NOTICE OF FORM CHANGE NO. 12-089					DATE	
TO:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Mar	nagemei	nt Unit	
Listed below is information re	garding a form chang	ge. Only applica	able information is show	n.		
This notice updates your Cal	ifornia Department of	f Social Service	es (CDSS) County Form	s Catalo	g (PUB 69).	
ORDER UNIT  MASTER ONLY  □ Sold		ld ESTIMATED	R 7 Semi-Annual Eligibility/Status Repo		INITIAL SUPPLY SENT	
$oxed{oxed}$ New $oxed{oxed}$ Revised	DATE OF FORM 10/12	REPLACES			☐ Obsolete	
REQUIRED FORM- No Change Permitted Substitute Permitted UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			ed With Prior DSS Approval Recommended Form  OTHER:  INTERNET:  INTRANET:			
	FORMS DISPO	SITION AND S	SPECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY  Use until exhausted		☐ De	☐ Destroy			
USE NEW FORM  When supply available in DSS Warehouse			□ Use new form effective Refer to ACL 12-59			
USE FORM IN ACCORDANCE WITH  ☐ All County Letter No. htt ☐ Other (specify)	p://www.cdss.ca.gov/	/lettersnotices/d	entres/getinfo/acl/2012/	12-59.pd	f	
ADDITIONAL INFORMATION REGARDING FOR		rlich/SAD7A no	lf			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/SAR7A.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.