NOTICE OF FORM CHANGE NO. 16-063					DATE
					5/31/2016
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms	Managemer	nt Unit
Listed below is information re	egarding a form change.	Only applica	ble information is	shown.	
This notice updates your Ca	lifornia Department of S	ocial Service	s (CDSS) County	Forms Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	PUB 341 (4/16) - A	doptions Se	rvices Bureau Ca	areer Opport	unities
DRDER UNIT		ESTIMATED I	ESTIMATED PRICE		INITIAL SUPPLY SENT
MASTER ONLY	⊠ Free ☐ Sold				☐ Yes ☒ No
☐ New X Revised	DATE OF FORM 4/16	REPLACES 9/05			Obsolete
REQUIRED FORM-	REQUIRED FORM-				
No Change Permitted	Substitute Permitted			Recommende	d Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			ER:		
Department of Social Services Warehouse P.O. Box 980788			RNET:		
West Sacramento, CA 95798-0788			RANET:		
	FORMS DISPOSI	TION AND S	PECIAL INSTRU	CTIONS	
Use until exhausted		⊠ Des	stroy		
USE NEW FORM When supply available in	n DSS Warehouse 🛛 L	Jse new form	effective	Imme	diately
USE FORM IN ACCORDANCE WITH					
All County Letter No.					
Other (specify)					
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE				

http://www.cdss.ca.gov/cdssweb/entres/forms/English/PUB341.pdf