NOTICE OF FORM CHANGE NO. 11-006		DATE
		01-28-2011
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Office District Attorney Private and Public Adoption Agencies Other	FROM: Forms Manag	gement Unit
Listed below is information regarding a form change.	Only applicable information is shown.	
This notice updates your California Department of S	ocial Services (CDSS) County Forms (Catalog (PUB 69).
In-Home Supportive S	· · · · · · · · · · · · · · · · · · ·	
MASTER ONLY	ESTIMATED PRICE	
□ New □ Revised □/11	replaces 10/09	
REQUIRED FORM- REQUIRED FORM- No Change Permitted 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 DISPOSI	TION AND SPECIAL INSTRUCTIONS	5
DISPOSITION OF OLD SUPPLY	⊠ Destroy	
USE NEW FORM	igtimes Use new form effective	see ACL 11-12
USE FORM IN ACCORDANCE WITH All County Letter No. http://www.cdss.ca.gov/let	ttersnotices/entres/getinfo/acl/2011/11-	12.pdf
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
Please refer to the ACL 11-12 for list of forms.		
Here is website to forms.		
http://www.cdss.ca.gov/cdssweb/PG168.htm#s		

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.