NOTICE OF FORM CHANGE NO.	07-037		DATE 04/13/2007
TO: County Welfare Director Supply Clerk / Forms Coordina Community Care Licensing Dis District Attorney Private and Public Adoption Ag Other	trict Offices	FROM: Forms Ma (916) 657-	nagement Unit -1907
Listed below is information regarding a for	m change. Only applica	ble information is show	wn.
This notice updates your California Depart	ment of Social Services	(CDSS) County Form	s Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE AD 904B (	3/07) - Waiver of Rights	To Confidentiality For	Siblings - Under The Age Of 18
MASTER ONLY	Sold	PRICE	INITIAL SUPPLY SENT
New Revised 3/07	REPLACES		Obsolete
REQUIRED FORM-	titute Permitted With P	rior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788			ss.cahwnet.gov/pdf/ad904b.pdf
West Sacramento, CA 95798-0788		RANET:	
	S DISPOSITION AND S	SPECIAL INSTRUCTION	DNS
DISPOSITION OF OLD SUPPLY	De	stroy	
use New FORM ☐ When supply available in DSS Wareho	ouse 🛛 🖂 Us	e new form effective	3/07
USE FORM IN ACCORDANCE WITH  All County Letter No.  Other (specify)			
ADDITIONAL INFORMATION REGARDING FORM CHANGE			

http://www.dss.cahwnet.gov/pdf/ad904b.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.