

Maine WIC Nutrition Program 11 State House Station Augusta, Maine 04333 207-287-3991 or 1-800-437-9300 TTY Users: Dial 711 Fax: 207-287-3993

WIC Benefit Replacement Affidavit

	Date: H	Household ID:	Authorized Representative/Proxy:
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I declare the following WIC benefit(s) were:

 \Box lost \Box stolen \Box damaged in disaster \Box unsafe to retrieve

State WIC ID	Benefit(s)	Valid Date(s)	Replace (Y/N)

I have been given the following benefit(s) to replace the one(s) listed above:

Participant ID	Benefit(s)	Valid Date(s)

- □ I understand if I find any of my WIC benefits reported as lost or stolen, I will call the WIC office right away.
- □ I understand that if I or anyone acting for me redeems WIC benefits that has been replaced as lost or stolen, I will have to pay the WIC Program for the amount of the redeemed benefit(s).
- □ I understand that if I have given the WIC Program false information, I will have to pay the program for the replacement WIC benefit(s) I have been provided.

Authorized Representative Signature/Proxy

WIC Staff Member Signature

Replacement Approval Date

This institution is an equal opportunity provider