NOTICE OF FORM CHANGE NO. 14-003				DATE 01/03/2014
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Manageme	nt Unit
Listed below is information regarding	g a form change. Only	y applica	ble information is shown.	
This notice updates your California	Department of Social	l Service:	s (CDSS) County Forms Catalo	og (PUB 69).
	285-A1 (2/13) Englisl resh Benefits	h and Sp	panish	
ORDER UNIT	ee 🗌 Sold	ESTIMATED F	PRICE	INITIAL SUPPLY SENT
□ New □ Revised 2/13		REPLACES		☐ Yes ☐ No ☐ No ☐ Obsolete
REQUIRED FORM- REQUIR				
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:				econimenaea i onni
Department of Social Services Warehouse		☐ INTERNET:		
P.O. Box 980788 West Sacramento, CA 95798-0788		☐ INTRANET:		
F	ORMS DISPOSITION	N AND S	PECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY Use until exhausted			stroy	
USE NEW FORM ☐ When supply available in DSS Warehouse ☐ Use new form effective				
USE FORM IN ACCORDANCE WITH ☐ All County Letter No. http://www ☐ Other (specify)	w.cdss.ca.gov/lettersr	notices/E	EntRes/getinfo/acl/2013/13-75.p	odf
ADDITIONAL INFORMATION REGARDING FORM CHANG		Spanish	are obsolete as of January 1, 2	2014.
This form is replaced by the CF 285	i.			
http://www.cdss.ca.gov/cdssweb/en	tres/forms/English/CF	=285.pdf		
http://www.cdss.ca.gov/cdssweb/en	tres/forms/Spanish/C	F285SP.	pdf	