NOTICE OF FORM CHANGE NO. 07-061					DATE
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			08-24-2007 FROM: Forms Management Unit (916) 657-1907		
Listed below is information re	garding a form chang	ge. Only applica	able information is show	vn.	
This notice updates your Cali	fornia Department of	Social Service	s (CDSS) County Form	s Catalog	(PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	FS 11 (8/07) Englis Notice To All Food		ents - Important - Pleas	e Read	
ORDER UNIT MASTER ONLY	MASTER ONLY Sold		ESTIMATED PRICE		INITIAL SUPPLY SENT
🗌 New 🛛 Revised	DATE OF FORM <b>8/07</b>	REPLACES 8/06			Obsolete
REQUIRED FORM- No Change Permitted  Substitute Permitted 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:		
				NIS	
DISPOSITION OF OLD SUPPLY					
Use until exhausted			stroy		
USE NEW FORM			se new form effective	date of A	ACIN
USE FORM IN ACCORDANCE WITH					
	5-07				
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE				

http://www.dss.cahwnet.gov/Forms/English/FS11\_ENG\_SP.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.