20.24.4 Letter Sample

The following is the complete text of the Disqualification Notification - Final Notice letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Disqualification Notification - Final Notice

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program has disqualified [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code].

The bank has been notified not to accept any checks from your store, effective [Bank Effective Date of Termination]. Submit all checks prior to that date to receive payment. Return your stamp to the State WIC office by [Bank Effective Date of Termination +5]. Sanction points will be applied if you do not return the stamp.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.25 Onsite Letter

20.25.1 Purpose of Letter

This letter advises the vendor that a store visit was performed and that the store is in compliance.

20.25.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Vendor Monitoring dialog as described in [Chapter 14 – Vendor Monitoring](#) and no violations resulted from the Vendor visit. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Vendor Monitoring dialog as described in [Chapter 14 – Vendor Monitoring](#) and no violations resulted from the Vendor visit. This invokes the Send Letter dialog that generates the letter.

20.25.3 Merged Fields

These are the additional merged fields in the Onsite Letter.

20.25.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.25.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.25.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.25.3.4 Monitoring Visit Date

This value is the date on which the monitoring visit occurred. The value is taken from the Visit-Date attribute of the MONITORING VISIT entity. The value will print in MM/DD/CCYY format.

20.25.3.5 Visiting Staff Member

This value is the staff member who performed the monitoring visit. The value is taken from the First-Name Last-Name attribute of the STAFF MEMBER entity.

20.25.4 Letter Sample

The following is the complete text of the Onsite Letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Monitoring Visit

Dear *Recipient* [Salutation] [Last Name]:

This is to provide you with a summary of my visit to your store located at [VAddress Line 1] [VAddress Line 2], [VCity], State on [Monitoring Visit Date]. The areas audited are detailed on the attached "Vendor Monitoring" form.

Please review this form thoroughly. The result of this visit indicates that the vendor is:

IN COMPLIANCE - The practices of the store reviewed are in compliance with federal and state regulations and procedures.

As indicated in the Vendor Agreement, monitoring of vendors is an ongoing activity conducted by federal, state and/or local WIC representatives. If you have any questions regarding this report please contact the State Agency at (000) 000-0000.

Sincerely,

[Visiting Staff Member]
Program Representative
State WIC Services

Enclosure

20.26 Onsite Warning

20.26.1 Purpose of Letter

This letter provides the vendor with the specific abuses and corresponding sanction points found during a visit to the store, and requires the vendor to schedule a meeting if the accumulated sanction points are six or greater.

20.26.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Vendor Monitoring dialog as described in [Chapter 14 – Vendor Monitoring](#) and violations resulted from the Vendor visit. This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Vendor Monitoring dialog as described in [Chapter 14 – Vendor Monitoring](#) and violations resulted from the Vendor visit. This invokes the Send Letter dialog that generates the letter.

20.26.3 Merged Fields

These are the additional merged fields in the Onsite Warning letter.

20.26.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.26.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.26.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.26.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.26.3.5 Monitoring Visit Date

This value is the date on which the monitoring visit occurred. The value is taken from the Visit-Date attribute of the MONITORING VISIT entity. The value will print in MM/DD/CCYY format.

20.26.3.6 Points Assessed for Visit

This value is the total number of sanction points assessed against the vendor due to the listed abuses. The value is the accumulated total of the Sanction-Amount-Assessed attribute of the SANCTION entity. The value will print in “999” format.

20.26.3.7 Sanction Type

This value is the type of sanction recorded against the vendor. The value comes from the Sanction-Description attribute of the SANCTION Entity.

20.26.3.8 Points Assessed

These are the points assessed for the sanction received by the vendor. The value is taken from the Sanction-Points attribute of the SANCTION Entity. The value will print in “999” format.

20.26.3.9 Total Sanction Points

This value is the total number of sanction points assessed against the vendor. The value is the accumulated total of the Sanction-Amount-Assessed attribute of the SANCTION entity. The value will print in “999” format.

20.26.3.10 Contract End Date

This value is the date that the Vendor contract expires. The value comes from the Contract-End-Date attribute of the VENDOR entity. The value will print in MM/DD/CCYY format.

