

Cashier Practice

Purpose: Hands on experience with WIC check transactions

Preparation: If possible, set cash registers in training mode to practice WIC transactions

Remember sales tax cannot be applied to WIC check transactions

- You will need a shopper, a cashier, and a reviewer. You can have a team of shoppers and a team of cashiers if needed.
- Everyone should review the Idaho WIC Training Newsletter and read the “Helpful Hints” page in the Idaho WIC Authorized Food List.
- **Shopper:** Sign the WIC ID Folder page on the Responsible Adult signature line. Shop for WIC products using the Idaho WIC practice checks and the Idaho WIC Food List. Practice using all the different check types – grocery, formula, baby food, and CVV. Remember to separate WIC foods by check.
 - Note – infant formula is not included in the food list booklet. The description of the type of formula to purchase is printed on the actual check.
 - Ensure cashiers are familiar with the difference between powder (pwd) liquid concentrate (conc) and liquid ready-to-feed (rtf). Read the full description on the check to be sure the correct number, brand, and type are selected.

TIP: Most formula checks are printed for powder. If a formula check total is over \$250, check the description and container size again. There is likely an error.
- **Cashier:** Complete the WIC transaction. Remember each check is a separate transaction and every WIC check must be signed by the WIC customer only after the amount to pay is written on the check.
 - Note – Remember to compare the signature on the WIC check to the practice WIC ID Folder page. Signatures should be a reasonable match.
- **Reviewer:** Observe the WIC transaction and complete the checklist.

Reviewer Checklist

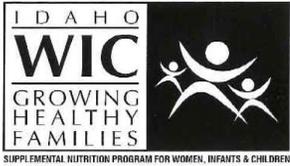
Name of Cashier _____ Date _____

Instructions: Place a checkmark if the cashier completed the item. Include any comments next to the item as appropriate.

	Cashier greeted customer and was friendly
	Cashier asked to see WIC Identification Folder
	Cashier checked the dates on each WIC check
	Foods were separated by WIC check
	Foods purchased with WIC checks were listed on the actual check
	Foods purchased with WIC checks were authorized WIC foods according to the Idaho WIC Authorized Food List
	Cashier did not sell more authorized items than were printed on the check Reminder: Baby food 2-packs are counted as 2 containers; a jar is counted as 1 container
	Cashier wrote the amount of the WIC transaction in the Pay Exactly box on the check before the WIC customer signed the check, not after the check was signed.
	Cashier observed WIC customer signing WIC check(s)
	After the WIC customer signed the WIC check, the cashier compared the signature on the WIC check to one of the signatures on the WIC Identification Folder.
	Cashier properly completed a CVV purchase (practice what to do when the purchase is less than or more than the maximum value printed on the CVV)

Other Comments:

WIC Identification Folder



F21983
Family No.

Bring this folder with you to every WIC appointment and each time you shop with WIC checks/CVVs.

WIC Participant #####
Participant Name Client No.

Participant Name Client No.

Participant Name Client No.

Participant Name Client No.

Responsible Adult Signature

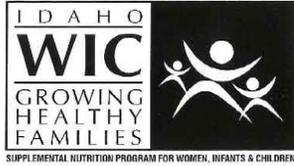
Authorized Signer

The goal of WIC is to improve the health of women and children by providing:

- health screenings
- nutrition education
- breastfeeding information and support
- nutrition counseling with registered dietitians
- nutritious supplemental foods
- referral to health care and other helpful services

Idaho

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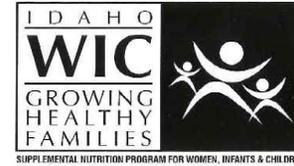
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Idaho

1 1609880 PARTICIPANT, WIC

00024750



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
75-1248
919

Void if Vendor Does Not Have
a Valid Idaho WIC Contract

First Day To Use
10-01-15

Last Day To Use
10-31-15

Pay Exactly

Pay To The Order Of:

\$

VENDOR MUST DEPOSIT
WITHIN 60 DAYS OF FIRST
DAY TO USE DATE

IDAHO WIC VENDOR NO.

