

Submission Studio

Form Name: FMS-388 (11-13)
 Form Description: State Issuance and Participation Estimates
 Program: SNAP Electronic Benefits Transfer Operational Project
 State: AR
 Agency Code: 0392501
 Agency Name: AR DEPT OF HUMAN SERVICES
 Program Time: March 2017
 Submission Type: Monthly
 Revision: 0
 Submission Status: New Submission

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State Issuance and Participation Estimates

Remarks

State Issuance and Participation Estimates	March 2017	February 2017	January 2017
2. Issuance (Dollars)			
a. Regular Ongoing	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. D-SNAP (New Households)	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Disaster Supplements (Ongoing SNAP Households)	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Replacements	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Total Issuance (2a + 2b + 2c + 2d + 2e)	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Number of Participating People			
a. Regular Ongoing	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. D-SNAP (New Participants)	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Disaster Supplements (Ongoing SNAP Participants)	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Replacements	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Total People (3a + 3b + 3c)	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Number of Participating Households			
a. Regular Ongoing	<input type="text"/>	<input type="text"/>	<input type="text"/>
b. D-SNAP (New Households)	<input type="text"/>	<input type="text"/>	<input type="text"/>
c. Disaster Supplements (Ongoing SNAP Households)	<input type="text"/>	<input type="text"/>	<input type="text"/>
d. Replacements	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
f. Total Households (4a + 4b + 4c)	<input type="text"/>	<input type="text"/>	<input type="text"/>
(g) Non-assistance (see special instructions for March and September reporting of this item)			
(h) Public assistance (see special instructions for March and September reporting of this item)			

Submission Studio

Form Name: FNS-388A (9-10)
Form Description: Project Area Issuance and Participation
Program: SNAP Electronic Benefits Transfer Operational Project
State: AR
Agency Code: 0392501
Agency Name: AR DEPT OF HUMAN SERVICES
Program Time: January 2017
Submission Type: Semi-Annual
Revision: 0
Submission Status: New Submission

Participation		4. Number of Persons		5. Number of Households		6. Total Actual Coupon Issuance
Participation						
Total of PA & NPA						
Project Area	Project Area Name	Public Assistance	Non-Public Assistance	Public Assistance	Non-Public Assistance	Coupon Issuance
0500101	ARKANSAS COUNTY					
0500301	ASHLEY COUNTY					
0500501	BAXTER COUNTY					
0500701	BENTON COUNTY					
0500901	BOONE COUNTY					
0501101	BRADLEY COUNTY					
0501301	CALHOUN COUNTY					
0501501	CARROLL COUNTY					
0501701	CHICOT COUNTY					
0501901	CLARK COUNTY					
0502101	CLAY COUNTY					
0502301	CLEBURNE COUNTY					
0502501	CLEVELAND COUNTY					
0502701	COLUMBIA COUNTY					
0502901	CONWAY COUNTY					
0503101	CRAIGHEAD COUNTY					
0503301	CRAWFORD COUNTY					
0503501	CRITTENDEN COUNTY					
0503701	CROSS COUNTY					
0503901	DALLAS COUNTY					
0504101	DESHA COUNTY					
0504301	DREW COUNTY					
0504501	FAULKNER COUNTY					
0504701	FRANKLIN COUNTY					
0504901	FULTON COUNTY					
0505101	GARLAND COUNTY					
0505301	GRANT COUNTY					
0505501	GREENE COUNTY					
0505701	HEMPSTEAD COUNTY					
0505901	HOT SPRING COUNTY					
0506101	HOWARD COUNTY					
0506301	INDEPENDENCE COUNTY					
0506501	IZARD COUNTY					
0506701	JACKSON COUNTY					
0506901	JEFFERSON COUNTY					
0507101	JOHNSON COUNTY					
0507301	LAFAYETTE COUNTY					
0507501	LAWRENCE COUNTY					
0507701	LEE COUNTY					
0507901	LINCOLN COUNTY					
0508101	LITTLE RIVER COUNTY					
0508301	LOGAN COUNTY					
0508501	LONOKE COUNTY					
0508701	MADISON COUNTY					
0508901	MARION COUNTY					
0509101	MILLER COUNTY					
0509301	MISSISSIPPI COUNTY					
0509501	MONROE COUNTY					
0509701	MONTGOMERY COUNTY					
0509901	NEVADA COUNTY					
0510101	NEWTON COUNTY					
0510301	OUACHITA COUNTY					
0510501	PERRY COUNTY					
0510701	PHILLIPS COUNTY					
0510901	PIKE COUNTY					
0511101	POINSETT COUNTY					
0511301	POLK COUNTY					
0511501	POPE COUNTY					
0511701	PRAIRIE COUNTY					
0511901	PULASKI COUNTY					
0512101	RANDOLPH COUNTY					
0512301	SAINTE FRANCIS COUNTY					
0512501	SALINE COUNTY					
0512701	SCOTT COUNTY					
0512901	SEARCY COUNTY					
0513101	SEBASTIAN COUNTY					
0513301	SEVIER COUNTY					
0513501	SHARP COUNTY					
0513701	STONE COUNTY					
0513901	UNION COUNTY					
0514101	VAN BUREN COUNTY					
0514301	WASHINGTON COUNTY					
0514501	WHITE COUNTY					
0514701	WOODRUFF COUNTY					
0514901	YELL COUNTY					
0515992	92-1 Field Operations					
0515996	96-1 Field Operations					