UPC/Brand Request Form

## Your Information

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| --- | --- | --- | --- | --- | --- |
| Your Name: |  | |  | Your E-Mail: |  |
|  | |  | | | |
| Your Company: |  | |  | City your Company is Located in: |  |

## UPC Information

Please provide the following information for each product:

* Submissions do not require images, but you may be asked to provide them before final approval.
* For new brand submissions images of the nutrition panel and ingredient lists are required.

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| --- | --- | --- | --- | --- | --- | --- | --- |
| UPC or PLU  (must include ALL digits found on barcode) | | Product Description  (Brand, Type, Flavor, etc. OR image of front of package) | | Selling Unit Size  (Ounce, pound, jar, package, gallon, etc.) | Selling Unit Retail  (your retail cost per item) | Images  (Nutrition panel & ingredient list) | |
| 9-87564-32100-9 | | Johns 1% milk | | 1 gallon | $1.75 |  | |
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## Please submit the form by faxing it to 515-281-4913 or e-mailing it to [wicvendor@idph.iowa.gov](mailto:wicvendor@idph.iowa.gov).

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