

Request of eWIC Grant Funds for Vendor Cash Register System Enhancements

Vendor Name (Legal Name of the Store): _____

Mailing Address: _____

I understand that the Arizona WIC Program has eWIC grant funds available to assist my store with the necessary upgrades to integrate my cash register system for eWIC. I further understand that the available funds will be prorated among all Vendors who qualify for and agree to receive the monies. The exact amount I may receive will be unknown until the Arizona WIC Program has received and reviewed all requests submitted. A Vendor that receives eWIC grant funds to integrate their cash register system for eWIC must participate as an Arizona WIC Program Vendor and accept eWIC for a minimum of two years or be required to repay a portion of the eWIC grant funds received as indicated in their contract.

I agree to provide a signed copy of this document plus a copy of the original quote or invoice for all eWIC upgrade expenditures to the Arizona WIC Program as soon as possible to the address below.

Arizona WIC Program
 150 North 18th Avenue
 Suite 310
 Phoenix, AZ 85007
 Attention: Jung Thai

In order to be considered for grant funds, all required documentation must be received by August 31, 2016. The Arizona WIC Program will not award funds prior to October 1, 2016. Vendors that received grant funds to enhance their cash register systems for eWIC from another WIC State Agency will not be eligible to receive grant funds from the Arizona WIC Program unless the vendor's cash register system requires new hardware and software changes. For any questions about this process, please contact Jung Thai at Jung.Thai@azdhs.gov or Taffery Lowry at Taffery.Lowry@azdhs.gov.

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| Vendor hereby acknowledges receipt and acceptance of the above-referenced information and that a signed copy of this request and required documentation must be submitted on or before the deadline listed above. | |
| Signature _____ Date _____ | Vendor (Store)Name _____ |
| Print or Type Name and Title of Authorized Person _____ | Vendor ID Number _____ |
| | Federal Tax ID Number _____ |