NOTICE OF FORM CHANGE NO. 14-117		DATE
		12/03/2014
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offi District Attorney Private and Public Adoption Agencies Other		ns Management Unit
Listed below is information regarding a form change	e. Only applicable information	is shown.
This notice updates your California Department of	Social Services (CDSS) Coun	ty Forms Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE M40-181E (11/14) - Change	SAWS 2 PLUS Redeterminati	on Immunizations/School Attendance,
ORDER UNIT	ESTIMATED PRICE	INITIAL SUPPLY SENT
New Revised 11/1/14	REPLACES 7-1-98	Obsolete
REQUIRED FORM-		'
¥	d With Prior DSS Approval	Recommended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788	 OTHER: INTERNET: INTRANET: 	
FORMS DISPOS	SITION AND SPECIAL INSTR	UCTIONS
DISPOSITION OF OLD SUPPLY	Destroy	
USE NEW FORM	Use new form effective	
USE FORM IN ACCORDANCE WITH		
X All County Letter No. 14-88		
Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
http://www.cdss.ca.gov/cdssweb/NoticeofAc_238	33.htm	

http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2014/14-88.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.