NOTICE OF FORM CHANGE NO. 13-017		DATE
NOTICE OF FORM CHANCE NO. 13-017		3/5/2013
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other Public and Private Adoption Agencies	FROM: Forms Manageme	nt 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  Notice Of Action NA 791 (10/12) REQUIRED FORM - SUBSTITUTE PERMITTED AAP - APPROVAL/DENIAL/CHANGE  ORDER UNIT  DESTIMATED PRICE  INITIAL SUPPLY SENT		
MASTER ONLY	DPRICE	Yes No
☐ New ☐ Revised ☐ DATE OF FORM ☐ REPLACES		☐ Obsolete
REQUIRED FORM-  No Change Permitted  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  UNTERNET:  INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS		
DISPOSITION OF OLD SUPPLY	estroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use new form effective		
USE FORM IN ACCORDANCE WITH  ☐ All County Letter No.  ☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE  Notice Of Action NA 791 (10/12) REQUIRED FORM - SUBSTITUTE PERMITTED AAP - APPROVAL/DENIAL/CHANGE		

Notice Of Action NA 791 (10/12) REQUIRED FORM - SUBSTITUTE PERMITTED AAP - APPROVAL/DENIAL/CHANGE http://www.cdss.ca.gov/cdssweb/entres/forms/English/NA791.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.