# WIC VENDOR SALES INFORMATION

See the instructions on the back of this form

Store Na	me:		KY WIC Vendor #:	
Physical	address (NC	) post office box)		
Street: _			City:	
State:	Zip:	County:	Email:	

- If the store has been in business for less than one (1) month, estimate sales amount and specify time period.
- If the store has been in business for more than one (1) month but less than one (1) year, provide actual sales amount and specify time period, and <u>attach Kentucky Sales and Use Tax forms.</u>
- If the store has been in business for more than one (1) year, provide actual sales figures from October 1, 2020, through September 30, 2021, and attach Kentucky Sales and Use Tax forms.

Non-taxable Food Sales: \$	
	(Pharmacies: This number should include your WIC formula sales)
Gross Sales: \$	
From:	To:
MONTH/YEAR	MONTH/YEAR

## ATTACH PROOF OF REPORTED SALES FIGURES

### (KENTUCKY SALES AND USE TAX WORKSHEETS from https://onestop.efile.ky.gov)

To the best of my knowledge, the above information is correct. I understand this information is for the use of the Kentucky WIC Program.

Print name of authorized person supplying information

Signature of authorized person supplying information





Title

Date



## INSTRUCTIONS FOR COMPLETING THE WIC VENDOR SALES INFORMATION FORM

- A. This form serves to document whether a contracted vendor or vendor applicant meets the criteria for non-taxable food sales and the primary business is a retail grocer or drug store.
- B. Instructions for completing the form:
  - 1. Store name enter store name.
  - 2. KY WIC vendor number enter the authorized KY WIC vendor number as it has been assigned to you. If you are an applying vendor, leave the area blank.
  - 3. Physical address of the store no post office box.
  - 4. Email address of store owner email will be the primary mode of communication from the KY WIC Program, please submit an email address that is checked frequently.
  - 5. Food sales supply amount of all non-taxable food sales, **including** WIC formula sales, for the time period beginning October 1, 2020, and ending September 30, 2021. Indicate the dollar amount of sales. If an applying vendor, estimate anticipated sales.
  - 6. Gross sales supply amount of total sales for store for the time period beginning October 1, 2020, and ending September 30, 2021. Gross sales include **both** the taxable and non-taxable sales done by the store, **including** gas, pharmacy, bait, deli, video rental, etc. However, sales from lottery, money orders, any service offered as commission services (e.g., ticket master), or fishing/hunting licenses are not to be reported as gross sales. Indicate the dollar amount of sales. If an applying vendor, estimate anticipated sales.
  - 7. From/To provide the beginning and ending dates of the month and year of the reported sales.
  - 8. Attach supporting documentation vendors are required to provide copies of supporting documentation showing gross sales and total non-taxable food sales, per federal guidelines. The acceptable proof is the **Kentucky Sales and Use Tax forms** for the reported period.
  - 9. Name of authorized person supplying information self-explanatory.
  - 10. Date month, day, and year the form is completed.
  - 11. Signature signature of authorized person supplying information.
  - 12. Title title of person supplying information.

#### 13. Please make certain all supporting documentation is <u>attached and</u> legible, and email to: KYWICVendor@ky.gov

Kentucky WIC Program Vendor Management Section 275 East Main Street, Mailstop: HS2W-D Frankfort, Kentucky 40621

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