NOTICE OF FORM CHANGE NO. 10-002		DATE
		01-07-2010
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Managemen	ut Unit
Listed below is information regarding a form change. Only	y applicable information is shown.	
This notice updates your California Department of Social	Services (CDSS) County Forms Catalog	g (PUB 69).
ORDER UNIT	nd Spanish ices Recipient/Employer Responsibility C	INITIAL SUPPLY SENT
MASTER ONLY Free Sold	REPLACES	☐ Yes ☐ No
	6/06	☐ Obsolete
REQUIRED FORM- No Change Permitted REQUIRED FORM- Substitute Permitted With Prior DSS Approval Recommended 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 DISPOSITION AND SPECIAL INSTRUCTIONS		
DISPOSITION OF OLD SUPPLY Use until exhausted	☐ Destroy	
USE NEW FORM When supply available in DSS Warehouse	☐ Use new form effective 09-69	
USE FORM IN ACCORDANCE WITH		
 ⊠ All County Letter No. 09-69 □ Other (specify) 		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/SOC332.pdf		
http://www.dss.cahwnet.gov/cdssweb/entres/forms/Spani	·	

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.
Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.