NOTICE OF FORM CHANGE NO. 13-057				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 Man	nagemei	nt Unit
Listed below is information re	garding a form change. O	nly applicat	ole information is show	'n.	
This notice updates your Cal	lifornia Department of Soc	ial Services	(CDSS) County Form	s Catalo	og (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	NA 300 (4/13) Notice Of Action - Contil	nuation Pag	ge - Recipient Financia	al Eligibili	ity Test
ORDER UNIT MASTER ONLY Free Sold		ESTIMATED P	ESTIMATED PRICE		INITIAL SUPPLY SENT
MASTER ONLY	DATE OF FORM	REPLACES			☐ Yes ☐ No
\square New $oxtimes$ Revised	4/13	9/11			☐ Obsolete
REQUIRED FORM-	REQUIRED FORM-				
No Change Permitted	Substitute Permit			L R€	ecommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse			☐ OTHER: ☑ INTERNET:		
P.O. Box 980788 West Sacramento, CA 9579	☐ INTR	☐ INTRANET:			
	FORMS DISPOSITION	ON AND SE	PECIAL INSTRUCTIO	NS	
DISPOSITION OF OLD SUPPLY Use until exhausted			troy		
USE NEW FORM ☐ When supply available in DSS Warehouse		⊠ Use	☐ Use new form effective Re		to ACI 13-42
SE FORM IN ACCORDANCE WITH SE All County Letter No. htt Other (specify)		rsnotices/E	ntRes/getinfo/acl/2013	/13-42.p	df
ADDITIONAL INFORMATION REGARDING FOR	KINI CHANGE				

http://www.cdss.ca.gov/cdssweb/entres/forms/English/NA300.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.