NOTICE OF FORM CHANGE NO. 11-029			DATE
			03-18-2011
To: County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices	FROM: Forms Mana	agement Unit
Listed below is information re	garding a form change. Or	nly applicable information is showr	1.
This notice updates your Cal	ifornia Department of Soci	al Services (CDSS) County Forms	s Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	DFA 377.7D3 (2/11)		
	` ,	Notice For Administrative Errors C	Only
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	⊠ Free □ Sold		☐ Yes ⊠ No
☐ New ☐ Revised	DATE OF FORM 2/11	REPLACES 9/10	☐ Obsolete
REQUIRED FORM-	REQUIRED FORM-		
No Change Permitted No Change Permitted		ted With Prior DSS Approval	☐ Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		☐ OTHER:	
Department of Social Services Warehouse P.O. Box 980788		⊠ INTERNET:	
West Sacramento, CA 95798-0788		☐ INTRANET:	
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTION	IS
DISPOSITION OF OLD SUPPLY Use until exhausted		⊠ Destroy	
USE NEW FORM When supply available in DSS Warehouse		☑ Use new form effective	see ACL 11-26
USE FORM IN ACCORDANCE WITH All County Letter No. htt Other (specify) ADDITIONAL INFORMATION REGARDING FOR		rsnotices/entres/getinfo/acl/2011/1	1-26.pdf
VARIATIONAL IN OUNING LOW LEGARDING LOL	AN OLIMINE		

http://www.cdss.ca.gov/cdssweb/entres/forms/English/DFA377.7D3.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.