NOTICE OF FORM CHANGE NO. 12-065				DATE
			07-13-2012	
To: County Welfare Director Supply Clerk / Forms Co Community Care Licens District Attorney Private and Public Adop Other	FROM: Forms	s Manageme	nt Unit	
Listed below is information regardi	ng a form change. On	ly applicable information is	shown.	
This notice updates your Californi	a Department of Socia	al Services (CDSS) County	Forms Catalo	og (PUB 69).
	24 (7/12) IFresh (CF) Program F	Request For Policy/Regula	tion Interpretat	tion
ORDER UNIT MASTER ONLY		ESTIMATED PRICE		INITIAL SUPPLY SENT Ves No
	DF FORM	REPLACES 4/12		☐ 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		☐ OTHER: ☐ INTERNET: ☐ INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY Use until exhausted		□ Destroy		
USE NEW FORM When supply available in DSS Warehouse		⊠ Use new form effec	tive <u>7/12</u>	
USE FORM IN ACCORDANCE WITH				
☐ All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FORM CHAP http://www.cdss.ca.gov/cdssweb/e		F24.pdf		
Page 2 was added.				

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.