NOTICE OF FORM CHANGE NO. 13-108		DATE
		9/27/2013
To:     County Welfare Director     Supply Clerk / Forms Coordinator     Community Care Licensing District Offices     District Attorney     Private and Public Adoption Agencies     Other		nagement Unit
Listed below is information regarding a form change. Only applicable information is shown.		
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).		
FORM NUMBER, REVISION DATE AND TITLE PUB 339 (7/13) Foster	Care Ombudsman Brochure	
ORDER UNIT MASTER ONLY    Free   Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT  ☐ Yes ☐ No
☐ New ☐ Revised 7/13	REPLACES 1/04	☐ Obsolete
REQUIRED FORM-  No Change Permitted  REQUIRED FORM-  Substitute Permitted	itted With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788  West Sacramento, CA 95798-0788	☐ OTHER: ☐ INTERNET: ☐ INTRANET:	
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS		
DISPOSITION OF OLD SUPPLY  ☐ Use until exhausted	⊠ Destroy	
USE NEW FORM  When supply available in DSS Warehouse	oxtimes Use new form effective	immediately
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	/pub339.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.