

**23. VENDOR QUESTIONNAIRE SYSTEM.....2**

23.1 VENDOR QUESTIONNAIRE SYSTEM WELCOME PAGE .....2

23.2 VENDOR QUESTIONNAIRE – VENDOR APPLICATION.....6

23.3 VENDOR QUESTIONNAIRE SURVEY – VENDOR PRICE SURVEY .....46

23.4 CONFIRMATION PAGE.....56

## **23. Vendor Questionnaire System**

The Vendor Questionnaire System (VQS) web site will be composed of three pages: a Welcome page, a Questionnaire page, and a Confirmation page. Vendors accessing the site via the public URL will first see the welcome page. Here they may select any of the public questionnaires. Once a questionnaire is selected the vendor will be navigated to the questionnaire page. Upon completion of the questionnaire the vendor will be navigated to the confirmation page.

Vendors accessing the site via an email link will bypass the Welcome page and go directly to the questionnaire page. As above, upon completion of the questionnaire the vendor will be navigated to the confirmation page.

Questionnaires can be “saved “or “submitted”. An individual would choose to save a partially completed questionnaire with the intent of returning and completing later. While an individual who has completed the questionnaire would choose to submit it. When saving a questionnaire no verification will be performed, the information will simply be stored in the system and a questionnaire number will be provided back to the vendor. This questionnaire number, along with the vendor’s email address, can be used to re-open the partially completed questionnaire. An email will also be sent to the vendor which will contain a link enabling the vendor to return to the partially completed questionnaire (bypassing the Welcome page). Verification will only be performed when submitting the questionnaire. (If the verification step fails, the questionnaire will be presented back to the vendor with a list of cumulative errors to be corrected.) Once the form is successfully submitted and all verification edits are passed the Vendor will be navigated to the Confirmation page. (Note that once a questionnaire is submitted it cannot be re-opened.) The submitted information will then be stored in the system and a questionnaire response document will be created and placed on the FTP site for client retrieval.

Following is an example of the three web site pages. (Note: The actual pages will make use of style sheets and graphics which will provide the ability to customize the look and feel of the site. These pages are shown here simply to demonstrate the pages’ content.)

### ***23.1 Vendor Questionnaire System Welcome Page***

The Vendor Questionnaire System (VQS) Welcome page will be the initial screen displayed to vendors providing access to the requested questionnaires. It is invoked from Internet Explorer by entering the internet address in the Address line and clicking Go. This page is by-passed for vendors who access their questionnaire via a web link from an email generated by the VQS web master.

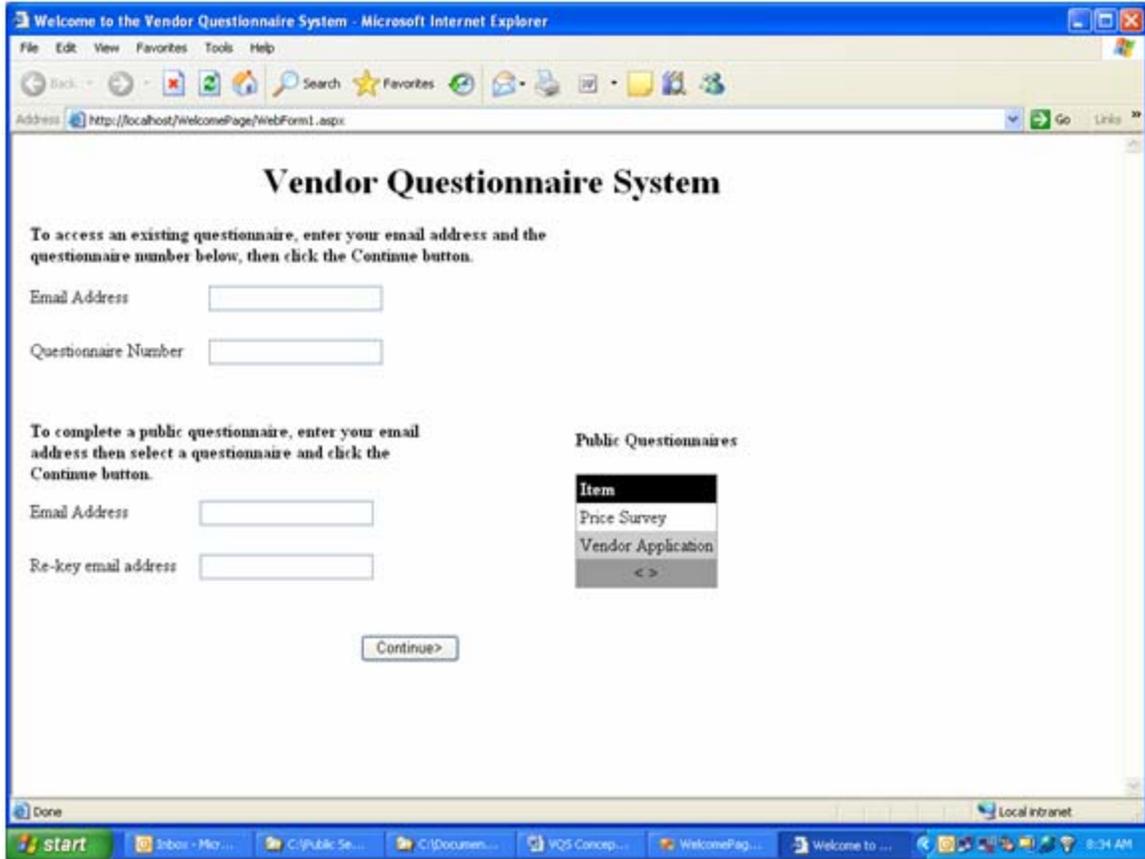


Figure 1 - Vendor Questionnaire System Welcome Page

### 23.1.1 Controls

This section describes the behavior of the controls on the Vendor Questionnaire Welcome page. It will include functionality to access an existing questionnaire that has not been submitted and access to a new questionnaire.

#### 23.1.1.1 Access to Existing Questionnaire

This function allows the vendor to access an existing questionnaire that has not yet been submitted. The vendor will be required to enter their email address and the system assigned questionnaire number. The controls will be preceded by the text “To access an existing questionnaire, enter your email address and the questionnaire number below, then click the Continue button.”

##### 23.1.1.1.1 Email Address Text Box

This control allows the user to enter the email address for the vendor. Characteristics for the email address are defined in *Consistencies*.

#### 23.1.1.1.2 Questionnaire Number Text Box

This control allows the user to enter the questionnaire number assigned to the vendor's questionnaire. This control will allow a maximum of 4 characters.

#### 23.1.1.2 Create a New Questionnaire

This function allows the vendor to create a new questionnaire. The vendor will be required to enter their email address and select the questionnaire item. The controls will be preceded by the text "To complete a public questionnaire, enter your email address then select a questionnaire and click the Continue Button."

##### 23.1.1.2.1 Email Address Text Box

This control allows the user to enter the email address for the vendor. Characteristics for the email address are defined in *Consistencies*.

##### 23.1.1.2.2 Re-key Email Address Text Box

This control allows the user to re-key the email address for the vendor. Characteristics for the email address are defined in *Consistencies*.

##### 23.1.1.2.3 Public Questionnaires Item

This control allows the user to select the questionnaire they wish to complete. It will contain a list of questionnaire published by the Questionnaire Administrator. A single selection is allowed.

#### 23.1.1.3 Continue Button

The Continue button allows the user to continue to the selected questionnaire. The Continue button is always enabled.

### 23.1.2 Processes

This section describes the processes of the controls on the Vendor Questionnaire Welcome page.

#### 23.1.2.1 Edits

Upon selection of the Continue button:

- If the user has selected to access an existing questionnaire the following edits will be performed:
  - If the Tracing Number entered is not found, the system will display a message with the text "The Tracking Number entered does not exist".
- If the user has selected to start a new questionnaire the following edits will be performed:
  - If the Email Address and Re-key Email Address do not match, the system will display a message with the text "The Email addresses entered do not match."

- If the Questionnaire Item has not been selected, the system will display a message with the text “Please select a questionnaire item.”
- If no information has been entered, the system will display an error message, “Please provide an email address and/or tracking number to continue.”

#### **23.1.2.2 Continue**

Upon successful completion of the above listed edits, the system will display the requested questionnaire.

