NOTICE OF FORM CHANGE NO. 16-145

DATE
12/1/2016

TO:
County Welfare Director
Supply Clerk / Forms Coordinator
Community Care Licensing District Offices
District Attorney
Private and Public Adoption Agencies
Other

FROM:
Forms Management 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).

FORM NUMBER, REVISION DATE AND TITLE
ARC 2 (11/16) - Redetermination: Statement Of Facts Supporting Eligibility For The Approved

ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	☒ Free ☐ Sold		☐ Yes ☒ No
☒ New ☐ Revised	DATE OF FORM 11/16	REPLACES	☐ **Obsolete**

REQUIRED FORM-
☒ No Change Permitted

REQUIRED FORM-
☐ Substitute Permitted With Prior DSS Approval ☐ Recommended Form

UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:
Department of Social Services Warehouse
P.O. Box 980788
West Sacramento, CA 95798-0788

☐ OTHER:
☐ INTERNET:
☐ INTRANET:

FORMS DISPOSITION AND SPECIAL INSTRUCTIONS

DISPOSITION OF OLD SUPPLY
☐ 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)

ADDITIONAL INFORMATION REGARDING FORM CHANGE
ARC 2 (11/16) - Redetermination: Statement Of Facts Supporting Eligibility For The Approved

http://www.cdss.ca.gov/cdssweb/entres/forms/English/ARC2.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.