North Carolina Department of Health and Human Services
Division of Public Health • Women's and Children's Health Section
Nutrition Services Branch, Attn: WIC Vendor Unit
MSC 1914 Raleigh, NC 27699-1914
Fax: (919) 870-4895

PARTICIPANT HARDSHIP FORM

COUNTY: DATE:

WIC DIRECTOR: HEALTH DIRECTOR:

VENDOR: LOCAL CONTACT:

WIC VENDOR #: PHONE #:

DATE VENDOR OWNER SIGNED MOST CURRENT AGREEMENT: _____

1. ARE ANY WIC VENDORS WITHIN ONE (1) MILE OF THE HEALTH DEPARTMENT? IF SO, LIST AND DOCUMENT THE DISTANCE.

2. IF THIS VENDOR IS IN THE CITY LIMITS, WHAT WIC VENDORS ARE WITHIN THREE (3) MILES OF THIS VENDOR? (THIS MAY INCLUDE VENDORS IN ADJACENT COUNTIES) LIST AND DOCUMENT THE DISTANCE.

3. IF THIS VENDOR IS OUTSIDE THE CITY LIMITS, WHAT WIC VENDORS ARE WITHIN SEVEN (7) MILES OF THIS VENDOR? (THIS MAY INCLUDE VENDORS IN ADJACENT COUNTIES) LIST AND DOCUMENT THE DISTANCE.

MONTHLY REDEMPTION: STATE USE ONLY

_____ through _____ = $ _____