NOTICE OF FORM CHANGE NO. 12-068			DATE	
			07-19-2012	
T0: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Management Unit	
	egarding a form change. O	 nly applicable information is show	n.	
		ial Services (CDSS) County Form		
FORM NUMBER, REVISION DATE AND TITLE	NA 1242 (4/11) Notice Of Action - Sanc	tions Budget		
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT	
MASTER ONLY	☐ Free ☐ Sold		☐ Yes ☐ No	
\square New \boxtimes Revised	DATE OF FORM 4/11	REPLACES 6/08	☐ Obsolete	
REQUIRED FORM- No Change Permitted	REQUIRED FORM- Substitute Permit	ted With Prior DSS Approval	Recommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		☐ OTHER:		
Department of Social Service P.O. Box 980788	ces Warehouse	⊠ INTERNET:		
West Sacramento, CA 95798-0788		☐ INTRANET:		
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTION	NS	
DISPOSITION OF OLD SUPPLY Use until exhausted		□ Destroy		
USE NEW FORM When supply available in DSS Warehouse		□ Use new form effective	4/11	
USE FORM IN ACCORDANCE WITH				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/NA1242.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.