NOTICE OF FORM CHANGE NO. 13-023		
		03-14-2013
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Office District Attorney Private and Public Adoption Agencies Other		lanagement Unit
Listed below is information regarding a form change	. Only applicable information is sh	nown.
This notice updates your California Department of S	Social Services (CDSS) County Fo	orms Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE See Obsoleted list be	elow	
ORDER UNIT MASTER ONLY Free Sold		INITIAL SUPPLY SENT ☐ Yes ☐ No
☐ New ☐ Revised DATE OF FORM	REPLACES	⊠ Obsolete
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788	mitted With Prior DSS Approval OTHER: INTERNET: INTRANET:	☐ Recommended Form
	ITION AND SPECIAL INSTRUCT	TIONS
DISPOSITION OF OLD SUPPLY Use until exhausted	□ Destroy	
USE NEW FORM When supply available in DSS Warehouse	\square Use new form effective	
□ All County Letter No. □ Other (specify)		
Effective April 1, 2013, forms listed below are obsole		
TEMP CL 1, TEMP CL 2, TEMP CL 4, TEMP CL	_8, TEMP CL 10	
TEMP M42-769, TEMP WTW 5		
TEMP CW 2186C, TEMP NA BACK 9		
Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS	S@dss.ca.gov.