

Ohio Revised Code

Section 3119.022 Child support computation worksheet - sole residential parent or shared parenting order.

Effective: June 30, 2007

Legislation: House Bill 119 - 127th General Assembly

When a court or child support enforcement agency calculates the amount of child support to be paid pursuant to a child support order in a proceeding in which one parent is the residential parent and legal custodian of all of the children who are the subject of the child support order or in which the court issues a shared parenting order, the court or agency shall use a worksheet identical in content and form to the following:

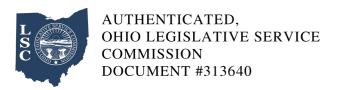
CHILD SUPPORT COMPUTATION WORKSHEETSOLE RESIDENTIAL PARENT OR SHARED PARENTING ORDER

Name of parties
The following parent was designated as residential parent and legal custodian: mother father shared
Column IColumn IIIFatherMotherCombined
INCOME:
1.a.Annual gross income from employment or, when determined appropriate by the court or agency, average annual grossin come from employment over a reasonable period of years. (Exclude overtime, bonuses, self-employment income, or commissions)
\$\$
b.Amount of overtime bonuses, and commissions (year 1 representing the most recent year)



FatherMotherYr. 3 \$Yr. 3 \$(Three years ago)(Three years ago)Yr. 2 \$Yr. 2
\dots (Two years ago)(Two years ago)Yr. 1 \dots (Last calendar year)(Last calendar year)
year)Average \$Average \$
(Include in Col. Iand/or Col. II theaverage of the threeyears or the year 1amount, whichever isless, if
there exists areasonable expectation that the total earnings from overtime and/orbonuses during
thecurrent calendar yearwill meet or exceedthe amount that is the lower of theaverage of the
$three years \ or \ the \ year \ 1 amount. \ If, however, there \ exists \ are a sonable \ expectation that \ the \ total earnings$
fromovertime/bonuses duringthe current calendaryear will be lessthan the lower of theaverage of the
3 years or the year 1 amount, include only the amount reasonably expected to be earned this year.)
\$\$
2.For self-employmentincome:
a.Gross receipts frombusiness
\$\$
b.Ordinary and necessarybusiness expenses
\$\$
c.5.6% of adjusted grossincome or the actualmarginal differencebetween the actualrate paid by
theself-employedindividual and the F.I.C.A. rate
\$\$
d.Adjusted gross incomefrom self-employment(subtract the sum of 2b and 2c from 2a)
\$\$
3. Annual income frominterest and dividends (whether ornot taxable)

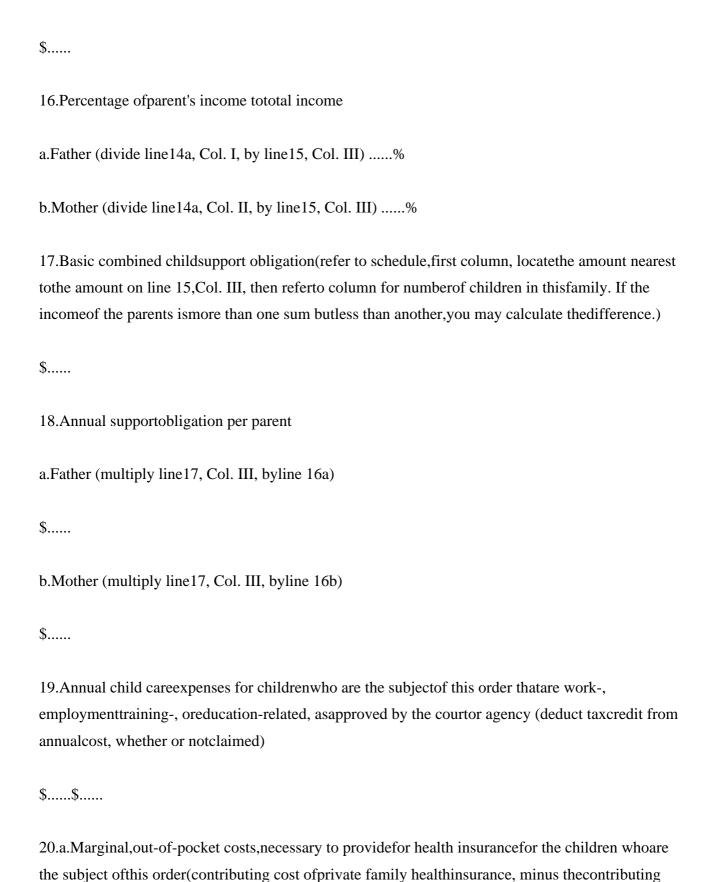
\$\$
4. Annual income fromunemployment compensation
\$\$
5.Annual income fromworkers' compensation, disability insurancebenefits, or socialsecurity disability/retirement benefits
\$\$
6.Other annual income(identify)
\$\$
7.a.Total annual grossincome (add lines 1a,1b, 2d, and 3-6)
\$\$
b.Health insurance\$\$maximum (multiplyline 7a by 5%)
ADJUSTMENTS TO INCOME:
8.Adjustment for minorchildren born to oradopted by eitherparent and anotherparent who are livingwith this parent; adjustment does notapply to stepchildren(number of childrentimes federal incometax exemption lesschild supportreceived, not toexceed the federaltax exemption)
\$\$
9.Annual court-orderedsupport paid forother children
\$\$



