NOTICE OF FORM CHANGE NO. 07-081			DATE	
			12/06/2007	
County Welfare Dir Supply Clerk / Forn Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices	FROM: Forms Manageme (916) 657-1907	ent 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 NA 692 (12/07) - Notice of Change - Cash Assistance Program For Immigrants (CAPI)				
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT	
MASTER ONLY	⊠ Free ☐ Sold		☐ Yes ⊠ No	
☐ New ☐ Revised	12/07	REPLACES 4/99	Obsolete	
REQUIRED FORM-  No Change Permitted  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		Use new form effective		
USE FORM IN ACCORDANCE WITH				
All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FORM CHANGE				
http://www.dss.cahwnet.gov/	http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/NA692.PDF			

Camera-ready copies are currently available on the CDSS Internet. Go to www.dss.cahwnet.gov/cdssweb/FormsandPu\_271.htm.

Form information on forms not listed in the catalog, you may contact FMU at (916) 657-1907 or by e-mail at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.