NOTICE OF FORM CHANGE NO. 13-102				DATE
				09/12/2013
To: County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	FROM:	orms 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 CF 286 SAR (8/13) CalFresh Budget Worksheet/Semi-Annual Reporting Households				
ORDER UNIT			<u> </u>	INITIAL SUPPLY SENT
MASTER ONLY	☐ Free ☐ Sold	DEDI 4050		☐ Yes ☐ No
New □ Revised	DATE OF FORM 8/13	REPLACES		☐ Obsolete
REQUIRED FORM- No Change Permitted REQUIRED FORM- 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 AND SPECIAL INSTRUCTIONS				
Use until exhausted		☐ Destroy		
USE NEW FORM ☐ When supply available in DSS Warehouse		$oxtimes$ Use new form ϵ	effective <u>Refer</u>	to ACL 13-74
SE FORM IN ACCORDANCE WITH ☐ All County Letter No. htt ☐ Other (specify)	p://www.cdss.ca.gov/letter	snotices/EntRes/getinf	o/acl/2013/13-74.p	odf
ADDITIONAL INFORMATION REGARDING FOR http://www.cdss.ca.gov/cdss/		F286SAR.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.