20.26.4 Letter Sample

The following is the complete text of the Onsite Warning letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Onsite Warning

Dear *Recipient* [Salutation] [Last Name]:

This is to provide you with a summary report of the visit to [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code] on [Monitoring Visit Date]. The areas audited are detailed on the attached “Vendor Monitoring” form. Please review this form thoroughly and give your attention to the column “Abuse” and to the “Comments” section.

The above named Vendor has incurred a total of [Points Assessed for Visit] penalty point(s) in accordance with the State WIC Program's Vendor Agreement: Sanction Policy. The abuses noted and the points assessed for each are listed below:

[Sanction Type] [Points Assessed]
[Sanction Type] [Points Assessed]

These penalty point(s) added to the previous assessed penalty point(s), give a total of [Total Sanction Points] for this Vendor. Penalty points are retained for the duration of the Vendor Agreement, or a maximum of three (3) years. The current Agreement with this Vendor is in effect through [Contract End Date].

In order to prevent future sanction(s), please comply with the enclosed list of corrective actions.

If over six (6) penalty points have been assessed against this Vendor, you are required to attend mandatory training. Please contact me to schedule this training.

The State WIC Agency values your participation and is available to assist you with any problems you may have with the WIC Program. If you have any questions or would like to request training, please contact the Vendor Unit at the State WIC Office. The number is (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.27 CPL Notification - CPL Survey

20.27.1 Purpose of Letter

This letter notifies the vendor that commodity price information must be submitted to the state.

20.27.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog as described in this document and the CPL Notification – CPL Survey letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the CPL Notification – CPL Survey letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the CPL Notification – CPL Survey letter is selected on the Send Letter dialog.

20.27.3 Merged Fields

These are the additional merged fields in the CPL Notification - CPL Survey letter.

20.27.3.1 Current Date + 21

This value is the date the letter is generated plus 21 calendar days.

20.27.4 Letter Sample

The following is the complete text of the CPL Notification - CPL Survey letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: CPL Notification - CPL Survey

Dear *Recipient* [Salutation] [Last Name]:

Enclosed is a revised one page Commodity Price List form. Per your WIC Vendor Agreement, you are required to provide, upon request, timely and accurate information on your stock and retail prices for WIC foods. Please complete the enclosed form, using regular shelf prices, not sale prices, for only those WIC foods you routinely stock. Do not list items or sizes you do not carry.

Please follow the instructions carefully to ensure that information you submit is correct.

Note: Do not record information in the shaded area.

Please return the completed form to State Department of Health, WIC Services, PO Box 364, Anytown, ST 46204-0364.

The deadline for return is [Current Date +21].

If you have any questions, please call the State Office at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.28 Vendor New Stamp

20.28.1 Purpose of Letter

This letter is sent with the first stamp issued to the vendor.

20.28.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Issue Vendor Stamp dialog as described in [Chapter 12 – Vendor Stamp](#). This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Issue Vendor Stamp dialog as described in [Chapter 12 – Vendor Stamp](#). This invokes the Send Letter dialog that generates the letter.

20.28.3 Merged Fields

These are the additional merged fields in the Vendor New Stamp letter.

20.28.3.1 Stamp ID

This value is the new food stamp number for the Vendor. The value comes from the Stamp-Number attribute of the VENDOR STAMP entity.

20.28.3.2 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.28.3.3 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.28.3.4 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.28.3.5 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.28.3.6 Stamp Effective Date

This value is the date that the bank will start accepting WIC checks with the new Vendor stamp. The value comes from the Bank-Date-Activated attribute of the VENDOR STAMP entity.

20.28.4 Letter Sample

The following is the complete text of the Vendor New Stamp letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: New Stamp - Code [Stamp ID]

Dear *Recipient* [Salutation] [Last Name]:

Enclosed is the new stamp for [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], IN [VZIP Code].

You may begin using the stamp on WIC checks effective [Stamp Effective Date].

Note: The bank will reject checks that do not have the stamped code on them. Keep this stamp in a locked and secure area. There shall be a charge incurred for the replacement of a lost stamp. It will take several weeks to issue a replacement stamp.

Should you have any problems with the stamp or lose it, contact me immediately at (609) 292-9560.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.29 Vendor Replacement Stamp

20.29.1 Purpose of Letter

This letter is sent with replacement stamps issued to the vendor.

