NOTICE OF FORM CHANGE NO. 10-012					DATE
					3/30/2010
TO: County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices		FROM: Forms Man	agemen	t Unit
Listed below is information re	garding a form change. Or	nly applica	able information is show	า.	
This notice updates your Ca	ifornia Department of Soci	al Service	es (CDSS) County Forms	s Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	PUB 401 (3/10) English Safety Surrendered Bab	•		poster s	
ORDER UNIT EACH	⊠ Free □ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT Yes No
☐ New ☐ Revised	DATE OF FORM 3/10	REPLACES 3/06			☐ Obsolete
REQUIRED FORM- No Change Permitted	REQUIRED FORM-	ed With F	Prior DSS Approval	□ Ra	commended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			HER: ERNET: RANET:		
	FORMS DISPOSITION	ON AND S	SPECIAL INSTRUCTION	NS	
DISPOSITION OF OLD SUPPLY Use until exhausted USE NEW FORM		☐ De	stroy		
☐ When supply available in DSS Warehouse		☐ Use new form effective 3/10			
USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify) AC	CIN I-19-10 (March 29, 201	0)			
ADDITIONAL INFORMATION REGARDING FOR http://www.dss.cahwnet.gov/		llish/pub4	01L.pdf		
http://www.dss.cahwnet.gov/	_	-	•		
http://www.dss.cahwnet.gov/	cdssweb/entres/forms/Spa	nish/PUB	401LSP.pdf		
http://www.dss.cahwnet.gov/	cdssweb/entres/forms/Spa	nish/PUB	401SP_P.pdf		
Camera-ready copies are cur http://www.dss.cahwnet.gov/ Form information on forms no	cdssweb/FormsandPu_271	1.htm.		s.ca.gov	

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

GEN 127 (3/02)