

## B2. Revised Letter to State Agencies from Regional Offices

XX/XX/XXXX

To: **[STATE WIC DIRECTORS FROM ALL STATES]**

From: **[RESEARCH TEAM]**

Subject: Participation in the “Third National Survey of WIC Participants Study” Survey

Dear **[FIRST NAME] [LAST NAME]**:

2M Research Services and its partner, Abt Associates, are working with Capital Consulting Corporation, a company that does research studies in health and human services, to conduct the “Third National Survey of WIC Participants (NSWP-III).” FNS has commissioned this study to provide nationally representative estimates of certification errors in the WIC program (required by the Improper Payment Elimination and Recovery Improvement Act); to collect information on State and local WIC agencies’ certification policies and procedures, participant caseloads, services provided and other aspects of agency operations; and to collect information from current and former WIC participants about their experiences with the WIC program. You have been invited to participate in a pretest of the State Agency Survey, which is designed to identify how to improve the instrument.

**TO STATES PRETESTING THE SURVEY + THEY HAVE LAS INVITED TO TAKE LA SURVEY, NO DATA COLLECTION FROM THAT STATE’S WIC PARTICIPANTS**

Some local agencies from your State will be selected for the study; they are listed below. We are requesting your help to identify and contact 3–4 of your local WIC agencies. We will begin contacting local WIC agencies on **[DATE]**.

Local Agency Contact	Name of Local Agency	Email Address/Phone

Each local agency will also receive an individual invitation to the Local Agency Survey with instructions.

**We will make every effort to minimize the burden of providing these data, and address any other concerns you may have.**

If you have questions, please feel free to contact us at 1-866-465-7738.

Thank you in advance for your assistance.

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