20.29.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Replace Vendor Stamp dialog as described in [Chapter 12 – Vendor Stamp](#). This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Replace Vendor Stamp dialog as described in [Chapter 12 – Vendor Stamp](#). This invokes the Send Letter dialog that generates the letter.

20.29.3 Merged Fields

These are the additional merged fields in the Vendor Replacement Stamp letter.

20.29.3.1 Stamp ID

This value is the new food stamp number for the Vendor. The value comes from the Stamp-Number attribute of the VENDOR STAMP entity.

20.29.3.2 Previous Stamp ID

This value is the current food stamp number for the Vendor. The value comes from the Vendor-Current-Stamp-Number attribute of the VENDOR entity.

20.29.3.3 Current Date + 21

This value is the date on which the letter was generated plus 21 calendar days.

20.29.3.4 Stamp Effective Date

This value is the date that the bank will start accepting WIC checks with the new Vendor stamp. The value comes from the Bank-Date-Activated attribute of the VENDOR STAMP entity. The value prints in MM/DD/CCYY format.

20.29.3.5 Number of Replacements

This value is the textual number of replacement stamp IDs issued to the vendor. The value is determined using the Event-Identifier and Follow-Up-Activity attributes of the VENDOR STAMP entity. The count is incremented for every stamp issued to the vendor. Then one is subtracted from the final count to account for the current stamp. For example:

- If the vendor has 2 stamp IDs in the database, the value merged would be “first”.
- If the vendor has 5 stamp IDs in the database, the value merged would be “fourth”.

20.29.4 Letter Sample

The following is the complete text of the Vendor Replacement Stamp letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Replacement Stamp - Code [Stamp ID] to Replace Code [Previous Stamp ID]

Dear *Recipient* [Salutation] [Last Name]:

Enclosed is the replacement stamp noted above. Return the damaged stamp by [Current Date + 21]. Sanction points will be applied if you do not return the stamp by the due date. You may begin using this stamp effective [Stamp Effective Date].

This is your [Number of Replacements] replacement.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.30 Fee for Replacement of Lost Stamp

20.30.1 Purpose of Letter

This letter notifies the vendor that a fee is required for the lost stamp prior to another stamp being issued to the store.

20.30.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog described in this document and the Fee for Replacement of Lost Stamp letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Fee for Replacement of Lost Stamp letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Fee for Replacement of Lost Stamp letter is selected on the Send Letter dialog.

20.30.3 Merged Fields

All merged fields in the Fee for Replacement of Lost Stamp letter are described in the Common Merged Fields section.

20.30.4 Letter Sample

The following is the complete text of the Fee for Replacement of Lost Stamp letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Fee for Replacement of Lost Stamp

Dear *Recipient* [Salutation] [Last Name]:

The fee for replacement of a lost vendor stamp is \$20.00. You must submit payment prior to a replacement stamp being issued. A check should be made payable to State Department of Health.

Please call me at (000) 000-0000 should you have any questions.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.31 Annual Vendor Training

20.31.1 Purpose of Letter

This letter informs the vendor of the annual training schedule so the vendor can choose when to attend training.

20.31.2 How Generated

This letter is generated when annual training dates for a fiscal year are initially set as described in [Chapter 18 – Vendor Training](#). This invokes the Send Letter dialog described in this document that generates the letter.

20.31.3 Merged Fields

These are the additional merged fields in the Annual Vendor Training letter.

20.31.3.1 System Training FY

This value is the fiscal year for the Vendor training. The value comes from the Training-Fiscal-Year attribute of the TRAINING entity. The value will print in YY format.

20.31.4 Letter Sample

The following is the complete text of the Annual Vendor Training letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Annual Vendor Training

Dear Recipient [Salutation] [Last Name]:

The State WIC Program has scheduled the annual vendor training sessions for all vendors participating in the WIC Program. In accordance with the requirements of the Vendor Agreement for FY '[System Training FY]', you are required to send representation from your store. We suggest that the person you select is someone who will be responsible for daily supervision of cashiers.

Vendors have an option of attending one of the scheduled training sessions. Vendors who do not attend on the sessions will receive sanction points.

