**Superior Court of Washington, County of King**

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| In re:  Petitioner:  CHRISTINE MOYER  And Respondent:  ROBERT EDWARD MOYER II | No. 23-3-05392-7 SEA Child Support Order **Final (ORS)** Clerk's action required: WSSR, 1 |

**Child Support Order**

**1. Money Judgment Summary**

No money judgment is ordered.

Findings and Orders

**2.** The court orders child support as part of this family law case. This is a final order.

**3.** The *Child Support Schedule Worksheets* attached or filed separately are approved by the court and made part of this order.

**4. Parents' contact and employment information**

Each parent must fill out and file with the court a *Confidential Information* form (FL All Family 001) including personal identifying information, mailing address, home address, and employer contact information.

***Important!*** If you move or get a new job any time while support is still owed, you must:

* Notify the Support Registry, and
* Fill out and file an updated *Confidential Information* form with the court.

***Warning!*** Any notice of a child support action delivered to the last address you provided on the *Confidential Information* form will be considered adequate notice, if the party trying to serve you has shown diligent efforts to locate you.

**5. Parents' Income**

| **Parent *(name):*** Christine Moyer | **Parent *(name):*** Robert Moyer II |
| --- | --- |
| **Net monthly income $ 14,037.**  *(line 3 of the Worksheets)*  This income is:  [  ] imputed to this parent.  [X] this parent’s actual income *(after any exclusions approved below).* | **Net monthly income $ 41,120.**  *(line 3 of the Worksheets)*  This income is:  [X] imputed to this parent.  [  ] this parent’s actual income *(after any exclusions approved below)*. |
| **Does this parent have income from overtime or a second job?**  [  ] No.  [  ] Yes. | **Does this parent have income from overtime or a second job?**  [  ] No.  [  ] Yes. |

**6. Imputed Income**

*To calculate child support, the court may* ***impute*** *income to a parent:*

* *whose income is unknown, or*
* *who the Court finds is unemployed or under-employed by choice.*

*Imputed income is not actual income. It is an assigned amount the court finds a parent could or should be earning. (RCW 26.19.071(6))*

| **Parent *(name):*** Christine Moyer | **Parent *(name):*** Robert Moyer II |
| --- | --- |
| Does not apply. This parent’s actual income is used. | This parent’s monthly net income is imputed because:  this parent is voluntarily unemployed.  The imputed amount is based on the information below: *(Options are listed in order of required priority. The court used the first option possible based on the information it had unless a presumed option was rebutted.)* |

**7. Limits affecting the monthly child support amount**

The monthly amount has been affected by:

**Combined Monthly Net Income over $12,000.** Together, the parents earn more than $12,000 per month. The child support amount

**8. Standard Calculation**

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| *Parent Name* | *Standard calculation worksheets line 17* |
| Christine Moyer | $605 |
| Robert Edward Moyer II | $1,775 |

**9. Deviation from standard calculation**

Should the monthly child support amount be different from the standard calculation?

**No** - The monthly child support amount ordered in section **10** is the **same** as the standard calculation listed in section **8** because

**10. Monthly child support amount (transfer payment)**

After considering the standard calculation in section **8**, and whether or not to apply a deviation in section **9**, the court orders the following monthly child support amount (transfer payment).

Robert Moyer II must pay child support to Christine Moyer each month as follows for the children listed below:

|  |  |  |
| --- | --- | --- |
| Child’s Name | Age | Amount |
| 1. Robert Edward Moyer III | 16 | $887.74 |
| 2. Adrian Moyer | 12 | $887.74 |
| **Total monthly child support amount:** | | **$ 1,775.48** |

**11. Starting date and payment schedule**

The monthly child support amount must be paid starting November 1, 2024 on the following payment schedule:

In two payments each month: 1/2 by the 1st and 1/2 by the 15th day of the month.

**12. Step increase or decrease (for modifications or adjustments only)**

Does not apply.

**13. Periodic Adjustment**

Child support may be changed according to state law. The Court is not ordering a specific periodic adjustment schedule below.

**14. Payment Method** *(check either Registry or Direct Pay)*

**Registry** – Send payment to theWashington State Support Registry. The Division of Child Support (DCS) will forward payments to the person owed support and keep records of all payments.

Address for payment: Washington State Support Registry  
PO Box 45868, Olympia, WA 98504

Phone number/s: 1 (800) 922-4306 or 1 (800) 442-5437

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| ***Important!***  *If you are ordered to send your support payments to the Washington State Support Registry, and you pay some other person or organization, you will* ***not*** *get credit for your payment*. |

**DCS Enforcement:**

DCS will **enforce** this order because:

One of the parties has already asked DCS for services.

