NOTICE OF FORM CHANGE NO. 08-096					DATE 07/14/2008
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-		nt Unit
Listed below is information re	garding a form change. Or	nly applica	ble information is show	vn.	
This notice updates your Cal	ifornia Department of Soci	al Service	s (CDSS) County Forn	ns Catalo	g (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	AD 864 (3/08) English a Reqlinquishment Of an I				
	⊠ Free □ Sold	ESTIMATED PRICE			INITIAL SUPPLY SENT
		REPLACES			
$\Box$ New $\Box$ Revised	3/08	3/06		Obsolete	
No Change Permitted Substitute Permitted With Prior DSS Approval Recommended Form   UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: OTHER:					
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788					
		⊠ INTERNET:			
West Sacramento, CA 95798-0788					
	FORMS DISPOSITIO	ON AND S	PECIAL INSTRUCTIO	ONS	
POSITION OF OLD SUPPLY			stroy		
USE NEW FORM		☐ Use new form effective 3/08			
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/Eng	glish/AD86	4.PDF		

http://www.dss.cahwnet.gov/cdssweb/entres/forms/Spanish/ad864sp.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.