NOTICE OF FORM CHANGE NO. 13-039						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 Mar	ageme	nt Unit	
Listed below is information re	garding a form o	change. Or	nly applica	ble information is show	'n.		
This notice updates your Ca	lifornia Departm	ent of Socia	al Service	s (CDSS) County Form	s Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	SAR 7 Adden	dum (4/13)					
		, ,		Eligibility Status Report	For Cas	sh Aid and CalFresh	
ORDER UNIT			ESTIMATED PRICE		INITIAL SUPPLY SENT		
MASTER ONLY						☐ Yes ☐ No	
□ Revised	DATE OF FORM 4/13		REPLACES			☐ Obsolete	
REQUIRED FORM-	REQUIRED FORM		134771 5				
☐ No Change Permitted		ute Permitt		rior DSS Approval	L R€	ecommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:				☐ OTHER:			
Department of Social Services Warehouse P.O. Box 980788				☐ INTERNET:			
West Sacramento, CA 95798-0788			☐ INTRANET:				
	FORMS D	ISPOSITIO	ON AND S	PECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY							
Use until exhausted			☐ Des	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. htt	tp://www.cdss.ca	a.gov/letter	snotices/E	EntRes/getinfo/acl/2013	/13-26.p	df	
Other (specify)							
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE						

http://www.cdss.ca.gov/cdssweb/entres/forms/English/SAR7ADDENDUM.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.

Tom mornation or forms not listed in the datalog, you may contact I we at midds@ds.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.