

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
COMMODITY DISTRIBUTION PROGRAM
SCHOOL YEAR 2010 ADDENDUM
UPDATE & CHANGE REPORT FORM**

In accordance to CFR-7 (250.12) current agreements with the Arkansas Commodity Distribution Office are permanent and renewing the agreement is no longer necessary. However, for the contract to remain valid and binding, the Commodity Distribution Office must receive a *School Year Addendum* each school year and it must be signed by the Superintendent or Board Director, if commodity participation is to be continued. This form must be submitted by May 31, 2010.

NOTE: This form must be re-submitted if any of the following information changes during the school year.

The Commodity Office requires this form to be typed. To use this electronic form, please type requested information, print, obtain signature of School Superintendent or Agency Board Director and fax to (501)-371-1410.

RA# _____ School/Agency _____

School/Agency Mailing Address _____

School/Agency Street Address _____

Superintendent/Board Director Name/Title _____

Superintendent/Board Director E-Mail Address _____

School/Agency Phone Number _____

School/Agency Fax Number _____

Food Service Management Name/Title _____

Food Service Management Phone Number _____

Food Service Management Fax Number _____

Food Service Management Email Address _____

Is the Food Service Director available during June _____ yes _____ no July _____ yes _____ no

Does the school/agency have Food Storage Warehouse (not on the school property)? _____

If YES, list address _____

Number of kitchens using commodities _____ List addresses on letterhead and attach to this form.

SIGNATURES:

Name/Title of Person completing this form _____

Signature _____

Signature of Superintendent/Board Director _____

Date _____

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SUB-AGENT INFORMATION

Complete Sub-Agent section **ONLY** if you receive commodity deliveries at your location.

NOTE: If you pick-up commodity delivers at another location, you are not a Sub-Agent and do not need to fill out this section.

Sub-Agent _____ **Sub-Agent (SA) Number** _____

Sub-Agent Mailing Address _____

Sub-Agent Contact Emergency After-Hours Phone Number _____

Sub-Agent Dry Food Unload Address _____

Sub-Agent Cold/Freezer Unload Address _____

Sub-Agent Commodity Non-Delivery Dates

Schools/Agencies that receive commodity deliveries must input dates that facility cannot accept commodities for SY2011, into the Arkansas Commodity Distribution System (ACDS) under *Report -School Closings*, by May 31, 2010.

NOTE: Any changes on this information must be input into ACDS by the 23rd of month, prior to the month of delivery.

IMPORTANT: Deliveries will not be rescheduled if non-delivery dates are not input into ACDS.

SIGNATURES:

By signing this form, you are stating that you have supplied complete and accurate information pertaining to School/Agency information.

Signatures also indicates that the School/Agency has input the SY2011 non-delivery dates for the period of September 2010 through May 2011, into the Arkansas Commodity Distribution System (ACDS) under *Report -School Closings*.

Name/Title of Person completing this form _____

Signature _____

Signature of Superintendent/Board Director _____

Date _____