

NOTICE OF FORM CHANGE NO. 13-131

DATE

10/28/2013

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 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 | | | | SAWS 2 PLUS (9/13) English and Spanish Application For CalFresh, Cash Aid, And/Or Medi-Cal/Health Care Programs | | | |
| ORDER UNIT SET | | <input type="checkbox"/> Free <input checked="" type="checkbox"/> Sold | | ESTIMATED PRICE \$.79 English / \$1.23 Spanish | | INITIAL SUPPLY SENT <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised | | DATE OF FORM 9/13 | | REPLACES | | <input type="checkbox"/> Obsolete | |
| REQUIRED FORM- <input checked="" type="checkbox"/> No Change Permitted | | | | REQUIRED FORM- <input type="checkbox"/> Substitute Permitted With Prior DSS Approval | | <input type="checkbox"/> Recommended Form | |
| UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788 | | | | <input type="checkbox"/> OTHER: <input checked="" type="checkbox"/> INTERNET: <input type="checkbox"/> INTRANET: | | | |

FORMS DISPOSITION AND SPECIAL INSTRUCTIONS

| | | | |
|---|--|---|--|
| DISPOSITION OF OLD SUPPLY <input type="checkbox"/> Use until exhausted | | <input type="checkbox"/> Destroy | |
| USE NEW FORM <input checked="" type="checkbox"/> When supply available in DSS Warehouse | | <input type="checkbox"/> Use new form effective _____ | |
| USE FORM IN ACCORDANCE WITH <input type="checkbox"/> All County Letter No. <input type="checkbox"/> Other (specify) | | | |

ADDITIONAL INFORMATION REGARDING FORM CHANGE

NOTE: Instructions for use of the form are forthcoming shortly via All County Letter.

<http://www.cdss.ca.gov/cdssweb/entres/forms/English/SAWS2PLUS.pdf>

http://www.cdss.ca.gov/cdssweb/entres/forms/Spanish/SAWS2PLUS_SP.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.