NOTICE OF FORM CHANGE NO. 13-127			DATE
			10/10/2013
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		FROM: Forms Manage	ment 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).			
DFA 285-A1 (2/13) English and Spanish CalFresh Benefits			
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
SET	☐ Free ☐ Sold	.26 ENG / .18 SP	☐ Yes ⊠ No
☐ New ☐ Revised	DATE OF FORM 2/13	REPLACES 4/09	☐ Obsolete
REQUIRED FORM- No Change Permitted Required Form- Substitute Permitted With Prior DSS Approval Recommended Form			
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			
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		☐ Destroy	
USE NEW FORM When supply available in DSS Warehouse		\boxtimes Use new form effective \underline{w}	hen feasible
USE FORM IN ACCORDANCE WITH			
☐ All County Letter No.			
Other (specify)			
ADDITIONAL INFORMATION REGARDING FO			
http://www.cdss.ca.gov/cdssweb/entres/forms/English/DFA285A1.pdf			

http://www.cdss.ca.gov/cdssweb/entres/forms/Spanish/DFA285_A1SP.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.