NOTICE OF FORM CHANGE NO. 13-130 ERRATA						
					DATE 10/10/2013	
			EDOM:		10/10/2013	
TO:  County Welfare Dire Supply Clerk / Form Community Care Li District Attorney Private and Public A	ns Coordinator censing District Offices		FROM: Forms Mana	agemer	nt Unit	
Listed below is information re-	garding a form change. On	nly applica	able information is shown	١.		
This notice updates your Cali	fornia Department of Socia	al Service	es (CDSS) County Forms	Catalo	g (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	Messages listed in ACL	13-67				
ORDER UNIT  MASTER ONLY    Free   Sold		ESTIMATED	PRICE		INITIAL SUPPLY SENT  ☐ Yes  ☐ No	
⊠ New ☐ Revised	DATE OF FORM 8/13	REPLACES			Obsolete	
REQUIRED FORM-	REQUIRED FORM-					
☑ No Change Permitted         ☐ Substitute Permitted With Prior DSS Approval         ☐ Recommended Form						
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse			HER:			
P.O. Box 980788		☐ INTERNET:				
West Sacramento, CA 95798-0788			☐ INTRANET:			
	FORMS DISPOSITION	N AND S	SPECIAL INSTRUCTION	IS		
Use until exhausted		☐ De	stroy			
USE NEW FORM  When supply available in DSS Warehouse			☐ Use new form effective Refer to 13-67			
USE FORM IN ACCORDANCE WITH						
<u> </u>	p://www.cdss.ca.gov/letters	snotices/l	EntRes/getinfo/acl/2013/	13-67.pd	df	
Other (specify)						
ADDITIONAL INFORMATION REGARDING FOR						
http://www.cdss.ca.gov/cdssv	veb/NoticeofAc_2383.htm					
M44-350K (8/13) EBT Replace M44-350L (8/13) Notice of Ov TEMP WI 10072 (8/13) EBT F TEMP WI 10072A (8/13) EBT	verpayment Replacement Approval Replacement Review					
NOTE: M44-350K (8/13) and Camera-ready copies are cur http://www.dss.cahwnet.gov/cForm information on forms no	rently available on the CDS	SS Intern I.htm.	et. Go to	s.ca.gov		
Contact Language Services for	or other languages at (916	) 651-887	76 or by e-mail at LTS@c	lss.ca.g	ov.	