### 23.2 Vendor Questionnaire – Vendor Application

The Vendor Application page allows vendors to apply as a WIC approved vendor via an on-line application. Vendors gain access by one of the following:

- Entering an Email Address and assigned Questionnaire Number on the VQS web page and clicking Continue.
- Clicking the web link in an email from the VQS web master.
- Entering an email address, selecting the Questionnaire item of Vendor Application and clicking Continue

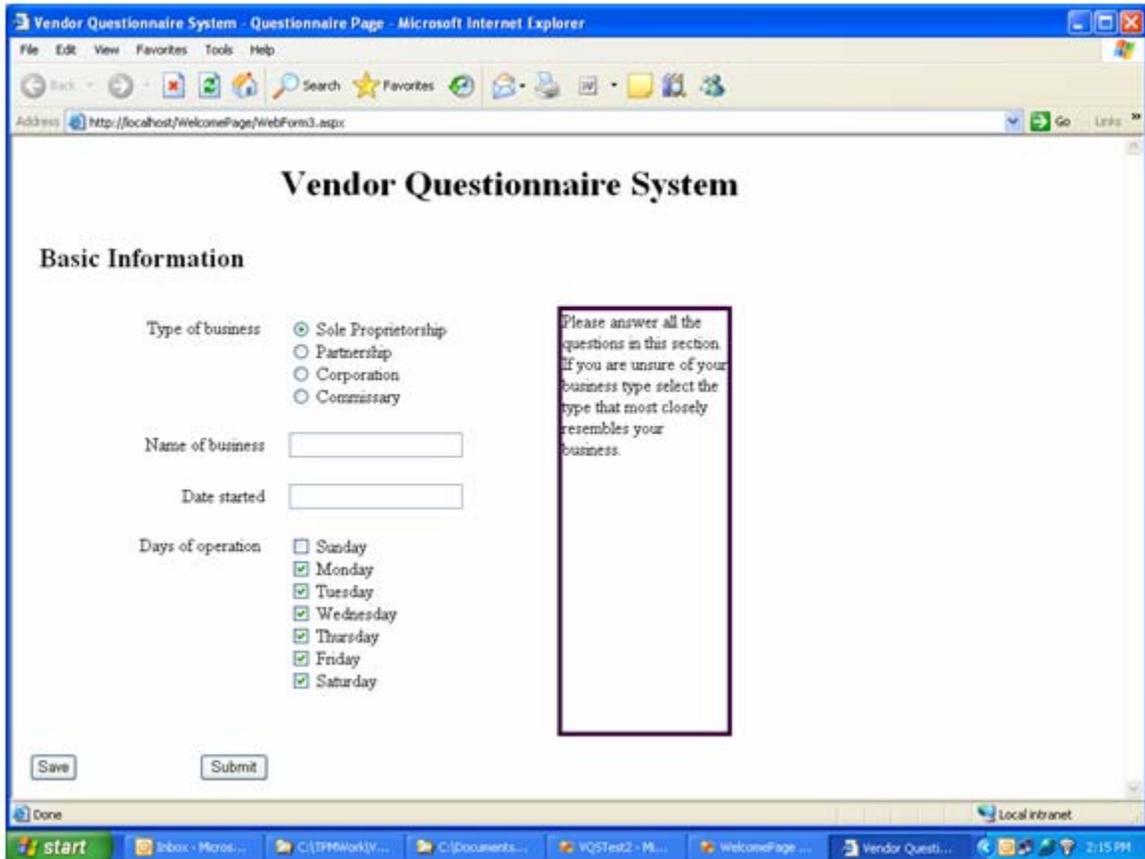


Figure 2 - Vendor Questionnaire System - Vendor Application example page

#### Vendor Application

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##### Step 1: Business Information

Please answer all questions that are applicable. Once you have completed this section proceed to Step 2.

**Please specify the ownership structure of the business**

- Corporation
- Sole Ownership

- Partnership
- Commissary
- Other

If the ownership structure is something other than listed above please specify

Trade Name (DBA)

Federal ID number of the business

---

### Step 2: Sole Ownership Information (Sole Ownership only)

If this is a Sole Ownership, please provide information regarding the owner of the business and proceed to Step 6. If this is not a Sole Ownership skip to Step 3.

Salutation

First Name

Middle Name

Last Name

Telephone Number

Social Security Number

Mailing Address

Mailing City

Mailing State

Mailing Zip

---

### Step 3: Partnership Information (Partnership only)

If this is a Partnership, please provide information regarding the partners owning the business and proceed to Step 6. If this is not a Partnership please skip to Step 4.

Partner 1: Salutation

Partner 1: First Name

Partner 1: Middle Name

Partner 1: Last Name

<b>Partner 1: Telephone Number</b>	<input type="text"/>
<b>Partner 1: Social Security Number</b>	<input type="text"/>
<b>Partner 1: Address</b>	<input type="text"/>
<b>Partner 1: City</b>	<input type="text"/>
<b>Partner 1: State</b>	<input type="text" value="Alaska"/>
<b>Partner 1: Zip</b>	<input type="text"/>
<b>Partner 1: Number of non-WIC stores owned</b>	<input type="text"/>
<b>Partner 1: Number of WIC stores owned</b>	<input type="text"/>
<b>Partner 2: Salutation</b>	<input type="text"/>
<b>Partner 2: First Name</b>	<input type="text"/>
<b>Partner 2: Middle Name</b>	<input type="text"/>
<b>Partner 2: Last Name</b>	<input type="text"/>
<b>Partner 2: Telephone Number</b>	<input type="text"/>
<b>Partner 2: Social Security Number</b>	<input type="text"/>
<b>Partner 2: Address</b>	<input type="text"/>
<b>Partner 2: City</b>	<input type="text"/>
<b>Partner 2: State</b>	<input type="text" value="Alaska"/>
<b>Partner 2: Zip</b>	<input type="text"/>
<b>Partner 2: Number of non-WIC stores owned</b>	<input type="text"/>
<b>Partner 2: Number of WIC stores owned</b>	<input type="text"/>
<b>Partner 3: Salutation</b>	<input type="text"/>
<b>Partner 3: First Name</b>	<input type="text"/>
<b>Partner 3: Middle Name</b>	<input type="text"/>
<b>Partner 3: Last Name</b>	<input type="text"/>
<b>Partner 3: Telephone Number</b>	<input type="text"/>
<b>Partner 3: Social Security Number</b>	<input type="text"/>

<b>Partner 3: Address</b>	<input type="text"/>
<b>Partner 3: City</b>	<input type="text"/>
<b>Partner 3: State</b>	<input type="text" value="Alaska"/>
<b>Partner 3: Zip</b>	<input type="text"/>
<b>Partner 3: Number of non-WIC stores owned</b>	<input type="text"/>
<b>Partner 3: Number of WIC stores owned</b>	<input type="text"/>

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**Step 4: Corporate Information (Corporation only)**

If this is a Corporation, please provide the following information. If the name of the corporation does not appear in the drop down list please enter the information. If this is not a corporation or when you have completed this section proceed to Step 5.

<b>Corporate Parent</b>	<input type="text"/>
<b>Name of Corporation</b>	<input type="text"/>
<b>Telephone Number</b>	<input type="text"/>
<b>Address</b>	<input type="text"/>
<b>City</b>	<input type="text"/>
<b>State</b>	<input type="text" value="Alaska"/>
<b>Zip</b>	<input type="text"/>

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**Step 5: Authorized Agent (Corporation and Commissary only)**

If this is a Corporation or a Commissary please provide information regarding the authorized agent and proceed to Step 6.

<b>Salutation</b>	<input type="text"/>
<b>Title</b>	<input type="text"/>
<b>First Name</b>	<input type="text"/>
<b>Middle Name</b>	<input type="text"/>
<b>Last Name</b>	<input type="text"/>

---

**Step 6: Store Information**

Please answer all the questions below that are applicable. Once you have completed this section proceed to step 7.

<b>Address</b>	<input type="text"/>
<b>City</b>	<input type="text"/>
<b>State</b>	Alaska <input type="button" value="v"/>
<b>Zip</b>	<input type="text"/>
<b>Mailing Address</b>	<input type="text"/>
<b>Mailing City</b>	<input type="text"/>
<b>Mailing State</b>	Alaska <input type="button" value="v"/>
<b>Mailing Zip</b>	<input type="text"/>
<b>Store uses scanners</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Store processes EBT transactions</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Store scans for WIC items</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total square footage of store</b>	<input type="text"/>
<b>Total number of cash registers</b>	<input type="text"/>
<b>Total number cashiers</b>	<input type="text"/>
<b>Total number scanners</b>	<input type="text"/>
<b>Total number scanners that can identify WIC approved foods</b>	<input type="text"/>
<b>Total annual WIC sales in dollars</b>	<input type="text"/>
<b>Total annual non-WIC sales in dollars</b>	<input type="text"/>
<b>Do you expect to derive more than 50 percent of your annual food sales from WIC sales?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Is the store authorized to redeem Food Stamps?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If YES, please provide the Food Stamp Authorization No.</b>	<input type="text"/>

If NO, please provide the date on which the store applied for authorization.

State sales tax number

Federal ID number of the store

Seller's Permit No.

Health ID number

Do you sell Kosher foods?

Yes - Some

Yes - Primarily Kosher

No

Bank Name

Bank transit number

Bank account number

Has this store been sold within the past two years?

Yes

No

If YES, are any of the current owners related by blood or marriage to any previous owners?

Yes

No

If YES, please identify the current owners and specify their relationship to previous owners.

How long has the owner(s) operated this business at the present site?  
(years/months)

If not applicable, provide opening date

Has the owner(s) operated this business under another name and/or at a different location?

Yes

No

If YES, name and location of former store

During the past 6 years, has any current owner, officer or manager at your store been convicted of or had a civil judgment for any of the following activities: fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification nor destruction of records, making false statement, receiving stolen property, making false claims, or obstruction of justice?

Yes

No

If YES, please specify the name of the owner, officer or manager and the activities involved:

If violation was with WIC, specify the Program name

Has the owner(s) ever been warned, withdrawn, disqualified, or received a civil money penalty from a Food Stamp Program?

