NOTICE OF FORM CHANGE NO. 16-038				DATE	
110110E 01 1 01/111 011/110E 110. 10-030				03/28/2016	
			1	03/26/2016	
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. Only applicable information is shown.					
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).					
CW 2213 (10/15) - Response To Request To Inspect Case Record CalWORKs, CalFresh, TCVAP, And Refugee Programs					
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE		INITIAL SUPPLY SENT ☐ Yes ☒ No	
☐ New X Revised	DATE OF FORM 10/15	PEPLACES 9/14		Obsolete	
REQUIRED FORM- REQUIRED FORM- REQUIRED FORM- REQUIRED FORM- REQUIRED FORM-					
No Change Permitted					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		⊠ INTI	☐ 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 ☐ Use new form effective ☐ immediately					
All County Letter No.					
Other (specify)					
ADDITIONAL INFORMATION REGARDING FORM CHANGE					
http://www.cdss.ca.gov/cdssweb/entres/forms/English/CW2213.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.