

CAUSE NO. \_\_\_\_\_

IN THE MATTER OF  
THE MARRIAGE OF

§  
§  
§  
§  
§  
§

IN THE DISTRICT COURT

\_\_\_\_\_

\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_ COUNTY, TEXAS

**PROPOSED SUPPORT DECISION AND INFORMATION  
OF \_\_\_\_\_**

(A) GROSS MONEY EARNED PER MONTH:

- |     |   |    |
|-----|---|----|
| (1) | Gross wages and salary income                           | \$ |
| (2) | Commissions, tips and income                            | \$ |
| (3) | Self-employment income                                  | \$ |
| (4) | Rental income (net of expenses other than depreciation) | \$ |
| (5) | All other income actually received:                     | \$ |

**GROSS MONEY EARNED PER MONTH** \$ \_\_\_\_\_ (A)

(B) ACTUAL DEDUCTIONS PER MONTH - Attach most recent pay stubs from each employer.

- |     |                        |    |
|-----|------------------------|----|
| (1) | Income tax withholding | \$ |
| (2) | FICA (Social Security) | \$ |
| (3) | Medicare withholding   | \$ |
| (4) | Health insurance       | \$ |
| (6) | Union dues             | \$ |
| (7) | Other                  | \$ |

**TOTAL ACTUAL DEDUCTIONS PER MONTH** \$ \_\_\_\_\_ (B)

(C) NET MONEY ACTUALLY RECEIVED PER MONTH.  
SUBTRACT (B) FROM (A).

\$ \_\_\_\_\_ (C)

**D & E TO BE COMPLETED BY ATTORNEYS OFFICE**

(D) STATUTORY NET RESOURCES DEDUCTIONS ALLOWED PER MONTH:

- (1) Income tax withholding for a single person claiming one personal exemption and standard deduction \$
- (2) FICA (Social Security) \$
- (3) Medicare Tax \$
- (4) Health insurance attributable to children \$
- (5) license fees to practice medicine \$

(E) STATUTORY NET RESOURCES PER MONTH. \$\_\_\_\_\_ (E)

(F) TOTAL MONEY NEEDED PER MONTH BY ME AND MINOR CHILDREN LIVING WITH ME.  
**FOR ITEMS WHICH ARE NOT PAID MONTHLY, EXPRESS THE AMOUNT AS A MONTHLY AVERAGE.**

- (1) Rent or house payment \$
- (2) Real property taxes \$
- (3) Residence maint. (repairs, yard) \$
- (4) Insurance - home or renters \$
- (5) Utilities - Gas \$
- (6) Utilities - Electric and water \$
- (7) Utilities - Garbage service (if separate) \$
- (8) Cellular telephone \$
- (9) Telephone (incl. avg. long dist.) \$
- (10) Groceries and household items \$
- (11) Meals away from home \$
- (12) School lunches \$
- (13) Dental and orthodontia \$
- (14) Medical and prescriptions \$
- (15) Laundry and dry cleaning \$
- (16) Car payments \$
- (17) Gas and vehicle maintenance \$
- (18) Clothing and shoes \$
- (19) Insurance - Auto \$
- (20) Insurance - Life \$
- (21) Insurance - Health (omit if payroll deduction) \$
- (22) Child care \$
- (23) Children's activities \$
- (24) Entertainment \$
- (25) Haircuts \$
- (26) Cable TV and newspaper \$
- (27) Total monthly payments on debts (from G on next page) \$
- (28) Child support for another child \$
- (29) Alimony or spousal support for another person \$
- (30) Other (specify) \$
- (31) \$
- (32) \$

**TOTAL NEEDED PER MONTH** \$\_\_\_\_\_ (F)

(G) TOTAL MONTHLY PAYMENTS ON DEBTS:

	<u>Description of Debt</u>	<u>Balance</u>	<u>Mo. Pymt.</u>
(1)		\$	\$
(2)		\$	\$
(3)		\$	\$
(4)		\$	\$
(5)		\$	\$

**TOTAL MONTHLY PAYMENTS ON DEBTS** \$\_\_\_\_\_ (G)

***H & I TO BE COMPLETED BY ATTORNEYS OFFICE***

(H) **DIFFERENCE BETWEEN MONEY RECEIVED AND MONEY NEEDED.** \$\_\_\_\_\_ (H)

(I) **STATUTORY PRESUMED CHILD SUPPORT – (E) MULTIPLIED BY GUIDELINE PERCENTAGE** \$\_\_\_\_\_ (I)

I, \_\_\_\_\_, would testify under oath in open court that the foregoing information is true and correct. I understand that at such a court hearing, I may be required to prove these amounts by testimony and by records such as pay vouchers, canceled checks, receipts, and bills.

SIGNED this \_\_\_\_\_ day of \_\_\_\_\_, 2008.

\_\_\_\_\_  
CLIENT

I intend to ask the court to set my child support at \$\_\_\_\_\_ per month.

I intend to ask the court to order my spouse to pay child support at \$\_\_\_\_\_ per month.

SIGNED this \_\_\_\_\_ day of \_\_\_\_\_, 2008.

\_\_\_\_\_  
CLIENT