Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services
Paul R. LePage, Governor Mary C. Mayhew, Commissioner

Maine CDC WIC Nutrition Program
Tel. (207) 287-3991 or (800) 437-9300
Fax: 207-287-3993

WIC Shopping Experience

WIC wants you to have a positive shopping experience. We appreciate you sharing your concerns and suggestions with us.

If you would like a WIC staff member to contact you regarding the information you provide on this form, please check "Yes" here. ☐ Yes ☐ No

Participant Information: (optional) used for follow-up questions or inquire store transaction

Participant Name: _____ Participant ID: _____

Phone Number: _____ E-mail: _____

Store Demographics

Store Name: _____ City: _____

Shopping Date: _____ Time: _____ AM ☐ PM ☐ Cashier Name (Lane #, or ID #) _____

Please describe what occurred at the store. You may use the back if you need more space.

Product Information

Product Name: _____

Package Size: _____ UPC: _____

Other

Name of person completing this form if other than WIC Participant: _____ Date: _____

Phone Number: _____ E-mail: _____