NOTICE OF FORM CHANGE NO. 10-032		DATE
1101101 01 1 011111 0111 110 110 100 10		07/20/2010
To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Managemer	nt Unit
Listed below is information regarding a form change. Only applicable information is shown.		
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).		
FORM NUMBER, REVISION DATE AND TITLE AD 1C (3/10) - In Superior Court Of The State Of California In And For The County Of		
ORDER UNIT  MASTER ONLY   Free Sold	MATED PRICE	INITIAL SUPPLY SENT
□ New □ Revised 3/10 Repl 3/0	ACES 8	Obsolete
REQUIRED FORM- REQUIRED FORM- REQUIRED FORM- REQUIRED FORM-		
No Change Permitted ☐ Substitute Permitted With Prior DSS Approval ☐ Recommended Form  UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: ☐ OTHER:		
Department of Social Convince Warehouse	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		
USE FORM IN ACCORDANCE WITH  All County Letter No.		
☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
The web-link below is for the online form to be used for reproduction.		
http://www.cdss.ca.gov/cdssweb/entres/forms/English/AD1C.PDF		

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.