NOTICE OF FORM CHANGE NO. 13-129					DATE	
					10/10/2013	
TO: County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	FROM	: Forms Man	agemer	nt Unit		
Listed below is information re	garding a form change. O	nly applicable inform	mation is show	'n.		
This notice updates your Cal	ifornia Department of Soc	ial Services (CDSS) County Form	s Catalo	g (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	CF 11A (9/13) English a Notice to All CalFresh R	•				
ORDER UNIT MASTER ONLY	🛛 Free 🗌 Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT	
□ New ⊠ Revised	DATE OF FORM 9/13	REPLACES				
REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form						
UNLESS OTHERWISE SPECIFIED STOR Department of Social Servic P.O. Box 980788 West Sacramento, CA 9579	 □ OTHER: ☑ INTERNET: □ INTRANET: 					
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS						
DISPOSITION OF OLD SUPPLY		Destroy				
USE NEW FORM	\boxtimes Use new form effective Refer		Refer	to ACIN I-52-13E		
USE FORM IN ACCORDANCE WITH All County Letter No.	p://www.cdss.ca.gov/lette	rsnotices/EntRes/go	etinfo/acin/201	3/I-52_1	3E.pdf	
ADDITIONAL INFORMATION REGARDING FOR http://www.cdss.ca.gov/cdss/	RM CHANGE				•	

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.