10.Annual court-orderedspousal support paidto any spouse orformer spouse
\$\$
11.Amount of localincome taxes actuallypaid or estimated tobe paid
\$\$
12.Mandatory work-relateddeductions such asunion dues, uniformfees, etc. (notincluding taxes, social security, orretirement)
\$\$
13.Total gross incomeadjustments (addlines 8 through 12)
\$\$
14.a.Adjusted annual grossincome (subtract line13 from line 7a)
\$\$
b.Cash medical supportmaximum (If the amounton line 7a, Col. I,is under 150% of thefederal poverty levelfor an individual, enter \$0 on line 14b,Col. I. If the amount on line 7a, Col. I,is 150% or higher ofthe federal povertylevel for anindividual, multiplythe amount on line14a, Col. I, by 5% and enter this amounton line 14b, Col. I.If the amount on line7a, Col. II, is under150% of the federal poverty level for anindividual, enter \$0 on line 14b, Col. II.If the amount on line7a, Col. II, is 150% or higher of thefederal poverty levelfor an individual, multiply the amounton line 14a, Col. II,by 5% and enter this amount on line 14b,Col. II.)
\$\$

15. Combined annualincome that is basisfor child supportorder (add line 14a, Col. I and Col. II)





cost ofprivate single healthinsurance, divided bythe total number ofdependents covered bythe plan, including the children subject of the support order, times the number of children subject of the support order)

order)
\$\$
b.Cash medical supportabligation (enter theamount on line 14b orthe amount of annualhealth careexpenditures estimated by the United States Department of Agriculture and described in section 3119.30 of the Revised Code, whichever amount is lower)
\$\$
21.ADJUSTMENTS TO CHILD SUPPORT WHEN HEALTH INSURANCE IS PROVIDED:
Father (only if obligorMother (only if obligoror shared parenting) or shared parenting) a. Additions: line 16a timesb. Additions: line 16bthe sum of amounts showntimes the sum of amountson line 19 Col. II and shown on line 19, Col. Iline 20a, Col. II and line 20a, Col. II
22.OBLIGATION AFTER ADJUSTMENTS TO CHILD SUPPORT WHEN HEALTH INSURANCE IS PROVIDED:
a.Father: line 18a plusor minus thedifference betweenline 21a minusline 21c
\$
b.Mother: line 18b plusor minus thedifference betweenline 21b minusline 21d
\$

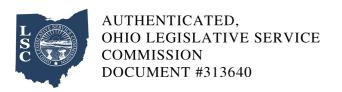
23.ACTUAL ANNUAL OBLIGATION WHEN HEALTH INSURANCE IS PROVIDED:

a.(Line 22a or 22b,\$.....whichever linecorresponds to the parent who is the obligor). b. Any non-means-testedbenefits, including social security and veterans' benefits, paid to and received by a child or aperson on behalf of the child due to death, disability, or retirement of the parent \$..... c.Actual annualobligation (subtractline 23b from line 23a) \$..... 24.ADJUSTMENTS TO CHILD SUPPORT WHEN HEALTH INSURANCE IS NOT PROVIDED: Father (only if obligorMother (only if obligoror shared parenting) or shared parenting) a. Additions: line 16a timesb. Additions: line 16bthe sum of the amountstimes the sum of theshown on line 19, Col. Hamounts shown on lineard line 20b, Col. H119, Col. I and line 20b, Col. times the sum of theamounts shown on line 19, amounts shown on lineCol. I and line 20b, 19, Col. II and lineCol. I20b, Col. II\$.....\$.... 25.OBLIGATION AFTER ADJUSTMENTS TO CHILD SUPPORT WHEN HEALTH **INSURANCE IS NOT PROVIDED:** a. Father: line 18a plusor minus the difference between line 24a minus line 24c \$.....

26.ACTUAL ANNUAL OBLIGATION WHEN HEALTH INSURANCE IS NOT PROVIDED:

b.Mother: line 18b plusor minus the difference between line 24b and 24d

\$.....



a.(Line 25a or 25b,\$.....whichever linecorresponds to theparent who is theobligor)

b.Any non-means-tested\$.....benefits, including social security and veterans' benefits, paid to and received by a child or aperson on behalf of the child due to death, disability, or retirement of the parent

c.Actual annual\$.....obligation (subtractline 26b fromline 26a

27.a.Deviation from sole residential parent support amount shown on line 23c if amount would be unjust or inappropriate: (see section 3119.23 of the Revised Code.) (Specific facts and monetary value must be stated.)

b.Deviation from shared parenting order: (see sections 3119.23 and 3119.24 of the Revised Code.) (Specific facts including amount of time children spend with each parent, ability of each parent to maintain adequate housing for children, and each parent's expenses for children must be stated to justify deviation.)

WHENWHENHEALTHHEALTHINSURANCEINSURANCEISIS NOTPROVIDEDPROVIDED

28.FINAL CHILD SUPPORTFIGURE: (This amountreflects final annualchild supportabligation; in Col. I,enter line 23c plusor minus any amountsindicated in line 27aor 27b; in Col. II,enter line 26c plus orminus any amountsindicated in line 27aor 27b)

\$.....\$..... Father/Mother,

OBLIGOR

29.FOR DECREE: Childsupport per month(divide obligor's annual share, line 28,by 12) plus anyprocessing charge

\$.....\$.....

30.FINAL CASH MEDICALSUPPORT FIGURE: (thisamount reflects thefinal annual cashmedical



support to be paid by the obligor when neither parent provides health insurance coverage for the child; enterobligor's cash medical support amount from line 20b

\$
31.FOR DECREE: Cashmedical support permonth (divide line 30by 12)
\$
Prepared by:Counsel:Pro se:(For mother/father)CSEA:Other:
Worksheet Has Been Reviewed and Agreed To:
MotherDate
FatherDate