

Wyoming WIC Program

**FRAUD & ABUSE REPORTING FORM**

Please complete this form if you suspect someone to be committing fraud or abuse of the Wyoming WIC Program.

Return this form using one of the following methods:

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|--|---|
| 1. Email to: <a href="mailto:wdh-wywicvendor@wyo.gov">wdh-wywicvendor@wyo.gov</a>  | 3. Fax to: 307-777-5643                 |
| 2. Mail to: Vendor Coordinator, WY WIC Program, 122<br>West 25 <sup>th</sup> Street, 3 <sup>rd</sup> Floor West, Cheyenne, WY<br>82002 | 4. Call: 307-777-7494 or 1-888-996-9378 |

Name (Optional):	Phone # (Optional):
Address (Optional):	City:
Would you like a response to your problem, suggestion, or comment?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**INCIDENT TYPE**

Name and/or Description of WIC Participant, WIC Grocery Store/Cashier, or WIC Clinic Employee:	
Address of Location:	
Date(s) of Occurrence(s):	Time(s) of Occurrence(s):

Place a check next to the appropriate response:			
<input type="checkbox"/>	Falsifying information about income/family size when applying for WIC.	<input type="checkbox"/>	Exchanging WIC foods/formula at the store for cash, credit, or non-WIC items.
<input type="checkbox"/>	Participating at more than one WIC location.	<input type="checkbox"/>	Intending to sell, selling, or giving away the WYO W.E.S.T. card or WIC foods/formula verbally, in print, or online through social media.
<input type="checkbox"/>	Buying non-WIC foods at the store with WYO-W.E.S.T. card.	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Trading the WYO-W.E.S.T. card or WIC foods for other items or cash.		

**INCIDENT INFORMATION**

<b>Please describe the incident in detail below:</b> (You may include more information on a separate sheet of paper if necessary.)

**WE VALUE YOUR INPUT. THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM.**