NOTICE OF FORM CHANGE NO. 13-045		DATE	
		05/06/2013	
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Manageme	ent Unit	
Listed below is information regarding a form change. Only applicable information is shown.			
This notice updates your California Department of Social Se	ervices (CDSS) County Forms Catal	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE SAWS 2A SAR (4/13)			
Rights, Responsibilities And Other Important Information			
ORDER UNIT ESTI	MATED PRICE	INITIAL SUPPLY SENT	
MASTER ONLY ☐ Free ☐ Sold		☐ Yes ⊠ No	
New ☐ Revised DATE OF FORM REPL	ACES	☐ Obsolete	
REQUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form			
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			
Department of Social Services Warehouse P.O. Box 980788	INTERNET:	TERNET:	
West Sacramento, CA 95798-0788	798-0788		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS			
DISPOSITION OF OLD SUPPLY ☐ Use until exhausted	Destroy		
USE NEW FORM ☐ When supply available in DSS Warehouse	\boxtimes Use new form effective Refe	r to 13-26	
SE FORM IN ACCORDANCE WITH ☐ All County Letter No. http://www.cdss.ca.gov/lettersnot ☐ Other (specify)	tices/EntRes/getinfo/acl/2013/13-26.	pdf	
ADDITIONAL INFORMATION REGARDING FORM CHANGE			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/SAWS2ASAR.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.