

**MASHANTUCKET PEQUOT CHILD SUPPORT AND ARREARAGE
WORKSHEET A - PAGE 1**

MOTHER	FATHER	NAME OF CUSTODIAN	
MASHANTUCKET PEQUOT TRIBAL COURT	DOCKET NO.	NUMBER OF CHILDREN	
CHILDREN'S NAMES			DATE OF BIRTH
I. NET INCOME COMPUTATION [WEEKLY AMOUNTS]		MOTHER	FATHER
1.	Gross income <i>(attach verification)</i>	\$	\$
2.	Number of exemptions for tax purposes	\$	\$
3.	Federal income tax	\$	\$
4.	State and local income tax	\$	\$
5.	Social security tax or mandatory retirement	\$	\$
6.	Health Insurance premiums <i>(other than child)</i>	\$	\$
7.	Union dues or fees	\$	\$
8.	Unreimbursed work-related day care	\$	\$
9.	Other alimony and child support orders	\$	\$
10.	Sum of lines 3 - 9	\$	\$
11.	Net income <i>[line 1 minus line 10]</i>	\$	\$
II. CURRENT SUPPORT DETERMINATION			
12.	Combined net weekly income <i>[nearest \$10.00]</i>	\$	
13.	Basic obligation <i>[from schedule]</i>	\$	
14.	Check here if noncustodial parent is a low -income obligor. <input type="checkbox"/> <i>[see instructions]</i>		
15.	Child's health insurance premium	\$	\$
16.	Total obligation <i>[Line 13 minus noncustodial parent's line 15 amount if line 14 is checked; line 13 plus line 15 total for all other cases]</i>		

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17.	Each parent's decimal share of line 12 <i>[If line 14 is checked, skip this line and line 19, and enter the line 16 amount in the noncustodial parent's column on line 18.]</i>		
18.	Each parent's share of the total obligation <i>[Line 17 times line 16 for each parent]</i>	\$	\$
19.	Health insurance premium adjustment	\$	\$
20.	Social Security benefits adjustment	\$	\$
21.	Sum of lines 19 and 20 <i>[for each parent]</i>	\$	\$
22.	Recommended support amounts <i>[Line 18 minus line 21]</i>	\$	\$
23.	Current support order <i>[Noncustodial parent(s) only. If different from line 22 amount, explain in section VI.]</i>	\$	\$
III. TOTAL ARREARAGE DETERMINATION			
24.	Delinquencies on current support orders		\$
25.	Unpaid court-ordered arrearage		\$
26.	Past-due support <i>[not court-ordered]</i>		\$
27.	Total arrearage <i>[sum of lines 24 through 26]</i>		\$
IV. ARREARAGE PAYMENT DETERMINATION			
28.	Current support order from line 23 <i>[or imputed support obligation for IV-D arrearage owned to the state or if child living with obligor]</i>		\$
29.	Twenty percent (20%) of line 28 <i>[or fifty percent (50%) of line 28 if there is no child under age 18]</i>		\$
30.	Noncustodial parent's line 11 amount		\$
31.	Fifty-five percent (44%) of line 30		\$
32.	Line 31 minus line 28		\$
33.	Line 28 plus \$145		\$
34.	Line 30 minus line 33		\$
25.	Recommended arrearage payment <i>[Smallest of lines 29, 32, and 34; or \$5.00/month if child living with obligor and obligor's gross income is not more than 350% of poverty level; or the lesser of \$5.00/week or line 34 for low-income obligor. If arrearage is owed to the state and the family, \$5.00/month of this amount is allocated to the state, and the balance to the family.]</i>		\$
36.	Arrearage payment order <i>[At least \$5.00/month unless line 34 is less than \$1.00 if different from line 35, explain in section VI.]</i>		\$
V. ORDER SUMMARY			

