NOTICE OF FORM CHANGE NO. 07-082					DATE 12/14/2007
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Management Unit (916) 657-1907		
Listed below is information re	garding a form change. C	Only applica	ble information is show	vn.	
This notice updates your Cal	ifornia Department of Soc	cial Service	s (CDSS) County Form	ns Catalog	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	LIC 198B (12/07) Out-0	Of-State Ch	ild Abuse/Neglect Rep	ort Reque	est
ORDER UNIT MASTER ONLY	⊠ Free □ Sold	ESTIMATED	PRICE		INITIAL SUPPLY SENT
New Revised	DATE OF FORM 12/07	REPLACES			Obsolete
QUIRED FORM- REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788					
West Sacramento, CA 95798-0788			RANET:		
	FORMS DISPOSIT	ION AND S	PECIAL INSTRUCTIO	DNS	
DISPOSITION OF OLD SUPPLY			stroy		
USE NEW FORM		🖂 Use	\boxtimes Use new form effective <u>12/0</u>		
All County Letter No. Other (specify)					
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE				

http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/LIC198B.PDF

Camera-ready copies are currently available on the CDSS Internet. Go to www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm. Form information on forms not listed in the catalog, you may contact FMU at (916) 657-1907 or by e-mail at fmudss@dss.ca.gov.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.