



**FAMILY COURT**

**CHILD SUPPORT GUIDELINE WORKSHEET**

<b>Plaintiff</b>	<b>Civil Action File Number</b>
<b>Defendant</b>	

To be filed with complaints for divorce, for divorce on bed and board, miscellaneous complaints, and when an answer or modification is filed.

<b>Number of children:</b> _____	<b>Plaintiff</b>	<b>Defendant</b>	<b>Combined</b>
1. Monthly Gross Income	\$ _____	\$ _____	XXX
2. <u>Required Deductions:</u>	- _____	- _____	XXX
a. Preexisting Child Support Payments	- _____	- _____	XXX
b. Health Insurance Premiums or Medical Cash Contributions	- _____	- _____	XXX
c. Additional Minor Dependents	- _____	- _____	XXX
d. Work Related Child Care Cost Share	- _____	- _____	XXX
3. <u>Optional Adjustments in the Discretion of the Court</u>			
a. Pension/Retirement Payments	- _____	- _____	XXX
b. Life Insurance Premium Payments	- _____	- _____	XXX
c. Parent's Extraordinary Medical Expenses	- _____	- _____	XXX
d. Income Tax Exemptions Adjustment	+/- _____	+/- _____	XXX
e. Payments of Assigned Marital Debts	- _____	- _____	XXX
4. Monthly Adjusted Gross Income (line 1 minus lines 2 and 3)	\$ _____	\$ _____	\$ _____
5. Percentage Share of Income (line 4 parents' income divided by line 4 combined income)	_____	_____	100%
6. Basic Child Support Obligation (apply line 4 combined income to child support table)	XXX	XXX	_____
7. Work-Related Child Care Costs (actual costs minus federal tax credit)	XXX	XXX	_____
8. Total Child Support Obligation (add lines 6 and 7)	XXX	XXX	\$ _____
9. Parent's Child Support Obligation (for each parent, line 5 percentage X line 8)	\$ _____	\$ _____	XXX
10. Recommended Child Support Order (enter line 9 amount for <u>non-custodial parent</u> only; leave other column blank)	\$ _____	\$ _____	XXX
11. Basic Child Support Amount Ordered:	\$ _____	per _____	
		weekly/bi-weekly/monthly	
12. Cash Medical Ordered:	\$ _____	per _____	
		weekly/bi-weekly/monthly	
13. TOTAL AMOUNT ORDERED: (add lines 11 and 12)	\$ _____	per _____	
		weekly/bi-weekly/monthly	

Prepared and presented  
 By/for the plaintiff \_\_\_\_\_ Date \_\_\_\_\_  
 By/for the defendant \_\_\_\_\_ Date \_\_\_\_\_

Prepared and presented by the Office of Child Support Services (if applicable): \_\_\_\_\_  
 Date: \_\_\_\_\_

Entered as an Order of the court on _____.	<b>APPROVED:</b> /s/ _____ Judicial Officer
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