NOTICE OF FORM CHANGE NO. 14-102			DATE
			10/23/2014
District Attorney		FROM: Form	s Management Unit
Listed below is information re	garding a form change. Or	nly applicable information is	shown.
This notice updates your Ca	lifornia Department of Soci	al Services (CDSS) Count	/ Forms Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	CF 11A (9/13) Notice to	All CalFesh Recipients	
ORDER UNIT	🗙 Free 🗌 Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT
New Revised	DATE OF FORM	REPLACES	⊠ Obsolete
REQUIRED FORM-	REQUIRED FORM-		
No Change Permitted	Substitute Permitted Wi		Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:		OTHER:	
Department of Social Services Warehouse P.O. Box 980788		X INTERNET:	
West Sacramento, CA 95798-0788		INTRANET:	
	FORMS DISPOSITIC	ON AND SPECIAL INSTRU	JCTIONS
DISPOSITION OF OLD SUPPLY		Destroy	
use New FORM	n DSS Warehouse 🗌 Use	e new form effective	
USE FORM IN ACCORDANCE WITH			
All County Letter No.			
Other (specify)			
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE		
All revisions of the form CF 1	1A (10/13) English and Sp	panish are obsolete as of S	eptember, 2014.

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.