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

For Purchase Of Authorized WIC Foods Only

24 CAN SIMILAC ADVANCE 13 OZ CONCENTRATE

SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
Subject to Federal and State Prosecution

⑈000 24 7 50⑈

1 1607762 PARTICIPANT, WIC

00024754



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
75-1248
919

Void if Vendor Does Not Have
a Valid Idaho WIC Contract

First Day To Use
10-01-15

Last Day To Use
10-31-15

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\$

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DAY TO USE DATE

IDAHO WIC VENDOR NO.

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

For Purchase Of Authorized WIC Foods Only

9 CAN GERBER GOOD START SOY 12.9 OZ POWDER

SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
Subject to Federal and State Prosecution

⑈000 24 7 54⑈

1 1644089 PARTICIPANT, WIC

00024766



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
75-1248
919

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AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

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For Purchase Of Authorized WIC Foods Only

13 QUART NUTRAMIGEN QUART READY TO USE

SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
Subject to Federal and State Prosecution

⑈000 24 7 66⑈

1 1688296 PARTICIPANT, WIC

00024761



STATE OF IDAHO Department of Health and Welfare

Account: 804201 75-1248 919

Void if Vendor Does Not Have a Valid Idaho WIC Contract

First Day To Use 10-01-15

Last Day To Use 10-31-15

Pay Exactly \$

Pay To The Order Of: IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only
8 DOLLARS FRESH FRUITS AND/OR FRESH VEGETABLES-SEE FOOD LIST
NOT TO EXCEED \$8.00
NO CHANGE GIVEN

VENDOR MUST DEPOSIT WITHIN 60 DAYS OF FIRST DAY TO USE DATE

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)
VOID VOID VOID
SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

SECURITY STATE BANK HOWARD LAKE MN 55349

Improper Use Of This Check is Subject to Federal and State Prosecution

000 24 76 1

1 1609880 PARTICIPANT, WIC

00024751



STATE OF IDAHO Department of Health and Welfare

Account: 804201 75-1248 919

Void if Vendor Does Not Have a Valid Idaho WIC Contract

First Day To Use 10-01-15

Last Day To Use 10-31-15

Pay Exactly \$

Pay To The Order Of: IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only
16 OUNCE OR LESS INFANT CEREAL - SEE FOOD LIST
16 CONTAINER 3.5- 4 OZ INFANT FRUITS/VEGETABLES - SEE FOOD LIST

VENDOR MUST DEPOSIT WITHIN 60 DAYS OF FIRST DAY TO USE DATE

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)
VOID VOID VOID
SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

SECURITY STATE BANK HOWARD LAKE MN 55349

Improper Use Of This Check is Subject to Federal and State Prosecution

000 24 75 1

1 1634358 PARTICIPANT, WIC

00024770



STATE OF IDAHO Department of Health and Welfare

Account: 804201 75-1248 919

Void if Vendor Does Not Have a Valid Idaho WIC Contract

First Day To Use 10-01-15

Last Day To Use 10-31-15

Pay Exactly \$

Pay To The Order Of: IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only
16 OUNCE OR LESS INFANT CEREAL - SEE FOOD LIST
16 CONTAINER 3.5- 4 OZ INFANT FRUITS/VEGETABLES - SEE FOOD LIST
10 JAR 2.5 OZ INFANTS MEATS WITH BROTH/GRAVY-SEEFOODLIST

VENDOR MUST DEPOSIT WITHIN 60 DAYS OF FIRST DAY TO USE DATE

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)
VOID VOID VOID
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SECURITY STATE BANK HOWARD LAKE MN 55349

Improper Use Of This Check is Subject to Federal and State Prosecution

000 24 7 70

1 1670495 PARTICIPANT, WIC

00024775



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
75-1248
919

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VENDOR MUST DEPOSIT
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IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only

- 2 HALF GALLON SILK SOYMILK, ORIGINAL ONLY
- 1 DOZEN EGGS WHITE, LARGE, MEDIUM, SMALL - SEE FOOD LIST

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
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⑈000 24 775⑈

1 1688296 PARTICIPANT, WIC

00024759



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75-1248
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VENDOR MUST DEPOSIT
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IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only

- 4 QUART MILK, WHOLE MILK ONLY
- 1 QUART WHOLE YOGURT - 32 OZ CONTAINER, SEE FOOD LIST
- 1 DOZEN EGGS WHITE, LARGE, MEDIUM, SMALL - SEE FOOD LIST

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
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⑈000 24 759⑈

1 1666105 PARTICIPANT, WIC

00024756



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
75-1248
919

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First Day To Use
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IDAHO WIC VENDOR NO.

