

# Complaint Reporting Procedures

## Vendor Report Concerning WIC Participants

- LVLs can provide vendors the *Grocer Report Concerning WIC Participants* pre-paid postcard or vendors can order them by completing the *Vendor Materials Order Form* (OSP 508). This form can be found at [www.wicworks.ca.gov](http://www.wicworks.ca.gov).
  - Under the *Grocers/Vendors* tab, choose “Resources”
  - Under the *Authorized Vendors* tab, choose “WIC Vendor Materials Form - OSP 508”
- The vendor completes the pre-paid postcard and drops it in the mailbox.
- If the vendor chooses to provide the completed postcard to the LVL, they must:
  - Make a notation in the participant’s ISIS file to educate the participant at their next appointment regarding the issue reported by the vendor.
  - Educate the participant on the topic needed and do not identify the vendor to the participant.
  - Send a postcard with notations of your participant follow up to the State Local Agency Support Services Branch (LASB), as directed on the postcard.

## Participant or Local Agency Report Concerning WIC-Authorized Vendors

- Call 1-800-852-5770, or
- Complete the *Complaint against a Vendor for Local Agency and Participants* form, and
  - Fax the completed form to 916-440-5575, or
  - Email the completed form to [WICABUSE@cdph.ca.gov](mailto:WICABUSE@cdph.ca.gov), or
  - Mail the completed form to: *Program and Business Integrity Section  
WIC Supplemental Nutrition Branch  
3901 Lennane Drive  
Sacramento, CA 95834*

The form is located on the WIC website at [www.wicworks.ca.gov](http://www.wicworks.ca.gov), under *Professional Resources/Forms*

## State WIC’s Responsibilities

When you report abuse or fraud to WICABUSE, you will receive a receipt notification e-mail. Any correspondence or action taken on the vendor is **confidential** and LVLs will not be notified of results. If other means of reporting are used, i.e., telephone, fax, or mail, you will not receive confirmation.

State WIC reviews all complaints. If determined that the vendor is out of compliance with WIC Program requirements, State WIC issues a warning letter and an opportunity to correct the issue before they receive sanctions and/or are disqualified. The number of warnings and sanctions that a vendor receives before being disqualified can vary depending on the extent of severity and frequency of the violation.

Complaints against WIC participants reported by the vendor on the *Grocers Report Concerning WIC Participants* pre-paid postcard are received by the LASB. If received directly from the vendor, LASB notifies either the WIC local agency so they can provide follow-up education to the participant, or the State Program and Business Integrity Section if there was a program violation.

Image of pre-paid postcard  
Front & Back



California Department of Public Health California WIC Program  
**VENDOR REPORT CONCERNING WIC PARTICIPANTS**

On \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Complete all boxes below to describe Vendor comments and WIC violations:

Most complete Food Instrument information below:

Individual Number	First Day In Use	Serial Number
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Vendor \_\_\_\_\_

Address (number, street) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Name \_\_\_\_\_ Manager's Initials \_\_\_\_\_ Telephone Number \_\_\_\_\_ ( ) \_\_\_\_\_

Food:

<input type="checkbox"/> Wrong Size/Amount	<input type="checkbox"/> Cheese	<input type="checkbox"/> Peanut Butter	<input type="checkbox"/> Dry Beans, Peas, or Lentils
<input type="checkbox"/> Wrong Food Brand	<input type="checkbox"/> Milk	<input type="checkbox"/> Infant Formula	<input type="checkbox"/> Breakfast Cereal
<input type="checkbox"/> Type: <input type="checkbox"/> Milk	<input type="checkbox"/> Juice	<input type="checkbox"/> Tofu	<input type="checkbox"/> Soy Beverage
<input type="checkbox"/> Infant Formula	<input type="checkbox"/> Eggs	<input type="checkbox"/> Whole Grains	<input type="checkbox"/> Tuna, Salmon or Sardines
<input type="checkbox"/> Infant Foods	<input type="checkbox"/> Fruit and Vegetables		

Specify details: \_\_\_\_\_

Food Instrument:

<input type="checkbox"/> Used another person's food instrument without authorization	<input type="checkbox"/> Successful
<input type="checkbox"/> Used an altered food instrument	<input type="checkbox"/> Terminated
<input type="checkbox"/> Used a food instrument before "FIRST DAY TO USE" or after "LAST DAY TO USE"	
<input type="checkbox"/> Pre-signed a food instrument	

Transactions:

<input type="checkbox"/> Signature did not match WIC Authorization Folder	
<input type="checkbox"/> Did not have the WIC Authorization Folder	
<input type="checkbox"/> Attempted to receive cash back from purchase	
<input type="checkbox"/> Attempted to exchange WIC food for other food, cash, or credit	
<input type="checkbox"/> Did not separate the WIC foods from the other food	

Participant:

<input type="checkbox"/> Was the alternate buyer	
<input type="checkbox"/> Was the alternate buyer	
<input type="checkbox"/> Needs more training on WIC foods	
<input type="checkbox"/> Was rude and/or argued	
<input type="checkbox"/> Was cooperative when given an explanation of WIC Program rules	

WIC TRANSACTION: \_\_\_\_\_

Thank you for your cooperation. We will notify the local WIC agency immediately and re-educate the participant on the rules of the WIC Program.

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