

Appendix D: FDP State Agency File Upload Templates v1 02192021

Field Name	FNS WIC ID	State WIC ID	FNS Number
Field Type	Text	Text	Number
Field Length	18	32	7
Example Data	a2Q2J00000kMQKX	4545	1234567
Is Mandatory for FDE Upload?	- No (if New FDE) - Yes (if exisitng FDE)	- No (if FDE is not Retail) - Yes (if Retail FDE has an Agreement Start date)	No
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	The FNS Number provided by SNAP, if applicable.
Valid Values	N/A	N/A	N/A
Formatting/Validation Notes	Not required for new Food Delivery Entities	Required for all Food Delivery Entities with an Agreement Start date and Retail Food Delivery Entities	Field Left blank intentionally

Name	DBA	Chain Store Num	Street Num	Street Name
Text	Text	Text	Text	Text
60	60	8	20	100
Scott's Bakery	Scott's Bakery	#100	333	Willow St
Yes	No	No	No	No
Full legal business name.	The 'doing business as' (DBA) name, if applicable.	The vendor's chain store number, if applicable	Street Number of the vendor's address	Street Name of the vendor's address
N/A	N/A	N/A	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Suite or Unit	City	State	Zip Code	County
Text	Text	Picklist	Text	Text
100	40	2	10	40
100	McLean	VA	20155	Fairfax
No	No	No	No	No
Suite or Unit Number of the vendor's address	City of the vendor's address	State of the vendor's address	Zip Code (Zip or Zip +4) of the vendor's address	County of the vendor's address
N/A	N/A	2-digit code of the State	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	XXXXX, XXXXX-XXXX	Field Left blank intentionally

No Physical Address	Location Description	Latitude	Longitude
Boolean	Text	Number	Number
3	255	10-digit, 6 decimal places	10-digit, 6 decimal places
Yes	In parking lot	123.110101	1464.345055
No	No	No	No
Indicates if the store does not have an exact address or easily definable physical location.	The description of the store's exact location if no exact address can be provided.	The latitude coordinates for this address.	The longitude coordinates for this address.
N/A	N/A	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Unauthorized Store	Peer Group	Initial Auth Date	Food Delivery Method
Boolean	Picklist	Date	Picklist
3	Custom Policy Setting will be entered from State agency data entry/input.	Date Length	See Valid Values below
No	Other (See Picklist Values below)	10/10/2020	Retail
No	No	No	Yes
Indicates if this store was investigated by the SA but is not a WIC authorized store.	Peer group values can be created in Policy Settings and will contain custom values from State agency data entry/input.	The date of the vendor's initial authorization.	The food delivery method this entity operates under to ensure WIC participants have access to supplemental foods.
N/A	Custom picklist values will be entered from State agency data entry/input.	N/A	Retail, Direct Distribution, Home Delivery
Field Left blank intentionally	Custom picklist values will be entered from State agency data entry/input.	Date must be in the m/dd/yy format	Field Left blank intentionally

Retail Category	Contractor	Online Ordering Options	Num of Store Registers
Picklist	Text	Picklist	Number
See Valid Values below	40	See Valid Values below	4
Farmers' Market	Pharmacy	Delivery	2
No	No	No	No
The category of food delivery entity within the retail food delivery system.	The type of food delivery entity within either the home or direct distribution food delivery system.	Multi-picklist: can have more than 1 value selected	The number of cash registers at the store location.
Regular Vendor, A50 - for profit, A50 - nonprofit, Pharmacy - only exempt infant formula/nutrionals, Commissary, Farmer, Farmers' market	Pharmacy, Non-Profit, Other Contractor	In-store or curbside pickup, Delivery, Transaction in the presence of cashier, Online transaction,	N/A
Required if Food Delivery Method= 'Retail'	Required if Food Delivery Method= 'Direct Distribution' or 'Home Delivery'	Field Left blank intentionally	Field Left blank intentionally

Store Sq Ft	WIC Only	Mobile Vendor	Online Vendor
Number	Boolean	Boolean	Boolean
6	3	3	3
2400	Yes	No	Yes
No	No	No	No
The square footage of the store location.	Indicates if this vendor provides only WIC foods or identifies as a WIC only store.	Indicates if this vendor is authorized as a mobile vendor.	Indicates if this vendor operates solely online (i.e., does not have a fixed location/storefront).
N/A	N/A	N/A	N/A
Field Left blank intentionally	Only available if Vendor Type is = 'A50 - for profit' or 'A50 - nonprofit'	Field Left blank intentionally	Field Left blank intentionally

Status	Assessed For Participant Access	Participant Access Reasons	Denial Reason
Picklist	Boolean	Picklist	Picklist
See Valid Values below	3	See Valid Values below	See Valid Values below
Authorized	No	Failed to meet business integrity selection criterion	Other
Yes	No	No	No
The current status of the vendor's agreement.	Indicates if this vendor was assessed for participant access during this fiscal year.	The reason(s) the vendor was determined necessary for participant access.	The reason why the store's application was denied.
Authorized, Authorized with CMP, Authorized for participant access, Authorized with disaster waiver(s), Disqualified (and agreement terminated), Agreement expired, Agreement terminated, Application pending, Application denied, Never authorized	N/A	Failed to meet business integrity selection criterion, Failed to meet competitive price selection criterion, Failed to meet State agency selection criterion, Current SNAP disqualification/CMP for hardship, Serving a mandatory sanction from another WIC State agency	Failed to meet federal selection criteria, Failed to meet State agency selection criteria, Attempted to circumvent a sanction, Submitted application outside of timeframe, Withdrew application from WIC Program, Limiting criteria, Other
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Other Denial Reason	Agreement Start Date	Agreement End Date	Agreement Termination Date
Text	Date	Date	Date
100	Date Length	Date Length	Date Length
Test Denial Reason test	1/1/2020	1/1/2020	1/1/2020
No	No	No	No
The specific reason the store's application was denied if "Other" was cited as a denial reason.	Agreement Start Date	Agreement End Date	Agreement Termination Date
Required when Denial reason= 'Other'	N/A	N/A	N/A
Field Left blank intentionally	Date muse be in the m/dd/yy format	Date muse be in the m/dd/yy format	Date muse be in the m/dd/yy format

Termination Reason	Other Termination Reason	Num of Stores Owned	Num of Other WIC Vendors
Picklist	Text	Number	Number
See Valid Values below	100	4	7
Other	Test Other Termination Reason	1	3
No	No	No	No
The reason why the vendor agreement was terminated.	The specific reason the vendor's agreement was terminated if "Other" was cited as a termination reason.	The total number of stores owned by the same ownership.	The number of other WIC authorized vendors by the same ownership.
Failed to continue to meet federal selection criteria, Failed to continue to meet State agency selection criteria, Failed to continue to meet terms of vendor agreement, Provided false information in connection with vendor application, Underwent a change in ownership, Underwent a change in location, Ceased operations, Voluntarily withdrew from WIC program, Other	Required when Termination reason= 'Other'	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Field Name	FNS WIC ID	State WIC ID	Fiscal Year	Auth on Oct 1
Appendix D: FDP State Agency File Upload Templates v1 02192021				
Field Type	ID	Text	Text	Boolean
Field Length	18	32	4	3
Example Data	a2Q2J00000k MQKX	1234	2015	Yes
Is Mandatory for Annual Data or Training Upload?	Yes	No	Yes	No
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	The federal fiscal year for this record.	Indicates if this vendor was authorized by the SA as of October 1 of the fiscal year.

Valid Values	N/A	N/A	N/A	N/A
Formatting/ Validation Notes	Field Left blank intentionally	Compare against FNS WIC ID and should match	Field Left blank intentionally	Field Left blank intentionally

Num of RMVs Completed This Year	High Risk
Number	Boolean
2	3
2	Yes
No	No
The number of routine monitoring visits (RMVs) conducted during this fiscal year.	Indicates if this vendor was identified as high risk this fiscal year.

N/A	N/A
Field Left blank intentionally	Field Left blank intentionally

High Risk Reasons
Picklist
See Valid Values below
Other - New Vendor
No
High risk reasons that were identified for this vendor.

Redemption - Extremely small amount of variation in food instrument prices,
Redemption - Large percent of food instruments redeemed at same price,
Redemption - Unusually high average food instrument prices,
Redemption - Redeemed prices are higher than their price list,
Volume - Large percent of high-priced food instruments,
Volume - Volume of WIC business,
Volume - Large increase of dollar volume of food instruments redeemed over time,
Volume - Large percent of the area's total WIC redemptions,
Volume - WIC sales are an unusually high percentage of vendor's total sales,
Volume - High WIC to SNAP redemption ratio,
Volume - WIC and SNAP Program sales are an unusually high percentage of total sales,
Participant - Participant/other complaints,
Participant - Large number of participants redeeming food instruments outside of their health service area,
Participant - Large number of participants redeeming food instruments who are considered to be at high health risk,
Non-EBT - Large number of food instruments with consecutive serial numbers,
Non-EBT - Large percentage of manually issued food instruments,
Non-EBT - Excessive number of returned checks due to errors,
Other - Past history of violations and disqualifications,
Other - Associations with known violators,
Other - Multiple ownerships which include known violators,
Other - Short on authorized food items or no inventory,
Other - New Vendor,
Other - Random Selection,
Other - Multiple ownerships which include known violators,
Other - Short on authorized food items or no inventory,
Other - New Vendor,
Other - Random Selection

Multi-picklist: can have more than 1 value selected

State Risk Reasons	Training Date 1
Text	Date
50	Date Length
Some other State agency reason - small amount of variation in food instrument prices	12/12/2010
No	Yes
Any SA specific high risk reasons that were identified for this vendor.	Training Date

N/A

N/A

Field Left blank intentionally

After Annual data, the next 3 fields will be for each trainings. Date muse be in the m/dd/yy format

Training Type 1	Training Format 1	Training Date 2	Training Type 2
Picklist	Picklist	Date	Picklist
See Valid Values below	See Valid Values below	Date Length	See Valid Values below
Interactive	Interactive - On-site cashier training	12/12/2010	Non Interactive
Yes	Yes	Yes	Yes
The type of training provided (e.g., Interactive, or non-interactive training?)	Please select the answer that best describes the training format.	Training Date	The type of training provided (e.g., Interactive, or non-interactive training?)

Interactive, Non Interactive	Interactive - On-site cashier training, Interactive - Off-site classroom training , Interactive - Train-the-trainer sessions, Not interactive - Newsletter , Not interactive - Video , Not interactive - Webinar , Not interactive - Other	N/A	Non Interactive
Field Left blank intentionally	Field Left blank intentionally	Date must be in the m/dd/yy format	Field Left blank intentionally

Training Format 2

Picklist

See Valid Values below

Not interactive - Video

Yes

Please select the answer that best describes the training format.

Not interactive -
Video

Field Left blank
intentionally

Appendix D: FDP State Agency File Upload Templates v1 02192021

Field Name	FNS WIC ID	State WIC ID	Year	Month	Non-CVB amount
Field Type	ID	Text	Number	Picklist	Number
Field Length	18	32	4	See Valid Values below	9-digit, 2 decimal places
Example Data	a2Q2J00000kMQKX	1234	2020	JAN	200.50
Is Mandatory for Redemption Upload?	Yes	No	Yes	Yes	No
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	The calendar year for the transaction data provided.	The calendar month for the transaction data provided.	The total value of all Non-CVB redemptions in the calendar month.
Valid Values	N/A	N/A	N/A	January, February, March, April, May, June, July, August, September, October, November, December	N/A

