NOTICE OF FORM CHANGE NO. 11-100				DATE
				10/07/2011
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		FROM: For	ms Managemer	nt Unit
Listed below is information regarding a form change. Only applicable information is shown.				
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).				
FORM NUMBER, REVISION DATE AND TITLE AD 930 (7/11) Independent Adoption Placement Agreement Transmittal				
ORDER UNIT MASTER ONLY	⊠ Free □ Sold	ESTIMATED PRICE		INITIAL SUPPLY SENT Yes No
☐ New ☐ Revised	DATE OF FORM 7/11	REPLACES 5/99		Obsolete
REQUIRED FORM- REQUIRED FORM-				
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		☐ OTHER: ☑ INTERNET: ☐ INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY Use until exhausted		□ Destroy		
USE NEW FORM When supply available in DSS Warehouse		oxtimes Use new form eff	ective immed	liately
USE FORM IN ACCORDANCE WITH All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE			
http://www.cdss.ca.gov/cdss	web/entres/forms/English/ <i>F</i>	AD930.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.