NOTICE OF FORM CHANGE NO. 16-079				DATE
				07/21/2016
To:     County Welfare Director     Supply Clerk / Forms Coordinator     Community Care Licensing District Offices     District Attorney     Private and Public Adoption Agencies     Other			FROM: Forms Manageme	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).				
SOC 2282 (6/16) In-Home Supportive Services Program Notice To Provider Upholding Third Violation (90-Day Suspension Of Eligibility) For Exceeding Workweek And/Or Travel Time				
ORDER UNIT MASTER ONLY	⊠ Free  Sold	ESTIMATED	PRICE	INITIAL SUPPLY SENT  Yes X No
X New ☐ Revised	DATE OF FORM 6/16	REPLACES 5/16		☐ Obsolete
REQUIRED FORM- No Change Permitted Substitute Permitted With UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			SS Approval	d Form
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY  Use until exhausted		☐ Des	stroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use new form effective Refer to ACL				
USE FORM IN ACCORDANCE WITH				
ADDITIONAL INFORMATION REGARDING FOR			/0040/40 F0 - If	
ACL 16-53 - http://inet.dss.ca.gov/wm7_landn/EntRes/getinfo/acl/2016/16-53.pdf  http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC2282.pdf SOC 2282 (5/16) - For Posting Info Only SOC 2282 (6/16) In-Home Supportive Services Program Notice To Provider Upholding Third Violation (90-Day Suspension Of Eligibility) For Exceeding Workweek And/Or Travel Time Limits				
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.				