- Yes  
 No

If YES, please specify when and why:

Has the corporate entity, any owner, any corporate officer or any manager ever had a business, health, occupational license or permit withdrawn, suspended/revoked, or been fined for non-compliance or fined for violations within the past six years

- Yes  
 No

If YES, Explain:

Are any of the following: corporate entity or officers, owners, managers, partners, stockholders, or immediate family members now charged with, or have they ever been convicted of or forfeit collateral for any felony or fraud or misrepresentation in any connection?

- Yes  
 No

If YES, Explain:

Does your store offer green stamps or other store promotions?

- Yes  
 No

Is your milk supplier state licensed?

- Yes  
 No

If YES, License No.

Other WIC programs in which this store participates

- ACL  
 Chickasaw Nation  
 Choctaw Nation  
 Eight Northern Pueblos  
 Five Sandoval  
 Inter-Tribal Council  
 Muskogee Creek Nation  
 Osage  
 Otoe Missouriia  
 Pueblo of Zuni  
 San Felipe  
 Santo Domingo  
 Wichita, Caddo, Delaware (WCD)

**Step 7: Contact Information**

Please specify the individual to be contacted regarding the store location. Once you have completed this section proceed to Step 8.

<b>Title</b>	<input type="text"/>
<b>Salutation</b>	<input type="text"/>
<b>First Name</b>	<input type="text"/>
<b>Last Name</b>	<input type="text"/>
<b>Telephone Number</b>	<input type="text"/>
<b>Fax Number</b>	<input type="text"/>
<b>E-Mail address</b>	<input type="text"/>

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**Step 8: Hours of Operation**

Please provide the hours of operation for the store location. Once you have completed this section proceed to Step 9.

**Store is open at least 8 hours per day 6 days per week**  Yes  
 No

<b>Sunday - Opening time</b>	<input type="text"/>
<b>Sunday - Closing time</b>	<input type="text"/>
<b>Monday - Opening time</b>	<input type="text"/>
<b>Monday - Closing time</b>	<input type="text"/>
<b>Tuesday - Opening time</b>	<input type="text"/>
<b>Tuesday - Closing time</b>	<input type="text"/>
<b>Wednesday - Opening time</b>	<input type="text"/>
<b>Wednesday - Closing time</b>	<input type="text"/>
<b>Thursday - Opening time</b>	<input type="text"/>
<b>Thursday - Closing time</b>	<input type="text"/>
<b>Friday - Opening time</b>	<input type="text"/>
<b>Friday - Closing time</b>	<input type="text"/>
<b>Saturday - Opening time</b>	<input type="text"/>

Saturday - Closing time

---

### Step 9: Primary Grocery Wholesaler

Please provide information regarding the primary grocery wholesaler that supplies the store. Once you have completed this section proceed to Step 10.

Name	<input type="text"/>
Telephone Number	<input type="text"/>
Address 1	<input type="text"/>
Address 2	<input type="text"/>
City	<input type="text"/>
State	<input type="text" value="Alaska"/>
Zip	<input type="text"/>
Contact Title	<input type="text"/>
Contact Salutation	<input type="text"/>
Contact First Name	<input type="text"/>
Contact Last Name	<input type="text"/>

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### Step 10: Milk or Pharmacy Wholesaler

Please provide information regarding the milk or pharmacy wholesaler that supplies the store. Once you have completed this section proceed to Step 11.

Name	<input type="text"/>
Telephone Number	<input type="text"/>
Address 1	<input type="text"/>
Address 2	<input type="text"/>
City	<input type="text"/>
State	<input type="text" value="Alaska"/>
Zip	<input type="text"/>
Contact Title	<input type="text"/>

Contact Salutation

Contact First Name

Contact Last Name

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### Step 11: Licensed Formula Wholesaler

Please provide information regarding the licensed formula wholesaler that supplies the store.

License Number

Name

Telephone Number

Address 1

Address 2

City

State

Zip

Contact Title

Contact Salutation

Contact First Name

Contact Last Name

Figure 3 – Vendor On-line Application Screen – SPiRiT

### 23.2.1 Controls

This section describes the behavior of the controls on the VQS – Vendor Application.

#### 23.2.1.1 Step 1: Business Information

#### 23.2.1.2 Ownership Structure Radio Button Group

The radio button group will include the question/statement

“Please specify the ownership structure of the business”

This group of radio buttons allows the user to select the Ownership Structure of the Vendor submitting the application. The following types will be available:

- Sole Proprietorship
- Partnership
- Corporation
- Commissary
- Other

When the “Other” radio button is selected, the Other Ownership Structure dropdown will be enabled.

### *23.2.1.3 Other Ownership Structure Dropdown*

The dropdown will be enabled when the “Other” radio button in the Ownership Structure is selected. It is filled from a list of “other” Ownership Structures from the OTHER-OWNERSHIP-STRUCTURE table, and will allow the user to add additional “other” Ownership Structures to the list. This control accepts entry of alphanumeric characters. The maximum size is fifty (50) characters. All alphabetic characters are forced to uppercase. Special characters are not accepted in this field.

### *23.2.1.4 Trade Name (DBA) Text Box*

This control allows the user to enter or view the name of the Vendor. This control accepts entry of alphanumeric characters. The maximum size of the control will be fifty (50) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### *23.2.1.5 Federal ID Number Text Box*

This control allows the user to enter or view the Federal ID number for the Vendor. The maximum size of the control will be nine (9) numeric digits. Special characters are not accepted.

### *23.2.1.6 Step 2: Sole Ownership Information*

#### *23.2.1.7 Owner - Salutation Text Box*

This control allows the user to enter the salutation of the Owner. The control accepts a maximum of twenty (20) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### *23.2.1.8 Owner - First Name Text Box*

This control allows the user to enter the first name of the Owner. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### *23.2.1.9 Owner - Middle Name Text Box*

This control allows the user to enter the middle name of the Owner. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.10 Owner - Last Name Text Box***

This control allows the user to enter the last name of the Owner. The control accepts a maximum of twenty-five (25) alphanumeric and special characters.

#### ***23.2.1.11 Owner - Telephone Number Masked Edit Box***

This control allows the user to enter the telephone number for the Owner. The masked edit box will only accept the entry of numeric digits formatted as “999-999-9999”. Alphabetic and special characters are not allowed.

#### ***23.2.1.12 Owner - Social Security Number Masked Edit Box***

This control allows the user to enter the Social Security number of the Owner. The control will only accept entry of nine (9) numeric digits. The format for the control will be “999-99-9999”. Alphabetic and special characters are not allowed.

#### ***23.2.1.13 Owner - Mailing Address Text Box***

This control allows the user to enter the address of the Owner. The control accepts a maximum of fifty (50). Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen (-), forward slash (/), apostrophe (’), and ampersand (&). Alphabetic characters will be forced to upper case.

#### ***23.2.1.14 Owner - Mailing City Text Box***

This control allows the user to enter the city of the Owner. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (’).

#### ***23.2.1.15 Owner - Mailing State Dropdown***

This control allows the user to select the State of the Owner. The dropdown will display all fifty (50) states in alphabetic order. This control is read only.

#### ***23.2.1.16 Owner - Mailing ZIP Masked Edit Box***

This control allows the user to enter the ZIP of the Owner. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### ***23.2.1.17 Step 3: Partnership Information***

#### ***23.2.1.18 Partner 1: Salutation Text Box***

This control allows the user to enter the salutation of Partner 1. The control accepts a maximum of twenty (20) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.19 Partner 1: First Name Text Box***

This control allows the user to enter the first name of Partner 1. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.20 Partner 1: Middle Name Text Box***

This control allows the user to enter the middle name of Partner 1. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.21 Partner 1: Last Name Text Box***

This control allows the user to enter the last name of Partner 1. The control accepts a maximum of twenty-five (25) alphanumeric and special characters.

#### ***23.2.1.22 Partner 1: Telephone Number Masked Edit Box***

This control allows the user to enter the telephone number for Partner 1. The masked edit box will only accept the entry of numeric digits formatted as "999-999-9999". Alphabetic and special characters are not allowed.

#### ***23.2.1.23 Partner 1: Social Security Number Masked Edit Box***

This control allows the user to enter the Social Security number of Partner 1. The control will only accept entry of nine (9) numeric digits. The format for the control will be "999-99-9999". Alphabetic and special characters are not allowed.

#### ***23.2.1.24 Partner 1: Address Text Box***

This control allows the user to enter the address of Partner 1. The control accepts a maximum of fifty (50). Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen (-), forward slash (/), apostrophe ('), and ampersand (&). Alphabetic characters will be forced to upper case.

#### ***23.2.1.25 Partner 1: City Text Box***

This control allows the user to enter the city of Partner 1. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.26 Partner 1: State Dropdown***

This control allows the user to select the State of Partner 1. The dropdown will display all fifty (50) states in alphabetic order. This control is read only.

#### ***23.2.1.27 Partner 1: ZIP Masked Edit Box***

This control allows the user to enter the ZIP of Partner 1. The control will accept the entry of numeric digits only. The format for the ZIP will be "99999-9999". If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

#### ***23.2.1.28 Partner 1: Number of Non-WIC Stores Owned Text Box***

This control allows the user to enter the number of non-WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.29 Partner 1: Number of WIC Stores Owned Masked Edit Box***

This control allows the user to enter the number of WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.30 Partner 2: Salutation Text Box***

This control allows the user to enter the salutation of Partner 2. The control accepts a maximum of twenty (20) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.31 Partner 2: First Name Text Box***

This control allows the user to enter the first name of Partner 2. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.32 Partner 2: Middle Name Text Box***

This control allows the user to enter the middle name of Partner 2. The control accepts a maximum of twenty (20) alphanumeric and special characters.

