NOTICE OF FORM CHANGE NO. 08-124				10-08-2008
County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other			FROM: Forms Managemer (916) 657-1907	nt Unit
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 SOC 369 (9/08) Agency-Relative Guardianship Disclosure				
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE		INITIAL SUPPLY SENT  ☐ Yes  ☐ No
☐ New ☐ Revised	DATE OF FORM 9/08	REPLACES 4/08		Obsolete
REQUIRED FORM-  No Change Permitted  REQUIRED FORM-  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  Supply Use until exhausted		☐ Destroy		
USE NEW FORM  When supply available in DSS Warehouse		Use new form effective		
USE FORM IN ACCORDANCE WITH  All County Letter No.  Other (specify)				
ADDITIONAL INFORMATION REGARDING FOR http://www.dss.cahwnet.gov/o		ish/SOC36	69.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.