

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number and address):		
TELEPHONE NO:	FAX NO: (OPTIONAL)	
E-MAIL ADDRESS (OPTIONAL)		
ATTORNEY FOR:		
SUPERIOR COURT OF SAN LUIS OBISPO COUNTY San Luis Obispo Branch 1035 Palm Street, Room 385, San Luis Obispo, CA 93408-2500 web site: www.slocourts.net		
In the matter of the Adoption Petition of:		
FINANCIAL STATEMENT (STEPPARENT ADOPTION)		CASE NO:

We, the undersigned declare that our gross family income as substantiated by our most recent Federal Tax Return, filed in 20____, falls into the category checked below:

- \$19,000 and below
- \$19,001-\$34,999
- \$35,000-\$49,999
- \$50,000 and above

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

Dated: _____

Petitioner

Parent Retaining Custody