NOTICE OF FORM CHANGE NO. 08-073				
				DATE 06-19-2008
TO:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other		(916) 657	anagement -1907	
Listed below is information regarding a form change. Only applicable information is shown.				
This notice updates your California Department of Social Services (CDSS) County Forms Catalog (PUB 69).				
FORM NUMBER, REVISION DATE AND TITLE	AD 2D (3/08) English a Stepparent Adoption	and Spanish		
ORDER UNIT MASTER ONLY	⊠ Free	ESTIMATED PRICE		INITIAL SUPPLY SENT  Yes No
☐ New ☐ Revised	DATE OF FORM 3/08	REPLACES 6/02		☐ Obsolete
REQUIRED FORM-  REQUIRED 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		☐ OTHER: ☐ INTERNET: ☐ INTRANET:		
FORMS DISPOSITION AND SPECIAL INSTRUCTIONS				
DISPOSITION OF OLD SUPPLY  Use until exhausted		⊠ Destroy		
USE NEW FORM  When supply available in DSS Warehouse		⊠ Use new form effective	3/08	
□ All County Letter No. □ Other (specify)				
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE			
Print form: 8 1/2 x 11, two sided				
http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/AD2D.PDF				
http://www.dss.cahwnet.gov/cdssweb/entres/forms/Spanish/AD2DSP.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 (910).

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.