

FAMILY COURT					
vs.		SSN		County	
				Docket	
		SSN			
Child Support Worksheet and Findings of Fact					
Child's Name	SSN	DOB	Child's Name	SSN	DOB

PART I. CALCULATING MONTHLY AVAILABLE INCOME

	Custodial	Noncustodial		Combined
1. Monthly Gross Income	\$	\$		
1a. Minus Self Employment and/or Spousal Support Adjustment	-	-		
2. Monthly Adjusted Gross Income	\$	\$		
3. Monthly After Tax Income (From Yellow Tax Conversion Table)	\$	\$		
3a. Minus Pre-existing Child Support	-	-		
3b. Minus Health Insurance	-	-		
3c. Minus Additional Self-Employment and/or Spousal Support Adjustment	-	-		
4. Monthly Unadjusted Available Income	\$	\$		
4a. Minus Additional Dependent Adjustment	-	-		
5. Monthly Available Income	\$	+	\$	= \$

PART II. CALCULATING THE CHILD SUPPORT OBLIGATION

6. Proportional Share of Income (Line 5 for each parent divided by line 5 "Combined")	%		%	
7. Child Support Guideline Amount (Apply line 5 "Combined" to blue Intact Family Expenditures Table)				\$
7a. Qualified Child Care Costs				+
7b. Extraordinary Medical Expenses				+
7c. Extraordinary Educational Expenses				+
8. Combined Family Expenditures				\$
9. Parental Support Obligation (Line 6 for each parent multiplied by line 8)	\$		\$	

PART III. ABILITY TO PAY CALCULATION

10. Self-Support Reserve (Amount found on the green Reference Sheet)		\$	
11. Income Available for Support (Line 4 minus line 10)		\$	
Enter the smaller of line 9 or line 11 on line 12. If Income Available for Support (Line 11) is less than \$50.00, a minimum support order of \$50.00 is recommended.			
12. Monthly Support Payable (From Non-custodial line 9 or line 11)		\$	
13. Monthly Incomes (After Support Payment) (For Custodial Parent, line 4 plus line 12; for Non-Custodial Parent, line 4 minus line 12)	\$	\$	
14. Maintenance Supplement		\$	

COMMENTS, CALCULATIONS, OR REBUTTALS TO SCHEDULE:

Prepared by:

Date: