

New York State WIC Program Vendor Contact Information

Please enter your current contact information below. If at any time in the future any of this information changes, you **MUST** contact your Vendor Management Agency to report the changes.

Vendor Number / Location Number:			
Trade Name:			
Vendor Address:	Street		
City	State	Zip	
Store Telephone Number:			
Cell Phone Number (Owner):			
Alternate Phone Number (Manager):			
Corporate or Owner Email:			
Store or Manager Email:			
Vendor Signature			
Print Name:			
Signature:			Date: