

NOTICE OF FORM CHANGE NO. 14-036

DATE

3/18/2014

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 | | | | KG 5 (2/14) Kinship Guardianship Assistance Payment (Kin-GAP) Program Nonrecurring Legal Guardianship Expenses Form | | | |
| ORDER UNIT | | ESTIMATED PRICE | | INITIAL SUPPLY SENT | | | |
| MASTER ONLY | | <input checked="" type="checkbox"/> Free <input type="checkbox"/> Sold | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised | | DATE OF FORM 2/14 | | REPLACES | | <input type="checkbox"/> Obsolete | |
| REQUIRED FORM- | | | | REQUIRED FORM- | | | |
| <input checked="" type="checkbox"/> No Change Permitted | | | | <input type="checkbox"/> Substitute Permitted With Prior DSS Approval | | <input type="checkbox"/> Recommended Form | |
| UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: | | | | OTHER: | | | |
| Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788 | | | | <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 type="checkbox"/> When supply available in DSS Warehouse | | <input checked="" type="checkbox"/> Use new form effective <u>immediately</u> | |
| USE FORM IN ACCORDANCE WITH | | | | | |
| <input checked="" type="checkbox"/> All County Letter No. http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2014/14-19.pdf | | | | | |
| <input type="checkbox"/> Other (specify) | | | | | |

ADDITIONAL INFORMATION REGARDING FORM CHANGE

<http://www.cdss.ca.gov/cdssweb/entres/forms/English/KG5.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.