NOTICE OF FORM CHANGE NO. 08-122		DATE
		12-31-2008
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other	FROM: Forms Managen (916) 657-1907	nent Unit
Listed below is information regarding a form change. On	ly applicable information is shown.	
This notice updates your California Department of Social	al Services (CDSS) County Forms Cata	alog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE TLR 2 (12/08) Trustline Registry - "The	California Registry Of In-Home Child C	Care Providers"
ORDER UNIT	ESTIMATED PRICE	INITIAL SUPPLY SENT
MASTER ONLY Free Sold	REPLACES	☐ Yes ⊠ No
☐ New ☐ Revised 10/05	12/08	☐ Obsolete
REQUIRED FORM- No Change Permitted Substitute Permitted With Prior DSS Approval REQUIRED FORM- REQUIRED FO		
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT: Department of Social Services Warehouse P.O. Box 980788 West Sacramento, CA 95798-0788	☐ OTHER: ☐ INTERNET: ☐ INTRANET:	
FORMS DISPOSITIO	N AND SPECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY Use until exhausted	⊠ Destroy	
USE NEW FORM When supply available in DSS Warehouse	☐ Use new form effective 12/0	8
USE FORM IN ACCORDANCE WITH		
All County Letter No.		
Other (specify)		
ADDITIONAL INFORMATION REGARDING FORM CHANGE		
http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/TLR2.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.