



Department of Social Services – Community Care Licensing Division
Policy Training and Quality Assurance Branch
Administrator Certification Section – Vendor Support and Review Unit
744 P Street, M.S. 9-17-47, Sacramento, CA 95814
Main Line: (916) 653-9300 Fax: (916) 654-1808
ACS Mailbox: ACSVendorInfo@dss.ca.gov

NOTICE OF PAYMENT INFORMATION

Vendor Name and Number

Approved Authorized Representative

Business Address (Street, City, State, Zip Code)

Telephone Number

Program Type

- | | | | |
|-----------------------------------|----------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> ARF ICTP | <input type="checkbox"/> GH ICTP | <input type="checkbox"/> RCFE ICTP | <input type="checkbox"/> STRTP ICTP |
| <input type="checkbox"/> ARF CETP | <input type="checkbox"/> GH CETP | <input type="checkbox"/> RCFE CETP | <input type="checkbox"/> STRTP CETP |

Check or Money Order Number

Fee Amount

Assigned Analyst (If Known)
