

ARKANSAS DEPARTMENT OF HUMAN SERVICES  
COMMODITY DISTRIBUTION PROGRAM

UPDATE & CHANGE REPORT

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Recipient Agency \_\_\_\_\_ Recipient Agency # \_\_\_\_\_

To request updates of contact information in the Arkansas Commodity Distribution System (ACDS) complete the following steps:

- In ACDS go to the screen(s) that require changes: Agency, Sub-Agent, User Information
- Type the correct information in the fields that are incorrect, print the screen, and circle change(s)

**Note:** This process does not save the changes you entered. Changes can only be completed by the Commodity Distribution Unit Staff.

Check the box(s) below on the screen(s) you are requesting changes.

- Agency Maintenance
- Sub-Agent Maintenance
- User Account Information

Fax a copy of the screen(s) and this form to the Commodity Distribution Unit at (501) 371-1410. You will be contacted by email when the changes have been made.

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

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Emergency #: \_\_\_\_\_