NOTICE OF FORM CHANGE NO. 11-049				DATE
				4/14/2011
To: County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	FROM: Forms Man	agemer	nt Unit	
Listed below is information regarding a form change. Only applicable information is shown.				
This notice updates your Ca	lifornia Department of Soci	al Services (CDSS) County Form	s Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE TLR 9163A (3/11) Request For Live Scan Service For TrustLine Registry Applicants				
ORDER UNIT		ESTIMATED PRICE		INITIAL SUPPLY SENT
MASTER ONLY	⊠ Free □ Sold			☐ Yes
☐ New ☐ Revised	DATE OF FORM 3/11	REPLACES 11/08		☐ Obsolete
REQUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form				
UNLESS OTHERWISE SPECIFIED STO	CK MAINTAINED AT:	☐ OTHER:		
Department of Social Services Warehouse P.O. Box 980788		⊠ INTERNET:		
West Sacramento, CA 95798-0788		☐ 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	3/11	
USE FORM IN ACCORDANCE WITH				
All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/TLR9163A.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.