NOTICE OF FORM CHANGE NO. 08-003				DATE
				01-18-2008
County Welfare Dir Supply Clerk / Forr Community Care L District Attorney Private and Public Other	(916) 65	FROM: Forms Management Unit (916) 657-1907		
Listed below is information re	egarding a form change. O	nly applicable information is sh	own.	
This notice updates your Ca	lifornia Department of Soc	ial Services (CDSS) County Fo	rms Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	NA 835 (1/08) Notice of Action - Child	Care Discontinuance		
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	old ESTIMATED PRICE		INITIAL SUPPLY SENT  ☐ Yes ⊠ No
☐ New ☐ Revised	1/08	REPLACES 7/99		☐ Obsolete
REQUIRED FORM-	REQUIRED FORM-	1145H B : BOO A		
No Change Permitted		ted With Prior DSS Approval	⊠ Ke	commended Form
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:  Department of Social Services Warehouse P.O. Box 980788		☐ OTHER:  ☐ INTERNET:		
West Sacramento, CA 95798-0788		☐ INTRANET:		
	FORMS DISPOSITI	ON AND SPECIAL INSTRUCT	IONS	
DISPOSITION OF OLD SUPPLY  Use until exhausted		⊠ Destroy		
USE NEW FORM  When supply available in DSS Warehouse		☐ Use new form effective 2-1-08		
USE FORM IN ACCORDANCE WITH  All County Letter No. 08	3-04			
Other (specify)				
ADDITIONAL INFORMATION REGARDING FOR http://www.dss.cahwnet.gov/		alish/NA835.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.