NOTICE OF FORM CHANGE NO. 16-122				DATE 10/31/2016	
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Managen	nent Unit	
Listed below is information re	garding a form change. On	nly applica	able information is shown.		
This notice updates your Cal	ifornia Department of Socia	al Service	es (CDSS) County Forms Cat	alog (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	CW 2184 (8/16) - CalWC CW 2189 (3/15) - Notice		alWORKs Time Limit - 42nd	Month on Aid	
New Revised REQUIRED FORM- No Change Permitted	DATE OF FORM Varies REQUIRED FORM- Substitute Permitted Wit	REPLACES	SS Approval 🗌 Recommer	Obsolete	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:					
Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788			INTERNET:		
	FORMS DISPOSITIC	N AND S	PECIAL INSTRUCTIONS		
DISPOSITION OF OLD SUPPLY		De	stroy		
USE NEW FORM	DSS Warehouse 🛛 Use	new form	n effective Re	fer to ACL	
USE FORM IN ACCORDANCE WITH All County Letter No. 16 Other (specify) ADDITIONAL INFORMATION REGARDING FOF http://www.cdss.ca.gov/letter	RM CHANGE	I/2016/16	-76.pdf		
http://www.cdss.ca.gov/cdssv CW 2184 (8/16) - CalWORKs		W2184.F	PDF		
http://www.cdss.ca.gov/cdssv CW 2189 (3/15) - Notice of ye					
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 f	or other languages at (916) 651-887	′6 or by e-mail at LTS@dss.c	a.gov.	