Formatting/ Validation Notes	Not required for new Food Delivery Entities	Required for all Food Delivery Entities with an Agreement Start date and for Retail Food Delivery Entities	Field left blank intentionally	Field left blank intentionally	Field left blank intentionally
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CVB amount
Number
9-digit, 2 decimal places
100.50
No
The total value of all CVB redemptions in the calendar month.
N/A

Field left blank intentionally

Appendix D: FDP State Agency File Upload Templates v1 02192021

Field Name	FNS WIC ID	State WIC ID	Investigation Start Date	Investigation End Date
Field Type	ID	Text	Date	Date
Field Length	18	32	Date Length	Date Length
Example	a2Q2J00000kMQKX	21323	1/1/2020	1/1/2020
Is Mandatory for Investigation or Claim Collection Upload?	Yes	No	Yes	No
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	Investigation Start Date	Investigation End Date
Valid Values	N/A	N/A	N/A	N/A
Formatting/ Validation Notes	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Investigation Status	Reason Closed	Investigation Outcome	Num of Compliance Buys
Picklist	Text	Boolean	Number
See Valid Values below	255	3	2
Open	Store Closed	Yes	2
Yes	No	No	No
The current status of the investigation. Please note the "Closed" status indicates that the investigation was closed, but not completed per 246.12(j)(4).	The reason the investigation was closed but not completed.	Indicates if there was a Sanction or No Sanction outcome.	The total number of compliance buys conducted in the investigation.
Open, Completed, Closed.	store closed, store voluntarily withdrew, store DQ'ed by SNAP	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Sanction, No Sanction	Field Left blank intentionally

Inventory Audit Completed	Claim Amount	Admin Review Requested
Boolean	Number	Boolean
3	8-digit, 2 decimal places	3
Yes	2300.99	Yes
No	No	No
Indicates if an inventory audit was conducted as part of the investigation.	The total amount of all claims established in this investigation.	Indicates if an Admin Review has been requested
N/A	N/A	N/A
Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Administrative Review Status or Outcome	Judicial Review Requested	Judicial Review Status or Outcome
Picklist	Boolean	Picklist
See Valid Values below	3	See Valid Values below
Pending	No	Pending
No	No	No
Indicates the status of the Admin Review	Indicates if a Judicial Review has been requested	Indicates the status of the Judicial Review
Pending, Upheld, Overturned, Modified	N/A	Pending, Upheld, Overturned, Modified
Required, if ARR is Yes	Optional. Only available if AR.Administrative Review Outcome is valued.	Required, if JRR= Yes

Collections 1- Date Received	Amount	Collections 2- Date Received	Amount
Date	Number(9,2)	Date	Number(9,2)
Date Length	9-digit, 2 decimal places	Date Length	9-digit, 2 decimal places
02/02/2020	10000.23	02/02/2020	10000.23
No	No	No	No
The date the Collections was received	The amount collected in this payment.	The date the Collections was received	The amount collected in this payment.
N/A	N/A	N/A	N/A
Repeat collections for each investigation	Field Left blank intentionally	Field Left blank intentionally	Field Left blank intentionally

Field Name	FNS WIC ID	State WIC ID	Investigation Start Date
Field Type	ID	Text	Date
Field Length	18	32	Date Length
Appendix D: FDP State Agency File Upload Templates v1.0			
Example Data	a2Q2J00000kMQKX	21323	1/1/2020
Is Mandatory for Violations Upload?	Yes	No	Yes
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	Investigation Start Date
Valid Values	N/A	N/A	N/A

