NOTICE OF FORM CHANGE NO. 12-012						DATE	
						1/23/2012	
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Man	ageme	nt Unit	
Listed below is information re	garding a form	change. Or	nly applica	ble information is show	n.		
This notice updates your Ca	lifornia Departr	ment of Socia	al Service	s (CDSS) County Form	s Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	SOC 156A (-	_	reemen	t Nonminor Dependent	
ORDER UNIT MASTER ONLY	⊠ Free	Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT ☐ Yes ☐ No	
New □ Revised	DATE OF FORM 1/12		REPLACES			☐ Obsolete	
REQUIRED FORM- No Change Permitted REQUIRED FORM- Substitute Permitted With Prior DSS Approval Recommended Form							
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			⊠ INTE	☐ OTHER: ☐ INTERNET: ☐ INTRANET:			
	FORMS	DISPOSITIO	N AND S	PECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY Use until exhausted			☐ Des	stroy			
USE NEW FORM ☐ When supply available in DSS Warehouse			⊠ Us	☐ Use new form effective 1/20		2	
USE FORM IN ACCORDANCE WITH							
All County Letter No. AC	CL 11-77						
Other (specify)							
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE						
http://www.cdss.ca.gov/cdss	web/entres/forr	ms/English/S	OC156A.	pdf			

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.