NOTICE OF FORM CHANGE NO. 06-050 ERRATA					DATE	
					04-21-2006	
TO: County Welfare Director Supply Clerk / Forms Coordinator			FROM: Forms Management Unit (916) 657-1907			
Community Care Licensi			District Attorney			
Private and Public Adoption Agencies			Other			
Listed below is information re	garding a form change. Or	nly applica	ble information is show	wn.		
This notice updates your Dep	artment of Social Services	County F	orms Catalog.			
	(12/05) English and Spanis CalWORKs Learning Disa		creening and/or Evalua	ition		
ORDER UNIT MASTER ONLY	⊠ Free □ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT	
New Revised	date of form 12/05	REPLACES 8/02			Obsolete	
REQUIRED FORM-	REQUIRED FORM-	ed With Pr	rior DSS Approval	Rec	commended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			Other:			
	FORMS DISPOSITIO	ON AND S	PECIAL INSTRUCTION	ONS		
DISPOSITION OF OLD SUPPLY		🖂 De	stroy			
USE NEW FORM		Use new form effective DATE		OF THIS NOTICE		
All County Letter No. 06	-09					
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE					

Print form: 8 1/2 x 11, one sided

AS STATED IN ACL - DESTROY OLD STOCK

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 651-8876 or by electronic mail at LTS@dss.ca.gov.