NOTICE OF FORM CHANGE NO. 09-071						DATE	
						12-29-2009	
To: County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other				FROM: Forms Mar (916) 657-	-	nt Unit	
Listed below is information regarding a form change. Only applicable information is shown.							
This notice updates your Cal	lifornia Depar	tment of Soci	al Service	es (CDSS) County Form	ns Catalo	og (PUB 69).	
FORM NUMBER, REVISION DATE AND TITLE	TEMP 2239	• •	ppeals Co	ontact Information			
DRDER UNIT ESTIMATED PRICE						INITIAL SUPPLY SENT	
MASTER ONLY	⊠ Free □ Sold					☐ Yes ☐ No	
⊠ New ☐ Revised	12/09		REPLACES			☐ Obsolete	
REQUIRED FORM-							
UNLESS OTHERWISE SPECIFIED STOCK MAINTAINED AT:				IER:			
Department of Social Services Warehouse P.O. Box 980788				INTERNET:			
West Sacramento, CA 95798-0788				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 I-87-		<u>l-87-0</u>	9	
USE FORM IN ACCORDANCE WITH							
☐ Other (specify)							
ADDITIONAL INFORMATION REGARDING FOR	RM CHANGE						
http://www.dss.cahwnet.gov/cdssweb/entres/forms/English/TEMP2239.pdf							

Camera-ready copies are currently available on the CDSS Internet. Go to http://www.dss.cahwnet.gov/cdssweb/FormsandPu_271.htm.

Form information on forms not listed in the catalog, you may contact FMU at fmudss@dss.ca.gov.