NOTICE OF FORM CHANGE NO. 12-074			DATE
			8/20/2012
TO:     County Welfare Director     Supply Clerk / Forms Coordinator     Community Care Licensing District Offices     District Attorney     Private and Public Adoption Agencies     Other			anagement Unit
Listed below is information reg	garding a form change. O	only applicable information is sho	wn.
This notice updates your Calif	fornia Department of Soc	cial Services (CDSS) County For	ms Catalog (PUB 69).
FORM NUMBER, REVISION DATE AND TITLE	, ,	tional Housing Program Plus Fo	n ,
ORDER UNIT MASTER ONLY	⊠ Free ☐ Sold	ESTIMATED PRICE	INITIAL SUPPLY SENT  ☐ Yes ☐ No
	DATE OF FORM 8/12	REPLACES	☐ 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:	☐ IXecommended Form
	FORMS DISPOSITION	ON AND SPECIAL INSTRUCTI	ONS
DISPOSITION OF OLD SUPPLY  Use until exhausted		☐ Destroy	
USE NEW FORM  When supply available in DSS Warehouse		☐ Use new form effective	effective immediately
USE FORM IN ACCORDANCE WITH   ☐ All County Letter No. 12-4  ☐ Other (specify)	44		
ADDITIONAL INFORMATION REGARDING FORM	// CHANGE		
http://www.cdss.ca.gov/cdssw	reb/entres/forms/English/	SOC179.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.