NOTICE OF FORM CHANGE NO. 08-102		DATE
		07-15-2008
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Office District Attorney Private and Public Adoption Agencies Other	(916) 657-	nagement Unit 1907
Listed below is information regarding a form change.	Only applicable information is show	n.
This notice updates your California Department of S	ocial Services (CDSS) County Form	ns Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE AD 20B (3/08) Refusal To Give cons	sent To Adoption - Alleged Natural F	ather
ORDER UNIT	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY Free Sold	REPLACES	☐ Yes ☐ No
☐ New ☐ Revised 3/08	3/06	Obsolete
REQUIRED FORM- No Change Permitted REQUIRED FORM- Substitute Perm	nitted 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 DISPOSI	ITION AND SPECIAL INSTRUCTION	NS
DISPOSITION OF OLD SUPPLY Use until exhausted	⊠ Destroy	
USE NEW FORM When supply available in DSS Warehouse	Use new form effective	3/08
USE FORM IN ACCORDANCE WITH		
☐ All County Letter No.☐ Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE	English/AD20P PDE	

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.