NOTICE OF FORM CHANGE NO. 13-068						DATE	
						07/12/2013	
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Mar	nageme	nt Unit	
Listed below is information re	garding a form	n change. Or	nly applica	able information is show	/n.		
This notice updates your Cal	lifornia Departı	ment of Soci	al Service	es (CDSS) County Form	ns Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	CF 377.2 (6	,		O - 44:5: 4:			
CalFresh Notice Of Expirat					INITIAL SUPPLY SENT		
MASTER ONLY			ESTIMATED PRICE			☐ Yes ☐ No	
	DATE OF FORM 6/13		REPLACES			☐ Obsolete	
REQUIRED FORM-	REQUIRED FOR					<u>-</u>	
□ No Change Permitted □ Substitute Permitted With Prior DSS Approval □ Recommended Form						ecommended 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	DISPOSITIO	ON AND S	SPECIAL INSTRUCTIO	NS		
DISPOSITION OF OLD SUPPLY Use until exhausted				☐ Destroy			
USE NEW FORM When supply available in DSS Warehouse				☐ Use new form effective refer to 13-57			
SE FORM IN ACCORDANCE WITH ☐ All County Letter No. htt ☐ Other (specify)	p://www.cdss.	ca.gov/letter	snotices/l	EntRes/getinfo/acl/2013	3/13-57.p	df	
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE						

http://www.cdss.ca.gov/cdssweb/entres/forms/English/CF377.2.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.