NOTICE OF FORM CHANGE NO. 12-076		DATE
		09/10/2012
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Of District Attorney Private and Public Adoption Agencies Other	fices	nagement Unit
Listed below is information regarding a form chang	ge. Only applicable information is show	vn.
This notice updates your California Department o	f Social Services (CDSS) County Form	ns Catalog (PUB 69).
·	P) English and Spanish Stop Aid; Report Incomplete	
order unit MASTER ONLY ☐ Free ☐ So	estimated price	INITIAL SUPPLY SENT ☐ Yes ☐ No
☐ New ☐ Revised ☐ DATE OF FORM 7/12	REPLACES 7/04	☐ Obsolete
REQUIRED FORM- REQUIRED FORM- Substitute P	ermitted 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 DISPO	SITION AND SPECIAL INSTRUCTIO	INS
DISPOSITION OF OLD SUPPLY Use until exhausted	☐ Destroy	
USE NEW FORM ☐ When supply available in DSS Warehouse	☐ Use new form effective	refer to 12-35
USE FORM IN ACCORDANCE WITH All County Letter No. http://www.cdss.ca.gov. Other (specify)	/lettersnotices/entres/getinfo/acl/2012/	12-35.pdf
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
http://www.cdss.ca.gov/cdssweb/entres/forms/Eng	glish/NA960YQR.PDF	

http://www.cdss.ca.gov/cdssweb/entres/forms/Spanish/NA960YQRSP.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.