NOTICE OF FORM CHANGE NO. 13-119			DATE 10/2/2013
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		FROM: Forms Management Unit	
Listed below is information re	egarding a form change. C	Only applicable information is show	n.
This notice updates your Ca	lifornia Department of Soc	cial Services (CDSS) County Form	s Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	AD 929A (7/13) - Waive	er Of Right To Revoke Relinquishm	nent Agency Adoption Program
ORDER UNIT	⊠ Free □ Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT
🖾 New 🛛 Revised	DATE OF FORM 7/13	REPLACES	☐ Obsolete
REQUIRED FORM-	REQUIRED FORM-	tted With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788		☐ OTHER:☑ INTERNET:	
West Sacramento, CA 95798-0788			
	FORMS DISPOSITI	ON AND SPECIAL INSTRUCTION	NS
DISPOSITION OF OLD SUPPLY		Destroy	
ISE NEW FORM		Use new form effective	7/13
USE FORM IN ACCORDANCE WITH All County Letter No.			
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE		
http://www.cdss.ca.gov/cdss	web/entres/forms/English/	/AD929A.pdf	
FORMS IS A MASTER ONL	Y		
Camera - ready copies are c	urrently available on the C	CDSS Internet	
Contact Language Services	for other languages at (91	6) 651-8876 or by e-mail at: LTS@	dss.ca.gov
Camera-ready copies are cu	rrently available on the CL	JSS 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.