

Superior Court of California
County of San Luis Obispo

Court Administration

Tana Coates
Presiding Judge

Michael Powell
Court Executive Officer



Courthouse Annex
1035 Palm Street, Room 385
San Luis Obispo, CA 93408

(805) 706-3615
admin@slo.courts.ca.gov

SLO.COURTS.CA.GOV

April 21, 2026

Notice of Updated Local Forms

In compliance with California Rules of Court 10.613 and 10.614, the Superior Court is distributing for comment, proposed amendments to the local forms. The proposed changes will be effective July 1, 2026.

The following forms are proposed to be amended or adopted:

- FL017 - DECLARATION RE COMPLIANCE WITH SAN LUIS OBISPO COUNTY FAMILY LAW LOCAL RULES, RULE 19.27
- FL017A - CONTINUATION PAGE TO LOCAL FORM FL017
- FL018 - NOTICE REGARDING CONFIDENTIALITY OF CHILD WELFARE RECORDS UNDER WELFARE & INSTITUTIONS CODE SECTION 827
- FL019 - FAMILY LAW DIVISION EXHIBIT LIST
- FL019A - FAMILY LAW DIVISION EXHIBIT LIST CONTINUATION PAGE

The proposed changes are attached to this notice and may also be found online at:

<https://www.slo.courts.ca.gov/forms-filing/local-rules>. A hard copy of the proposed changes is available upon request.

Please submit all comments to LocalRulesComments@slo.courts.ca.gov.

Michael Powell,
Court Executive Officer

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (Name):	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO <input type="checkbox"/> 1050 Monterey Street, Room 220 San Luis Obispo, CA 93408 <input type="checkbox"/> 901 Park Street, Paso Robles, CA 93446	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT/CLAIMANT:	
DECLARATION RE COMPLIANCE WITH SAN LUIS OBISPO COUNTY FAMILY LAW LOCAL RULES, RULE 19.27	CASE NUMBER:

This form may be used to comply with the declaration requirement of [San Luis Obispo County Family Law Local Rule 19.27\(g\)](#). Local Rule 19.27 states the disclosure requirements and identifies the documents that must be produced. This form is intended to assist parties in reporting compliance, partial compliance, or noncompliance with that rule.

If additional space is needed for any section, attach a continuation page. At the top of each continuation page, write: **“Continuation Page to Local Form FL-017, Section ___.”** For section (h)(2), Optional Local Form FL-017A may be used. Include the date of this Declaration, the case name and case number on each continuation page.

Refer to Local Rule 19.27 for compliance requirements; this form is for reporting purposes only and is not operative to establish or modify any compliance obligation.

I, _____, declare:

- This declaration is submitted
 - in connection with a Request for Order
 - in connection with a Responsive Declaration to Request for Order
 - to comply with a court order for a pending hearing, review or other proceeding.
- For each applicable category below, I have identified each document being produced and the date or date range(s) covered by each document.

SECTION (c)(1): INDIVIDUAL INCOME DOCUMENTATION, LAST 180 DAYS

For each applicable source of income, identify the type of income, the employer, business, or other source, the documents produced, and the date or date range(s) covered by each document.

Type of income: <input type="checkbox"/> Wage income <input type="checkbox"/> Self-employment income <input type="checkbox"/> Other income	Type of income: <input type="checkbox"/> Wage income <input type="checkbox"/> Self-employment income <input type="checkbox"/> Other income
Employer / business / source:	Employer / business / source:
Documents produced:	Documents produced:
Date or date range(s) covered:	Date or date range(s) covered:

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (c)(2): INDIVIDUAL INCOME TAX RETURNS, 2 MOST RECENT RETURNS

For each of the 2 most recent tax returns filed, identify the return or returns produced and the supporting documents included.

Tax year:	Tax year:
Returns produced: <input type="checkbox"/> Federal income tax return <input type="checkbox"/> State income tax return(s)	Returns produced: <input type="checkbox"/> Federal income tax return <input type="checkbox"/> State income tax return(s)

Jurisdiction(s): <input type="checkbox"/> Foreign income tax return(s)	Jurisdiction(s): <input type="checkbox"/> Foreign income tax return(s)
Jurisdiction(s):	Jurisdiction(s):
Supporting documents included: <input type="checkbox"/> Schedules / attachments / worksheets	Supporting documents included: <input type="checkbox"/> Schedules / attachments / worksheets
<input type="checkbox"/> Amendments	<input type="checkbox"/> Amendments
<input type="checkbox"/> W-2 forms	<input type="checkbox"/> W-2 forms
<input type="checkbox"/> 1099 forms	<input type="checkbox"/> 1099 forms

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (c)(3): FL-150 INCOME AND EXPENSE DECLARATION

Current [Income and Expense Declaration, Form FL-150](#), produced. ("Current" means the form has been completed within the past three months providing no facts have changed. CRC 5.260(a)(3))

Date of Current Income and Expense Declaration: _____

If any required document was not produced, see section (h)(2).