**15. Enforcement through income withholding (garnishment)**

DCS or the person owed support can collect the support owed from the income, earnings, assets, or benefits of the parent who owes support, and can enforce liens against real or personal property as allowed by any state's child support laws without notice to the parent who owes the support.

*If this order is* ***not*** *being enforced by DCS and the person owed support wants to have support paid directly from the employer, the person owed support must ask the court to sign a separate income withholding order requiring the employer to withhold income and make payments. (Chapter 26.18 RCW.)*

Income withholding may be delayed until a payment becomes past due if the court finds good reason to delay.

Does not apply. There is no good reason to delay income withholding.

**16. Temporary reduction if incarcerated (abatement)**

***Important!*** *Read Support Abatement Warnings at the end of this order.*

If the person who owes support is incarcerated:

* The total monthly child support amount may be temporarily reduced to $10 while the person who owes support is in jail, prison, or a correctional facility for at least six months (or serving a sentence of more than six months), and has no income or assets available to pay the support.
* If reduced, the support amount will be $10 a month.
* Beginning the fourth month after the person who owes support is released, support will be 50% of the original amount, or $50 per child, whichever is more.
* One year after release, support will return to the original amount in section 10.
* Reinstatement of the support amount at 50% does not automatically apply, if a *Petition to Modify Child Support Order* is filed during the period of abatement.

**17. End date for support**

Support must be paid for each child until the court signs a different order or the child turns 18 or is no longer enrolled in high school, whichever happens last, unless the court makes a different order in section **18**.

**18. Post-secondary educational support (for college or vocational school)**

**Granted** - The parents must pay for the children's post-secondary educational support. Post-secondary educational support may include support for the period after high school and before college or vocational school begins. The amount or percentage each person must pay will be decided later. The parties may make a written agreement or ask the court to set the amount or percentage by filing a *Petition to Modify Child Support Order* (form FL Modify 501).

**19. Tax Issues**

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| ***Important!*** *Although personal tax exemptions are currently suspended under federal law through tax year 2025, other tax benefits may flow from claiming a child as dependent.* |

The parties have the right to claim the children as their dependents for purposes of personal tax exemptions and associated tax credits on their tax forms as follows:

Every year - Christine Moyer has the right to claim Adrian Moyer; and Robert Moyer II has the right to claim Robert Edward Moyer III.

Other:

Until one child remains then alternate, with Mother having even and father having odd.

For tax years when a non-custodial parent has the right to claim the children, the parents must cooperate to fill out and submit IRS Form 8332 in a timely manner.

**20. Medical Support**

***Important!*** *Read the Medical Support Warnings at the end of this order. Medical Support includes health insurance (both public and private) and cash payments towards premiums and uninsured medical expenses.*

**Private health insurance ordered**. Christine Moyer must pay the premium to provide health insurance coverage for the children. The court has considered the needs of the children, the cost and extent of coverage, and the accessibility of coverage.

The other parent must pay their proportional share\* of the premium paid. Health insurance premiums *\* Proportional share is each parent's percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

**21. Healthcare coverage if circumstances change or court has not ordered**

If the parties' circumstances change, or if the court is not ordering how healthcare coverage must be provided for the children in section **20**:

* A parent, non-parent custodian, or DCS can enforce the medical support requirement.
* If a parent does not provide proof of accessible healthcare coverage (coverage that can be used for the children's primary care), that parent must:
* Get (or keep) insurance through their work or union, unless the insurance costs more than 25% of their basic support obligation (line 19 of the *Worksheets*),
* Pay their share of the other parent's monthly premium up to 25% of their basic support obligation (line 19 of the *Worksheets*), or
* Pay their share of the monthly cost of any public healthcare coverage, such as Apple Health or Medicaid, which is assigned to the state.

**22. Children's expenses not included in the monthly child support amount**

**Uninsured medical expenses** - Each parent is responsible for a share of uninsured medical expenses as ordered below. Uninsured medical expenses include premiums, co-pays, deductibles, and other healthcare costs not paid by healthcare coverage.

| **Children’s Expenses for:** | Parent:  Christine Moyer  pays monthly | Parent:  Robert Moyer II   pays monthly | Make payments to: | |
| --- | --- | --- | --- | --- |
| Person who pays the expense | Service Provider |
| Uninsured medical expenses | Proportional Share\* | Proportional Share\* | [X] | [  ] |

\* *Proportional Share is each parent’s percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

**Other shared expenses:**

The parents will share the cost of the expenses listed below:

| **Children’s Expenses for:** | Parent:  Christine Moyer  pays monthly | Parent:  Robert Moyer II   pays monthly | Make payments to: | |
| --- | --- | --- | --- | --- |
| Person who pays the expense | Service Provider |
| [X] Education:  Private School for both children | 50%\*\* | 50%\*\* | [X] | [  ] |
| [X] Other *(specify):*  Agreed Extra-curricular activities | Proportional Share\* | Proportional Share\* | [X] | [  ] |

\* *Proportional Share is each parent’s percentage share of the combined net income from line 6 of the Child Support Schedule Worksheets.*

\*\* *If any percentages ordered are different from the Proportional Share, explain why:*

**A person receiving support can ask DCS to collect**:

expenses owed directly to them.

reimbursement for expenses the person providing support was ordered to pay.

an order for a money judgment from the court.

