NOTICE OF FORM CHA	DATE		
			03-18-2011
To:  County Welfare Dir Supply Clerk / Forn Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices	FROM: Forms Man	agement Unit
Listed below is information re	garding a form change. Or	nly applicable information is show	n.
This notice updates your Cal	ifornia Department of Soci	al Services (CDSS) County Form	s Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	• • •	resh Overissuance Notice For Ar Or Status Change From Inadvert	
ORDER UNIT	9	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	⊠ Free ☐ Sold		☐ Yes ⊠ No
☐ New ☐ Revised	DATE OF FORM 2/11	9/10	☐ Obsolete
REQUIRED FORM-  No Change Permitted	REQUIRED FORM-	ad With Prior DSS Approval	Recommended Form
No Change Permitted			
Department of Coolel Corvince Warehouse		□ OTTER.	
West Sacramento, CA 95798-0788		☐ INTRANET:	
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTIO	NS
DISPOSITION OF OLD SUPPLY  Use until exhausted		□ Destroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse		oxtimes Use new form effective	see ACL 11-26
Other (specify)		rsnotices/entres/getinfo/acl/2011/	'11-26.pdf
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE		

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