



### Inter Tribal Council of Arizona, Inc. WIC Program Notice of Change Form

The Vendor must notify ITCA WIC within 30 days of **any** change, failure to do so may result in corresponding sanctions or fines. Please see [Section 8: Reporting Changes](#) in the Vendor Manual for further details.

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|--|--|---|--|
| Vendor Name:   |  | Vendor ID:  |  |
| Physical Address:  |  | Mailing Address:  |  |
| City, State, Zip:  |  | City, State, Zip:   |  |
| Phone Number:  |  | <b>Effective Date:</b>  |  |
| <b>Change Requested</b><br>Please select all that apply.   |  |   |  |
| <input type="checkbox"/> Mailing Address<br><input type="checkbox"/> Store Hours<br><input type="checkbox"/> Vendor Name<br><input type="checkbox"/> Store Number<br><input type="checkbox"/> Store Telephone Number | <input type="checkbox"/> Store Fax Number<br><input type="checkbox"/> Store Management<br><input type="checkbox"/> Vendor Ownership<br><input type="checkbox"/> Store or Outlet Location<br><input type="checkbox"/> Bank Management | <input type="checkbox"/> POS system, including software updates<br><input type="checkbox"/> Third Party Processor<br><input type="checkbox"/> Cessation of Operation<br><input type="checkbox"/> Bankruptcy |  |
| Description of change: Please provide details about the changing information, if applicable.   |  |   |  |

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Print Name
Signature
Date

Please mail, fax or email the completed form to:

ITCA WIC Program  
 Attn: Mallory Phelps, Vendor Manager  
 2214 N. Central Avenue, suite 100  
 Phoenix, AZ 85004

Fax: (602) 258-4825  
 E-mail: [Mallory.phelps@itcaonline.com](mailto:Mallory.phelps@itcaonline.com)  
 If you have any further questions, feel free to contact ITCA WIC at (602) 258-4822