### ***23.2.1.33 Partner 2: Last Name Text Box***

This control allows the user to enter the last name of Partner 2. The control accepts a maximum of twenty-five (25) alphanumeric and special characters.

### ***23.2.1.34 Partner 2: Telephone Number Masked Edit Box***

This control allows the user to enter the telephone number for Partner 2. The masked edit box will only accept the entry of numeric digits formatted as “999-999-9999”. Alphabetic and special characters are not allowed.

### ***23.2.1.35 Partner 2: Social Security Number Masked Edit Box***

This control allows the user to enter the Social Security number of Partner 2. The control will only accept entry of nine (9) numeric digits. The format for the control will be “999-99-9999”. Alphabetic and special characters are not allowed.

### ***23.2.1.36 Partner 2: Address Text Box***

This control allows the user to enter the address of Partner 2. The control accepts a maximum of fifty (50). Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen (-), forward slash (/), apostrophe (’), and ampersand (&). Alphabetic characters will be forced to upper case.

### ***23.2.1.37 Partner 2: City Text Box***

This control allows the user to enter the city of Partner 2. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (’).

### ***23.2.1.38 Partner 2: State Dropdown***

This control allows the user to select the State of Partner 2. The dropdown will display all fifty (50) states in alphabetic order. This control is read only.

### ***23.2.1.39 Partner 2: ZIP Masked Edit Box***

This control allows the user to enter the ZIP of Partner 2. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

#### ***23.2.1.40 Partner 2: Number of Non-WIC Stores Owned Text Box***

This control allows the user to enter the number of non-WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.41 Partner 2: Number of WIC Stores Owned Masked Edit Box***

This control allows the user to enter the number of WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.42 Partner 3: Salutation Text Box***

This control allows the user to enter the salutation of Partner 3. The control accepts a maximum of twenty (20) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.43 Partner 3: First Name Text Box***

This control allows the user to enter the first name of Partner 3. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.44 Partner 3: Middle Name Text Box***

This control allows the user to enter the middle name of Partner 3. The control accepts a maximum of twenty (20) alphanumeric and special characters.

#### ***23.2.1.45 Partner 3: Last Name Text Box***

This control allows the user to enter the last name of Partner 3. The control accepts a maximum of twenty-five (25) alphanumeric and special characters.

#### ***23.2.1.46 Partner 3: Telephone Number Masked Edit Box***

This control allows the user to enter the telephone number for Partner 3. The masked edit box will only accept the entry of numeric digits formatted as "999-999-9999". Alphabetic and special characters are not allowed.

#### ***23.2.1.47 Partner 3: Social Security Number Masked Edit Box***

This control allows the user to enter the Social Security number of Partner 3. The control will only accept entry of nine (9) numeric digits. The format for the control will be "999-99-9999". Alphabetic and special characters are not allowed.

#### ***23.2.1.48 Partner 3: Address Text Box***

This control allows the user to enter the address of Partner 3. The control accepts a maximum of fifty (50). Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen (-), forward slash (/), apostrophe (’), and ampersand (&). Alphabetic characters will be forced to upper case.

#### ***23.2.1.49 Partner 3: City Text Box***

This control allows the user to enter the city of Partner 3. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (’).

#### ***23.2.1.50 Partner 3: State Dropdown***

This control allows the user to select the State of Partner 3. The dropdown will display all fifty (50) states in alphabetic order. This control is read only.

#### ***23.2.1.51 Partner 3: ZIP Masked Edit Box***

This control allows the user to enter the ZIP of Partner 3. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

#### ***23.2.1.52 Partner 3: Number of Non-WIC Stores Owned Text Box***

This control allows the user to enter the number of non-WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.53 Partner 3: Number of WIC Stores Owned Masked Edit Box***

This control allows the user to enter the number of WIC stores owned. The control will only allow a maximum of four (4) numeric digits. Alphabetic and special characters are not allowed.

#### ***23.2.1.54 Step 4: Corporate Information (Corporation Only)***

#### ***23.2.1.55 Corporate Parent Dropdown***

This control allows the user to select the name of the corporate parent from the list of corporate parents known to the system. The list of corporate parents will be displayed in alphabetical order.

### *23.2.1.56 Name of Corporation Text Box*

This control allows the user to enter the name of the corporation. This control accepts a maximum of fifty (50) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### *23.2.1.57 Corporation Telephone Number Masked Edit Box*

This control allows the user to view the telephone number of the corporation. The masked edit box will only accept the entry of numeric digits formatted as “999-999-9999”. Alphabetic and special characters are not allowed.

### *23.2.1.58 Corporation Address Text Box*

These controls allow the user to enter the address of the corporation. This control accepts a maximum of fifty (50) alphanumeric characters. The alphabetic characters will all be forced to uppercase. Special characters are permitted but limited to the following: period (.), pound sign (#), dash (-), forward slash (/), and apostrophe (').

### *23.2.1.59 Corporation City Text Box*

This control allows the user to enter the city of the corporation. The control accepts a maximum of thirty (30) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), dash (-), forward slash (/), and apostrophe (').

### *23.2.1.60 Corporation State Dropdown*

This control allows the user to select the state of the corporation. This control is filled with the list of all U.S. states in alphabetic order.

### *23.2.1.61 Corporation ZIP Masked Edit Box*

This control allows the user to view the ZIP code of the corporation. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### *23.2.1.62 Step 5: Authorized Agent (Corporation and Commissary Only)*

### *23.2.1.63 Authorized Agent Salutation Text Box*

This control allows the user to enter the salutation for the authorized agent for the Vendor. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### *23.2.1.64 Authorized Agent Title Text Box*

This control allows the user to enter title for the authorized agent for the Vendor. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### *23.2.1.65 Authorized Agent First Name Text Box*

This control allows the user to enter the first name of the authorized agent for the Vendor. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### *23.2.1.66 Authorized Agent Middle Name Text Box*

This control allows the user to enter the first name of the authorized agent for the Vendor. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### *23.2.1.67 Authorized Agent Last Name Text Box*

This control allows the user to enter last name of the authorized agent for the Vendor. The control accepts a maximum of twenty five (25) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

This control allows the user to enter title for the authorized agent for the Vendor. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### *23.2.1.68 Step 6: Store Information*

##### *23.2.1.69 Vendor Address*

The address control allows the user to enter the physical address of the vendor. The control allows a maximum of fifty (50) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen, forward slash (/), apostrophe ('), and ampersand (&). Alpha characters will be forced to upper case.

##### *23.2.1.70 Vendor City Text Box*

This control allows the user to enter the city where the vendor resides. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

### *23.2.1.71 Vendor State Dropdown*

This control allows the user to select the post office abbreviation for the physical state for the vendor. The dropdown will display all U.S. states in alphabetic order and is read only.

### *23.2.1.72 Vendor ZIP Masked Edit Box*

This control allows the user to enter the ZIP of the physical address for the vendor. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### *23.2.1.73 Vendor Mailing Address Text Box*

The address control allows the user to enter the mailing address of the vendor. The control allows a maximum of fifty (50) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), pound sign (#), hyphen, forward slash (/), apostrophe (’), and ampersand (&). Alpha characters will be forced to upper case.

### *23.2.1.74 Vendor Mailing City Text Box*

This control allows the user to enter the mailing city of the vendor. The control accepts a maximum of thirty (30) alphanumeric characters. All alphabetic characters will be forced to upper case. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (’).

### *23.2.1.75 Vendor Mailing State Dropdown*

This control allows the user to select the mailing state of the vendor. It is filled with a list of all U.S. states in alphabetic order and is read only.

### *23.2.1.76 Vendor Mailing ZIP Masked Edit Box*

This control allows the user to enter the ZIP of the mailing address for the vendor. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### *23.2.1.77 Store Uses Scanners Radio Button Group*

The radio button group allows the user to select either the Yes or No radio button to indicate the use of scanners in the store.

### *23.2.1.78 Store Processes EBT Transactions Radio Button Group*

The radio button group allows the user to select either the Yes or No radio button to indicate whether the vendor has EBT.

### ***23.2.1.79 Store Scans for WIC Items Radio Button Group***

The radio button group allows the user to select either the Yes or No radio button to indicate the vendor has scanners to scan for WIC items.

### ***23.2.1.80 Total Square Footage of Store Masked Edit Box***

This control allows the user to enter the square footage of the Vendor's building. This control will allow a maximum of seven (7) numeric digits. Alphabetic and special characters are not allowed.

### ***23.2.1.81 Total Number of Cash Registers Masked Edit Box***

This control allows the user to enter the number of cash registers the Vendor has in the store. The masked edit box will allow a maximum of two (2) numeric digits. Alphabetic and special characters are not allowed.

### ***23.2.1.82 Total Number Cashiers Masked Edit Box***

This control allows the user to enter the number of cashiers that are employed at the vendor store. This control will allow a maximum of three (3) numeric digits. Alphabetic and special characters are not allowed.

### ***23.2.1.83 Total Number Scanners Masked Edit Box***

This control allows the user to enter the number of scanners that are in use at the vendor store. This control will allow a maximum of three (3) numeric digits. Alphabetic and special characters are not allowed.

