**** **Food Price List (FPL)** Updated 03/01/2019

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| Store Name | Phone Number | Email | County |
|  |  |  |  |
| Store Address | City | State | Zip Code |
|  | | | |
| Name of Person Completing this FPL | | | |

**Instructions:**

1. Complete all sections of the Food Price List (FPL) for all relevant WIC authorized foods in the following pages.
2. If you have questions, explanations, or comments, please provide these in the space on the last page.
3. Email the completed FPL document and Vendor Application to [WICVendorMail@isdh.in.gov](mailto:WICVendorMail@isdh.in.gov).

**Minimum Stock of WIC Approved Foods** (*Refer to the Approved Foods Card for more information.)*:

|  |  |
| --- | --- |
| **Milk:** 15 gallons total: 4-whole, 1-2%, 10-1% or skim | **Infant Formula:** |
| **Cheese:** 2 kinds, 5 lbs. in 8 or 16 oz. sizes | 6- 8.1 or 12.1 oz. Gerber Good Start Gentle concentrate |
| **Eggs:** 5 dozen large or extra large white eggs, one-dozen | 20-12.7 oz. Gerber Good Start Gentle powder |
| **Dry Beans:** 2 kinds of dry beans for a total of 3 lbs. in 1 lb. bags | 10-12.4 oz. Gerber Good Start Soothe powder  5-12.9 oz. Gerber Good Start Soy powder |
| **Canned Beans:** 128 oz. of canned beans in 15-64 oz. size | **Infant Cereal:** 2 kinds for a total of 80 oz. in 8 or 16 oz. containers |
| **Cereal:** 6 kinds of dry, 25 boxes total, at least 1 whole grain cereal | **Fruits and Vegetables Infant Food:** 200 oz. in 4 oz. or 8 oz. containers |
| **64 oz. Juice:** 15 containers of 64 oz., 2 kinds with 100% juice and at least 72 mg or 120% Vitamin C | **Bread:** 10 loaves of WIC approved whole grain bread in 16 oz. packages (waiver available for 5 loaves) |
| **11.5-12 oz. Juice Concentrate or 46-48 oz. Juice:** 5 containers, 2 kinds | **Fruits and Vegetables:** $50 worth, fresh or frozen, with 2 different fruits and 2 different vegetables |
| **Peanut Butter:** 5 jars, 16-18 oz. |  |

Does your store have all of the required WIC food listed above in stock?  Yes  No

**A. MILK:** No organic.

|  |  |  |
| --- | --- | --- |
| Type | Price | Size |
| Whole, 2%, 1%, or Skim |  | gallon, lowest price |
| Whole, 2%, 1%, or Skim |  | ½ gallon, lowest price |
| Lactose-Free |  | Size: |
| Soy Milk |  | ½ gallon |
| Evaporated |  | 12 oz. |
| Powdered Dry |  | Size: |
| UHT |  | quart |

**B. CHEESE: Highest price**. No organic. See approved foods card.

|  |  |  |
| --- | --- | --- |
|  | 8 oz. | 16 oz. |
| Type: |  |  |

**C. YOGURT: Highest price.** 16 or32 oz. plain or flavored. Container can be quart or multipacks. No Greek or light yogurt. No organic.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Brand | Highest Price | Size |
| Quart |  |  | 32 oz. |
| Multipack |  |  |  |

**D. EGGS**: **Least expensive brand only.** No organic.

|  |  |
| --- | --- |
|  | Lowest Price |
| Extra Large White |  |
| Large White |  |

**E. CANNED BEANS: Highest price.** No organic. See approved foods card.

|  |  |  |
| --- | --- | --- |
|  | Highest Price |  |
| Type |  | 15-16 oz. |

**F. DRY BEANS: Highest price.** No organic. See approved foods card.

|  |  |  |
| --- | --- | --- |
|  | Highest Price |  |
| Type |  | 1lb (16 oz.) |

**G. PEANUT BUTTER: Highest price.** 16-18 oz. jars only. Creamy, crunchy, or extra crunchy. No spreads or organic.

|  |  |
| --- | --- |
| Brand | Highest Price |
|  |  |

**H. FISH**: **Highest price**. Packed in water, oil, or vegetable broth. No premium or organic.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Brand | Highest Price | Size |
| Chunk Light Tuna |  |  |  |
| Pink Salmon |  |  |  |

**I. GRAINS: Highest price.** No organic. See approved foods card.

|  |  |
| --- | --- |
| **16 oz. Whole Grain Bread** | Highest Price |
| Brand: |  |

|  |  |  |
| --- | --- | --- |
| **16 oz. Tortilla** | Brand | Highest Price |
| Whole Wheat |  |  |
| Corn |  |  |

|  |  |
| --- | --- |
|  | Highest Price |
| **Brown Rice: 14-16 oz.** |  |
| **Whole Wheat Pasta: 16 oz.** |  |

**J. CEREAL:** Must list 6 cold cereals. Hot cereal is optional. See approved foods card.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cereal Name | 12 oz. | 18 oz. | 24 oz. | 36 oz. |
| Cold: |  |  |  |  |
| Cold: |  |  |  |  |
| Cold: |  |  |  |  |
| Cold: |  |  |  |  |
| Cold: |  |  |  |  |
| Cold: |  |  |  |  |
| Hot: |  |  |  |  |

