

## Iowa Women, Infants, and Children (WIC) Program

### Appointment Reminder

Dear

This is a reminder of the WIC appointment(s) for the following members of your family:

Date	Time	Participant Name	Appointment Type

Please bring the following with you:

\_\_\_\_\_ Proof of Income (all pay stubs for the household from the last 30 days)

- Paycheck stubs, income tax return, Medicaid card, or notice of award letter for Food Assistance and/or FIP.

\_\_\_\_\_ Proof of your address (one of the following):

- Utility bill, rent or mortgage receipt, driver's license with current address, voter registration card for current address.

\_\_\_\_\_ Proof of identity for each family member applying for WIC, such as:

- Driver's license or passport, birth certificate, eWIC card, insurance or Medicaid card, hospital/medical record, crib card, WIC ID folder from any state, Social Security card.

\_\_\_\_\_ Hemoglobin or hematocrit results, height, and weight (if available).

\_\_\_\_\_ Immunization record for children 2 years and younger.

\_\_\_\_\_ Prescriptions for special formula.

Your children (list names): \_\_\_\_\_

If you are unable to keep this appointment, please call us as soon as possible at the number below so we can reschedule your appointment.

Phone Number: \_\_\_\_\_

This institution is an equal opportunity provider.