| NOTICE OF FORM CHANGE NO. 12-096   |                            |                                    |                         |          | DATE                |  |
|--|----------------------------|------------------------------------|-------------------------|----------|---------------------|--|
|  |                            |                                    |                         |          | 12/18/2012          |  |
| To:  County Welfare Director Supply Clerk / Forms Coordinator Community Care Licensing District Offices District Attorney Private and Public Adoption Agencies Other |                            |                                    | FROM:<br>Forms Man      | nagemer  | nt Unit             |  |
| Listed below is information re   | garding a form change. C   | nly applica                        | ole information is show | n.       |                     |  |
| This notice updates your Ca  | lifornia Department of Soc | cial Services                      | s (CDSS) County Form    | s Catalo | g (PUB 69).         |  |
| FORM NUMBER, REVISION DATE AND TITLE   | NA 1271 (12/12) Notice     | e Of Action                        | Denial Of Home Ass      | essment  | t/Approval          |  |
| ORDER UNIT MASTER ONLY   | ⊠ Free ☐ Sold              | ESTIMATED F                        | ESTIMATED PRICE         |          | INITIAL SUPPLY SENT |  |
| ⊠ New ☐ Revised  | DATE OF FORM 12/12         | REPLACES                           | REPLACES                |          | ☐ Obsolete          |  |
| REQUIRED FORM-   | REQUIRED FORM-             |                                    | DOO A                   |          |                     |  |
|  |                            |                                    | Tor DSS Approval<br>ER: | ∟ Re     | ecommended Form     |  |
| Department of Social Services Warehouse P.O. Box 980788  |                            |                                    | ☐ INTERNET:             |          |                     |  |
| West Sacramento, CA 95798-0788   |                            |                                    | ☐ INTRANET:             |          |                     |  |
|  | FORMS DISPOSITI            | ON AND S                           | PECIAL INSTRUCTIO       | NS       |                     |  |
| DISPOSITION OF OLD SUPPLY  Use until exhausted   |                            | ☐ Des                              | troy                    |          |                     |  |
| use NEW FORM  When supply available ir   | ⊠Us                        | oxtimes Use new form effective imm |                         | diately  |                     |  |
| USE FORM IN ACCORDANCE WITH  | . 74                       |                                    |                         |          |                     |  |
| <ul><li>✓ All County Letter No. 12</li><li>✓ Other (specify)</li></ul>   | (- <i>f</i> 1              |                                    |                         |          |                     |  |
|  |                            |                                    |                         |          |                     |  |
| ADDITIONAL INFORMATION REGARDING FO  | XIVI CHANGE                |                                    |                         |          |                     |  |
| http://www.cdss.ca.gov/cdss  | web/entres/forms/English/  | /NA1271.pd                         | f                       |          |                     |  |

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.

Contact Language Services for other languages at (916) 651-8876 or by e-mail at LTS@dss.ca.gov.