NOTICE OF FORM CHANGE NO. 15-238				DATE 11/02/2015
TO: County Welfare Director			FROM: Forms Management Unit	
Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			Forms Managemen	int Offit
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 MAA 246C SAR (40/45). No Change (Mid. Revised Banest of Brancetty).				
M44-316C SAR (10/15) - No Change/Mid-Period Report of Property				
MASTER ONLY ⊠ Free □ Sold		ESTIMATED	PRICE	INITIAL SUPPLY SENT  Yes X No
☐ New X Revised	DATE OF FORM 10/15	9/13		Obsolete
REQUIRED FORM-  No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form				
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:			IER:	
Department of Social Services Warehouse P.O. Box 980788		INTERNET:		
West Sacramento, CA 95798-0788				
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
Use until exhausted		☐ Des	stroy	
USE NEW FORM  ☐ When supply available in DSS Warehouse ☐ Use new form effective  Refer to ACL				
USE FORM IN ACCORDANCE WITH  All County Letter No. 15-86				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FORM CHANGE				
http://www.cdss.ca.gov/cdssweb/res/word/NoaDocs/M44-316CSAR.doc				
http://inet.dss.ca.gov/wm7_landn/EntRes/getinfo/acl/2015/15-86.pdf				
Camera-ready copies are cur http://www.dss.cahwnet.gov/o Form information on forms no	cdssweb/FormsandPu_27	1.htm.	et. Go to act FMU at fmudss@dss.ca.gov	<i>I</i> .
Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.				