NOTICE OF FORM CHANGE NO. 15-76					DATE
NOTICE OF FORM CHANGE NO. 19-70					DATE 03/11/2015
					03/11/2013
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms	s 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	TEMP 3005 (12/14) - C	hanges Fo	r People With A P	rior Felony Dru	ug Conviction
ORDER UNIT	⊠ Free ☐ Sold		ESTIMATED PRICE		INITIAL SUPPLY SENT Yes No
⊠ New ☐ Revised	DATE OF FORM 12/14	REPLACES			Obsolete
REQUIRED FORM- No Change Permitted	REQUIRED FORM-	lith Prior D	SS Approval	Recommended	d Form
No Change Permitted Substitute Permitted With Pruncess otherwise specified Stock Maintained at:			THER:		
Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		⊠ INTE			
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS					
Use until exhausted Destroy					
USE NEW FORM ☐ When supply available in DSS Warehouse ☐ Use new form effective				Refer	to ACL
September 2 Septem	I-100				
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE				
http://www.cdss.ca.gov/cdssweb/entres/forms/English/Temp3005.pdf http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2014/14-100.pdf					
http://www.cdss.ca.gov/lette	ersnotices/EntRes/getinfo	/acl/2014/1	4-100.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.