NOTICE OF FORM CHANGE NO. 07-060						DATE 7/19/2007	
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Mana (916) 657-19		it Unit	
Listed below is information re	garding a for	m change. On	ly applica	ble information is shown.			
This notice updates your Calif	ornia Departi	ment of Socia	I Services	(CDSS) County Forms C	Catalog	(PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	PUB 13 (3/	07) Large Prir	nt - Your I	Rights Pamphlet			
	Free Sold			ESTIMATED PRICE		INITIAL SUPPLY SENT	
	DATE OF FORM		REPLACES 8/06				
REQUIRED FORM-			ed With Pi	rior DSS Approval		ommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788				□ OTHER: □ INTERNET: □ INTRANET:			
	FORMS		N AND S	PECIAL INSTRUCTION	S		
DISPOSITION OF OLD SUPPLY				stroy			
USE NEW FORM				e new form effective			
USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify)							
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE						

http://www.dss.cahwnet.gov/Forms/English/pub13ada.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.