Enclosed are the list of training sessions, a tentative agenda, and directions to the training site. RSVP not required.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

Coordinator
State WIC Services
SC/[user]
Enclosures

WIC Coordinator Name

20.32 Special Training - Individualized

20.32.1 Purpose of Letter

This letter advises the vendor that they are required to attend an individual meeting with the state staff to discuss and resolve problems that have been identified.

20.32.2 How Generated

The following actions generate this letter:

- The OK button is selected on the Special Training dialog as described in [Chapter 18 – Vendor Training](#). This invokes the Send Letter dialog that generates the letter.
- The Print button is selected on the Special Training dialog as described in [Chapter 18 – Vendor Training](#). This invokes the Send Letter dialog that generates the letter.

20.32.3 Merged Fields

These are the additional merged fields in the Special Training - Individualized letter.

20.32.3.1 VAddress Line 1

This value is the first line of the Vendor physical address. The value comes from the Physical-Address-1 attribute of the VENDOR entity.

20.32.3.2 VAddress Line 2

This value is the second line of the Vendor physical address. The value comes from the Physical-Address-2 attribute of the VENDOR entity.

20.32.3.3 VCity

This value is the city in which the Vendor resides. The value comes from the Physical-City attribute of the VENDOR entity.

20.32.3.4 VZIP Code

This value is the ZIP code in which the Vendor resides. The value comes from the Physical-ZIP attribute of the VENDOR entity.

20.32.3.5 Special Training Type

This value is the type of special training the Vendor must attend. The value comes from the Special-Training-Description attribute of the SPECIAL TRAINING Entity.

20.32.3.6 Scheduled Date

This value is the ZIP code in which the Vendor resides. The value comes from the Special-Training-Scheduled-Date attribute of the SPECIAL TRAINING entity.

20.32.4 Letter Sample

The following is the complete text of the Special Training - Individualized letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Special Training

Dear *Recipient* [Salutation] [Last Name]:

A state representative conducted an onsite visit at [Vendor] located at [VAddress Line 1] [VAddress Line 2], [VCity], ST [VZIP Code] to ensure that the vendor was in compliance with the Vendor Agreement and Federal Regulations. The state representative found that the store needed the following type of special training:

[Special Training Type]

A meeting has been scheduled on [Scheduled Date]. The meeting will be held at the state WIC office, 50 East State Street, 6th floor, Statepolis, State. The purpose of the meeting is to discuss the areas noted above and develop a corrective action plan so that your store may continue to participate as a WIC vendor.

Should you have any questions or need directions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]

20.33 Interactive Training

20.33.1 Purpose of Letter

This letter invites vendors to attend an interactive training session to learn about participation in WIC.

20.33.2 How Generated

This letter is generated from the Send Letter dialog when an Interactive Training is scheduled for a vendor described in [Chapter 18 – Vendor Training](#).

20.33.3 Merged Fields

All merged fields in the Interactive Training letter are described in the Common Merged Fields section described in this document.

20.33.4 Letter Sample

The following is the complete text of the Interactive Training letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Interactive Training

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program received a letter or call from you regarding an interest in participating as a WIC vendor in the State WIC Program.

The State WIC Program accepts applications from interested retail vendors every three years. The vendors must meet the selection criteria, which include; the minimum stock for WIC food items and is located in a designated geographic area. The next application period is January 20XX for selecting vendors to participate as State WIC vendors October 1, 20XX - September 30, 20XX.

WIC is a federally funded nutrition program, which provides nutritious foods eligible pregnant, breastfeeding, and postpartum women and infants and children up to age 5. Participants must meet income and resident requirements and have a nutritional need for the program. Once certified onto WIC, they received a food prescription every three months. These foods are purchased at WIC contracted stores with WIC checks.

The interactive training will provide a complete overview of the requirements a vendor must meet to participate as a State WIC vendor. Attendance at an interactive session does not guarantee receipt of a WIC vendor contract.

Should you have any questions please call WIC Coordinator Name at (555) 555-9560.

Sincerely,

Program Manager Name
Program Coordinator
State WIC Services

JM/[user]
Attachment

20.34 New Vendor Training

20.34.1 Purpose of Letter

This letter advises newly authorized vendors of the required training schedule.

