NOTICE OF FORM CHANGE NO. 07-014		DATE 02-13-2007
To: County Welfare Director Supply Clerk / Forms Coordinator	FROM: Forms Managem (916) 657-1907	ent Unit
☐ Community Care Licensing District Offices ☐ Private and Public Adoption Agencies	☐ District Attorney ☐ Other	
Listed below is information regarding a form change. Only This notice updates your Department of Social Services C		
FS 22 QR (12/06) English and Spanis Applying For Food Stamp Benefits	:h	
ORDER UNIT MASTER ONLY □ Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT ☐ Yes ☐ No
	REPLACES 7/06	Obsolete
REQUIRED FORM- ☐ No Change Permitted ☐ Substitute Permitted	I With Prior DSS Approval ☐ R	ecommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788	Other:	
FORMS DISPOSITION	N AND SPECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY 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/pdf/FS22QR.PDF		
http://www.dss.cahwnet.gov/pdf/FS22QRSP.pdf		

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.