

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

IN THE MATTER OF:)

_____)
 Petitioner)

and _____)

_____)
 Respondent)

CASE NO. DG _____
 Division _____

CHILD SUPPORT WORKSHEET

	<u>MOTHER</u>	<u>FATHER</u>
A. <u>INCOME COMPUTATION – WAGE EARNER</u>		
1. Domestic Gross Income (Insert on Line C.1. below)*	\$ _____	\$ _____
B. <u>INCOME COMPUTATION – SELF-EMPLOYED</u>		
1. Self-Employment Gross Income*	_____	_____
2. Reasonable Business Expenses	(-) _____	_____
3. Domestic Gross Income (Insert on Line C.1. below)	_____	_____
C. <u>ADJUSTMENTS TO DOMESTIC GROSS INCOME</u>		
1. Domestic Gross Income	_____	_____
2. Court-Ordered Child Support Paid	(-) _____	_____
3. Court-Ordered Maintenance Paid	(-) _____	_____
4. Court-Ordered Maintenance Received	(+) _____	_____
5. Child Support Income (Insert on Line D.1. below)	_____	_____
D. <u>COMPUTATION OF CHILD SUPPORT</u>		
1. Child Support Income	_____	+ _____
		= _____
2. Proportionate Shares of Combined Income (Each parent's income divided by combined income)	_____ %	_____ %
3. Gross Child Support Obligation** (Using the combined income from Line D.1., find the amount for each child and enter total for all children)		

Age of Children Number Per Age Category	0-5		6-11		12-18		Total
Total Amount	_____	+	_____	+	_____	=	_____

* Interstate Pay Differential Adjustment? _____ Yes _____ No

**Multiple Family Application? _____ Yes _____ No

	<u>MOTHER</u>	<u>FATHER</u>
4. Health and Dental Insurance Premium	\$ _____	+ \$ _____
		= _____
5. Work-Related Child Care Costs Formula: Amt. - ((Amt. X %) + (.25 x (Amt. x %))) for each child care credit	_____	_____
Example: 200 - ((200 x .30%) + (.25 x (200 x .30%)))		= _____
6. Parents' Total Child Support Obligation (Line D.3. plus Lines D.4. & D.5.)		_____
7. Parental Child Support Obligation (Line D.2. times Line D.6. for each parent)	_____	_____
8. Adjustment for Insurance and Child Care (Subtract for actual payment made for items D.4. and D.5.)	(-) _____	_____
9. Basic Parental Child Support Obligation (Line D.7. minus Line D.8.; Insert on Line F.1. below)	_____	_____

E. CHILD SUPPORT ADJUSTMENTS

APPLICABLE	N/A	CATEGORY	AMOUNT ALLOWED	
			MOTHER	FATHER
1. <input type="checkbox"/>	<input type="checkbox"/>	Long Distance Parenting Time Costs	(+/-) _____	(+/-) _____
2. <input type="checkbox"/>	<input type="checkbox"/>	Parenting Time Adjustment (if b. %____)	(+/-) _____	(+/-) _____
3. <input type="checkbox"/>	<input type="checkbox"/>	Income Tax Considerations	(+/-) _____	(+/-) _____
4. <input type="checkbox"/>	<input type="checkbox"/>	Special Needs/Extraordinary Exp	(+/-) _____	(+/-) _____
5. <input type="checkbox"/>	<input type="checkbox"/>	Agreement Past Majority	(+/-) _____	(+/-) _____
6. <input type="checkbox"/>	<input type="checkbox"/>	Overall Financial Condition	(+/-) _____	(+/-) _____
7. TOTAL (Insert on Line F.2. below)			_____	_____

F. DEVIATION(S) FROM REBUTTABLE PRESUMPTION AMOUNT

		AMOUNT ALLOWED	
		MOTHER	FATHER
1. Basic Parental Child Support Obligation (Line D.9. from above)		_____	_____
2. Total Child Support Adjustments (Line E.7. from above)	(+/-)	_____	_____
3. Adjusted Subtotal (Line F.1. +/- Line F.2.)		_____	_____
4. Enforcement Fee Allowance**	Percentage _____ %		
(Applied only to Nonresidential Parent)	Flat Fee \$ _____		
((Line F.3. x Collection Fee %) x .5) or (Monthly Flat Fee x .5)	(+)	_____	(+)
5. Net Parental Child Support Obligation (Line F.3. + Line F.4.)		_____	_____

Parent with nonprimary residency. **Use local percentage of 5%.

District Judge Pro Tem

Prepared By:

(Your signature here)