## STATE OF MICHIGAN

CASE	NO.	and	JUDGE

JUDICIAL CIRCUIT COUNTY	UNIFORM CHILD S DEVIATION A				
ourt address					Court telephone no
laintiff's name	v	Def	fendant's name		
THE COURT FINDS:					
. Paragraph(s) (Specify paragraph numbe	in the preceding part.)	ages	of the uniform ord	der deviate from th	ne Michigan Child
Support Formula and are warranted	d to avoid an unjust or i	napp	ropriate result.		
2. Pursuant to MCL 552.605(2), it has	been determined from	the f	acts of this case t	hat:	
a. The child support obligation that	would be ordered by ap	oplyi	ng the Michigan C	hild Support Form	nula is:
Payer:			Payee:		
Children's names and annual over Children's na				Overnights	
Children supported 1 child Base Support: (includes support pl Support: \$ Premium adjust. \$ Subtotal: \$ Ordinary medical: \$ Child care: \$ Other: \$ Benefit credit: \$ Total: \$	\$ \$ \$ \$ \$ \$ \$	\$ \$ \$ \$ \$ \$ \$			5 or more children  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Uninsured Health-Care Expense amount will be paid % the annual ordinary medical amour request may be enforced by the frie	by the plaintiff and nt for the year they are i	ncur	% by the defer red that are not pa	ndant. Uninsured e iid within 28 days	expenses exceeding of a written paymen

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(Item 2 continued.)			
coverage (as defined in MCL 552.602) that includes path that coverage is accessible to the child and avail adding the children to the parent's coverage	ayment for hable at a rea	☐ plaintiff ☐ defendant shall maintain health-care nospital, dental, optical, and other health-care expenses w asonable cost. The reasonable cost is the parent's net cost ☐ up to a maximum of \$ for defendant. come.	
b. Applying the Michigan Child Support Formula	is unjust or	inappropriate because: (Specify the deviation factors relied on.)	
c. The child support order deviates from the Mic (Specify which provisions of the child support formula cre provisions.)	chigan Child eate an unjust (	Support Formula as follows: or inappropriate result and explain how this order deviates from the	
d. The value of property or other support award	ed instead c	f the payment of child support: (If not applicable, put none.)	
Plaintiff (if consent/stipulation)	Date	Defendant (if consent/stipulation)	Date
Plaintiff's attorney  Prepared by:  Name (type or print)	Date	Defendant's attorney	Date
rvaine (type or print)			

**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.