NOTICE OF FORM CHANGE NO. 13-015			DATE	
			02-27-2013	
District Attorney			agement Unit	
Listed below is information re	garding a form change. O	nly applicable information is show	n.	
This notice updates your Ca	ifornia Department of Soc	ial Services (CDSS) County Form	s Catalog (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	AR 3 (12/12) Mid-Year Status Report	For CalWORKs And CalFresh		
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT	
MASTER ONLY	⊠ Free ☐ Sold		☐ Yes ☒ No	
☐ New ☐ Revised	DATE OF FORM 12/12	REPLACES 9/12	☐ Obsolete	
REQUIRED FORM-  No Change Permitted	REQUIRED FORM-  Substitute Permit	ted With Prior DSS Approval	⊠ Recommended Form	
_		☐ OTHER:	OTHER:	
Department of Social Services Warehouse P.O. Box 980788		☑ INTERNET:	NTERNET:	
West Sacramento, CA 95798-0788		☐ INTRANET:		
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTIO	NS	
DISPOSITION OF OLD SUPPLY  Use until exhausted		⊠ Destroy		
USE NEW FORM  When supply available in DSS Warehouse		oxtimes Use new form effective	Refer to ACL 12-49E	
SE FORM IN ACCORDANCE WITH  SE All County Letter No. htt  ☐ Other (specify)	p://www.cdss.ca.gov/lette	rsnotices/EntRes/getinfo/acl/2012	/12-49E.pdf	
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/AR3.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.