### ***23.2.1.84 Total Number of Scanners that Can Identify WIC Approved Foods Masked Edit Box***

This control allows the user to enter the number of scanners that are in use at the vendor store that can identify WIC approved foods. This control will allow a maximum of three (3) numeric digits. Alphabetic and special characters are not allowed.

### ***23.2.1.85 Total Annual WIC Sales in Dollars Masked Edit Box***

This control allows the user to enter the Annual WIC Sales for the vendor. The masked edit box will only allow maximum of 11 digits formatted as nine (9) whole numbers and two (2) decimals.

### ***23.2.1.86 Total Annual Non-WIC Sales in Dollars Masked Edit Box***

This control allows the user to enter the Annual Non-WIC Sales for the vendor. The masked edit box will only allow maximum of 11 digits formatted as nine (9) whole numbers and two (2) decimals.

***23.2.1.87 Do you expect to derive more than 50 percent of your annual food sales from WIC sales? Radio Button Group***

This control allows the user to select either the Yes or No radio button to indicate whether the annual WIC sales of the store will be more than 50% of the store's total annual food sales.

***23.2.1.88 Is the store authorized to redeem food stamps? Radio Button Group***

This control allows the user to select either the Yes or No radio button to indicate whether the store is authorized to redeem Food Stamps.

***23.2.1.89 If YES, please provide the Food Stamp authorization no. Masked Edit Box***

This control allows the user to enter the Food Stamp authorization number for the vendor. This control will allow the entry of fifteen (15) numeric digits. Alphabetic and special characters are not allowed.

***23.2.1.90 If NO, please provide the date on which the store applied for authorization Masked Edit Box***

This control allows the user to enter the date vendor applied for Food Stamp authorization number. This control accepts entry of numeric digits formatted MM/DD/YYYY. Alphabetic and special characters are not allowed.

***23.2.1.91 State Sales Tax Number Masked Edit Box***

This control allows the user to enter or view the State Sales Tax number of the vendor. This control will allow a maximum of fifteen (15) numeric digits. Alphabetic and special characters are not allowed.

***23.2.1.92 Federal ID Number of the Store Text Box***

This control allows the user to enter or view the Federal ID number for the Vendor. The maximum size of the control will be nine (9) numeric digits. Special characters are not accepted.

***23.2.1.93 Seller's Permit No. Text Box***

This control allows the user to enter the seller's permit number for the vendor. This control will accept a maximum of entry of five (5) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are not permitted in this field.

***23.2.1.94 Health ID Number Text Box***

This control allows the user to enter the regional Health ID for the vendor. This control will accept a maximum of entry of five (5) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are not permitted in this field.

### *23.2.1.95 Do you sell kosher foods? Radio Button Group*

This radio button group allows the user to indicate the amount of Kosher Foods sold at the vendor. There will be three (3) options:

- Yes - Some
- Yes - Primarily Kosher
- No

### *23.2.1.96 Bank Name Text Box*

This control allows the user to enter bank name for the vendor. The control accepts entry of fifty (50) alphanumeric characters. Special characters are permitted but limited the ampersand (&) only.

### *23.2.1.97 Bank Transit Number Masked Edit Box*

This control allows the user to enter the transit number for the bank. This control will only allow a maximum of ten (10) numeric digits. Alphabetic and special characters are not allowed.

### *23.2.1.98 Bank Account Number Masked Edit Box*

This control allows the user to enter bank account number for the vendor. The masked edit box will only allow the entry of ten (10) numeric digits. Alphabetic and special characters are not allowed.

### *23.2.1.99 Has this store been sold within the past two years? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the store has been sold within the last two years.

### *23.2.1.100 If YES, are any of the current owners related by blood or marriage to any previous owners? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the store owners are related to previous owners by blood or marriage.

### *23.2.1.101 If YES, please identify the current owners and specify their relationship to previous owners: Text Box*

This control allows the user to enter information in response to this request.

### *23.2.1.102 How long has the owner(s) operated this business at the present site? (Years/Months) Text Box*

This control allows the user to indicate in years and months the length of time they have operated this business at the current site.

*23.2.1.103 If not applicable, provide opening date Text Box*

This control allows the user to provide the opening date of the business if it has not been previously operated at this site.

*23.2.1.104 Has the owner(s) operated this business under another name and/or at a different location? Radio Button Group*

This control allows the user to select either the Yes or No radio button to indicate whether this business has been operated under another name or at another location by this owner.

*23.2.1.105 If YES, name and location of the former store Text Box*

This control allows the user to enter the name and location of the former store.

*23.2.1.106 During the past 6 years, has any current owner, officer or manager at your store been convicted of or had a civil judgment for any of the following activities: fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statement, receiving stolen property, making false claims, or obstruction of justice? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether any owner, officer, or manager has been convicted or had a civil judgment for one of the activities listed.

*23.2.1.107 If YES, please specify the name of the owner, officer, or manager and the activities involved: Text Box*

This control allows the user to enter a response to the request for more information.

*23.2.1.108 If violation was with WIC, specify the Program name Text Box*

This control allows the user to enter the program name if the violation was with WIC.

*23.2.1.109 Has the owner(s) ever been warned, withdrawn, disqualified, or received a civil money penalty from a Food Stamp Program? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the owner has had any of the actions listed imposed from a Food Stamp Program.

*23.2.1.110 If YES, please specify when and why: Text Box*

This control allows the user to enter a response to the request for more information.

*23.2.1.111 Has the corporate entity, any owner, any corporate officer or any manager ever had a business, health, occupational license or permit withdrawn, suspended/revoked, or been fined for non-compliance or fined for violations within the past six years? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the corporation, owner, corporate officer or manager has had any of the actions listed taken within the last six years.

*23.2.1.112 If YES, Explain: Text Box*

This control allows the user to enter a response to the request for more information.

*23.2.1.113 Are any of the following: corporate entity or officers, owners, managers, partners, stockholders, or immediate family members now charged with or have they ever been convicted of or forfeit collateral for any felony or fraud or misrepresentation in any connection? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether anyone connected with the business in the manner listed has ever been convicted or forfeited collateral for any of the reasons listed.

*23.2.1.114 If YES, Explain: Text Box*

This control allows the user to enter a response to the request for more information.

*23.2.1.115 Does your store offer green stamps or other store promotions? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the store offers in store promotions.

*23.2.1.116 Is your milk supplier state licensed? Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate whether the milk supplier is state licensed.

*23.2.1.117 If YES, License No. Text Box*

This control allows the user to enter the milk supplier's state license number.

*23.2.1.118 Other WIC programs in which this store participates Check Box Group*

This control allows the user to check a series of boxes to indicate any other WIC programs in which this store participates.

### **23.2.1.119 Step 7: Contact Information**

#### **23.2.1.120 Contact Title Text Box**

This control allows the user to enter title for the contact person of the Vendor. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### **23.2.1.121 Contact Salutation Text Box**

This control allows the user to enter the salutation for the contact person for the Vendor. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### **23.2.1.122 Contact First Name Text Box**

This control allows the user to enter the first name of the contact person for the Vendor. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### **23.2.1.123 Contact Last Name Text Box**

This control allows the user to enter last name of the contact person for the Vendor. The control accepts a maximum of twenty five (25) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### **23.2.1.124 Contact Telephone Number**

This control allows the user to enter the telephone number for the store contact person. The masked edit box will only accept the entry of numeric digits formatted as "999-999-9999". Alphabetic and special characters are not allowed.

#### **23.2.1.125 Contact Fax Number Masked Edit Box**

This control allows the user to enter or view the fax number of the store contact person. The masked edit box will only accept the entry of numeric digits in the format of "999-999-9999" Alphabetic and special characters are not accepted in this field.

#### **23.2.1.126 Contact Email Address Text Box**

This control allows the user to enter or modify the email address for the store contact person. Characteristics for Email Address text box are defined in *Consistencies*. The value will be populated with the email address from the VQS Welcome Screen of the vendor submitting the application.

*23.2.1.127 Step 8: Hours of Operation*

*23.2.1.128 Store is open at least 8 hours per day, 6 days per week  
Radio Button Group*

This control allows the user to select either the Yes or the No radio button to indicate the length of time this store is open during a week.

*23.2.1.129 Sunday – Opening Time Text Box*

This control allows the user to enter the time the store opens on Sundays.

*23.2.1.130 Sunday – Closing Time Text Box*

This control allows the user to enter the time the store closes on Sundays.

*23.2.1.131 Monday – Opening Time Text Box*

This control allows the user to enter the time the store opens on Mondays.

*23.2.1.132 Monday – Closing Time Text Box*

This control allows the user to enter the time the store closes on Mondays.

*23.2.1.133 Tuesday – Opening Time Text Box*

This control allows the user to enter the time the store opens on Tuesdays.

*23.2.1.134 Tuesday – Closing Time Text Box*

This control allows the user to enter the time the store closes on Tuesdays.

*23.2.1.135 Wednesday – Opening Time Text Box*

This control allows the user to enter the time the store opens on Wednesdays.

*23.2.1.136 Wednesday – Closing Time Text Box*

This control allows the user to enter the time the store closes on Wednesdays.

*23.2.1.137 Thursday – Opening Time Text Box*

This control allows the user to enter the time the store opens on Thursdays.

*23.2.1.138 Thursday – Closing Time Text Box*

This control allows the user to enter the time the store closes on Thursdays.

