BASIC CHILD SUPPORT OBLIGATION WORKSHEET

CHILDREN	DATE OF BIRTH	CHILDREN		DATE OF BIRTH		
			_		-	
			 FATHE	R MOTHER	- COMBINED	
1. MONTHLY GROSS I	NCOME					
a. Minus pre-existing child support payment.						
b. Minus pre-existing child support payment.						
2. MONTHLY ADJUSTED GROSS INCOME						
3. PERCENTAGE SHARE OF INCOME				%		
4. NUMBER OF CHILDREN						
5. BASIC CHILD SUPPORT OBLIGATION						
a. Net Child Care Costs (Cost Minimum Federal Tax Credit.)						
b. Child's Health Insurance Premium Cost.						
c. Extraordinary Medical Expenses (Uninsured Only.)						
d. Extraordinary Expenses						
e. Optional. Minus extraordinary adjustments.						
6. TOTAL CHILD SUPPORT OBLIGATION						
7. EACH PARTY'S SHARE OF EXPENSES						
8. DIRECT PAYMENTS MADE BY EACH PARTY						
9. EACH PARTY'S CHILD SUPPORT OBLIGATION						
10. RECOMMENDED CHILD SUPPORT ORDER						
Comments, calculations pays extraordinary expe	, or rebuttals to schedule or anses.	adjustments if non-cus	todial or non-	domiciliary p	arty directly	
		4-2-1				
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