The Iowa WIC Program is very interested in knowing about specific problems you have using your WIC benefits. If you have a problem or a complaint, please send us a message with contact information if you would like to discuss your concern to this web address http://www.idph.iowa.gov/WIC or, fill out the below form and mail it to us. If you have a store receipt, please also include that with this form.

When did problem occur? Date:______________________________________ Time:______________________________________

Store Name:__________________________________________________________

Store Address:__________________________________________________________

Clerk’s Name:_________________________ Check Lane Number:____________

Check one or more boxes:

☐ Store did not have the foods I was given from WIC. List item(s):____________________________________________________

☐ Store would not let me purchase specific WIC foods. List item(s):____________________________________________________

☐ Store would not accept my WIC Payment. Why? _______________________________________________________________

☐ Store offered to give me non-WIC food, cash or credit for my WIC benefits.

☐ Store told me not to write in the price.

☐ Store told me to sign the check before the items were rung up.

☐ Store mistreated me when I used my benefits. Please explain: ______________________________________________________

Please provide a phone number if you would like to discuss this issue.

Phone number with area code:____________________________________________________

Best time to call:_______________________________________________________________

https://www.facebook.com/IowaWIC