

	Father	Mother
Gross Monthly Income	(13) \$ _____	\$ _____
Spousal maintenance paid	(14) \$- _____	\$- _____
Spousal maintenance received	(15) \$+ _____	\$+ _____
Custodial parent of other children subject of court order(s) [] Father [] Mother	(16) \$- _____	\$- _____
Court-ordered child support paid for children of other relationships	(17) \$- _____	\$- _____
Other natural or adopted children not subject of court order(s) [] Father [] Mother	(18) \$- _____	\$- _____
Standard deduction	\$- _____	\$- _____
Alternate Deduction (only if less than standard deduction)	\$- _____	\$- _____
Adjusted Gross Monthly Income	(19) \$ _____	\$ _____
Combined Adjusted Gross Income	(20) \$ _____	\$ _____
Basic Child Support Obligation for [] children	(21) \$ _____	\$ _____
Additions:		
Adjusted for [] children over age 12 at []%	(22) \$ _____	\$ _____
Medical, dental and vision insurance paid	(23) \$ _____	\$ _____
Monthly childcare costs for [] child(ren)	(24) \$ _____	\$ _____
Less federal tax credit allowed to custodian at []%	\$ _____	\$ _____
Extra education expenses paid	(25) \$ _____	\$ _____
Extraordinary (gifted or handicapped) child expenses paid	(26) \$ _____	\$ _____
Subtotal	(27) \$ _____	\$ _____
Total Adjustments for Costs	(28) \$ _____	\$ _____
Total Child Support Obligation	(29) \$ _____	\$ _____
Each parent's proportionate percentage of combined income	(30) _____%	_____%
Each parent's proportionate share of the total support obligation	(31) \$ _____	\$ _____
Less paying parent's costs	(32) \$ _____	\$ _____
Costs associated with parenting time: Table A []		Table B []
No. of parenting days _____		
Line (21) x adjustment percentage _____%	(33) \$ _____	\$ _____
Adjustments subtotal	(34) \$ _____	\$ _____
Preliminary Child Support Amount	(35) \$ _____	\$ _____

Case No. _____

Self-Support Reserve Test for Payor

Line (19) \$ _____

Less paid arrears \$ _____

Less \$1,115

(36) \$ _____ \$ _____

Child support amount to be paid by:

[] Father [] Mother

(37) \$ _____ \$ _____

Travel related to parenting time

(38) _____% _____%

Medical, dental, and vision costs not paid by insurance

(39) _____% _____%