20.34.2 How Generated

This letter is generated when new vendor training dates for a fiscal year are initially set as described in [Chapter 18 – Vendor Training](#). This invokes the Send Letter dialog that generates the letter.

20.34.3 Merged Fields

These are the additional merged fields in the New Vendor Training letter.

20.34.3.1 System Training FY

This value is the fiscal year for the Vendor training. The value comes from the Training-Fiscal-Year attribute of the TRAINING entity. The value will print in YY format.

20.34.4 Letter Sample

The following is the complete text of the New Vendor Training letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Training for All New Vendors

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program has scheduled the vendor training sessions for all new vendors participating in the WIC Program. In accordance with the requirements of the Vendor Agreement for FY '[System Training FY]', you are required to send representation from your store. We suggest that the person you select is someone who will be responsible for daily supervision of cashiers.

Vendors have an option of attending one of the scheduled training sessions. Vendors who do not attend one the sessions will receive sanction points and will not be authorized to participate as a WIC Vendor.

Enclosed are the list of training sessions, a tentative agenda, and directions to the training site. RSVP not required.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

SC/[user]
Enclosures

WIC Coordinator Name
Coordinator
State WIC Services

20.35 Make-up Training for New Vendors

20.35.1 Purpose of Letter

This letter advises newly authorized vendors of the required training and provides a schedule of make-up training dates and times.

20.35.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog and the Make-up Training for New Vendors letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Make-up Training for New Vendors letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Make-up Training for New Vendors letter is selected on the Send Letter dialog.

20.35.3 Merged Fields

All merged fields in the Make-up Training for New Vendors letter are described in the Common Merged Fields section.

20.35.4 Letter Sample

The following is the complete text of the Make-up Training for New Vendors letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Make-up Vendor Training for New Vendors

Dear *Recipient* [Salutation] [Last Name]:

The State WIC Program recently held its annual, regional training sessions for new vendors. In accordance with the Vendor Agreement, you are required to send representation from your store(s) to a WIC training session.

The make-up sessions for stores that were not represented at the regional sessions have been scheduled. Enclosed are a tentative agenda and directions to the training site.

Please arrange to send a representative for your store(s). The person will be responsible for training store personnel. If you fail to send a representative to one of these sessions, you will not be authorized to participate as a WIC Vendor.

Should you have any questions please contact me at (000) 000-0000.

Sincerely,

WIC Coordinator Name
Coordinator
State WIC Services

SC/[user]
Enclosures

20.36 Vendor Price Survey Letter

20.36.1 Purpose of Letter

This letter advises authorized vendors that the vendor price survey is due.

20.36.2 How Generated

This letter is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog and the Vendor Price Survey letter is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Vendor Price Survey letter is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Vendor Price Survey letter is selected on the Send Letter dialog.

20.36.3 Merged Fields

All merged fields in the Vendor Price Survey letter are described in the Common Merged Fields section.

20.36.4 Letter Sample

The following is the complete text of the Vendor Price Survey letter with all merged fields identified.

[DATE]

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

SUBJECT: Vendor Price Survey

Dear *Recipient* [Salutation] [Last Name]:

Thank you for your participation as a vendor with the Chickasaw Nation WIC Program. We certainly value your role in serving our clients and ensuring program integrity.

Enclosed is a Chickasaw Nation WIC Vendor Price List on which you will need to record all prices on Chickasaw Nation WIC allowable foods, as required by your contract. Please complete and return to Jennifer Hayes, vendor coordinator, at the above address by [November 30, 2004] to avoid a sanction.

If you have any questions or need additional information, please feel free to contact Jennifer Hayes at 580-436-7292.

Sincerely,

Melinda Newport, RD/LD
Director of Nutrition Services
Chickasaw Nation Health Systems

MN/[user]
Enclosures

20.37 Mailing Labels

20.37.1 Purpose of Label

This label is to be used for mailing correspondences to the Vendor.

20.37.2 How Generated

This label is generated by the Send Letter dialog. The following actions invoke the dialog to generate this letter:

- The Send button is selected on the Send Group Letters dialog and Mailing Labels is selected on the Send Letter dialog
- The Send Letter event is selected on the Events dialog as described in [Chapter 4 – Vendor Folder](#) and the Mailing Labels is selected on the Send Letter dialog.
- The Send Letter follow-up activity is selected on the Follow-up Activities dialog as described in [Chapter 4 – Vendor Folder](#) and the Mailing Labels is selected on the Send Letter dialog.

