NOTICE OF FORM CHANGE NO. 14-015		DATE 02/04/2014
	FROM:	02/04/2014
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	Forms Managemer	nt 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 SOC 2247 (1/14) IHSS UHV Findings Repo	ort	
ORDER UNIT MASTER ONLY Free Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT Yes No
	REPLACES 3/13	Obsolete
REQUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form		
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:	OTHER:	
Department of Social Services Warehouse P.O. Box 980788	☑ INTERNET:	
West Sacramento, CA 95798-0788	☐ INTRANET:	
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS		
Use until exhausted	⊠ Destroy	
USE NEW FORM ☐ When supply available in DSS Warehouse	☐ Use new form effective 1/14	
USE FORM IN ACCORDANCE WITH		
☐ All County Letter No.☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
This form SOC 2247 is posted as an EXCEL document for county use.		
http://www.cdss.ca.gov/cdssweb/entres/forms/English/SOC2247.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.