NOTICE OF FORM CHANGE NO. 07-052					DATE 06-04-2007	
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 form change. Or	nly applica	ble information is show	vn.		
This notice updates your Calif	fornia Department of Socia	al Services	(CDSS) County Form	s Catalog	(PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	PUB 337 (1/04) English SFIS Brochure	and Span	ish			
		ESTIMATED PRICE				
	DATE OF FORM	REPLACES 1/05			☐ Yes ⊠ No	
REQUIRED FORM-	REQUIRED FORM-	ed With Pr	ior DSS Approval	Rec	commended Form	
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/pub337.pdf INTRANET: 			
	FORMS DISPOSITIO	ON AND S	PECIAL INSTRUCTIO	DNS		
DISPOSITION OF OLD SUPPLY			stroy			
USE NEW FORM		⊠ Use	⊠ Use new form effective imme		ately	
USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify)						
additional information regarding for The only change was to take						

http://www.dss.cahwnet.gov/pdf/PUB337SP.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.