NOTICE OF FORM CHANGE NO. 15-106			DATE
			5/6/2015
To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM	: Forms Managemer	nt Unit
Listed below is information regarding a form change. On	nly applicable inforr	nation is shown.	
This notice updates your California Department of Socia	al Services (CDSS	) County Forms Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE PLEASE SEE BELOW F	OR LIST OF OBS	OLETE FORMS	
ORDER UNIT  Free Sold  DATE OF FORM	ESTIMATED PRICE REPLACES		INITIAL SUPPLY SENT Yes No
New Revised			⊠ Obsolete
REQUIRED FORM-  No Change Permitted Substitute Permitted Wit	th Prior DSS Appro	oval Recommende	d Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788	☐ OTHER: ☐ INTERNET: ☐ INTRANET:		
FORMS DISPOSITIO	N AND SPECIAL	INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY  Use until exhausted	Destroy		
USE NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use	new form effective	·	
use form in accordance with  All County Letter No.  Other (specify)			
FS 18 FS 20 FS 21 NA 1215 NA 1216 TEMP 2223 TEMP CA 600			
TEMP CA 601 TEMP QR 1 TEMP SAR 1			