20.37.3 Merged Fields

All merged fields in the Mailing Labels are described in the Common Merged Fields section.

20.37.4 Label Sample

The following is the complete text of the Mailing Labels with all merged fields identified.

Recipient [Salutation] [First Name] [Last Name], [Title]
[Vendor]
[Address Line 1]
[Address Line 2]
[City], [ST] [ZIP Code]

20.38 Send Group Letters

The Send Group Letters dialog allows the user to send letters to a group of Vendors. This dialog will allow the user to search for Vendors on the system that fit specific search criteria and send them a letter. The Send Group Letters dialog is invoked from the vendor dialog when the user selects the Send Group Letters menu item on the File menu.

Vendor Name	Physical Address
A & B CONVENIENCE & DELI	1245 CHALKSTONE AVE
ALEX MARKET	215 ARNOLD ST
ANDY'S MARKET	457 MANTON AVE
ARCADIAN FIELDS	PO BOX 1273 - 94 BLITZRIEG TRAIL
ATWELLS MARKET	1119 ATWELLS AVENUE
BD MARKET	1356 CRANSTON ST
BEAVER ROCK FARM	PO BOX 485 CAROLINA
BONAO MARKET INC	400 HARTFORD AVE

Figure 3 - Send Group Letters Dialog

20.38.1 Controls

This section describes the behavior of the controls on the Send Group Letters dialog.

20.38.1.1 Vendor ID Masked Edit Box

This control allows the user to enter the Vendor ID as part of the search criteria for sending letters. The masked edit box is enabled when the Send Group Letters dialog is active. The character type and length for the masked edit box will vary according to your state. The maximum size for this control is six (6) characters. Alpha characters are forced to uppercase. Special characters are not accepted in this field. If the value entered is less than the maximum allowed for the field, the value will be padded with preceding zeros. This field is initially blank.

20.38.1.2 Store Type List Box

This control allows the user to select the store type of the vendor as part of the search criteria for sending vendor letters. The list box is enabled when the Send Group Letters dialog is active. The list contains the valid store types in alphabetical order. The control is filled with a list of store types listed in the Store Type table of the lookup database. The list box allows the user to select one or more of the store types to include in the search. There are no items initially selected in the list and is read only.

20.38.1.3 Peer Group List Box

This control allows the user to select the peer group of the vendor as part of the search criteria for sending vendor letters. The list box is enabled when the Send Group Letters dialog is active. The list contains the valid peer groups in alphabetical order. The control is filled with a list of peer groups listed in the Peer Group table of the lookup database. The list box allows the user to select one or more of the peer groups to include in the search. There are no items initially selected in the list and it is read only.

20.38.1.4 Status Dropdown

This control allows the user to select the status of the vendor as part of the search criteria for sending vendor letters. The dropdown is enabled when the Send Group Letters dialog is active. The control is filled with a list of vendor statuses from the Reference Dictionary table of the lookup database. The list is presented in alphabetical order and is single select. This field is initially blank and read only.

20.38.1.5 County Dropdown

This dropdown allows the user to select the county of the vendor as part of the search criteria for sending vendor letters. Note: The applicable label will be displayed according to your state requirements. The dropdown is enabled when the Send Group Letters dialog is active. The control is filled with a list of counties from the County table of the lookup database. The list is presented in alphabetical order and is single select. Selection within this list will enable the city dropdown. The field is initially blank and read only.

20.38.1.6 City Dropdown

This control allows the user to select the city (within the county selected) of the vendor as part of the search criteria for sending vendor letters. The text box is enabled when the Send Group Letters dialog is active and a value has been selected in the County field. The control is filled with a list of cities that are located within the county selected from the County drop-down list. The control is filled with a list of cities listed in the Local Municipality table of the lookup database. The list is presented in alphabetical order and is single select. The field is initially blank when enabled and is read only.

