



## Maine CDC WIC Nutrition Program UPC Product Submission Form



When requesting to add a product to the Maine CDC WIC Nutrition Program approved product list (APL), vendors, manufacturers and wholesale suppliers must:

1. Complete this form for each product requested to be added to the APL. If requesting multiple products be considered for inclusion, a spreadsheet including all required information can be submitted in place of this form.
  - a. Products submitted must, at a minimum, meet federal regulations, which can be found at <http://www.fns.usda.gov/wic/wic-food-packages-regulatory-requirements-wic-eligible-foods>.
2. E-mail, fax, or mail a copy of this completed form, the product label and UPC barcode of each product you are requesting be added to the Maine CDC WIC Nutrition Program APL.
  - a. If submitted electronically, the email must include images of the product label and the UPC barcode. The email subject line must be the 12 digit UPC.
  - b. The product label must include the product name, size, manufacturer, nutrition facts, ingredients list/label and the UPC barcode.
3. Please allow fourteen (14) days for feedback on your submission.

**\*\*The State may establish criteria in addition to the minimum Federal requirements (7 CFR §246.10(b)(1)(i)). All product approvals and/or denials are final and not subject to appeal.**

<u>Email:</u>		<u>Fax:</u>		<u>Mail:</u>		
SubmitUPCWIC@Maine.gov		(207) 287-3993		Maine CDC WIC Nutrition Program 286 Water St., 6 <sup>th</sup> Floor Augusta, ME 04330		
<b>Vendor/Manufacturer Information</b>						
Name:				Date:		
Address:				WIC Vendor # (if applicable):		
City:			State:		Zip Code:	
<b>Vendor/Manufacturer Contact Person</b>						
Contact Person (please print):						
Email:				Direct Phone:		
<b>Product Information</b>						
WIC Food Category:				Shelf Price or MSRP:		
Product Name (including manufacturer or brand):						
UPC Code (must be 12 digits):			Package Size:	Available in Maine: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Reminder:</b> A copy of the UPC Bar Code and product label must be submitted for each item.						
<b>STATE USE ONLY</b>						
Date Received:			Received By:			
Date Reviewed:			Reviewed By:			
Decision:	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved		<input type="checkbox"/> Review Pending		Date of Decision:	
Reason:						
<b>Complete if Approved</b>						
Category:			Sub Category:			
Date Added:			Item Description:			
			Entered By (Staff):			