SECTION (c)(4): SELF-EMPLOYMENT FINANCIAL DOCUMENTATION

I am self-employed.

(If checked, complete this section.)

For each applicable business, identify the business name, the financial documents produced, and the date or date range(s) covered by each document.

Business name(s):
<input type="checkbox"/> Profit and loss statement Date or date range(s) covered:
<input type="checkbox"/> Balance sheet Date(s):
<input type="checkbox"/> Quarterly sales tax report(s) Quarter(s) or date(s):
<input type="checkbox"/> Other similar documentation showing income received from all sources Documents produced: Date or date range(s) covered:

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (c)(5): BANKING AND DEPOSIT ACCOUNTS, PRECEDING 12 MONTHS

For each business or personal account maintained during the preceding 12 months, identify the statements produced.

Institution:	Institution:
Account type:	Account type:
Name on account:	Name on account:
Last 4 digits of account number:	Last 4 digits of account number:
Date range(s) of statements produced:	Date range(s) of statements produced:

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (c)(6): PEER-TO-PEER OR DIGITAL PAYMENT PLATFORMS, PRECEDING 12 MONTHS

I used a peer-to-peer or digital payment platform during the preceding 12 months.

(If checked, complete this section.)

For each peer-to-peer or digital payment platform account used during the preceding 12 months, identify the records produced. Include any peer-to-peer or digital payment platform or service through which the party sends, receives, transfers, or stores funds, including, for example, platforms such as Venmo, PayPal, Cash App, and Apple Cash.

Platform or service:	Platform or service:
Name on account / username / email address:	Name on account / username / email address:
Documents produced:	Documents produced:

Date or date range(s) covered by each document:	Date or date range(s) covered by each document:
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If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (c)(7): CRYPTOCURRENCY OR DIGITAL ASSET PLATFORMS, PRECEDING 12 MONTHS

I used a cryptocurrency or digital asset platform, wallet, brokerage, or service during the preceding 12 months.

(If checked, complete this section.)

For each cryptocurrency or digital asset platform, wallet, brokerage, or service used during the preceding 12 months, identify the records produced. Include any cryptocurrency, digital asset, blockchain-based asset, token, or similar digital financial asset platform, exchange, wallet, brokerage, or service through which the party holds, controls, transfers, trades, stakes, mines, or otherwise acquires such assets, including platforms such as Coinbase, Crypto.com, Kraken, and PayPal Crypto.

Platform / wallet / brokerage / service:	Platform / wallet / brokerage / service:
Name on account / username / email address:	Name on account / username / email address:
Documents produced:	Documents produced:
Date or date range(s) covered by each document:	Date or date range(s) covered by each document:

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (d): BUSINESS ENTITY DOCUMENTATION

I have at least a twenty-five percent (25%) ownership interest in a business entity that files tax returns.

(If checked, complete sections (d)(1) through (d)(5) for each such business entity, below.)

Business entity name:	
Type of entity:	
Ownership interest:	

SECTION (d)(1): BUSINESS ENTITY TAX RETURNS, 2 MOST CURRENT RETURNS

For each of the 2 most current business entity tax returns filed, identify the returns produced and the supporting documents included.

Tax year: _____	Tax year: _____
Returns produced:	Returns produced:
<input type="checkbox"/> Federal income tax return	<input type="checkbox"/> Federal income tax return
<input type="checkbox"/> State income tax return(s)	<input type="checkbox"/> State income tax return(s)
Jurisdiction(s):	Jurisdiction(s):
<input type="checkbox"/> Foreign income tax return(s)	<input type="checkbox"/> Foreign income tax return(s)
Jurisdiction(s):	Jurisdiction(s):
Supporting documents included:	Supporting documents included:
<input type="checkbox"/> Schedules / attachments / worksheets	<input type="checkbox"/> Schedules / attachments / worksheets
<input type="checkbox"/> Amendments	<input type="checkbox"/> Amendments
<input type="checkbox"/> W-2 forms	<input type="checkbox"/> W-2 forms
<input type="checkbox"/> 1099 forms	<input type="checkbox"/> 1099 forms

SECTION (d)(2): BUSINESS ENTITY BANK STATEMENTS, PRECEDING 12 MONTHS

For each business entity bank account maintained during the preceding 12 months, identify the statements produced.

Institution:	Institution:
Account type:	Account type:
Name on account:	Name on account:
Last 4 digits of account number:	Last 4 digits of account number:
Date range(s) of statements produced:	Date range(s) of statements produced:

SECTION (d)(3): MOST RECENT BUSINESS ENTITY FINANCIAL DOCUMENTATION

For each business entity financial document produced, identify the document and the date or date range(s) covered.

Business entity name:		
<input type="checkbox"/> Profit and loss statement Date or date range covered:		
<input type="checkbox"/> Balance sheet Date:		
<input type="checkbox"/> Quarterly sales tax report(s) Quarter(s) or date(s):		
<input type="checkbox"/> Other similar documentation showing income received from all sources Documents produced: Date or date range(s) covered:		

SECTION (d)(4): BUSINESS ENTITY PEER-TO-PEER OR DIGITAL PAYMENT PLATFORMS, PRECEDING 12 MONTHS

My corporation or business used a peer-to-peer or digital payment platform during the preceding 12 months.

