



Temporary eligibility due to missing proofs

Applicant/participant name(s):

_____, _____, _____

WIC ID number(s):

_____, _____, _____

WIC is required to see proof of income, residency, and identity to provide WIC services. If you cannot show proof for income, residency, and/or identity, you may fill out this form with the required information. This allows you to receive food benefits for the current month.

Instructions: Please complete the section(s) marked below. If the section heading box is not marked, you do not need to fill out that section.

If you need this in an alternate format, please call Oregon WIC at 971-673-0040.

This institution is an equal opportunity provider.

☐ **Proof of Income**

My household income before taxes is \$ _____

☐ **Weekly** ☐ **Monthly**

☐ **Other time frequency:**_____

I did not provide proof of income today. I understand that I must provide proof of our household income within 30 days from today or I will only receive WIC food benefits for the current month.

☐ **Proof of Residency**

My current address is

I did not provide proof of residency today. I understand that I must provide proof of our household residency within 30 days from today or I will only receive WIC food benefits for the current month.

☐ **Proof of Identity**

☐ **By checking the box to the left, I declare I did not provide proof of identity today for:**

I did not provide proof of identity today for the people in my household listed above. I understand that I must provide proof of identity within 30 days from today or I will only receive WIC food benefits for the current month.

Please read and sign

When I complete, sign, and date this form I confirm the information I provided above is correct. I understand I need to provide the information listed above to continue to receive WIC benefits after 30 days.

I understand giving false information on purpose is considered abuse of the program and I may be required to pay WIC back the value of any WIC food benefits I receive.

Applicant/participant signature:

Date:
