

Foxfire Report Request Form

Request Type:	Circle one	Detail	Summary	Cross-Tab	Labels
Request Name:	QACRTQRT				
Request Description:	Clients certified at your clinic for the current quarter				

Data Items (List Data displayed in report):

Card PAN
Client Name Last
Client Name First
Cert Date
Cert WIC Code
Client Status Code
Client Lock Code (DP/TR)
Cert Clinic Number

Filter Criteria (Limits data in report):

Client Status Code	is	Like	AC
Cert Date	is	Between	(Ask at Runtime)
Cert Clinic Number	is	Like	**
** your clinic number or Ask at Runtime			
<input checked="" type="checkbox"/> (X) Omit Duplicates			

Sort/Group (Sets order of data in report):

Client Name Last
OR
Card Pan *** (Sort by whatever filing method you use)

Output Details	Destination of report	Circle one	Printer	Screen	File
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Layout Options of Report:

Suppress repeat values	Number of columns
Number of Lines per Detail (single/double spacing)	Number of lines
Number of Spaces between columns	Number of spaces