

NOTICE OF FORM CHANGE NO. 14-078

DATE
09/22/2014

Table with TO: County Welfare Director, Supply Clerk / Forms Coordinator, Community Care Licensing District Offices, District Attorney, Private and Public Adoption Agencies, Other. FROM: Forms Management 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 with fields: FORM NUMBER, REVISION DATE AND TITLE (TEMP 2250 (8/14) State Law Changes Maximum Aid Payment (MAP) Levels for Cash Aid Recipients); ORDER UNIT (MASTER ONLY); ESTIMATED PRICE; INITIAL SUPPLY SENT (Yes/No); DATE OF FORM (9/14); REPLACES (1/14) TEMP 2250 Form; REQUIRED FORM- (Substitute Permitted With Prior DSS Approval); UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse.

FORMS DISPOSITION AND SPECIAL INSTRUCTIONS

Form with fields: DISPOSITION OF OLD SUPPLY (Destroy); USE NEW FORM (Use new form effective); USE FORM IN ACCORDANCE WITH (All County Letter No. http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2014/14-58.pdf).

ADDITIONAL INFORMATION REGARDING FORM CHANGE

http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2014/14-58.pdf

http://www.cdss.ca.gov/cdssweb/entres/forms/English/TEMP2250.pdf

The form TM44-315H (9/14) is a NEW form:

http://www.cdss.ca.gov/cdssweb/NoticeofAc_2383.htm

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.