State of California—Health and Human Services Agency
Department of Health Care Services

SANDRA SHEWRY
Director

ARNOLD SCHWARZENEGGER
Governor

DATE: June 10, 2008

TO: ALL COUNTY WELFARE DIRECTORS Letter No.: 08-23
ALL COUNTY WELFARE ADMINISTRATIVE OFFICERS
ALL COUNTY MEDI-CAL PROGRAM SPECIALISTS/LIAISONS
ALL COUNTY HEALTH EXECUTIVES
ALL COUNTY MENTAL HEALTH DIRECTORS
ALL COUNTY MEDS LIAISONS

SUBJECT: NEW G-845S FORM FOR SAVE VERIFICATION

The purpose of this letter is to inform Counties that the federal Department of Homeland Security has updated the G-845S Document Verification Request Form which is used when it is necessary to request a manual verification of immigration status using the Systematic Alien Verification for Entitlements (SAVE) system. Enclosed with this letter is a copy of the updated G-845S form which can be retrieved from the USCIS website at http://www.uscis.gov/files/form/g-845s.pdf.

This form is used to verify the status of an alien for official purposes of a government agency which participates in the SAVE program. The current version of this form is dated April 29, 2008. The previous version (dated January 3, 2005) will only be accepted until May 29, 2008.

If you have any questions regarding this letter, please contact Ms. Amarjit Singh at (916) 552-9457 or e-mail her at Amar.Singh@dhcs.ca.gov.

ORIGINAL SIGNED BY

Vivian Auble, Chief
Medi-Cal Eligibility Division

Attachment