NOTICE OF FORM CHANGE NO. 14-050		DATE
		05/12/2014
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Managem	ent 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 AD 594 (4/14) - Alleged Natural Father's Consent To Adoption (In Or Out Of California)		
ORDER UNIT MASTER ONLY Free Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT
	REPLACES	☐ Yes ☐ No
☐ New ☐ Revised 4/14		☐ Obsolete
REQUIRED FORM- No Change Permitted REQUIRED FORM- Substitute Permitted With Prior DSS Approval Recommended Form		
LESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		
Department of Social Services Warehouse P.O. Box 980788	☑ INTERNET:	
West Sacramento, CA 95798-0788	☐ INTRANET:	
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS		
DISPOSITION OF OLD SUPPLY ☐ Use until exhausted	⊠ Destroy	
USE NEW FORM When supply available in DSS Warehouse	☐ Use new form effective 4/14	i.
USE FORM IN ACCORDANCE WITH		
☐ All County Letter No.☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		

http://www.cdss.ca.gov/cdssweb/entres/forms/English/AD594.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.