

CIRCUIT COURT OF \_\_\_\_\_ COUNTY, MISSOURI  
CASE NO. \_\_\_\_\_ DIV/CT ROOM \_\_\_\_\_

**Form 14 CHILD SUPPORT AMOUNT CALCULATION WORKSHEET**

In re the Matter of \_\_\_\_\_ Petitioner and \_\_\_\_\_ Respondent

| CHILDREN  | AGE                      | CHILDREN              | AGE      |
|---|--------------------------|-----------------------|----------|
| Child One   |                          | Child Four            |          |
| Child Two   |                          | Child Five            |          |
| Child Three   |                          | Child Six             |          |
|   | Parent Receiving Support | Parent Paying Support | Combined |
| 1. MONTHLY GROSS INCOME   | \$                       | \$                    |          |
| a. Court ordered maintenance being received.  | \$                       | \$                    |          |
| 2. ADJUSTMENTS (per month)  | (\$ )                    | (\$ )                 |          |
| a. Other court or administratively ordered child support being paid.  |                          |                       |          |
| b. Court ordered maintenance being paid.  | (\$ )                    | (\$ )                 |          |
| c. Support obligation for other children primarily residing in parent's custody.  | (\$ )                    | (\$ )                 |          |
| 3. ADJUSTED MONTHLY GROSS INCOME (Sum of lines 1 and 1a, minus lines 2a, 2b and 2c).  | \$                       | \$                    | \$       |
| 4. PROPORTIONATE SHARE OF COMBINED ADJUSTED MONTHLY GROSS INCOME (Each parent's line 3 income divided by combined line 3 income).     |                          | %                     | %        |
| 5. BASIC CHILD SUPPORT AMOUNT (From support chart using combined line 3 income).  |                          |                       | \$       |
| 6. ADDITIONAL CHILD-REARING COSTS (per month)   | \$                       |                       |          |
| a. Reasonable work-related child care costs of the parent receiving support (\$ ) less any child care tax credit (\$ ).               |                          |                       |          |
| b. Reasonable work-related child care costs of the parent paying support.   |                          | \$                    |          |
| c. Health insurance costs for the children who are subjects of this proceeding.   | \$                       | \$                    |          |
| d. Uninsured extraordinary medical costs. (Agreed by parents or ordered by court).  | \$                       | \$                    |          |
| e. Other extraordinary child rearing costs. (Agreed by parents or ordered by court)   | \$                       | \$                    |          |
| 7. TOTAL ADDITIONAL CHILD-REARING COSTS (Sum of lines 6a, 6b, 6c, 6d and 6e).   | \$                       | \$                    | \$       |
| 8. TOTAL COMBINED CHILD SUPPORT COSTS (Sum of line 5 and combined line 7).  |                          |                       | \$       |
| 9. EACH PARENT'S SUPPORT OBLIGATION (Multiply line 8 by each parent's line 4)   | \$                       | \$                    |          |
| 10. CREDIT FOR ADDITIONAL CHILD-REARING COSTS (Line 7 of parent paying support).  |                          | (\$ )                 |          |
| 11. ADJUSTMENT FOR A PORTION OF THE AMOUNTS EXPENDED DURING PERIODS OF OVERNIGHT VISITATION OR CUSTODY. (Multiply line 5 by _____ %). |                          | (\$ )                 |          |
| 12. PRESUMED CHILD SUPPORT AMOUNT (Line 9 minus lines 10 and 11).   |                          | \$                    |          |
| PREPARED BY:  |                          |                       |          |