NOTICE OF FORM CHANGE NO. 13-014					DATE	
					02-27-2013	
To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Man	agemer	nt Unit	
Listed below is information re	garding a form change. Or	nly applica	ble information is show	n.		
This notice updates your Cal	ifornia Department of Soci	ial Service	s (CDSS) County Form	s Catalo	g (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	AR 2 (12/12) Reporting Changes For	CalWORK	s And CalFresh			
ORDER UNIT	UNIT ESTIMATED PRICE			INITIAL SUPPLY SENT		
MASTER ONLY	⊠ Free □ Sold				☐ Yes ⊠ No	
☐ New ☐ Revised	DATE OF FORM 12/12	REPLACES 9/12			Obsolete	
REQUIRED FORM-	REQUIRED FORM-	C. J.M.C. D.	···			
✓ No Change Permitted       ☐ Substitute Permitted With Prior DSS Approval       ☐ Recommended Form						
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			OTHER:			
Department of Social Services Warehouse P.O. Box 980788			☐ INTERNET:			
West Sacramento, CA 95798-0788			☐ INTRANET:			
	FORMS DISPOSITION	ON AND S	PECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY  ☐ Use until exhausted ☐ Destro			stroy			
USE NEW FORM  ☐ When supply available in DSS Warehouse			☐ Use new form effective		refer to ACL 12-49E	
SE FORM IN ACCORDANCE WITH  ☐ All County Letter No. htt ☐ Other (specify)	p://www.cdss.ca.gov/letter	rsnotices/E	intRes/getinfo/acl/2012	/12-49E.	pdf	
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE					

http://www.cdss.ca.gov/cdssweb/entres/forms/English/AR2.pdf

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.