



## WIC Check Appeal Request

Mail completed form and check copies to the address above. All fields must be completed or reimbursement request will be denied. Remember to always keep a photocopy of all items mailed, including the check.

PLEASE PRINT LEGIBLY. DO NOT TAPE OR STAPLE CHECKS TO FORM.

**Vendor Stamp Here**

The State of Alaska WIC Nutritional Program is not responsible for any bank charges, returned checks or other fees charged to the vendor that result from the non-payment of WIC checks. Vendors may not recover any bank charges from the WIC program, or from WIC participants or their proxies.

### WIC Vendor Information

Vendor Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Store Manager: \_\_\_\_\_ Email: \_\_\_\_\_

Name of person filling this form: \_\_\_\_\_ Date: \_\_\_\_\_

### WIC Check Information

Check Number	Amount	Reason for Request
	\$	
	\$	
	\$	
	\$	

### WIC OFFICE USE ONLY

Incomplete \_\_\_\_\_

Approved    ACH # \_\_\_\_\_     Denied \_\_\_\_\_

Payment Justification \_\_\_\_\_

Processor \_\_\_\_\_ Date \_\_\_\_\_

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## Instructions: WIC Check Appeal Request

Complete the WIC Check Appeal Request form to request reimbursement for a WIC check or WIC Fruit and Vegetable Voucher (FVV) which you believe has been incorrectly rejected. The WIC Program may consider payment approval with valid justification (attach explanation). A WIC Check Appeal Request form must be received at the address listed on the form within 30 days of the check rejection by the bank.

Refer to the table below to determine if your rejected WIC check or FVV can be corrected and resubmitted directly to your bank. **If the error is correctable according to the table below, resubmit the corrected check within 60 days of the first date to use to your bank.**

The State WIC Program will review WIC Check Appeal Request forms within 30 days of receipt.

**IMPORTANT: The Alaska WIC Program is NOT responsible for fees assessed due to rejected checks.**

Description of Error	Overlay Printed on Returned Check	What Can be Done?
Missing Vendor Stamp	<b>Missing Vendor Stamp</b> Stamp and Resubmit	Stamp and resubmit your check to your bank. <i>A Handwritten vendor number is not allowed.</i>
Unreadable/Illegible Vendor Stamp	<b>Unreadable Vendor Stamp</b> Stamp and Resubmit	Stamp and resubmit your check to your bank. <i>A Handwritten vendor number is not allowed.</i>
Unauthorized Vendor Stamp	<b>Invalid Vendor Stamp</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected.
Stale Dated Check	<b>Stale Date</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected. This rejection occurs when a check is deposited 61 days or <u>more from the first date to use printed on the check.</u>
Early Cashing	<b>Post Date</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected. This rejection occurs when a check is deposited prior to the <u>first date to use printed on the check.</u>
Missing Signature	<b>Missing Signature</b> Void Do Not Redeposit	This error can only be corrected if the participant returns to the store to sign the check.  Call the local WIC clinic and have the clinic contact the participant to return to the store to sign the check; then submit the check with the “WIC Check Appeal Request” form to the WIC Vendor Management Unit.
Altered Check Field	<b>Altered</b> Void Do Not Redeposit	The following are fatal errors and cannot be corrected: First and last date to spend Vendor Stamp Food Prescription
Encoding Error	<b>Encoding Error</b> Correct and Resubmit	This error can be corrected through your bank. Once corrected by your bank resubmit your check for deposit with your bank.
Unreasonable Dollar Amount	<b>Over Max \$ Amount</b> ACH may apply-Void	This error occurs when the requested dollar amount exceeds the maximum allowable reimbursement (MAR) for a particular check. You will be reimbursed at the MAR.  If you believe that you should be reimbursed for a higher amount, you may resubmit the check with the “WIC Check Appeal Request” to the WIC Vendor Management Unit.

Previously Presented/Rejected	<b>Second Presentment</b> Void Do Not Redeposit	If you believe that you should be reimbursed further you may resubmit the check with the “WIC Check Appeal Request” form to the WIC Vendor Management Unit.
Over Account Maximum	<b>Over Max \$ Amount</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected. No WIC check can exceed \$200.
Purchase Date Missing	<b>Date Of Use Error</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected.
Purchase Price Missing	<b>Amount Missing</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected.
Stop Payment	<b>Stop Payment</b> Void Do Not Redeposit	This is a fatal error and cannot be corrected.

For questions, contact the Alaska WIC Program at (907) 465-3100 or at [wic@alaska.gov](mailto:wic@alaska.gov)