NOTICE OF FORM CHANGE NO. 07 020					
NOTICE OF FORM CHANGE NO. 07-038					04/13/2007
To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies			FROM: Forms Ma (916) 657-		<u> </u>
Other  Listed below is information re	ılv applica	ble information is show	vn		
					(DLIP 60)
This notice updates your Cali	iornia Department of Social	Services	(CDSS) County Form	s Catalog	(РОВ 69).
FORM NUMBER, REVISION DATE AND TITLE	AD 67A (2/07) - Informat	ion About	The Birth Father		
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT  Yes No
☐ New ☐ Revised	DATE OF FORM 2/07	8/01			Obsolete
REQUIRED FORM- REQUIRED FORM-					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788		OTHER:			
		☐ INTERNET: http://www.dss.cahwnet.gov/pdf/ad67a.pdf			
West Sacramento, CA 95798-0788		☐ INTRANET:			
	FORMS DISPOSITION	N AND S	PECIAL INSTRUCTION	NS	
DISPOSITION OF OLD SUPPLY  Use until exhausted		☐ Des	stroy		
□ When supply available in DSS Warehouse		☑ Use new form effective 2/07			
USE FORM IN ACCORDANCE WITH					
All County Letter No.					
Other (specify)					
ADDITIONAL INFORMATION REGARDING FOR					
http://www.dss.cahwnet.gov/	pdf/ad67a.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.