(If checked, complete this section.)

For each peer-to-peer or digital payment platform account used by the corporation or business during the preceding 12 months, identify the records produced. Include any peer-to-peer or digital payment platform or service through which the corporation or business sends, receives, transfers, or stores funds, including, for example, platforms such as Venmo, PayPal, Cash App, and Apple Cash.

Platform or service:	Platform or service:
Name on account / username / email address:	Name on account / username / email address:
Documents produced:	Documents produced:
Date or date range(s) covered by each document:	Date or date range(s) covered by each document:

SECTION (d)(5): BUSINESS ENTITY CRYPTOCURRENCY OR DIGITAL ASSET PLATFORMS, PRECEDING 12 MONTHS

My corporation or business used a cryptocurrency or digital asset platform, wallet, brokerage, or service during the preceding 12 months.

(If checked, complete this section.)

For each cryptocurrency or digital asset platform, wallet, brokerage, or service used by the corporation or business during the preceding 12 months, identify the records produced. Include any cryptocurrency, digital asset, blockchain-based asset, token, or similar digital financial asset platform, exchange, wallet, brokerage, or service through which the corporation or business holds, controls, transfers, trades, stakes, mines, or otherwise acquires such assets, including platforms such as Coinbase, Crypto.com, Kraken, and PayPal Crypto.

Platform / wallet / brokerage / service:	Platform / wallet / brokerage / service:
Name on account / username / email address:	Name on account / username / email address:
Documents produced:	Documents produced:
Date or date range(s) covered by each document:	Date or date range(s) covered by each document:

If any required document was not produced, see section (h)(2).

Additional information for this section appears on attached continuation page(s).

SECTION (h)(2): REQUIRED DOCUMENTS NOT PRODUCED

For each required document not produced, provide the following information.

Applicable section or document category:
Specific document(s) not produced:
Why not produced:
Efforts being made to obtain the document(s):
When the document(s) will be available, if known:
Identity and location of the entity who has the document(s):

Applicable section or document category:
Specific document(s) not produced:
Why not produced:
Efforts being made to obtain the document(s):
When the document(s) will be available, if known:
Identity and location of the entity who has the document(s):

If additional space is needed, use Optional Local Form FL-017A or another continuation page for this section.

Additional information for this section appears on attached continuation page(s).

DECLARATION:

I have identified each document being produced pursuant to rule 19.27 and the date or date range(s) covered by each document. If any required document was not timely produced, I have provided the information required by rule 19.27(h).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature

Date

Name

Place

**CONTINUATION PAGE TO LOCAL FORM FL017
SECTION (h)(2): REQUIRED DOCUMENTS NOT PRODUCED
DECLARATION DATED: _____**

Applicable section or document category:
Specific document(s) not produced:
Why not produced:
Efforts being made to obtain the document(s):
When the document(s) will be available, if known:
Identity and location of the entity who has the document(s):

Applicable section or document category:
Specific document(s) not produced:
Why not produced:
Efforts being made to obtain the document(s):
When the document(s) will be available, if known:
Identity and location of the entity who has the document(s):

Applicable section or document category:
Specific document(s) not produced:
Why not produced:
Efforts being made to obtain the document(s):
When the document(s) will be available, if known:
Identity and location of the entity who has the document(s):

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name & Bar Number, Address, and Telephone No.): ATTORNEY FOR:	Reserved for Clerk's File Stamp
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO <input type="checkbox"/> 1050 Monterey Street, Room 220 San Luis Obispo, CA 93408 <input type="checkbox"/> 901 Park Street, Paso Robles, CA 93446	
Petitioner/Plaintiff: v. Respondent/Defendant:	
NOTICE REGARDING CONFIDENTIALITY OF CHILD WELFARE RECORDS UNDER WELFARE & INSTITUTIONS CODE SECTION 827	CASE NUMBER:

This form must be attached to the first page of all Child Welfare Records being submitted to the court.

ATTENTION CLERK: The attached child welfare records are confidential and must be maintained solely in the confidential portion of the Family Law or Probate file.

Assigned Judge: _____

Department: _____

Date of Hearing: _____

Number of Pages (including this cover page): _____

Exhibit Number: _____

PURSUANT TO WELFARE AND INSTITUTIONS CODE SECTIONS 827 AND 10850, CALIFORNIA RULES OF COURT 5.552, AND/OR PENAL CODE SECTION 11167.5, the attached records are confidential and must not be disseminated further. Anyone who reveals, disseminates, shares, or otherwise violates the confidentiality of these records is guilty of a misdemeanor, pursuant to Penal Code, Section 11167.5(a) which is punishable by imprisonment in the county jail for up to six (6) months, by a fine of five hundred dollars (\$500) or by both imprisonment and a fine.

Date: _____

 Attorney or Party Without Attorney