#### ***23.2.1.139 Friday – Opening Time Text Box***

This control allows the user to enter the time the store opens on Fridays.

#### ***23.2.1.140 Friday – Closing Time Text Box***

This control allows the user to enter the time the store closes on Fridays.

#### ***23.2.1.141 Saturday – Opening Time Text Box***

This control allows the user to enter the time the store opens on Saturdays.

#### ***23.2.1.142 Saturday – Closing Time Text Box***

This control allows the user to enter the time the store closes on Saturdays.

#### ***23.2.1.143 Step 9: Primary Grocery Wholesaler***

##### ***23.2.1.144 Name of Primary Grocery Wholesaler Text Box***

This control allows the user to enter the name of the Primary Grocery Wholesaler. This control accepts a maximum of fifty (50) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

##### ***23.2.1.145 Primary Grocery Wholesaler Telephone Number Masked Edit Box***

This control allows the user to view the telephone number of the Primary Grocery Wholesaler. The masked edit box will only accept the entry of numeric digits formatted as “999-999-9999”. Alphabetic and special characters are not allowed.

##### ***23.2.1.146 Primary Grocery Wholesaler Address 1 and Address 2 Text Boxes***

These controls allow the user to enter the address of the Primary Grocery Wholesaler. This control accepts a maximum of fifty (50) alphanumeric characters. The alphabetic characters will all be forced to uppercase. Special characters are permitted but limited to the following: period (.), pound sign (#), dash (-), forward slash (/), and apostrophe (').

##### ***23.2.1.147 Primary Grocery Wholesaler City Text Box***

This control allows the user to enter the city of the Primary Grocery Wholesaler. The control accepts a maximum of thirty (30) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), dash (-), forward slash (/), and apostrophe (').

### ***23.2.1.148 Primary Grocery Wholesaler State Dropdown***

This control allows the user to select the state of the Primary Grocery Wholesaler. This control is filled with the list of all U.S. states in alphabetic order.

### ***23.2.1.149 Primary Grocery Wholesaler ZIP Masked Edit Box***

This control allows the user to view the ZIP code of the Primary Grocery Wholesaler. The control will accept the entry of numeric digits only. The format for the ZIP will be "99999-9999". If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### ***23.2.1.150 Primary Grocery Wholesaler Contact Title Text Box***

This control allows the user to enter title for the contact person of the Primary Grocery Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

### ***23.2.1.151 Primary Grocery Wholesaler Contact Salutation Text Box***

This control allows the user to enter the salutation for the contact person for the Primary Grocery Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

### ***23.2.1.152 Primary Grocery Wholesaler Contact First Name Text Box***

This control allows the user to enter the first name of the contact person for the Primary Grocery Wholesaler. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### ***23.2.1.153 Primary Grocery Wholesaler Contact Last Name Text Box***

This control allows the user to enter last name of the contact person for the Primary Grocery Wholesaler. The control accepts a maximum of twenty five (25) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### ***23.2.1.154 Step 10: Milk or Pharmacy Wholesaler***

#### ***23.2.1.155 Name of Milk or Pharmacy Wholesaler Text Box***

This control allows the user to enter the name of the Milk or Pharmacy Wholesaler. This control accepts a maximum of fifty (50) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### ***23.2.1.156 Milk or Pharmacy Wholesaler Telephone Number Masked Edit Box***

This control allows the user to view the telephone number of the Milk or Pharmacy Wholesaler. The masked edit box will only accept the entry of numeric digits formatted as “999-999-9999”. Alphabetic and special characters are not allowed.

### ***23.2.1.157 Milk or Pharmacy Wholesaler Address 1 and Address 2 Text Boxes***

These controls allow the user to enter the address of the Milk or Pharmacy Wholesaler. This control accepts a maximum of fifty (50) alphanumeric characters. The alphabetic characters will all be forced to uppercase. Special characters are permitted but limited to the following: period (.), pound sign (#), dash (-), forward slash (/), and apostrophe (').

### ***23.2.1.158 Milk or Pharmacy Wholesaler City Text Box***

This control allows the user to enter the city of the Milk or Pharmacy Wholesaler. The control accepts a maximum of thirty (30) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), dash (-), forward slash (/), and apostrophe (').

### ***23.2.1.159 Milk or Pharmacy Wholesaler State Dropdown***

This control allows the user to select the state of the Milk or Pharmacy Wholesaler. This control is filled with the list of all U.S. states in alphabetic order.

### ***23.2.1.160 Milk or Pharmacy Wholesaler ZIP Masked Edit Box***

This control allows the user to view the ZIP code of the Milk or Pharmacy Wholesaler. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### ***23.2.1.161 Milk or Pharmacy Wholesaler Contact Title Text Box***

This control allows the user to enter title for the contact person of the Milk or Pharmacy Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.162 Milk or Pharmacy Wholesaler Contact Salutation Text Box***

This control allows the user to enter the salutation for the contact person for the Milk or Pharmacy Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

#### ***23.2.1.163 Milk or Pharmacy Wholesaler Contact First Name Text Box***

This control allows the user to enter the first name of the contact person for the Milk or Pharmacy Wholesaler. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### ***23.2.1.164 Milk or Pharmacy Wholesaler Contact Last Name Text Box***

This control allows the user to enter last name of the contact person for the Milk or Pharmacy Wholesaler. The control accepts a maximum of twenty five (25) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### ***23.2.1.165 Step 11: Licensed Formula Wholesaler***

#### ***23.2.1.166 Name of Formula Wholesaler Text Box***

This control allows the user to enter the name of the Formula Wholesaler. This control accepts a maximum of fifty (50) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

#### ***23.2.1.167 Formula Wholesaler Telephone Number Masked Edit Box***

This control allows the user to view the telephone number of the Formula Wholesaler. The masked edit box will only accept the entry of numeric digits formatted as "999-999-9999". Alphabetic and special characters are not allowed.

#### ***23.2.1.168 Formula Wholesaler Address 1 and Address 2 Text Boxes***

These controls allow the user to enter the address of the Formula Wholesaler. This control accepts a maximum of fifty (50) alphanumeric characters. The alphabetic characters will all be forced to uppercase. Special characters are permitted but limited to the following: period (.), pound sign (#), dash (-), forward slash (/), and apostrophe (').

#### ***23.2.1.169 Formula Wholesaler City Text Box***

This control allows the user to enter the city of the Formula Wholesaler. The control accepts a maximum of thirty (30) alphanumeric characters. Special characters are permitted but limited to the following: comma (,), period (.), dash (-), forward slash (/), and apostrophe (').

### *23.2.1.170 Formula Wholesaler State Dropdown*

This control allows the user to select the state of the Formula Wholesaler. This control is filled with the list of all U.S. states in alphabetic order.

### *23.2.1.171 Formula Wholesaler ZIP Masked Edit Box*

This control allows the user to view the ZIP code of the Formula Wholesaler. The control will accept the entry of numeric digits only. The format for the ZIP will be “99999-9999”. If the user does not enter the four-digit ZIP extension, it will be padded with 4 zeros. Alpha and special characters are not allowed.

### *23.2.1.172 Formula Wholesaler Contact Title Text Box*

This control allows the user to enter title for the contact person of the Formula Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

### *23.2.1.173 Formula Wholesaler Contact Salutation Text Box*

This control allows the user to enter the salutation for the contact person for the Formula Wholesaler. The control accepts a maximum of twenty (20) alphanumeric characters. All alphabetic characters will be forced to uppercase. Special characters are permitted but limited to the following: comma (,), period (.), hyphen (-), forward slash (/), and apostrophe (').

### *23.2.1.174 Formula Wholesaler Contact First Name Text Box*

This control allows the user to enter the first name of the contact person for the Formula Wholesaler. The control accepts a maximum of twenty (20) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### *23.2.1.175 Formula Wholesaler Contact Last Name Text Box*

This control allows the user to enter last name of the contact person for the Formula Wholesaler. The control accepts a maximum of twenty five (25) alphanumeric and special characters. All alphabetic characters will be forced to uppercase.

### *23.2.1.176 Save Button*

This control allows the user to save the vendor application. It will be displayed on the VQS – Vendor Application page.

### *23.2.1.177 Submit Button*

This control allows the user to submit the vendor application to the state for processing. It will be displayed in the VQS – Vendor Application page.

### 23.2.2 Processes

This section describes the processes (navigation) that take place as a result of the actions taken on the VQS - Vendor Application page.

#### 23.2.2.1 Edits

Upon selection of the Submit button, the system will perform minimal high level edits for the required fields which are indicated with an asterisk in Step 1: Business Information. An appropriate error message with text: “A selection is required for {Control Name}.” will be displayed for controls where a selection is made. A similar message with text: “An entry is required for {Control Name}.” will be displayed for controls where data is keyed by the user.

#### 23.2.2.2 Save

Upon selection of the Save button, the system will save the data on the VQS website, without writing information to the database. The system will return to the Vendor Application page.

#### 23.2.2.3 Saving the Data

Upon successful completion of the above listed edits, the system will save the data according to the data map below and will display the VQS Confirmation page.

