

CHILD SUPPORT WORKSHEET

Parents

Name		
Relationship		

1. INCOME

1a	Income			
1b	Additions to and subtractions from income			
	Add spousal support owed to the parent			
	Subtract spousal support the parent owes			
	Subtract mandatory union dues			
	Subtract cost of the parent's own health care coverage, if required to enroll this child. Do not count if counting makes health care coverage not reasonable in cost (line 7d).			
	Income after additions and subtractions			
1c	Number of additional children each parent supports			
1d	Additional child deduction Reference the guidelines scale using the parent's income after additions and subtractions (line 1b) and the number of additional children (line 1c)			combined
1e	Adjusted income Subtract additional child deduction (line 1d) from income after additions and subtractions (line 1b). Sum the parents' adjusted incomes in the "combined" column.			
1f	Each parent's percentage share of combined income (each parent's share from line 1e divided by the combined total)			

2. BASIC SUPPORT

combined

2a	Number of children in this calculation			
2b	Will there be a parenting time credit? Enter "yes" if: 1) There is a court order or written agreement for parenting time OR custody is split, <i>and</i> 2) each parent (<i>or</i> , if the child lives with a caretaker, at least one parent) has 25% or greater parenting time			
2c	Basic support per guideline scale Reference the scale using combined adjusted income (line 1e) and number of children (line 2a). If there will be a parenting time credit (line 2b), multiply the scale amount by 1.5. Enter this combined basic support obligation in the "combined" column. Multiply the combined amount by each parent's income share (line 1f) to determine each parent's share of basic support.			

3. PARENTING TIME CREDIT

Only complete this section if the answer to 2b is "yes"

**caretaker
or agency**

3a	Percentage shares of parenting time			
3b	Parenting time credit Multiply each parent's share of parenting time (line 3a) by the combined basic support obligation (line 2c). Line 2b must be "yes" in order to enter a credit here.			

7. MEDICAL SUPPORT

7a	Income available for medical support If the parent's income (line 1a) is \$1,456 or less, enter zero. Otherwise, subtract cash support obligation (line 6c) from the income available for support (line 6a).		
7b	Reasonable in cost The maximum amount a parent may be ordered to pay for private health care coverage or for cash medical support is the lower of: 1) 4% of a parent's adjusted income (line 1e), or a greater amount, if supported by specified compelling factors, or 2) the income available for medical support (line 7a) Round the result to the nearest dollar.		
7c	Health insurance premium cost for the children only. Enter "none" if no comprehensive, accessible insurance is available.		
7d	Is the private health care coverage reasonable in cost? If the premium (line 7c) is equal to or less than the reasonable in cost amount (line 7b) and the parent's income (line 1a) is greater than \$1,456, enter "yes". Otherwise enter "no".		
7e	Cash medical support Enter the amount of the reasonable in cost cap (line 7b). This amount may be ordered if the parent does not provide appropriate health care coverage.		

8. CASH CHILD SUPPORT AFTER MINIMUM ORDER

8a	Cash child support Enter the preliminary cash child support obligation (line 6c) and round to the nearest dollar. But, if the total of preliminary cash child support (line 6c) and the reasonable in cost amount (line 7b) is less than \$100, and the parent does not have an exception to the minimum order presumption, subtract the reasonable in cost amount (line 7b) from \$100 and enter the result here. Round the result to the closest dollar.		
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9. REBUTTALS (optional)

Only complete this section if rebutting the presumed support amount determined above. You must document the reason for the rebuttal. A worksheet is available to calculate and document rebuttals to income or to costs. The results of the worksheet will appear in this section. See instructions.

9a	Amount of change to cash child support due to rebuttal (+/-)		
9b	Cash child support after rebuttal(s)		
9c	Amount of change to cash medical support due to rebuttal (+/-)		
9d	Cash medical support after rebuttal(s)		

10. AGREED SUPPORT AMOUNT (optional)

Only complete this section if the parties agree to a change in the support amount. The deviation may be up to 10% of the support amount after any rebuttals.

10a	Amount of agreed change to cash child support (+/-)		
10b	Agreed cash child support		
10c	Amount of agreed change to cash medical support (+/-)		
10d	Agreed cash medical support		