



WIC PROXY FORM

Local Agency Name

During _____, I give permission for _____
to pick up and/or redeem my WIC vouchers. I certify that this person is at least 18 years
of age.

Signature of Responsible Party

Date

Name of Participant(s)

*To Be Filled in by WIC Staff

WIC Case Number

Voucher Numbers

Signature of Proxy

Date

Signature of Local Agency Staff Member

Date

IMPORTANT REMINDER

The person you designate as your proxy must bring proof of his/her identification and this completed form to the WIC office or on voucher pick-up day in order for a proxy card to be issued. The proxy ID card(s) must be shown to the vendor when redeeming the vouchers. A proxy cannot be issued more than one (1) month's worth of vouchers at a time.

NOTE: Participants are responsible for informing their proxy of voucher pick-up schedules. A copy of this form must be placed in each participant's file

This institution is an equal opportunity provider.

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