NOTICE OF FORM CHANGE NO. 07-073				DATE
				9/19/2007
County Welfare Dir Supply Clerk / Forn Community Care L District Attorney Private and Public Other	ns Coordinator icensing District Offices	FROM: Forms Ma (916) 657-	•	t Unit
Listed below is information re	garding a form change. On	ly applicable information is shov	vn.	
This notice updates your Calif	ornia Department of Socia	Services (CDSS) County Form	s Catalog (	(PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	LIC 198A (9/07) - Child A	Abuse Central Index Check for S	tate Licens	sed Facilities
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE		INITIAL SUPPLY SENT  Yes No
☐ New ⊠ Revised	DATE OF FORM  9/07	REPLACES 8/07		Obsolete
REQUIRED FORM-	REQUIRED FORM-			
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788  West Sacramento, CA 95798-0788		☐ OTHER: ☐ INTERNET: ☐ INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
Use until exhausted		Destroy		
USE NEW FORM  When supply available in DSS Warehouse		☐ Use new form effective	9/07	
USE FORM IN ACCORDANCE WITH				
<ul><li>☐ All County Letter No.</li><li>☐ Other (specify)</li></ul>				
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE			
http://www.dss.cahwnet.gov/o	cdssweb/On-lineFor_293.h	tm#l		

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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.