Washington State Child Support Schedule Worksheets

☐ Proposed by ☐ (name) _____ ☐ State of WA ☐ Other _____. (CSWP)
Or, ☐ Signed by the Judicial/Reviewing Officer. (CSW)

County _____ **Case No**. _____

Child/ren and Age/s: _____

Parent 1 _____ **Parent 2** _____

	Parent 1	Parent 2
Part I: Income (see Instructions, page 6)		
1. Gross Monthly Income		
a. Wages and Salaries	$	$
b. Interest and Dividend Income	$	$
c. Business Income	$	$
d. Maintenance Received	$	$
e. Other Income	$	$
f. Imputed Income	$	$
g. Total Gross Monthly Income (add lines 1a through 1f)	$	$
2. Monthly Deductions from Gross Income		
a. Income Taxes **(**Federal and State)	$	$
b. FICA **(**Soc. Sec.+ Medicare**)**/Self-Employment Taxes	$	$
c. State Industrial Insurance Deductions	$	$
d. Mandatory Union/Professional Dues	$	$
e. Mandatory Pension Plan Payments	$	$
f. Voluntary Retirement Contributions	$	$
g. Maintenance Paid	$	$
h. Normal Business Expenses	$	$
i. Total Deductions from Gross Income (add lines 2a through 2h)	$	$
3. Monthly Net Income (line 1g minus 2i)	$	$
4. Combined Monthly Net Income (add parent 1's and parent 2's monthly net incomes from line 3)	$	
5. Basic Child Support Obligation (enter total amount in box →) Child #1 _____ Child #3 _____ Child #5 _____ Child #2 _____ Child #4 _____	$	
6. Proportional Share of Income (divide line 3 by line 4 for each parent)	.	.

	Parent 1	Parent 2
Part II: Basic Child Support Obligation (see Instructions, page 7)		
7. Each Parent's Basic Child Support Obligation without consideration of low income limitations. (Multiply each number on line 6 by line 5.)	$	$
8. Calculating low income limitations: Fill in only those that apply.		
Self-Support Reserve: (125% of the Federal Poverty Guideline.)	$	
a. Is Combined Net Income Less Than $1,000? **If yes**, for each parent enter the presumptive $50 **per child**.	$	$
b. Is Monthly Net Income Less Than Self-Support Reserve? **If yes**, for that parent enter the presumptive $50 **per child**.	$	$
c. Is Monthly Net Income equal to or more than Self-Support Reserve? **If yes**, for each parent subtract the self-support reserve from line 3. If that amount is less than line 7, enter that amount or the presumptive $50 per child, whichever is greater.	$	$
9. Each parent's basic child support obligation after calculating applicable limitations. For each parent, enter the lowest amount from line 7, 8a - 8c, but not less than the presumptive $50 per child.	$	$
Part III: Health Care, Day Care, and Special Child Rearing Expenses (see Instructions, page 8)		
10. Health Care Expenses		
a. Monthly Health Insurance Premiums Paid for Child(ren)	$	$
b. Uninsured Monthly Health Care Expenses Paid for Child(ren)	$	$
c. Total Monthly Health Care Expenses (line 10a plus line 10b)	$	$
d. Combined Monthly Health Care Expenses (add parent 1's and parent 2's totals from line 10c)	$	
11. Day Care and Special Expenses		
a. Day Care Expenses	$	$
b. Education Expenses	$	$
c. Long Distance Transportation Expenses	$	$
d. Other Special Expenses (describe)	$	$
	$	$
	$	$
	$	$
e. Total Day Care and Special Expenses (add lines 11a through 11d)	$	$
12. Combined Monthly Total Day Care and Special Expenses (add parent 1's and parent 2's day care and special expenses from line 11e)	$	
13. Total Health Care, Day Care, and Special Expenses (line 10d plus line 12)	$	
14. Each Parent's Obligation for Health Care, Day Care, and Special Expenses (multiply each number on line 6 by line 13)	$	$
Part IV: Gross Child Support Obligation		
15. Gross Child Support Obligation (line 9 plus line 14)	$	$

	Parent 1	Parent 2
Part V: Child Support Credits (see Instructions, page 9)		
16. Child Support Credits		
a. Monthly Health Care Expenses Credit	$	$
b. Day Care and Special Expenses Credit	$	$
c. Other Ordinary Expenses Credit (describe) $	$	$
d. Total Support Credits (add lines 16a through 16c)	$	$
Part VI: Standard Calculation/Presumptive Transfer Payment (see Instructions, page 9)		
17. Standard Calculation (line 15 minus line 16d or $50 per child whichever is greater)	$	$
Part VII: Additional Informational Calculations		
18. 45 % of each parent's net income from line 3 (.45 x amount from line 3 for each parent)	$	$
19. 25% of each parent's basic support obligation from line 9 (.25 x amount from line 9 for each parent)	$	$
Part VIII: Additional Factors for Consideration (see Instructions, page 9)		
20. Household Assets (List the estimated present value of all major household assets.)		
a. Real Estate	$	$
b. Investments	$	$
c. Vehicles and Boats	$	$
d. Bank Accounts and Cash	$	$
e. Retirement Accounts	$	$
f. Other (describe)	$	$
	$	$
21. Household Debt (List liens against household assets, extraordinary debt.)		
	$	$
	$	$
	$	$
	$	$
	$	$
22. Other Household Income		

a. Income Of Current Spouse or Domestic Partner
      (if not the other parent of this action)
      Name _____
	$	$

Name _____	$	$
b. Income Of Other Adults In Household Name _____	$	$
Name _____	$	$

	Parent 1	Parent 2
c. Gross income from overtime or from second jobs the party is asking the court to exclude per Instructions, page 8 _____ _____	$	$
d. Income Of Child(ren) (if considered extraordinary) Name _____ Name _____	$ $	$ $
e. Income From Child Support Name _____ Name _____	$ $	$ $
f. Income From Assistance Programs Program _____ Program _____	$ $	$ $
g. Other Income (describe) _____ _____	$ $	$ $
23. Non-Recurring Income (describe) _____ _____	$ $	$ $
24. Child Support Owed, Monthly, for Biological or Legal Child(ren)		
Name/age: _____ Paid [ ] Yes [ ] No	$	$
Name/age: _____ Paid [ ] Yes [ ] No	$	$
Name/age: _____ Paid [ ] Yes [ ] No	$	$
25. Other Child(ren) Living In Each Household		
(First name(s) and age(s))		
26. Other Factors For Consideration		

Other Factors for Consideration (continued) (attach additional pages as necessary)

Signature and Dates

I declare, under penalty of perjury under the laws of the State of Washington, the information contained in these Worksheets is complete, true, and correct.

_____
Parent 1's Signature

_____
Parent 2's Signature

_____
Date   City

_____
Date   City

_____
Judicial/Reviewing Officer

_____
Date

This worksheet has been certified by the State of Washington Administrative Office of the Courts.
Photocopying of the worksheet is permitted.