ORDER UNIT       ESTIMATED PRICE         MASTER ONLY       Image: Construction of price         Image: Date of form       Replaces         Image: Date of form       Required form-         Image: Date of form       Recomment         Image: Date of form       Image: Date of form-         Image: Dat	alog (PUB 69).
County Welfare Director       Forms Managen         Supply Clerk / Forms Coordinator       Forms Managen         Community Care Licensing District Offices       District Attorney         Private and Public Adoption Agencies       Other         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 Cat         FORM NUMBER, REVISION DATE AND TITLE       CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       K Free       Sold         MASTER ONLY       Free       Sold         DATE OF FORM       REPLACES         8/15       8/15         REQUIRED FORM-       REQUIRED FORM-         No Change Permitted       Substitute Permitted With Prior DSS Approval       Recomment         UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:       OTHER:       OTHER:	alog (PUB 69).
This notice updates your California Department of Social Services (CDSS) County Forms Cat         FORM NUMBER, REVISION DATE AND TITLE       CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         Image: ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         Image: ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         Image: ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         Image: ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Impo         Image: ORDER UNIT       Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipient Englished Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipient Englished Image: CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipient Englis	
FORM NUMBER, REVISION DATE AND TITLE       CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Importance         ORDER UNIT       Image: Solid         MASTER ONLY       Image: Free image: Solid         Image: Date of Form       Image: Solid         Image: Date of Form       Replaces         Image: Solid Form       Replaces         Image: Solid Form       Required Form         Image: Solid Form       Substitute Permitted With Prior DSS Approval         Image: Solid Form       Image: Solid Form         Image: Solid Form	
FORM NUMBER, REVISION DATE AND TITLE       CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Importance         ORDER UNIT       Image: Sold         MASTER ONLY       Image: Free image: Sold         DATE OF FORM       REPLACES         New       Revised         8/16       8/15         REQUIRED FORM-       REQUIRED FORM-         No Change Permitted       Substitute Permitted With Prior DSS Approval         UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:       OTHER:	
MASTER ONLY       Image: Free       Sold         Image: Description of the second	ortant - Please Read
Image: Date of Form       Replaces         Box       B/16         Required Form-       Required Form-         Image: Date of Form-       Image: Date of Form-         Image: Date of Form-       Imag	
New       Revised       8/16       8/15         REQUIRED FORM-       REQUIRED FORM-       Recomment         No Change Permitted       Substitute Permitted With Prior DSS Approval       Recomment         UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:       OTHER:	Yes XNo
No Change Permitted Substitute Permitted With Prior DSS Approval Recomment UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Depertment of Second Services Workhouse	Obsolete
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:	
Department of Social Social Social Watcheves	ided Form
P.O. Box 980788	
West Sacramento, CA 95798-0788	
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY	
use New FORM ☐ When supply available in DSS Warehouse X Use new form effective Oct	tober 1, 2016
All County Letter No.	
Other (specify)	
ADDITIONAL INFORMATION REGARDING FORM CHANGE	

http://www.cdss.ca.gov/cdssweb/entres/forms/English/CF11.pdf CF 11 (8/16) ENG/SP - Notice To All CalFresh Recipients Important - Please Read

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.