**K. JUICE: Highest price**.Must be 100% juice and a minimum of 72 mg or 120% Vitamin C per serving. No organic.

|  |  |  |
| --- | --- | --- |
| Brand | Highest Price | Size |
|  |  | 64 oz. |
|  |  | 46-48 oz. |
|  |  | 11.5-12 oz. concentrate |

**L. INFANT CEREAL:** **Highest price**. 8 or 16 oz. containers. No added fruit or quinoa. No organic.

|  |  |  |
| --- | --- | --- |
| Brand | Highest Price | Size |
|  |  |  |

**M. INFANT FOOD: Highest price.** No organic.

|  |  |  |
| --- | --- | --- |
|  | Brand | Highest Price |
| **Fruit/Veggie:** 4 oz. jar |  |  |
| **Fruit/Veggie:** 2 x 2oz. tubs |  |  |
| **Fruit/Veggie:** 2 x 4 oz. tubs |  |  |
| **Meat:** 2.5 oz. Jar |  |  |

**N. INFANT FORMULA**

**\*Indicates required formulas for all stores, even those without pharmacies.**

Is your store also a pharmacy? Yes  No

If yes, pharmacies must provide prices for all formulas listed on this page and the next page or this application will not be approved. If your store does not have a pharmacy, then please provide prices of the formulas that are regularly stocked.

Can you obtain any of the items on the WIC formulary list located at

<http://www.in.gov/isdh/files/Indiana_WICFormulary.pdf> within 2 working days?  Yes  No

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Powder** | Price | Ready to Feed (RTF) | Price | **Liquid Concentrate** | Price |
| **Gerber Good Start Gentle** | **\*12.7 oz.** |  | 8.45 oz. 4-Pack |  | **\*8.1 or 12.1 oz.** |  |
| **Gerber Good Start Soothe** | **\*12.4 oz.** |  |  |  |  |  |
| **Gerber Good Start Soy** | **\*12.9 oz.** |  | 8.45 oz. 4-Pack |  | 12.1 oz. |  |

**O. SPECIAL FORMULA**

**Reminder: Stores with pharmacies must list prices for ALL FORMULAS ON THIS PAGE.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Powder** | | **Ready to Feed (RTF)** | | **Liquid Concentrate** | | **Case** | |
|  | Size (UPC) | Price | Size (UPC) | Price | Size (UPC) | Price | Size (UPC) | Price |
| Boost (any flavor) |  |  | 8 oz. 6-Pack (041679674000) |  |  |  |  |  |
| Boost Kid Essentials 1.0 Cal (any flavor) |  |  | 8.25 oz. 4-Pack (041679950968) |  |  |  |  |  |
| EleCare for Infants w/ DHA & ARA | 14.1 oz. (070074535111) |  |  |  |  |  |  |  |
| Enfamil Nutramigen w/ Enflora | 12.6 oz. (300871239418) |  |  |  |  |  |  |  |
| Enfamil Nutramigen |  |  | Quart (300870499011) |  | 13 oz. (300870498014) |  |  |  |
| Enfamil EnfaCare/ Enfacare NeuroPro | 12.8 oz. (300875122082) |  | 8 oz. 6-Pack (300875102985) |  |  |  | 2 oz./48/case (300875122051) |  |
| Ensure (any flavor) |  |  | 8 oz. 6-Pack (070074407111) |  |  |  |  |  |
| Neocate Infant w/DHA & ARA | 14.1 oz. (749735025956) |  |  |  |  |  |  |  |
| Neocate Jr (any flavor) | 14.1 oz. (749735017906) |  |  |  |  |  |  |  |
| Pediasure Grow & Gain (any flavor) |  |  | 8 oz. 6-Pack (070074580500) |  |  |  |  |  |
| Pediasure Grow & Gain w/ Fiber (any flavor) |  |  | 8 oz. 6-Pack (070074580623) |  |  |  |  |  |
| Pediasure 1.5 Cal (any flavor) |  |  |  |  |  |  | 8 oz./24/case (070074564098) |  |
| Pediasure Peptide 1.0 Cal (any flavor) |  |  |  |  |  |  | 8 oz./24/case (070074564111) |  |
| Similac Expert Care Alimentum | 12.1 oz. (070074647128) |  | Quart (070074575131) |  |  |  |  |  |
| Similac Expert Care NeoSure | 16 oz. (070074574318) |  | Quart (070074574561) |  |  |  |  |  |

*This is not a complete list of all special formulas. Please see the complete list at* [*wic.in.gov*](http://www.in.gov/isdh/files/Indiana_WICFormulary.pdf)*.*

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: <http://www.ascr.usda.gov/complaint_filing_cust.html>, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

-1 mail: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW

Washington, D.C. 20250-9410;

-2 fax: (202) 690-7442; or

-3 email: program.intake@usda.gov.

USDA is an equal opportunity provider and employer.



Explanations and comments: