NOTICE OF FORM CHANGE NO. 11-080				DATE	
				07-19-2011	
District Attorney		FROM: Forms Management Unit		nt Unit	
Listed below is information re	egarding a form change. C	Only applicable information is show	vn.		
This notice updates your Ca	lifornia Department of Soc	cial Services (CDSS) County Form	ns Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	CW 2184 (7/11) CalWORKs 48-Month T	Fime Limit			
		ESTIMATED PRICE		INITIAL SUPPLY SENT	
MASTER ONLY	Free Sold	REPLACES			
\Box New \Box Revised	7/11	4/11		☐ Obsolete	
REQUIRED FORM-	REQUIRED FORM-				
		tted 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 DISPOSITI	ON AND SPECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY		⊠ Destroy			
JSE NEW FORM		$oxed{\boxtimes}$ Use new form effective	\boxtimes Use new form effective refer to 11-50		
USE FORM IN ACCORDANCE WITH All County Letter No. ht Other (specify)	tp://www.cdss.ca.gov/lette	ersnotices/entres/getinfo/acl/2011/	11-50.pc	lf	
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE				
http://www.cdss.ca.gov/cdss	web/entres/forms/Enalish/	/CW2184.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.