NOTICE OF FORM CHANGE NO. 16-127			DATE
			11/18/2016
TO: County Welfare Dir Supply Clerk / Forn Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices	FROM: Forms Managem	ent Unit
Listed below is information regarding a form change. Only applicable information is shown.			
This notice updates your Cal	ifornia Department of Socia	al Services (CDSS) County Forms Cata	log (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE NA 822 (7/16) - Notice Of Action - Transportation Change			
ORDER UNIT		ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY	X Free Sold		🗌 Yes 🛛 No
New X Revised	DATE OF FORM 7/16	replaces 1/01	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		X INTERNET:	
P.O. Box 980788 West Sacramento, CA 95798-0788			
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS			
DISPOSITION OF OLD SUPPLY		Destroy	
	DSS Warehouse X Use	new form effective <u>Refe</u>	er to ACIN
USE FORM IN ACCORDANCE WITH			
All County Letter No.			
Other (specify)	4-16		
ADDITIONAL INFORMATION REGARDING FORM CHANGE			
http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acin/2016/I-74-16.pdf			

http://www.cdss.ca.gov/cdssweb/entres/forms/English/NA822.PDF NA 822 (7/16) - Notice Of Action - Transportation Change