NOTICE OF FORM CHANGE NO. 11-085		DATE
		08-18-2011
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Manageme	ent Unit
Listed below is information regarding a form change. On	ly applicable information is shown.	
This notice updates your California Department of Social	al Services (CDSS) County Forms Catal	log (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE DFA 377.7D3 (6/11) Eng CalFresh Overissuance I	lish and Spanish Notice For Administrative Errors Only	
MASTER ONLY	ESTIMATED PRICE	INITIAL SUPPLY SENT
□ New □ Revised 6/11	REPLACES 2/11	□ Obsolete
REQUIRED FORM- No Change Permitted Substitute Permitted	ed With Prior DSS Approval \Box R	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse		
P.O. Box 980788 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>date</u>	of this notice
USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
http://www.cdss.ca.gov/cdssweb/entres/forms/English/D	FA377.7D3.PDF	

http://www.cdss.ca.gov/cdssweb/entres/forms/Spanish/DFA377_7D3SP.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.