For Purchase Of Authorized WIC Foods Only

- 1 GALLON MILK, 2% ONLY
- 1 QUART REDUCED FAT YOGURT- 32 OZ CONTAINER, SEE FOOD LIST
- 4 CAN BEANS-CAN 16 OZ OR LESS *NO ADDED MEATS*

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)

VOID VOID VOID

SIGNATURE MUST MATCH SIGNATURE ON ID FOLDER

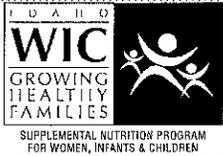
SECURITY STATE BANK
HOWARD LAKE MN 55349

Improper Use Of This Check is
Subject to Federal and State Prosecution

⑈000 24 756⑈

1 1663482 PARTICIPANT, WIC

00024762



STATE OF IDAHO
Department of
Health and Welfare

Account: 804201
79-1248
919

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First Day To Use
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Pay Exactly
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Pay To The Order Of:

IDAHO WIC VENDOR NO.

VENDOR MUST DEPOSIT
WITHIN 60 DAYS OF FIRST
DAY TO USE DATE

- For Purchase Of Authorized WIC Foods Only
- 2 GALLON MILK, 1% OR FAT FREE/SKIM ONLY
 - 2 CAN/PLASTIC JUICE 11.5 OZ OR 12 OZ FROZEN - SEE FOOD LIST
 - 36 OUNCE OR LESS CEREAL - SEE FOOD LIST
 - 1 DOZEN EGGS WHITE, LARGE, MEDIUM, SMALL - SEE FOOD LIST
 - 1 JAR PEANUT BUTTER 16 OZ TO 18 OZ *** SEE FOOD LIST
 - 16 OUNCE OR LESS WHOLEWHEAT BREAD/OTHER GRAINS-SEEFOODLIST

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)
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HOWARD LAKE MN 55349
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⑈000 24 76 2⑈

1 1670139 PARTICIPANT, WIC

00024779



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79-1248
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Pay Exactly
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Pay To The Order Of:

IDAHO WIC VENDOR NO.

VENDOR MUST DEPOSIT
WITHIN 60 DAYS OF FIRST
DAY TO USE DATE

- For Purchase Of Authorized WIC Foods Only
- 2 GALLON MILK, 1% OR FAT FREE/SKIM ONLY
 - 1 CAN/PLASTIC JUICE 11.5 OZ OR 12 OZ FROZEN - SEE FOOD LIST
 - 1 POUND DRY BEANS/PEAS/LENTILS
 - 1 DOZEN EGGS WHITE, LARGE, MEDIUM, SMALL - SEE FOOD LIST
 - 6 CAN TUNA OR PINK SALMON 5 OUNCE CAN

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HOWARD LAKE MN 55349
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⑈000 24 77 9⑈

1 1681585 PARTICIPANT, WIC

00024782



STATE OF IDAHO
Department of
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Account: 804201
79-1248
919

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Pay Exactly
\$

Pay To The Order Of:

IDAHO WIC VENDOR NO.

VENDOR MUST DEPOSIT
WITHIN 60 DAYS OF FIRST
DAY TO USE DATE

- For Purchase Of Authorized WIC Foods Only
- 3 HALF GALLON MILK LACTOSE REDUCED/FREE- 1% OR FATFREE/SKIM ONLY
 - 2 CAN/PLASTIC JUICE 11.5 OZ OR 12 OZ FROZEN - SEE FOOD LIST
 - 36 OUNCE OR LESS CEREAL - SEE FOOD LIST
 - 1 JAR PEANUT BUTTER 16 OZ TO 18 OZ *** SEE FOOD LIST
 - 1 POUND CHEESE -SEE FOOD LIST
 - 16 OUNCE OR LESS WHOLEWHEAT BREAD/OTHER GRAINS-SEEFOODLIST

AUTHORIZED SIGNATURE (MUST BE SIGNED AT VENDOR COUNTER)
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⑈000 24 78 2⑈