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TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK**Washington State Child Support Schedule Worksheets**

[] Proposed by []

[] State of WA (CSWP)

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

County Spokane

Case No. 17-3-02615-6

Child/ren and Age/s: AK, 7; QK, 12

Parents' names: Bryce Kehrer

Jessica Turner

(Column 1)

(Column 2)

	Bryce	Jessica
Part I: Income (see Instructions, page 6)		
1. Gross Monthly Income		
a. Wages and Salaries	\$8,201.00	\$4,323.00
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)	\$8,201.00	\$4,323.00
2. Monthly Deductions from Gross Income		
a. Income Taxes (Federal and State) Tax Year: Manual	\$1,081.00	\$319.00
b. FICA (Soc. Sec. + Medicare) / Self-Employment Taxes	\$627.00	\$331.00
c. State Industrial Insurance Deductions	-	\$54.00
d. Mandatory Union/Professional Dues	-	-
e. Mandatory Pension Plan Payments	-	-
f. Voluntary Retirement Contributions	\$416.00	\$130.00
g. Maintenance Paid	-	-
h. Normal Business Expenses	-	-
i. Total Deductions from Gross Income (add lines 2a through 2h)	\$2,124.00	\$834.00
3. Monthly Net Income (line 1g minus 2i)	\$6,077.00	\$3,489.00
4. Combined Monthly Net Income (add both parents' monthly net incomes from line 3)		\$9,566.00
5. Basic Child Support Obligation Number of children: 2 x \$1069.00 per child (enter total amount in box)		\$2,138.00
6. Proportional Share of Income (divide line 3 by line 4 for each parent)	.635	.365

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	Bryce	Jessica
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.)	\$1,357.63	\$780.37
8. Calculating low income limitations: Fill in only those that apply.		
Self-Support Reserve: (125% of the federal poverty guideline for a one-person family.)	\$1,519.00	
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.	\$1,357.63	\$780.37
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)	\$64.00	-
b. Uninsured Monthly Health Care Expenses Paid for Child(ren)	-	-
c. Total Monthly Health Care Expenses (line 10a plus line 10b)	\$64.00	-
d. Combined Monthly Health Care Expenses (add both parents' totals from line 10c)	\$64.00	
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 both parents' day care and special expenses from line 11e)	-	
13. Total Health Care, Day Care, and Special Expenses (line 10d plus line 12)	\$64.00	
14. Each Parent's Obligation for Health Care, Day Care, and Special Expenses (multiply each number on line 6 by line 13)	\$40.64	\$23.36
Part IV: Gross Child Support Obligation		
15. Gross Child Support Obligation (line 9 plus line 14)	\$1,398.27	\$803.73

	Bryce	Jessica
Part V: Child Support Credits (see Instructions, page 9)		
16. Child Support Credits		
a. Monthly Health Care Expenses Credit	\$64.00	-
b. Day Care and Special Expenses Credit	-	-
c. Other Ordinary Expenses Credit (describe)	-	-
	-	-
	-	-
d. Total Support Credits (add lines 16a through 16c)	\$64.00	-
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)	\$1,334.27	\$803.73
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)	\$2,734.65	\$1,570.05
19. 25% of each parent's basic support obligation from line 9 (.25 x amount from line 9 for each parent)	\$339.41	\$195.09
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	\$100.00	-
e. Retirement Accounts	-	-
f. Other: (describe)	-	-
	-	-
	-	-
	-	-
21. Household Debt (List liens against household assets, extraordinary debt.)		
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	-	-

	Bryce	Jessica
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. Monthly Child Support Ordered for Other Children		
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.


Bryce Kehrer (Feb 23, 2024 10:29 PST)

Parent's Signature (Column 1)

Feb 23, 2024

Spokane valley

Date

City

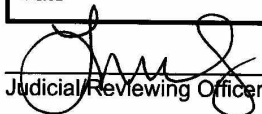
Telephonically Approved

Parent's Signature (Column 2)

2/23/24

Date

City


Judicial Reviewing Officer

3/6/24
Date

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