#### 23.2.2.4 Data Map

Control Label	Entity	Attribute	Business Rule
First Name	AppOwner	FirstName	
Middle Name	AppOwner	MiddleName	
Last Name	AppOwner	LastName	
Salutation	AppOwner	Salutation	
Telephone Number	AppOwner	Telephone	
Social Security Number	AppOwner	SSN	
Address	AppOwner	Address1	
City	AppOwner	City	

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
State	AppOwner	State	
Zip	AppOwner	Zip	
Trade Name (DBA)	AppVendor	TradeName	
Federal ID Number	AppVendor	FederalTaxNumber	
Address	AppVendor	PhysicalAddress1, PhysicalAddress2	
City	AppVendor	PhysicalCity	
Zip	AppVendor	PhysicalZip	
Telephone Number	AppVendor	Telephone	
Fax Number	AppVendor	Fax	
Email	AppVendor	Email	
Title	AppVendor	WICContactTitle	
Salutation	AppVendor	WICContactSalutation	
First Name	AppVendor	First Name	
Last Name	AppVendor	Last Name	
Trade Name (DBA)	AppVendor	TradeName	
Address	AppVendor	PhysicalAddress1, PhysicalAddress2	
City	AppVendor	PhysicalCity	
ZIP	AppVendor	PhysicalZip	

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
Census Tract	AppVendor	CensusTract	
Telephone Number	AppVendor	Telephone	
Fax Number	AppVendor	Fax	
Email	AppVendor	Email	
Title	AppVendor	WICContactTitle	
Salutation	AppVendor	WICContactSalutation	
First Name	AppVendor	WICContactFirstName	
Last Name	AppVendor	WICContactLastName	
Name of Corporation	AppCorporateParent	Name	
Federal ID Number	AppCorporateParent	FederalTaxNumber	
Address	AppCorporateParent	MailingAddress1, MailingAddress2	
City	AppCorporateParent	MailingCity	
ZIP	AppCorporateParent	MailingZip	
Telephone Number	AppCorporateParent	Telephone Number	
Corporate Parent	AppCorporateParent	This is documented under Update Vendor Information	

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
Trade Name (DBA)	AppVendor	TradeName	
Address	AppVendor	PhysicalAddress1, PhysicalAddress2	
City	AppVendor	PhysicalCity	
State	AppVendor	Physical State	
Zip	AppVendor	PhysicalZip	
Census Tract	AppVendor	CensusTract	
Telephone Number	AppVendor	Telephone	
(Contact) Title	AppVendor	WICContactTitle	
(Contact) Salutation	AppVendor	WICContactSalutati on	
(Contact) First Name	AppVendor	WICContactFirstNa me	
(Contact) Last Name	AppVendor	WICContactLastNa me	
(Authorized Agent)Title	AppVendor	AuthorizedAgentTit le	
(Authorized Agent) Salutation	AppVendor	AuthorizedAgentSal utation	
(Authorized Agent) First Name	AppVendor	AuthorizedAgentFir stName	
(Authorized Agent) Last Name	AppVendor	AuthorizedAgentLa stName	
Store Type	AppVendor	StoreTypeId	

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
Scanners	AppVendor	ElectronicScanners	
EBT	AppVendor	EBT	
Scan for WIC Items	AppVendor	RecognizeWICFoods	
Square Footage	AppVendor	SquareFootage	
Cash Registers	AppVendor	CheckOutRegisters	
Cashiers	AppVendor	Cashiers	
WIC	AppVendor	AnnualWICFoodSales	
Non-WIC	AppVendor	AnnualNonWICFoodSales	
Total	AppVendor	AnnualFoodSales	
%	Calculated Value	Calculated Value	
Open at least 8 Hours a Day 6 Days a Week	AppVendor	OpenRequiredHours	
Business Hours Sunday Open	AppStoreHours	SundayOpen	
Business Hours Sunday Close	AppStoreHours	SundayClose	
Business Hours Monday Open	AppStoreHours	MondayOpen	
Business Hours Monday Close	AppStoreHours	MondayClose	
Business Hours Tuesday Open	AppStoreHours	TuesdayOpen	

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
Business Hours Tuesday Close	AppStoreHours	TuesdayClose	
Business Hours Wednesday Open	AppStoreHours	WednesdayOpen	
Business Hours Wednesday Close	AppStoreHours	WednesdayClose	
Business Hours Thursday Open	AppStoreHours	ThursdayOpen	
Business Hours Thursday Close	AppStoreHours	ThursdayClose	
Business Hours Friday Open	AppStoreHours	FridayOpen	
Business Hours Friday Close	AppStoreHours	FridayClose	
Business Hours Saturday Open	AppStoreHours	SaturdayOpen	
Business Hours Saturday Close	AppStoreHours	SaturdayClose	
State Sales Tax Number	AppVendor	StateSalesTaxNumber	
Federal ID Number	AppVendor	FederalTaxNumber	
Health ID	AppVendor	HeathID	
Pending	AppVendor	ApplicationPending	
Authorization Date	AppVendor	AuthorizationDate	
Food Stamp Number	AppVendor	FSAuthorizationNumber	

Control Label	Entity	Attribute	Business Rule
Bank Name	AppVendor	BankName	
Bank Transit Number	AppVendor	BankTransitNumber	
Account Number	AppVendor	AccountNumber	
Kosher Foods Yes – Some	AppVendor	KosherFoods (value = S)	
Kosher Foods Yes – Primarily Kosher	AppVendor	KosherFoods (value = P)	
Kosher Foods No	AppVendor	KosherFoods (value = N)	
Primary Grocery Wholesaler	AppVendor	GrocerySupplierID	
Milk or Pharmacy Wholesaler	AppVendor	WholesalerID	Y
Formula Wholesaler	AppVendor	FormulaWholesalerID	Y
* Peer Group	AppVendor	PeerGroup	
* Staff Member Assigned	AppVendor	StaffID	
** Primary Agency	VendorLAAssociation	AgencyID  (note Primary flag is set to 'Y')	Y
** Shared Agencies	VendorLAAssociation	AgencyID  (note: Primary flag is set to 'N')	Y

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>	<b>Business Rule</b>
** Shared Local Clinics	VendorSSAssociation	ServiceSiteID	Y
Other WIC Programs Served	AppOtherWICProgramsServed	OtherWICProgramID	Y
Directions to the Store	AppVendor	Directions	

\* Peer Group and Staff Member will be assigned by the Vendor Manager at the state office during the final steps of the application process. The data is not captured in the VQS Application.

\*\* VendorLAAssociation and VendorSSAssociation tables won't be updated with data from the VQS Application information. They will be written after the application data has been made available to the Application Wizard.

### **23.3 Vendor Questionnaire Survey – Vendor Price Survey**

The VQS – Vendor Price Survey allows the vendor to enter their prices. The list of prices is dynamically created based on the Food Item List defined by the State. Vendors gain access by one of the following:

- Entering an Email Address and assigned Questionnaire Number on the VQS welcome page and clicking Continue.
- Clicking the web link in an email from the VQS web master.
- Entering an email address, selecting the Questionnaire item of Price Survey and clicking Continue

## Price Survey

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### Food Price List Survey

Please enter your regular shelf prices (not sale prices) for the WIC items that you sell. Please note that for some products a price is requested by a case or a multi-pack.

**Annual Food Sales**

---

### Milk Lowest Price

**Whole ( 1 ) Gal**

**Low Fat ( 1 ) Gal**

**Skim ( 1 ) Gal**

**Whole ( 0.5 ) Gal**

**Low Fat or Skim ( 0.5 ) Gal**

**Lactose Reduced/Free ( 0.5 ) Gal**

**Lactose Reduced/Free ( 1 ) Qt**

**Powdered Milk ( 8 ) Qt**

**Powdered Milk ( 10 ) Qt**

**Evaporated Milk ( 12 ) Oz**

**Chocolate Milk ( 1 ) Gal**

**Buttermilk ( 1 ) Qt**

**Buttermilk ( 0.5) Gal**

---

**Cheese Highest Price**

**Colby Jack or Mozzarella ( 8 ) Oz**

**Swiss ( 8 ) Oz**

---

**Eggs Highest Price**

**Lage Eggs White ( 1 ) Doz**

---

**Beans, Peas, Lentil High Price**

**Beans, Peas, Lentils-Dry Only (16 ) Oz**

---

**Peanut Butter Highest Price**

**Peanut Butter (most expensive) (18 ) Oz**

---

**Carrots Highest Price**

**Fresh or Frozen carrots ( 2 ) Lb**

---

**Tuna Highest Price**

**Tuna (most expensive) ( 6 ) Oz**

---

**Juice**

**Northland Cranberry (46 ) Oz**

**Welch's Grape (46 ) Oz**

**Juicy Juice (46 ) Oz**

**V-8 (46 ) Oz**

---

**Infant Juice Highest Price**

**100% Juice(any variety flavor) (32 ) Oz**

---

**Cereal**

**Quaker Instant Oatmeal (11.8) Oz**

**Kix (13 ) Oz**

**Post Alpha-Bits (10.2) Oz**

**Post Grape-Nuts Flakes (14 ) Oz**

**Special K (12 ) Oz**

**Crispix (12 ) Oz**

---

**Infant Cereal Highest Price**

**Infant Cereal(no fruit,any br) ( 8 ) Oz**

---

**Nestle Infant Formula**

**Peptamen Jr-Case (24 ) 8.45 Oz**

---

**Carnation Infant Formula**

**Good Start Supreme with Iron (13 ) Oz**

**Good Start Supreme with Iron (12 ) Oz**

**Good Start Supreme with Iron (32 ) Oz**

**Good Start Supreme DHA + ARA (13 ) Oz**

**Good Start Supreme DHA + ARA (12.9)  
Oz**

**Good Start Supreme DHA + ARA (32 ) Oz**

**Good Start 2 Essentials (13 ) Oz**

**Good Start 2 Essentials powdr (12 ) Oz**

**Good Start 2 Essentials rtu (32 ) Oz**

---

**Mead Johnson Infant Formula**

<b>Enfamil AR LIPIL pwdr (12.9) Oz</b>	<input type="checkbox"/>
<b>Enfamil AR LIPIL rtu (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil with Iron (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil with Iron (14.3) Oz</b>	<input type="checkbox"/>
<b>Enfamil with Iron (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil LIPIL with Iron (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil LIPIL with Iron (12.9) Oz</b>	<input type="checkbox"/>
<b>Enfamil LIPIL with Iron (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee (14.3) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee LIPIL (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee LIPIL (12.9) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee LIPIL (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosobee ( 4 ) Pk 8 Oz</b>	<input type="checkbox"/>
<b>Enfamil Prosob LIPIL ( 4 ) Pk 8 Oz</b>	<input type="checkbox"/>

