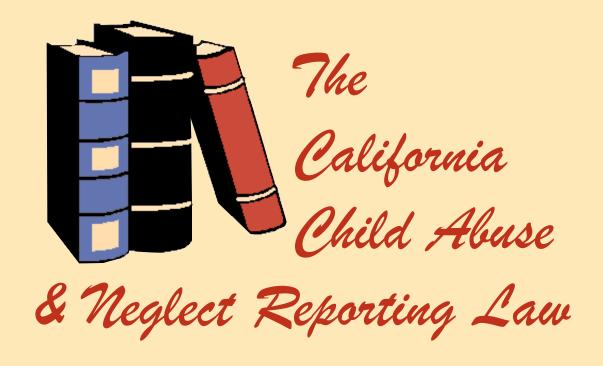
NOTICE OF FORM CHA	ANGE NO. 05-085		DATE 06/21/2005
TO: County Welfare Director Supply Clerk / Forms Coordinator			s Management Unit 657-1907
☐ Community Care Licens	•	☐ District Attorney ☐ Other	
Listed below is information re	garding a form change. Or	nly applicable information is	shown.
This notice updates your Dep	artment of Social Services	County Forms Catalog.	
FORM NUMBER AND TITLE PUB 132	ENG & SP (1/05) - The Ca	alifornia Child Abuse & Negl	ect Report Law
ORDER UNIT	⊠ Free ☐ Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT
	DATE OF FORM 1/05	REPLACES	Obsolete
REQUIRED FORM- No Change Permitted	REQUIRED FORM- Substitute Permitte	ed With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STORE Department of Social Service P.O. Box 980788 West Sacramento, CA 9579	ces Warehouse	Other:	
	FORMS DISPOSITION	ON AND SPECIAL INSTRU	CTIONS
SPOSITION OF OLD SUPPLY Use until exhausted		Destroy	
SE NEW FORM When supply available in DSS Warehouse		Use new form effecti	ve
USE FORM IN ACCORDANCE WITH All County Letter No.			
Other (specify) ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE		
You may obtain a copy of hor	th the English at http://www	dss cahwnet gov/ndf/PLIR	132 ndf_and Spanish translation_at

You may obtain a copy of both the English at http://www.dss.cahwnet.gov/pdf/PUB132.pdf, and Spanish translation at http://www.dss.cahwnet.gov/pdf/PUB132SP.pdf.

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 445-6778 or by electronic mail at LTS@dss.ca.gov.





Issues and Answers for Mandated Reporters

California Department of Social Services
Office of Child Abuse Prevention