	You ()	Other ()	Combined
Income			
1. Monthly Gross Income	\$0.00	\$0.00	
2. Adjustments for spousal support payments	\$0.00	\$0.00	
3. Adjustments for support of child(ren)	\$0.00	\$0.00	
4. Deductions from Monthly gross Income	\$0.00	\$0.00	
5. a. Available monthly income	\$0.00	\$0.00	
5. b. Combined monthly available income			\$0.00
Needs			
6. a. Number of children			0
6. b. XXX			0
7. a. Monthly basic child support obligation			\$0.00
7. b. Monthly health coverage			\$0.00
7. c. Monthly work-related child care expenses			\$0.00
8. Total monthly child support obligation			\$0.00
Support			
9. Percent obligation of each party	096	096	
10. Monthly child support obligation of each party	\$0.00	\$0.00	
11. Deduction by non-custodial parent for health care coverage when paid directly by non-custodial parent or non-custodial parent's spouse	\$0.00		
Adjustments			
12. a. Credit for benefits received by or for the child derived from the parent's entitlement to disability insurance benefits to the extent that such derivative benefits are included in a parent's gross income	\$0.00	\$0.00	
12. b.	\$0.00	\$0.00	
12. c.	\$0.00	\$0.00	
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