<b>Enfamil Lactofree LIPIL (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Lactofree LIPIL (12.9) Oz</b>	<input type="checkbox"/>
<b>Enfamil Lactofree LIPIL (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Nutramigen LIPIL (13 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Nutramigen LIPIL (16 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Nutramigen LIPIL (32 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Next Step LIPIL (12 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Next Step Prosobee (12 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Enfacare LIPIL (12.8) Oz</b>	<input type="checkbox"/>
<b>Enfamil Enfacare Case (48 ) 3 Oz</b>	<input type="checkbox"/>
<b>Enfamil Enf LIPIL Case (48 ) 3 Oz</b>	<input type="checkbox"/>
<b>Enfamil Pregestimil (16 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Pregestimil ( 8 ) 3 Oz</b>	<input type="checkbox"/>
<b>Portagen (16 ) Oz</b>	<input type="checkbox"/>
<b>Enfamil Pre LIPIL/Iron 24 Cal (48 ) 3 Oz</b>	<input type="checkbox"/>
<b>Enfamil Premature/Iron 24 Cal (48 ) 3 Oz</b>	<input type="checkbox"/>

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**Ross Infant Formula**

<b>Similac Lactose Free Advance (13 ) Oz</b>	<input type="checkbox"/>
<b>Similac Lactose Free Advance (12.9) Oz</b>	<input type="checkbox"/>
<b>Similac Lactose Free Advance (32 ) Oz</b>	<input type="checkbox"/>
<b>Similac With Iron (13 ) Oz</b>	<input type="checkbox"/>
<b>Similac With Iron (12.9) Oz</b>	<input type="checkbox"/>
<b>Similac With Iron (32 ) Oz</b>	<input type="checkbox"/>
<b>Similac With Iron ( 6 ) 8 Oz</b>	<input type="checkbox"/>
<b>Isomil With Iron (13 ) Oz</b>	<input type="checkbox"/>
<b>Isomil With Iron (12.9) Oz</b>	<input type="checkbox"/>
<b>Isomil With Iron (32 ) Oz</b>	<input type="checkbox"/>
<b>Isomil Adv With Iron ( 6 ) 8 Oz</b>	<input type="checkbox"/>
<b>Similac Alimemtum (32 ) Oz</b>	<input type="checkbox"/>
<b>Similac Alimemtum Advance (16 ) Oz</b>	<input type="checkbox"/>
<b>Similac Alimemtum Advance (32 ) Oz</b>	<input type="checkbox"/>
<b>Similac Alimentum Adv ( 6 ) 8 Oz</b>	<input type="checkbox"/>
<b>Pediasure ( 6 ) 8 Oz</b>	<input type="checkbox"/>
<b>Pediasure With Fiber ( 6 ) 8 Oz</b>	<input type="checkbox"/>
<b>Similac NeoSure Adv With Iron (12.8) Oz</b>	<input type="checkbox"/>

Similac PM 60/40 (16 ) Oz

Similac Sp Care w Iron 24 (48 ) 4 Oz

Figure 4 – Vendor On-line Price Survey Screen

### 23.3.1 Controls

This section describes the behavior of the controls on the Price Survey Page.

#### 23.3.1.1 Food Item Description Value Label

This text label and value allows the user to view the descriptions individually, per item, within the Price Survey. The food item description will be read only.

#### 23.3.1.2 Price Masked Edit Box

This control will allow the user to enter the Vendor's price amount for the selected item. The control accepts the entry of numeric digits in the format of \$999.99. The value of the control will default to zero currency (\$0.00).

#### 23.3.1.3 Save Button

This control allows the user to save the vendor price survey. It will be displayed on the VQS - Vendor Price Survey page.

#### 23.3.1.4 Submit Button

This control allows the user to submit the vendor price survey to the state for processing. It will be displayed in the VQS – Vendor Price Survey page.

### 23.3.2 Processing

This section describes the processes (navigation) that take place as a result of the actions taken on the VQS - Price Survey.

#### 23.3.2.1 Edits

There are no edits defined for this window.

#### 23.3.2.2 Submit

Upon selection of the Submit button, the system will save the data as defined in the data map below and will display the VQS Confirmation Page described in this document.

### 23.3.2.3 Save

Upon selection of the Save button, the system will save the data on the VQS website, without writing information to the database. The system will return to the Vendor Price Survey page..

### 23.3.2.4 Data Map

<b>Control Label</b>	<b>Entity</b>	<b>Attribute</b>
Description	FOODDISTRIBUTIONITEM	Description
Price	VENDORPRICES	VendorPrice

## 23.4 Confirmation Page

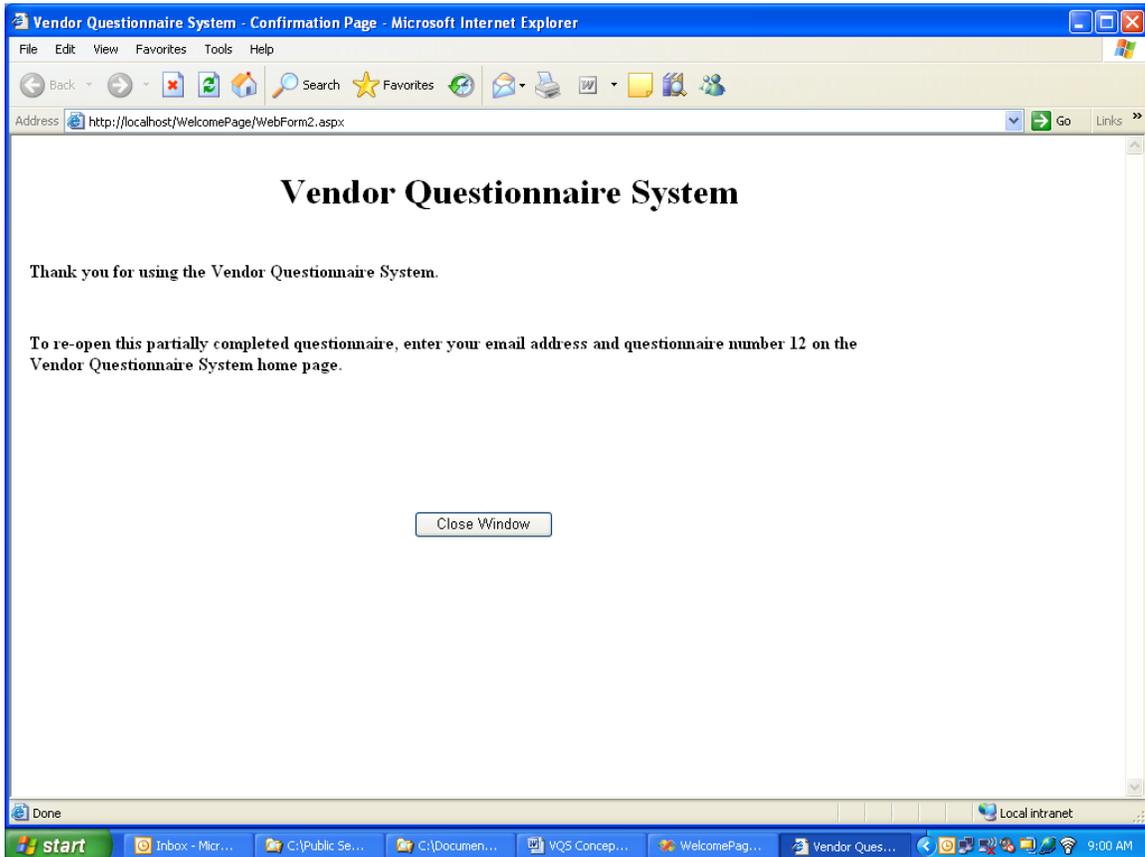


Figure 5 - Vendor Questionnaire System - Confirmation Page

### 23.4.1 Controls

This section describes the behavior of the controls on the VQS – Vendor Application.

#### 23.4.1.1 Confirmation Message

The confirmation message will display when the user has successfully saved a partially completed questionnaire or successfully submitted a completed questionnaire.

#### 23.4.1.2 Close Window

The Close Window button allows the user to close the Vendor Questionnaire. This control will display on the confirmation page.