

**IN THE COURT OF COMMON PLEAS, DELAWARE COUNTY, OHIO
DOMESTIC RELATIONS DIVISION**

_____ :
 and : Case Number _____
 _____ : **DELAWARE COUNTY COURT FORM 3:**
 : **AFFIDAVIT IN SUPPORT OF AGREED**
 : **CHILD SUPPORT ORDERS**

(FORM 3: FOR USE IN ALL INITIAL DISSOLUTION CASES WITH AT LEAST ONE CHILD AND IN ALL AGREED POST DECREE MATTERS DETERMINING SUPPORT. LIST WIFE'S INFORMATION FIRST, (EX)-HUSBAND'S SECOND, WHENEVER TWO LINES PER QUESTION)

STATE OF OHIO
 COUNTY OF DELAWARE, ss:

Now comes _____ and _____ the parties hereto, and
 being duly sworn under penalty of perjury states as follows:

I. PERSONAL INFORMATION

1. **Date of Marriage:** _____

2. **Date Separation:** _____

3. **Minor Children of this marriage:**

<u>Name</u>	<u>Age</u>	<u>Date of Birth</u>	<u>Year in School</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. **Age and date of birth:** Wife: _____ Husband: _____

5. **Social Security Number:** Wife: _____ Husband: _____

6. **Address of Wife:** _____ **Address of Husband:** _____

II. INCOME INFORMATION

(NOTE: Self-Employed persons shall complete Page 2-a of this Form.)

7. Employer's Name and Address:

Wife:

Husband:

Employee ID Number, if any:

Position:

Shift Hours Worked:

Length of Employment:

Pay Period:

Amount of Hourly Rate or
Other Manner of Payment:

Gross Pay Per Pay Period:

Net Pay Per Pay Period:

Deductions Per Pay other than
those required by law for taxes,
Social Security, etc.

Annual Gross Income:

Monthly Net Income:

8. Other Sources of Income and Amount:

Attach copies of a recent pay stub and also W-2's for the most recent year available.

II (a). SELF-EMPLOYMENT INCOME INFORMATION:

7(a). Name and Address of Place of Self-Employment:

Wife's:

Husband's:

Title:

Length of self-employment:

Pay Period:

Nature of Compensation:
(Fixed salary, commissions,
salary/commissions, etc.)

Gross Pay Per Pay Period:

Net Pay Per Pay Period:

Annual Gross Income:

Annual Net Income:

Monthly Gross Income:

Monthly Net Income:

8(a). Other Sources of Income, Frequency of Receipt and Amount:

COPIES OF THE FOLLOWING SHALL BE ATTACHED TO THIS FORM, IF AVAILABLE:

Most recent pay stub; monthly gross income figures for the past six (6) months; monthly itemized expenses for the past six (6) months; income and itemized expenses for the prior calendar year, with verification thereof, or, complete copy of Federal Tax Return for the prior calendar year.

III. CHILD SUPPORT CALCULATION INFORMATION:

9. Alimony Paid to a Former Spouse:

10. Child Support Paid for Other Children:

11. Number of Other Children of the Party Living With the Party:

12. Amount of Support Received for Said Children:

13. Cost of Health Insurance that Covers the Children Involved in this Case:

14. Amount of Work-Related Child Care Spent:

15. Amount of Tax Credit for Work-Related Child Care:

AFFIANT

AFFIANT

Sworn to and subscribed by _____ before me this ____ day of _____,
20____.

NOTARY PUBLIC

Sworn to and subscribed by _____ before me this ____ day of _____,
20____.

NOTARY PUBLIC

IV. CHILD SUPPORT CALCULATION:

(Complete Parts 16 and 17, or 16, 17 and 18 as applicable)

Gross Annual Income: _____

Less Child Support Paid: _____

Less Support for Other Dependents: _____

Less Health Insurance: _____

Less Alimony Paid: _____

Adjusted Annual Income: _____

Total Combined Adjusted Annual Incomes: _____

16. Support for Child(ren) in Wife's Custody:

Basic Child Support Obligation (from table): Plus

Child Care Expenses Net of Tax Credit: Total _____

Support Obligation: _____

Husband's Percentage: _____

Husband's Share Per Year (multiply above two lines): _____

Husband's Share Per Year Per Child: _____

Husband's Share Per Week Per Child: _____

17. Support for Child(ren) in Husband's Custody: _____

Basic Child Support Obligation (from table):

Plus Child Care Expenses Net of Tax Credit: _____

Total Support Obligation: _____

Wife's Percentage: _____

Wife's Share Per Year (multiply above two lines): _____

Wife's Share Per Year Per Child: _____

Wife's Share Per Week Per Child: _____

18. Split Custody Calculation:

Husband's Share of Support Per Year (from above): _____

Wife's Share of Support Per Year (from above): _____

Net Support to be Paid Per Year By: _____

Net Support to be Paid Per Year Per Child: _____

Net Support to be Paid Per Week Per Child: _____

This form was prepared by _____, Attorney at Law.

_____(SupCt# _____)
Attorney