Formatting/ Validation Notes	Field left blank intentionally	Field left blank intentionally	Used to identify Investigation
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Violation	State Violation	Num of Violations	Pattern Established
Picklist	Picklist	Number	Boolean
See Valid Values below	Custom Policy Setting will be entered from State agency data entry/input.	2	3
02192021			
Vendor Overcharge	Other (See Picklist Values below)	2	Yes
Yes	No	Yes	No
The violations that result in mandatory vendor sanctions as outlined in 246.12(l)(1)(i-iv).	The vendor violations not specified in 246.12(l)(1)(i-iv), but included in the SA's sanction schedule. SA violations are defined in the Policy Settings area.	The total number of times this violation has been found during this investigation.	Indicates if a pattern of violations has been established for this violation.
Trafficking Selling firearms, ammunition, explosives, and/or controlled substances Selling alcohol and/or tobacco products Claiming reimbursement in excess of the store's documented inventory Overcharging Receiving, transacting, and/or redeeming through unauthorized channels Charging for supplemental food not received by the participant Providing credit and/or non-food items (other than alcohol, tobacco products, cash, firearms, ammunition, explosives, or controlled substances) Providing unauthorized food items Charging for supplemental foods provided in excess of those in the benefit balance Providing prohibited incentive items State agency violation Providing prohibited incentive items State agency violation	Custom picklist values will be entered from State agency data entry/input.	N/A	N/A

Num of violations is updated when new violations of the same type occur	Custom picklist values will be entered from State agency data entry/input.	Field left blank intentionally	Field left blank intentionally
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Notification Sent	Documented Non-notification
Boolean	Boolean
3	3
Yes	Yes
No	No
<p>Indicates if a notification of violation was sent for the initial instance of this violation.</p>	<p>Indicates if a notification of violation was not sent to the vendor.</p>
N/A	N/A

Field left blank intentionally	Field left blank intentionally
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Appendix D: FDP State Agency File Upload Templates v1 02192021

Field Name	FNS WIC ID	State WIC ID	Inv Start Date	Investigation Origin	WIC Sanction Type	SNAP Sanction Type
Field Type	ID	Text	Date	Picklist	Picklist	Picklist
Field Length	18	32	Date Length	See Valid Values below	See Valid Values below	See Valid Values below
Example	a2Q2J00000kMQKX	21323	9/10/2020	WIC	State agency sanction	Permanent
Is Mandatory for Sanctions Upload?	Yes	No	Yes	Yes	No	No
Field Description	Unique Salesforce identifier for the vendor record	The State agency generated ID for this record.	Investigation Start Date	The originating Program (either SNAP or WIC) for this sanction.	The WIC sanction type being documented in this record.	The SNAP sanction type assessed by FNS SNAP.
Valid Values	N/A	N/A	N/A	WIC, SNAP	Mandatory federal disqualification, CMP in lieu of disqualification, State agency sanction	SNAP reciprocal disqualification, CMP for hardship

Formatting/ Validation Notes	Field left blank intentionally	Field left blank intentionally	Used to lookup the existing investigation else create a new one	Where the sanction originated or authority to issue the sanction is traced	If origin= WIC, this field is required	If origin= SNAP, this field is required
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State Sanction	Disqualification Date	Disqualification Length	Date referred to SNAP	Date referred to WIC	CMP Amount	Administrative Fine Amount
Picklist	Date	Picklist	Date	Date	Number	Number
Custom Policy Setting will be entered from State agency data entry/input.	Date Length	See Valid Values below	Date Length	Date Length	9-digit, 2 decimal places	9-digit, 2 decimal places
Other (See Picklist Values below)	10/10/2020	10	1/1/2020	1/1/2020	2300	4000.25
No	No	No	No	No	No	No
SA sanctions can be set in the Policy Settings area.	The effective date of the disqualification.	The length of time of the disqualification.	The date the WIC SA referred this disqualification to FNS SNAP, if applicable.	The date FNS SNAP referred the disqualification to the WIC SA.	The total amount of any civil money penalty (CMP) assessed. Please update this field if the amount changes.	The total amount of any fine(s) assessed. Please update this field if the amount changes.
Custom picklist values will be entered from State agency data entry/input.	N/A	Permanent, 6 year, 3 year, 1 year, 1 months, 2 months, 3 months, 4 months, 5 months, 6 months, 7 months, 8 months, 9 months, 10 months, 11 months	N/A	N/A	N/A	N/A

Custom picklist values will be entered from State agency data entry/input.	Field left blank intentionally	Number of months	Field left blank intentionally	Field left blank intentionally	Field left blank intentionally	Field left blank intentionally
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