NOTICE OF FORM CHANGE NO. 11-076					DATE	
		T			07-07-2011	
To:  County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other		FROM: Forms Mar	nagemei	nt Unit		
Listed below is information re	garding a form change. Or	nly applicable	e information is show	n.		
This notice updates your Cal	lifornia Department of Soci	al Services (	(CDSS) County Form	ns Catalo	g (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	NA 1267 (4/11) CalFresh NA 1268 (4/11) CalFresh	_	_		-	
ORDER UNIT EST		ESTIMATED PRI	<u> </u>		INITIAL SUPPLY SENT	
MASTER ONLY	TER ONLY Sold  DATE OF FORM REPLACES			☐ Yes ☐ No		
	4/11	REPLACES			☐ Obsolete	
REQUIRED FORM-  No Change Permitted	REQUIRED FORM-  Substitute Permitt	ed With Pric	or DSS Approval		ecommended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			OTHER:			
Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			□ INTERNET:			
		☐ INTRA	☐ INTRANET:			
	FORMS DISPOSITION	ON AND SPI	ECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY  Use until exhausted  Destroy						
use NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use new form effective see 11-22					11-22	
USE FORM IN ACCORDANCE WITH  All County Letter No. 1  Other (specify)	1-22					
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE					
http://www.cdss.ca.gov/cdssv	web/entres/forms/English/N	NA1267.pdf				
http://www.cdss.ca.gov/cdssv	web/entres/forms/English/N	NA1268.pdf				
http://www.cdss.ca.gov/letter	snotices/entres/getinfo/acl/	/2011/11-22.	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.