NOTICE OF FORM CHANGE NO. 08-057						DATE 4/30/2008	
TO: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Ma (916) 657			
Listed below is information re	garding a for	n change. On	ly applica	ble information is show	wn.		
This notice updates your Cal	ifornia Depar	tment of Socia	al Service	s (CDSS) County Forr	ns Catalo	g (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	SOC 832 S Notice of C	P (3/08) hild Abuse Ce	entral Inde	ex Listing			
MASTER ONLY			ESTIMATED PRICE		INITIAL SUPPLY SENT		
	DATE OF FORM		REPLACES			☐ Yes ⊠ No	
REQUIRED FORM-			ed With Pi	rior DSS Approval	Rec	commended Form	
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788							
West Sacramento, CA 95798-0788							
	FORMS	DISPOSITIO	ON AND S	PECIAL INSTRUCTION	ONS		
ISPOSITION OF OLD SUPPLY			Des	stroy			
USE NEW FORM			Use new form effective		immedi	immediate	
igtriangleq Other (specify) Th	is form was c	lesigned for th	ne followir	ng court case: Gomez	vs. Saen	Z	
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE						

http://www.dss.cahwnet.gov/cdssweb/entres/forms/Spanish/SOC832SP.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.