NOTICE OF FORM CHANGE NO. 08-056					DATE 4/21/2008
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Management Unit (916) 657-1907		
Listed below is information re	garding a form change.	Only applica	ble information is show	/n.	
This notice updates your Cal	ifornia Department of So	ocial Service	s (CDSS) County Form	ns Catalog) (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE TEMP 2232 SP (4/08) Notice of Possible Listing on the Child Abuse Central Index					
		ESTIMATED	PRICE		INITIAL SUPPLY SENT
MASTER ONLY	Free Sold				🗌 Yes 🛛 No
New Revised	DATE OF FORM 4/08	REPLACES		Obsolete	
QUIRED 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			ER:		
			⊠ INTERNET:		
			INTRANET:		
	FORMS DISPOSI		PECIAL INSTRUCTIO	NS	
DISPOSITION OF OLD SUPPLY			stroy		
USE NEW FORM					
When supply available in DSS Warehouse			e new form effective	4/08	
USE FORM IN ACCORDANCE WITH					
All County Letter No.					
Other (specify)					
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE				

http://www.dss.cahwnet.gov/cdssweb/entres/forms/Spanish/TEMP2232SP.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.