NOTICE OF FORM CHA	ANGE NO. 13-138		DATE
			10-31-2013
TO:     County Welfare Director     Supply Clerk / Forms Coordinator     Community Care Licensing District Offices     District Attorney     Private and Public Adoption Agencies     Other		FROM: Forms Manageme	nt 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 FS 22 QR (10/13) Applying For Food Stamp Benefits			
ORDER UNIT	M <b></b> □ <b>0</b> -1-1	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	Free Sold	REPLACES	☐ Yes ☐ No
$\square$ New $\boxtimes$ Revised	10/13	12/06	☐ 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 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 ☐ Us		Use new form effective	
USE FORM IN ACCORDANCE WITH  All County Letter No.  Other (specify)			
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE		
FS 22 QR has been reinstated with revisions to Page 3, Reporting Section.			
Instructions to counties, use until January 1, 2014			
http://www.cdss.ca.gov/cdssweb/entres/forms/English/FS22QR.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.