

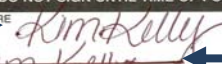
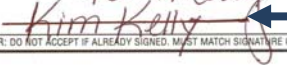
## Re-signing WIC Food Instruments

The WIC participant, authorized representative, or proxy may re-sign the WIC food instrument or cash value food instrument (food instruments) **one time only** in the presence of the cashier if:

1. The WIC customer's signature on the food instrument does not match their signature on the ID Folder or Proxy Certification form.
2. The food instrument presented is pre-signed.



The cashier will follow the procedures below when a food instrument needs to be re-signed:

1. Draw a single line through the original signature.
2. Have the WIC customer re-sign the food instrument
  - A. In the signature box, above the original signature (**must** be the same name) **OR**
  - B. If there is no room in the box, the WIC customer may resign to the left of the signature box.

ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELPT Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # <b>2741221</b>		75-1248 Payable Through FSNIC AN AFFILIATE OF SECURITY STATE BANK HOWARD LAKE, MN 55349 ACFW 980970	
AGENCY	CLINIC	PARTICIPANT ID	PARTICIPANT NAME	DRAFT TYPE	AZ WIC USE ONLY <b>VOID</b>		FIRST DATE TO USE	04/18/2005
07	01	1000008829	KELLY, KIM	001692AA			DATE OF USE	
36 OZ (UP TO 36 OZ) WIC APPROVED CEREAL (NOT INFANT) 2 CONTAINER (12 OZ FROZEN) WIC APPROVED 100% JUICE OR 2 CONTAINER (46 OZ ) WIC APPROVED 100% JUICE 1 GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON OR GALLON CONTAINERS ONLY) 1 HALF GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON CONTAINERS ONLY)					ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASHIER INITIAL		LAST DATE TO USE	05/17/2005
					TAX EXEMPT SALE NOT TO EXCEED \$300.00 PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE		PAY TO THE ORDER OF:	
					SIGNATURE AT STORE 			
					SIGNATURE AT STORE 			
					CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.			

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ARIZONA DEPARTMENT OF HEALTH SERVICES WIC PROGRAM 1740 WEST ADAMS, PHOENIX, ARIZONA 85007 NEED HELPT Mon. - Fri. 8 AM - 5 PM, Call 1-800-2525-WIC			MISUSE OF DRAFTS SUBJECT TO STATE OR FEDERAL PROSECUTION. VOID IF ALTERED		DRAFT # <b>2741223</b>		75-1248 Payable Through FSNIC AN AFFILIATE OF SECURITY STATE BANK HOWARD LAKE, MN 55349 ACFW 980970	
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07	01	1000008829	KELLY, KIM	000334AA			DATE OF USE	
2 CONTAINER (12 OZ FROZEN) WIC APPROVED 100% JUICE OR 2 CONTAINER (46 OZ ) WIC APPROVED 100% JUICE 2 GAL SKIM/NONFAT OR LOWFAT (1%) MILK (HALF GALLON OR GALLON CONTAINERS ONLY) 1 LB (UP TO 16 OZ) WIC APPROVED CHEESE 1 DOZ FRESH EGGS (12 PACK CARTONS ONLY)					ACTUAL \$ AMOUNT \$ CORRECTION ONLY CASHIER INITIAL		LAST DATE TO USE	05/17/2005
					TAX EXEMPT SALE NOT TO EXCEED \$300.00 PARTICIPANT: DO NOT SIGN UNTIL TIME OF PURCHASE		PAY TO THE ORDER OF:	
					SIGNATURE AT STORE 			
					SIGNATURE AT STORE 			
					CASHIER: DO NOT ACCEPT IF ALREADY SIGNED. MUST MATCH SIGNATURE ON ID FOLDER.			

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3. Verify that the signature matches their signature on the ID Folder or Proxy Certification Form

**NOTE:** If these instructions are **not** followed exactly as described and pictured above, the food instrument will be rejected for payment and the Vendor will not be reimbursed.