NOTICE OF FORM CHANGE NO. 13-050			DATE
			05-31-2013
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		FROM: Forms Management Unit	
Listed below is information re	egarding a form change. O	only applicable information is show	/n.
This notice updates your Ca	lifornia Department of Soc	cial Services (CDSS) County Form	ns Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	TEMP 2252 (5/13) State Law Changes The	e CalWORKs Earned Income Disr	egard
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	🛛 Free 🛛 Sold		🗌 Yes 🛛 No
□ New ⊠ Revised	DATE OF FORM 4/13	REPLACES 4/11	□ Obsolete
REQUIRED FORM-	REQUIRED FORM-		
No Change Permitted	Substitute Permit	tted With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		OTHER:	
Department of Social Services Warehouse			
P.O. Box 980788 West Sacramento, CA 95798-0788			
	FORMS DISPOSITI	ON AND SPECIAL INSTRUCTIO	NS
DISPOSITION OF OLD SUPPLY		⊠ Destroy	
USE NEW FORM		igtiade Use new form effective	Refer to ACL 13-42
USE FORM IN ACCORDANCE WITH All County Letter No. htt Other (specify)	tp://www.cdss.ca.gov/lette	rsnotices/EntRes/getinfo/acl/2013	3/13-42.pdf
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE		
http://www.cdss.ca.gov/cdss	web/entres/forms/English/	TEMP2252.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.