NOTICE OF FORM CHANGE NO. 07-050						DATE 5/30/2007		
TO:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Management Unit (916) 657-1907				
Listed below is information re	garding a forr	n change. On	ly applica	ble information is show	n.			
This notice updates your Cali	fornia Departr	ment of Social	Services	(CDSS) County Forms	Catalog	(PUB 69).		
FORM NUMBER, REVISION DATE AND TITLE	LIC 311D (3 Forms/Rec	,	n Your Fa	amily Child Care Home				
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold			ESTIMATED PRICE			<sup>NT</sup> ☑ <b>N</b> o	
☐ New ⊠ Revised	3/07		REPLACES 6/05			☐ Obsolete	•	
REQUIRED FORM-  No Change Permitted	REQUIRED FO		d With Pr	ior DSS Approval	Reco	ommended Fo	orm	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788  West Sacramento, CA 95798-0788			☐ OTHER:  ☐ INTERNET: http://www.dss.cahwnet.gov/pdf/LIC311DSP.pdf ☐ INTRANET:					
	FORMS	DISPOSITIO	N AND S	PECIAL INSTRUCTIO	NS			
DISPOSITION OF OLD SUPPLY Use until exhausted			☐ Destroy					
USE NEW FORM  When supply available in DSS Warehouse			⊠Use	se new form effective Date of Notice 5/07				
USE FORM IN ACCORDANCE WITH								
<ul><li>☐ All County Letter No.</li><li>☐ Other (specify)</li></ul>								
ADDITIONAL INFORMATION REGARDING FOR	M CHANGE							

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.