Sarah Huckabee Sanders
Governor

ARKANSAS DEPARTMENT OF AGRICULTURE
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Wes Ward
Secretary of Agriculture

FOOD AND NUTRITION DIVISON - FOOD DISTRIBUTION UNIT
RECIPIENT AGENCY CONTRACT ADDENDUM
agri.commodities@arkansas.gov

Recipient Agency _____ Recipient Agency # _____

In accordance to CFR-7 (250.4), Distributing Agency agreements with Recipient Agencies are permanent. In order for the contract to remain valid and binding, the Food Distribution Unit must receive a "Recipient Agency Addendum" if any changes occur to the information provided for the period July 1, 2023, through June 30, 2028, in the listed agreements:

7 CFR 250.4(c) Recipient agencies. The distributing agency must select recipient agencies, as defined in §250.2, to receive donated foods for distribution to eligible persons, or for use in meals provided to eligible persons, in accordance with eligibility criteria for specific programs or outlets and must enter into a written agreement with a recipient agency prior to distribution of donated foods to it. However, for child nutrition programs, the distributing agency must enter into agreements with those recipient agencies selected by the state administering agency to participate in such programs, prior to distribution of donated foods to such recipient agencies. The distributing agency must confirm such recipient agencies' approval for participation in the appropriate child nutrition program with the state administering agency.

- Arkansas Department of Agriculture, Food Distribution Unit, Recipient Agency Agreement for use of USDA foods

- Arkansas Department of Agriculture, Food Distribution Unit, Sub-Agent Agreement for receipt and distribution of USDA foods

To meet these requirements, complete this form and Update & Request for Access form.

Send both forms to the Food Distribution Unit.

By signing this form, you are stating that you have supplied complete and accurate information pertaining to the above noted Recipient Agency of USDA foods.

_____
Child Nutrition Director (Print Name) (Email Address)

Signature: X_____ Date: _____

_____
Superintendent/Agency Director (Print Name) (Email Address)

Signature: X_____ Date:_____