| NOTICE OF FORM CHANGE NO. 16-056                                                                                         |                            |              |                                         |              | DATE 5/16/2016              |  |
|--------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------|-----------------------------------------|--------------|-----------------------------|--|
| TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney |                            |              | FROM:<br>Forms N                        | Managemei    | 1                           |  |
|                                                                                                                          | Adoption Agencies          |              |                                         |              |                             |  |
| Listed below is information re                                                                                           | egarding a form change. C  | Only applica | ble information is sh                   | nown.        |                             |  |
| This notice updates your Ca                                                                                              | lifornia Department of Soc | cial Service | s (CDSS) County Fo                      | orms Catalo  | g (PUB 69).                 |  |
| FORM NUMBER, REVISION DATE AND TITLE                                                                                     | LIC 9219A (3/16) - Cris    | is Day Car   | e Sign-In                               |              |                             |  |
| ORDER UNIT MASTER ONLY                                                                                                   | MASTER ONLY Sold           |              |                                         |              | INITIAL SUPPLY SENT  Yes No |  |
| ☐ New ☐ Revised  REQUIRED FORM-                                                                                          | ED FORM- REQUIRED FORM-    |              |                                         |              | Obsolete                    |  |
| No Change Permitted                                                                                                      | Substitute Permitted W     |              | • • • • • • • • • • • • • • • • • • • • | ecommende    | d Form                      |  |
| Department of Social Servi<br>P.O. Box 980788                                                                            | IER:<br>ERNET:             |              |                                         |              |                             |  |
| West Sacramento, CA 95798-0788                                                                                           |                            |              |                                         |              |                             |  |
|                                                                                                                          | FORMS DISPOSIT             | ION AND S    | SPECIAL INSTRUCT                        | TIONS        |                             |  |
| DISPOSITION OF OLD SUPPLY  Use until exhausted                                                                           |                            | ⊠ De:        | stroy                                   |              |                             |  |
| USE NEW FORM  When supply available in                                                                                   | n DSS Warehouse 🔀 Us       | se new form  | n effective                             | immed        | diately                     |  |
| USE FORM IN ACCORDANCE WITH                                                                                              |                            |              |                                         |              |                             |  |
| <ul><li>All County Letter No.</li><li>Other (specify)</li></ul>                                                          |                            |              |                                         |              |                             |  |
| ADDITIONAL INFORMATION REGARDING FO                                                                                      | RM CHANGE                  |              |                                         |              |                             |  |
|                                                                                                                          |                            |              |                                         |              |                             |  |
| http://www.cdss.ca.gov/cdss                                                                                              | web/entres/forms/English/  | /lic9219a.po | df                                      |              |                             |  |
|                                                                                                                          |                            |              |                                         |              |                             |  |
|                                                                                                                          |                            |              |                                         |              |                             |  |
| Camera-ready copies are cu<br>http://www.dss.cahwnet.gov/<br>Form information on forms n                                 | cdssweb/FormsandPu_27      | 71.htm.      |                                         | ලාdss.ca.gov |                             |  |
|                                                                                                                          |                            |              |                                         |              |                             |  |

GEN 127 (3/02)