## **Uniform Child Support Order Instructions:**

Fill out completely and return to the Friend of the Court for approval.

**Plaintiff:** The person who initiated the case by filing the original court action

**Defendant:** The person who the case is being filed against

**Child Support:** 

**Payer:** Person paying support **Payee:** Person receiving support

Effective Date: Date the support amount will change/start

**Children Support:** Child Support, medical support, childcare and other charges are to be entered as a monthly amount. If there is more than one child on the case, the amount of support for the total number of children should be identified and the deletion amounts should be entered for general care and ordinary medical. A deletion amount is the amount to be paid for the remaining child or children once child support stops charging for one or more children.

\* You must indicate how many overnights the minor child(ren) spends with each parent.

\* You must check the section which states whether the support amounts they have entered "do" or "do not" follow the child support formula. If it does not follow the Michigan Child Support Formula, you must complete the attachment to Uniform Child Support Order Deviation Language form including the calculations per the Michigan Child Support Formula.

**Insurance:** Identify which person will be providing insurance coverage if it is available at a reasonable cost and the maximum amount they will be responsible to pay to provide the insurance coverage. The standard provision is "not to exceed 6% of the plaintiff's/defendants gross income." If the minor child(ren) is on Medicaid then the person to whom the Medicaid is under should be the person providing insurance.

## **Uninsured Medical Expenses:**

Any medical expense incurred, above the ordinary medical support amount of \$403.00 per year/per child (includes co-pays, deductibles, and prescriptions). You must identify the percentage that each will be responsible for covering on any uninsured medical expenses. If you are not identifying an Ordinary Medical amount in section #3 you should enter not applicable (N/A), under section #5 and the wording "exceeding the ordinary medical amount" should be crossed out. You should refer to the current Uniform Child Support Order for these amounts.

## Other:

You must specify any other provisions under this section that you wish to modify or add, and that have not been addressed previously in this order. If the Michigan Child Support Formula is not followed, complete the Attachment to Uniform Child Support Order Deviation Language Form and submit it with your agreed upon Uniform Child Support Order including the information indicated below:

- Fill out the first set of informational child support boxes which will be your current charging order
- Specifically state the reason you have agreed to deviate from the formula and enter the effective date. In addition, you will need to include the reasons why child support, according to the formula, is "unjust or inappropriate" and enter the effective date.
- Fill in the second set of informational child support boxes which will be the agreed upon sum that is a deviation from the guidelines.
- The NCP must indicate whether child support arrears are cancelled or preserved.

\*\*\*\* If your previous order was an adjustable order (a child support credit is given to the payer of support when proof of unemployment benefits is provided) and you want it to continue, you must reflect your agreement in the: Uniform Child Support Order-Adjustable Order Language" attachment.