NOTICE OF FORM CHANGE NO. 11-036		DATE
		4/14/2011
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Manageme	nt Unit
Listed below is information regarding a form change. On	ly applicable information is shown.	
This notice updates your California Department of Socia	al Services (CDSS) County Forms Catalo	og (PUB 69).
	buse Central Index Check For State Lice	
	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY Free Sold	REPLACES	Yes No
□ New □ Revised 3/11	9/07	☐ Obsolete
REQUIRED FORM-		
	ed With Prior DSS Approval	ecommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse		
P.O. Box 980788	⊠ INTERNET:	
West Sacramento, CA 95798-0788		
FORMS DISPOSITIO	N AND SPECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY	⊠ Destroy	
use New FORM	$\boxtimes$ Use new form effective <u>3/11</u>	
All County Letter No.		
Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		

http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC198A.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.