

WIC EBT Card Issuance Log							
Local Agency: (Enter Local Agency Name)				Clinic #: (Enter Clinic Number)			
Card Number	Check Digit	Date of Issuance	Auth. Person/Proxy Cardholder Name	WIC Family ID Number	Staff Name Card Issued By	New Card	Replacement Card (L, S, D, B, O)
5077118	00000001						
5077118	00000002						
5077118	00000003						
5077118	00000004						
5077118	00000005						
5077118	00000006						
5077118	00000007						
5077118	00000008						
5077118	00000009						
5077118	00000010						
5077118	00000011						
5077118	00000012						
5077118	00000013						
5077118	00000014						
5077118	00000015						
5077118	00000016						
5077118	00000017						
5077118	00000018						
5077118	00000019						
5077118	00000020						

Note: If replacement card, L = Lost, S = Stolen, D = Damaged, B = Bad Magstripe, O = Other