NOTICE OF FORM CHA			DATE		
					11/16/2011
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Man	agemer	nt Unit
Listed below is information re-	garding a form change. Or	nly applica	able information is show	'n.	
This notice updates your Cali	ifornia Department of Soci	ial Service	es (CDSS) County Form	s Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	PUB 456 (3/11) English Important Information Fo	•			
ORDER UNIT MASTER ONLY	⊠ Free □ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT
🛛 New 🗌 Revised	DATE OF FORM 3/11	REPLACES			☐ Obsolete
REQUIRED FORM-	REQUIRED FORM-	ted With P	rior DSS Approval	Re	commended 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 DISPOSITIO	ON AND S	SPECIAL INSTRUCTIO	NS	
DISPOSITION OF OLD SUPPLY		De:	stroy		
USE NEW FORM		$oxed{\boxtimes}$ Use new form effective imm		immed	liately
All County Letter No. Other (specify)					
ADDITIONAL INFORMATION REGARDING FOR	M CHANGE				
http://www.cdss.ca.gov/cdssv		PUB456.p	df		

http://www.cdss.ca.gov/cdssweb/entres/forms/Spanish/PUB456SP.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.