NOTICE OF FORM CH	ANGE NO. 16-133		DATE
			12/7/2016
To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			s Management Unit
Listed below is information re	egarding a form change.	Only applicable information is	shown.
This notice updates your Ca	lifornia Department of S	ocial Services (CDSS) County	Forms Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	ARC 1A (11/16) Right	ts, Responsibilities, And Other	Important Information
ORDER UNIT	M.E. O.L.	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	Free Sold	REPLACES	☐ Yes ☒ No
New □ Revised	11/16	11.010	☐ Obsolete
REQUIRED FORM-  REQUIRED FORM-			
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		OTHER:	
Department of Social Services Warehouse P.O. Box 980788			
West Sacramento, CA 95798-0788		☐ INTRANET:	
	FORMS DISPOSI	TION AND SPECIAL INSTRU	ICTIONS
DISPOSITION OF OLD SUPPLY		<b>~</b>	
Use until exhausted		Destroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use new form effective  immediately			
USE FORM IN ACCORDANCE WITH			
All County Letter No.			
Other (specify)			
ADD 4.4.4.4.6. Distant Day			
ARC 1A (11/16) Rights, Res	ponsibilities, And Otner	important information	
http://www.cdss.ca.gov/cdssweb/entres/forms/English/ARC1A.pdf			

Check on the Internet to see if forms are available at www.dss.cahwnet.gov.

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907. Contact Language Services for other languages at (916) 445-6778.