**23. Past due child support, medical support and other expenses**

This order does not address any past due amounts or interest owed.

**24. Overpayment caused by change**

Does not apply.

**25. Other Orders**

All of the *Warnings* below are required by law and are incorporated and made part of this order.

**Ordered.**

Dated:

*Judge or Commissioner*

**Petitioner and Respondent or their lawyers fill out below:**

|  |  |
| --- | --- |
| This document: | This document: |
|  |  |

24386 21047

*Petitioner signs here* ***or*** *lawyer signs here + WSBA No. Respondent signs here* ***or*** *lawyer signs here + WSBA No.*

Natalie de Maar Lisa Ann Sharpe

*Print Name Date Print Name Date*

**Parent or Non-Parent Custodian applies for Division of Child Support enforcement services:**

I ask the DCS to enforce this order. I understand that DCS will keep $35 each year as a fee if DCS collects more than $550, unless I ask to be excused from paying this fee in advance. *(You may call DCS at 1-800-442-5437. DCS will* ***not*** *charge a fee if you have ever received TANF, tribal TANF, or AFDC.)*

Christine Moyer

*Parent or Non-Parent Custodian signs here Print name Date  
(lawyer cannot sign for party)*

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| **All the warnings below are required by law and are part of the order. Do not remove.** |

***Warnings!***

**If you don’t follow this child support order…**

* DOL or other licensing agencies may deny, suspend, or refuse to renew your licenses, including your driver’s license and business or professional licenses, and
* Dept. of Fish and Wildlife may suspend or refuse to issue your fishing and hunting licenses and you may not be able to get permits. *(RCW 74.20A.320)*

**If you receive child support…**

You may have to:

* Document how that support and any cash received for the children’s healthcare was spent.
* Repay the other parent for any daycare or special expenses included in the support if you didn’t actually have those expenses. *(RCW 26.19.080)*

***Support Abatement Warnings!***

The Division of Child Support (DCS), the person required to pay support, the payee under this order, or the person entitled to receive support **may ask the court or DCS to temporarily reduce** child support to $10 per month when the person required to pay support is in jail, prison, or a correctional facility for at least six months, or serving a sentence of more than six months.

There is a rebuttable presumption that an incarcerated person cannot pay child support. DCS, the payee under this order, or the person receiving the support may overcome the presumption by showing that the person required to pay support has income or other assets available to pay support.

When a request for abatement is made, DCS will review its records and other available information, and decide if abatement is appropriate. DCS will send notice of the decision to the person required to pay support, and to the payee under this order or the person entitled to receive support. Any of those persons may object to DCS’s decision.

If at any point during the period of incarceration, a person or DCS later learns of income or other assets available to pay support, a request to terminate or reverse the abatement may be made through DCS or the Office of Administrative Hearings.

***Medical Support Warnings!***

**The parents** must keep the Support Registry informed about whether they have access to healthcare coverage for the children at a reasonable cost and to provide the policy information for any such coverage.

**If you are ordered to provide children’s healthcare coverage…**

You have **20 days** from the date of this order to send:

* proof that the children are covered, or
* proof that healthcare coverage is not available as ordered.

Send your proof to the other parent or to the Support Registry (if your payments go there).

If you do **not** provide proof of healthcare coverage:

The other parent or the support agency may contact your employer or union, without notifying you, to ask for direct enforcement of this order *(RCW 26.18.170)*, and

The other parent may:

Ask the DCS for help,

Ask the court for a contempt order, or

File a Petition in court.

**Don’t** cancel your employer or union health insurance for your children unless the court approves or your job ends, and you no longer qualify for insurance as ordered in section **20**.

If an insurer sends you payment for a medical provider’s service:

* you must send it to the medical provider if the provider has not been paid; or
* you must send the payment to whoever paid the provider if someone else paid the provider; or
* you may keep the payment if you paid the provider.

If the children have public healthcare coverage, the state can make you pay for the cost of the monthly premium.

**Always** inform the Support Registry and any parent if your access to healthcare coverage changes or ends.