

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

<b>PART I. CALCULATING MONTHLY AVAILABLE INCOME</b>	<b>Custodial</b>	<b>Noncustodial</b>	<b>Combined</b>
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	\$           +	\$           =	\$

<b>PART II. CALCULATING THE CHILD SUPPORT OBLIGATION</b>			
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)	\$	\$	

<b>PART III. ABILITY TO PAY CALCULATION</b>		
10. Self-Support Reserve		\$
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:**