| NOTICE OF FORM CHANGE NO. 14-058 | DATE |
|--|--|
| | 06/06/2014 |
| 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 applied | cable information is shown. |
| This notice updates your California Department of Social Service | es (CDSS) County Forms Catalog (PUB 69). |
| FORM NUMBER, REVISION DATE AND TITLE PLEASE SEE LIST BELOW OF OBSOLETE FORMS | |
| Department of Social Services Warehouse | ☐ Yes ☐ No ☐ Obsolete |
| P.O. Box 980788 West Sacramento, CA 95798-0788 | TRANET: |
| FORMS DISPOSITION AND SPECIAL INSTRUCTIONS | |
| DISPOSITION OF OLD SUPPLY Use until exhausted D | estroy |
| USE NEW FORM When supply available in DSS Warehouse Use new form effective immediately | |
| USE FORM IN ACCORDANCE WITH All County Letter No. Other (specify) ADDITIONAL INFORMATION REGARDING FORM CHANGE | |
| DFA 377.4A is replaced with CF 377.4A (2/14) | |
| DFA 377.7A1 is replaced with CF 377.7A1 (2/14) | |
| DFA 377.7B is replaced with CF 377.7B (2/14) | |
| DFA 377.7B1 is replaced with CF 377.7B1 (2/14) | |
| DFA 377.7C is replaced with CF 377.7C (2/14) | |
| DFA 377.7E1 is replaced with CF 377.7E1 (1/14) | |
| 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. | |