NOTICE OF FORM CHANGE NO. 13-099					DATE 09/09/2013
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other Adoption Agencies			FROM: Forms Man	ageme	nt Unit
Listed below is information re					(DUD 00)
This notice updates your Cal	·	g Informati	on For Issuance Of Cali	fornia D	epartment Of Social Services
ORDER UNIT					INITIAL SUPPLY SENT
MASTER ONLY	Free Sold	REPLACES			☐ Yes ☐ No
☐ New ☐ Revised	6/13	7/06			☐ Obsolete
REQUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		ОТН			
Department of Social Services Warehouse		⊠ INTERNET:			
P.O. Box 980788 West Sacramento, CA 95798-0788		☐ INTRANET:			
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		6/13	
USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify)					
ADDITIONAL INFORMATION REGARDING FORM CHANGE					
http://www.cdss.ca.gov/cdssweb/entres/forms/English/AD90.pdf					
FORM IS A MASTER ONLY.					
Camera-ready copies are currently available on the CDSS Internet.					
Contact Language Services for other languages at (916) 651-8876 or by e-mail at: LTS@dss.ca.gov.					