NOTICE OF FORM CHANGE NO. 08-010		DATE
		01/18/2008
TO:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Of District Attorney Private and Public Adoption Agencies Other	(916) 657- fices	nagement Unit 1907
Listed below is information regarding a form change	ge. Only applicable information is show	n.
This notice updates your California Department of	f Social Services (CDSS) County Form	s Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE NA 834 (1/08) Notice of Action - C	Child Care Denial	
ORDER UNIT	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY Free Sol	REPLACES	☐ Yes ⊠ No
☐ New ☐ Revised 1/08	6/99	☐ Obsolete
REQUIRED FORM-  No Change Permitted Substitute Pe	ermitted 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:	
FORMS DISPO	OSITION AND SPECIAL INSTRUCTION	NS
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		
ADDITIONAL INFORMATION REGARDING FORM CHANGE	e/English/NA934 PDE	

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.