NOTICE OF FORM CHANGE NO. 14-070			DATE
			06/27/2014
District Attorney		FROM: Forms Managem	ent Unit
Listed below is information re	garding a form change. Or	nly applicable information is shown.	
This notice updates your Cal	lifornia Department of Soci	al Services (CDSS) County Forms Cata	log (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE NA 818 (3/14)			
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	⊠ Free ☐ Sold		☐ Yes ☒ No
☐ New X Revised	DATE OF FORM 3/14	REPLACES 4/12	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			
DISPOSITION OF OLD SUPPLY Use until exhausted		□ Destroy	
USE NEW FORM ☐ When supply available in DSS Warehouse ☐ Use new form effective 3/14			
USE FORM IN ACCORDANCE WITH			
All County Letter No.			
Other (specify)			
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE		
http://www.cdss.ca.gov/cdssv	web/entres/forms/English/N	IA818.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.