Washington State Child Support Schedule Worksheets

[] Proposed by [] [] State of WA (CSWP)

Or, [] Signed by the Judicial/Reviewing Officer. (CSW)

County KING Case No. 23-3-05392-7 SEA

Child/ren and Age/s: Robert Moyer, 16; Adrian Moyer, 12

Christine Moyer Parents' names: Robert Edward Moyer II

(Column 2) (Column 1)

	R	obert	Christ	tine
Part I: Income (see Instructions, page 6)				
Gross Monthly Income				
a. Wages and Salaries Imputed for Robert		-	\$1794	45.58
b. Interest and Dividend Income		\$697.21	\$69	97.30
c. Business Income: Rental Income		-	\$41	14.83
d. Maintenance Received		-		-
e. Other Income: Robert – Deferred Compensation; Christine -	\$2	2,248.25	\$2,89	97.32
Bonus				
f. Imputed Income	\$1	7000.00		-
g. Total Gross Monthly Income (add lines 1a through 1f)	\$1	9945.46	\$2195	55.03
2. Monthly Deductions from Gross Income				
a. Income Taxes (Federal and State) Tax Year: 2024	\$4	,022.07	\$4,06	60.54
b. FICA (Soc.Sec.+Medicare)/Self-Employment Taxes	\$1	,120.60	\$1,19	99.52
c. State Industrial Insurance Deductions		-	\$1	13.76
d. WA Family Leave, WA Medical Leave, WA Cares Fund		\$159.82	\$15	59.82
e. Mandatory Pension Plan Payments		-		-
f. Voluntary Retirement Contributions	,	\$416.66	\$41	16.66
g. Maintenance Paid		-		-
h. Normal Business Expenses		-	\$84	40.00
i. Total Deductions from Gross Income (add lines 2a through 2h)	\$5	5,719.15	\$6,69	90.30
3. Monthly Net Income (line 1g minus 2i)	\$14	1,226.31	\$15,26	64.73
4. Combined Monthly Net Income		\$29,49	1.04	
(add both parents' monthly net incomes from line 3)				
5. Basic Child Support Obligation				
Number of children: 2 x \$1190.00 per child				
(enter total amount in box \rightarrow)	\$2,380.00			
6. Proportional Share of Income (divide line 3 by line 4 for each parent)		.482		.518

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	Rob	bert	Christine				
Part II: Basic Child Support Obligation (see Instructions, page 7)							
7. Each Parent's Basic Child Support Obligation without consideration							
of low income limitations (Each parent's Line 6 times Line 5.)	\$1,	147.16	\$1,232.84				
8. Calculating low income limitations: Fill in only those that apply.							
Self-Support Reserve: (125% of the federal poverty guideline for a	\$1,569.00						
one-person family.)							
a. Is combined Net Income Less Than \$1,000? If yes, for each							
parent enter the presumptive \$50 per child .		-		-			
b. <u>Is Monthly Net Income Less Than Self-Support Reserve?</u> 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.		-					
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.	¢1	147.16	¢1 2	32.84			
·			. ,				
Part III: Health Care, Day Care, and Special Child Rearing Expenses	(see i	Instructio	ns, pag	e 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 both parents' totals from line 10c)			-				
11. Day Care and Special Expenses		1					
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 both parents' 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)	\$1.	147.16	\$1,2	32.84			
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	Robert	Christine
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 Tatal Commant One dife. (and disease 40 a ferrounds 40 a)	-	-
d. Total Support Credits (add lines 16a through 16c)	-	-
Part VI: Standard Calculation/Presumptive Transfer Payment (see	Instructions, pa	ge 9)
17. Standard Calculation (line 15 minus line 16d or \$50 per child		
whichever is greater)	\$1,147.16	\$1,232.84
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)	\$6,401.84	\$6,869.13
19. 25% of each parent's basic support obligation from line 9 (.25 x		
amount from line 9 for each parent)	\$286.79	\$308.21
Part VIII: Additional Factors for Consideration (see Instructions, pa	ge 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)	-	-
	-	-
	-	<u>-</u>
21. Household Debt (List liens against household assets, extraordinary debt.)	-	-
a.	_	_
a. b.		
C.		
d.	_	_
e.	_	_
f.	_	-
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	-	-

								Rober	rt	Christine
c. Gross Income from overtime or from						arty				
is asking the court to exclude per Ins	struction	S,	page	8 9					-	-
d. Income Of Child(ren) (if considered e	extraord	ina	ary)							
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. Monthly Child Support Ordered for Oth										
Name/age:		[]			_				-	-
Name/age:	Paid	[]	Yes						-	-
Name/age:		[]	Yes	[]	۱ [No			-	-
25. Other Child(ren) Living In Each House	hold									
(First name(s) and age(s))										
							\perp			
							\perp			

26. Other Factors For Consideration

Basis for Interest and Dividend Income for Robert and Christine:

50% of Interest (\$966) reported on 2023 tax return

Interest: \$40.25/mo., \$483.00 Annually

50% of Dividends (\$15,768) reported on 2023 tax return

Dividend: \$656.96/mo., \$7,884 Annually

Basis for Business Income for Christine Moyer: \$414.83/mo.:

\$4,978.00 Annually reported on 2023 tax return with depreciation added back in.

Other Factors For Consideration (continued) (attach additional pages as necessary)				
Basis for Other Income for Christine Moyer, \$2	,897.32:			
\$34,767.80 annually comprised of:				
 2023 bonus \$24,537; \$5,000 SPOT reported on pay stub; Digi Ptr Stip \$230.80 reported on pay stu 	ub.			
Signature and Dates		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
I declare, under penalty of perjury under the law in these Worksheets is complete, true, and corn		asnington, the information contained		
Parent's Signature (Column 1)	 Parent's Sig	nature (Column 2)		
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.

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