NOTICE OF FORM CHANGE NO. 06-156		DATE 02/07/2007
TO: County Welfare Director Supply Clerk / Forms Coordinator	FROM: Forms Ma (916) 657	anagement Unit -1907
	☐ District Attorney ☐ Other	
Listed below is information regarding a form change.	Only applicable information is sho	wn.
This notice updates your Department of Social Service	es County Forms Catalog.	
FORM NUMBER AND TITLE LIC 9182 (12/06) - Criminal Back	ground Clearance Transfer Reque	est
ORDER UNIT MASTER ONLY Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT ☐ Yes ⊠ No
□ New □ Revised 12/06	REPLACES 4/02	Obsolete
REQUIRED FORM- REQUIRED FORM- REQUIRED FORM- Substitute Permi	itted 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:	
FORMS DISPOSIT	TION AND SPECIAL INSTRUCTION	ONS
DISPOSITION OF OLD SUPPLY Use until exhausted	□ Destroy	
use NEW FORM When supply available in DSS Warehouse		12/06
use FORM IN ACCORDANCE WITH All County Letter No. Other (specify)		
additional information regarding form change http://www.dss.cahwnet.gov/pdf/LIC9182.PDF		

Check on the internet to see if forms are available at www.dss.cahwnet.gov

For camera-ready copies of English and Spanish forms, please call the Forms Management Unit (FMU) at (916) 657-1907, or by electronic mail at: fmudss@dss.ca.gov. Contact Language Services for other languages at (916) 651-8876 or by electronic mail at LTS@dss.ca.gov.