CASE NO. and JUDGE STATE OF MICHIGAN

JUDICIAL CIRCUIT COUNTY	UNIFORM CHILD S DEVIATION A			
ourt address				Court telephone no
laintiff's name	v	Defendant's name		
THE COURT FINDS:				
. Paragraph(s) (Paragraph number)	in the preceding	pages of the unifor	m order deviate fro	om the Michigan Child
Support Formula and are warranted	l to avoid an unjust or ir	nappropriate result.		
2. Pursuant to MCL 552.605(2), it has Formula were applied, the following a. Payer, Support Recipient, and	would be ordered:		e that if the Michiga	an Child Support
Payer:	omaren oapportea o	Support recipient:		
Children's na	mes	An	inual overnights wi	th payer
b. Support Obligation.		I		
Children supported 1 child	2 children	3 children	4 children	5 or more children
Base Support: (includes support plu				5 or more chi

Children supported	d 1 child	2 childre	en 3 chil	dren 4 ch	ildren 5 or more	e children	
Base Support: (includes support plus or minus premium adjustment for health-care insurance)							
Support:	\$	\$	\$	\$	\$		
Premium adjust.	\$	\$	\$	\$	\$		
Subtotal:	\$	\$	\$	\$	\$		
Ordinary medical:	\$	\$	\$	\$	\$		
Child care:	\$	\$	\$	\$	\$		
Other:	\$	\$	\$	\$	\$		
Benefit credit:	\$	\$	\$	\$	\$		
Total:	\$	\$	\$	\$	\$		
☐ Support was reduced because payer's income was reduced.							

C.	Ordinary Medical Expenses. Ordinary medical expenses are the support recipient's co-payments, deductibles
	and other uninsured medical-related costs for all children in this case. Annually, the ordinary medical expense
	amount to be shared between the parties is \$ The payer's portion of ordinary medical expenses is
	listed in the above grid.

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d. Additional Medical Expenses. Additional medical expenses that exceed the children's ordered annulus payer's uninsured medical expenses. The annual will pay % and defendant will pay	al ordinary medical expense a ordinary medical amount is lis	amount and any of the support sted in the paragraph above. Plai	,
e. Health-Care Coverage. For the benefit of the chi health-care coverage (as defined in MCL 552.602 health-care expenses when that coverage is accereasonable cost is the parent's net cost of adding	that includes payment for ho sible to the child and availab he children to the parent's co	spital, dental, optical, and other le at a reasonable cost. The verage	
\square up to a maximum of \$ for plaintif \square not to exceed 6% of the plaintiff's/defendant's g		TOT \$TOT deteridant.	
3. Applying the Michigan Child Support Formula is unju	st or inappropriate because: (Specify the deviation factors relied on.)	
4. The child support order deviates from the Michigan C (Specify which provisions of the child support formula create an urprovisions.)			
5. The value of property or other support awarded inste	ad of the payment of child su	oport: (If not applicable, put none.)	
Plaintiff (if consent/stipulation)	ate Defendant (if consent/stipulation	on)	Date
Plaintiff's attorney [ate Defendant's attorney		Date
Prepared by: Name (type or print)	_		_ 2.0

NOTE: When deviating, this form must be completed, attached, and served along with the rest of the Uniform Child Support Order. The proof of service

on the Uniform Child Support Order must indicate this form was included.