NOTICE OF FORM CHANGE NO. 13-036					DATE	
					5/6/2013	
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Man	ageme	nt Unit	
Listed below is information reg	garding a form change. On	nly applica	ble information is show	'n.		
This notice updates your Calif	fornia Department of Socia	al Service	s (CDSS) County Form	s Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	CW 31 SAR (4/13) Receipt For Documents					
ORDER UNIT MASTER ONLY Free Sold		ESTIMATED PRICE			INITIAL SUPPLY SENT Yes No	
	DATE OF FORM 4/13	REPLACES	REPLACES		☐ Obsolete	
REQUIRED FORM- No Change Permitted UNLESS OTHERWISE SPECIFIED STOC Department of Social Service	ОТН		⊠R€	ecommended Form		
P.O. Box 980788 West Sacramento, CA 95798-0788			RNET:			
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS						
DISPOSITION OF OLD SUPPLY Use until exhausted			stroy			
USE NEW FORM When supply available in DSS Warehouse			☐ Use new form effective Refer		to 13-26	
USE FORM IN ACCORDANCE WITH ☐ All County Letter No. http ☐ Other (specify)	o://www.cdss.ca.gov/letters	snotices/E	EntRes/getinfo/acl/2013	/13-26.p	df	
ADDITIONAL INFORMATION REGARDING FORM						
http://www.cdss.ca.gov/cdssw	/eb/entres/torms/English/C	CW31SAR	.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.