

## Worksheet – Child Support Obligation

Each party shall complete that portion of the worksheet that applies to him or her, sign the form and file it with the court. This worksheet is required in all proceedings establishing or modifying child support.

**IN RE:**

**CASE NO:**

FATHER:

MOTHER:

### CHILD SUPPORT OBLIGATION WORKSHEET (CSOW)

Children	DOB	Children	DOB
<b>1. WEEKLY GROSS INCOME</b>		<b>FATHER</b>	<b>MOTHER</b>
A. Subsequent Children Multiplier Credit (.065 .097 .122 .137 .146 .155 .164 .173)			
B. Child Support (Court Order for Prior Born)			
C. Child Support (Legal Duty for Prior Born)			
D. Maintenance Paid			
E. WEEKLY ADJUSTED INCOME (WAI) Line 1 minus 1A, 1B, 1C and 1D			
<b>2. PERCENTAGE SHARE OF TOTAL WAI</b>		%	%
<b>3. COMBINED WEEKLY ADJUSTED INCOME</b> (Line 1E)			
<b>4. BASIC CHILD SUPPORT OBLIGATION</b> Apply CWAI to Guideline Schedules			
A. Weekly Work-Related Child Care Expense of each parent			
B. Weekly Health Insurance Premium – (Children's portion)			
<b>5. TOTAL CHILD SUPPORT OBLIGATION</b> (Line 4 plus 4A and 4B)			
<b>6. PARENT'S CHILD SUPPORT OBLIGATION</b> (Line 2 times Line 5)			
<b>7. ADJUSTMENTS</b>			
( ) Obligation from Post-Secondary Education Worksheet Line J.		+ _____	+ _____
( ) Payment of work-related child care by each parent. (Same amount as Line 4A )		- _____	- _____
( ) Weekly Health Insurance Premium (Children's portion)		- _____	- _____
( ) Parenting Time Credit		- _____	- _____
<b>8. RECOMMENDED CHILD SUPPORT OBLIGATION</b>			

**I affirm under penalties for perjury that the foregoing representations are true.**

Father: \_\_\_\_\_

Dated: \_\_\_\_\_

Mother: \_\_\_\_\_

#### UNINSURED HEALTH CARE EXPENSE CALCULATION

A. Custodial Parent Annual Obligation: (CSOW Line 4 Total) \$\_\_\_\_\_ + (PSEW § Two, Line I) \$\_\_\_\_\_ = \$\_\_\_\_\_ x 52 weeks x .06 = \$\_\_\_\_\_.

B. Balance of Annual Expenses to be Paid: (Line 2) \_\_\_\_\_ % by Father; \_\_\_\_\_ % by Mother.