NOTICE OF FORM CHANGE NO. 08-035					3/06/2008		
County Welfare Director Supply Clerk / Forms Coo Community Care Licensin District Attorney Private and Public Adoptic Other	F	FROM: Forms Management Unit (916) 657-1907					
Listed below is information regarding	a form change. On	ly applicable	information is show	vn.			
This notice updates your California [	Department of Socia	ıl Services (C	DSS) County Form	ns Catalo	g (PUB 69).		
	27 SP (1/08) - Cor Care Centers	nsent for Em	ergency Medical Tro	eatment -	Child Care	Centers or Family	
ORDER UNIT  MASTER ONLY  Fre	Free		ESTIMATED PRICE		INITIAL SUPPLY	SENT No	
□ New □ Revised DATE OF F		REPLACES 5/01		Obsole			
	Substitute Permitte	d With Prior	DSS Approval	Rec	ommended	Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788		☐ OTHER: ☐ INTERNET: ☐ INTRANET:					
FC	ORMS DISPOSITIO	N AND SPE	CIAL INSTRUCTIO	NS			
DISPOSITION OF OLD SUPPLY Use until exhausted		Destroy					
USE NEW FORM  When supply available in DSS Warehouse		⊠ Use new form effective immed		ate			
USE FORM IN ACCORDANCE WITH  ☐ All County Letter No. ☐ Other (specify)							
ADDITIONAL INFORMATION REGARDING FORM CHANGE	:						
http://www.dss.cahwnet.gov/cdsswel	o/entres/forms/Spar	nish/LIC627S	P.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.