20.38.1.7 Vendor ZIP Masked Edit Box (ZIP)

This control allows the user to enter the ZIP code of the vendor as part of the search for sending vendor letters. The masked edit box is enabled when the Send Group Letters dialog is active. The masked edit box only accepts entry of numeric digits. The mask for the box will be “99999-9999” to allow entry of the five digit ZIP code and a four digit ZIP extension. Special characters are not accepted in this field. This field is initially blank.

Order Vendors by Name Option Button

This control allows the user to enter how they would like to display the search results. If this option is selected the search display results and letters printed will be in the order of the Vendor’s Name. The radio option button is enabled when the Send Group Letters dialog is active. This radio option button is initially selected.

20.38.1.8 Order Vendors by ID Option Button

This control allows the user to enter how they would like to display the search results and print the letters. If this option is selected the search display results and letters printed will be in the order of the Vendor’s ID. The radio option button is enabled when the Send Group Letters dialog is active. This radio option button is initially not selected.

20.38.1.9 Search Button

This control allows the user to initiate a search for vendors that match the search criteria provided. The Search button is enabled when the Send Group Letters dialog is active. It has a mnemonic of “S”.

20.38.1.10 Vendor Search Results Display Grid

This control displays the results of the search criteria for sending vendor letters. The display grid consists of two columns:

- Vendor Name
- Physical Address

Each vendor listed will have an icon preceding the vendor name indicating the status of the vendor. The icons for these statuses are depicted in the Vendor List display grid as described in [Chapter 02 – Vendor List and Search](#). The display grid will be filled with the results of the search after selecting the Search button. By default the list is sorted alphabetically by vendor name. The records within the list are read only. The list allows the user to select one or more vendors to send a letter. No record is initially selected within the list.

20.38.1.11 Select All Button

This control allows the user to select all of the vendors listed in the Vendor Search Results display grid to send letters. The Select All button is enabled when the vendor search display grid displays at least one record. The button is disabled when the vendor search display grid is empty. The button has a mnemonic of "A".

20.38.1.12 Send Button

This control allows the user to generate a letter and a mailing label for each of the vendor(s) selected. An entry is added to the Event Log grid on the Event Log tab of the Vendor Folder for each selected vendor indicating that a letter has been sent. The Send button is enabled when the Send Group Letters dialog is active and at least one record is selected in the vendor search display grid. The button has a mnemonic of "D".

20.38.1.13 Close Button

This control allows the user to exit the Send Group Letters dialog without sending letters. The Close button is enabled when the Send Group Letters dialog is active. Characteristics for the Close button are defined in *Consistencies*.

20.38.2 Processing

This section describes the processes (navigation) that take place as a result of the actions taken on the Send Group Letters dialog.

20.38.2.1 Initializing the Interface

20.38.2.2 Search

Selecting the Search button will initiate a check for valid search information.

If there has been no data entered for any of the controls on the Send Group Letters dialog, a search cannot be performed. The system will invoke a standard error message with the text "You must enter information to perform a search."

If data exists in the Vendor ZIP masked edit box control, it will be evaluated to ensure that a complete entry has been made before doing the search. If this control contains incomplete data, the system will invoke a standard error message with the text "You must enter a complete ZIP code in order to perform a search."

Once the controls have been validated, a search will be performed. The results of the search will be displayed in the display grid on the Send Group Letters dialog. If there is no vendor information found that matches the search criteria, the system will invoke a standard error message box with the text “No Vendor information was found to match the search criteria.” Upon dismissal of the error message, the system will redisplay the Send Group Letters dialog.

20.38.2.3 Sort Vendor Search Results

Selecting a column heading on the vendor search display grid will sort the list by the selected column. Selecting the Vendor Name column heading sorts the list alphabetically. Selecting the Physical Address column heading sorts the list numerically by street number, and then alphabetically by the street name.

20.38.2.4 Select Vendors to Send Letters

The Send Group Letters dialog allows the user to select individual or multiple vendors to send letters listed in the display grid. The user can also select the Select All button to send letters to all the vendors listed in the display grid.

20.38.2.5 Send

Upon selection of the Send button, the system will initiate a check for selected vendors. Once a vendor or vendors has been selected, the system will invoke the [Sending Letter](#) dialog described in this document.

20.38.2.6 Close

Upon selection of the Close button, the system dismisses the Send Group Letters dialog and returns the user to the Vendor List window as described in this document.