STATE OF MICHIGAN **48TH CIRCUIT COURT ALLEGAN COUNTY**

CERTIFICATE OF MAILING

CASE NO. and JUDGE 2018-059153-DM HON. MATTHEW ANTKOVIAK

Court address

113 Chestnut Street Allegan, MI 49010

Court telephone no. (269) 673-0300

Plaintiff's name, address, and telephone no. STEPHANIE ANN MARSH

4379 Tracy Trl Dorr, MI 49323 (616) 889-2023

Plaintiff's attorney, bar no., address, and telephone no.

KENDRA J ORTEGA P82611 77 Monroe Center Nw Ste 406 Grand Rapids, MI 49503 (616) 454-7937

Defendant's name, address, and telephone no.

BRETT DAVID MARSH 11140 Keller Rd Shelbyville, MI 49344-9612

(616) 516-5804

Defendant's attorney, bar no., address, and telephone no.

TARA LYN SHARP P72908 6312 W Main St

Kalamazoo, MI 49009

(269) 978-6560

Document(s):

REFEREE RECOMMENDATION AND ORDER REGARDING CHILD SUPPORT

NOTICE OF RIGHT TO OBJECT

If you do not agree to the terms of this Proposed Order, you have the right to object to its terms. Any objection to this Proposed Order must be filed in writing with the Circuit Court Clerk within twenty-one (21) days after the date of mailing this Proposed Order. A copy of the objection and a notice of hearing must be served on the other party, the attorney(s) of record and the Office of the Friend of the Court.

IF NEITHER PARTY OBJECTS, IN WRITING, WITHIN TWENTY-ONE (21) DAYS AFTER BEING MAILED THIS PROPOSED ORDER, IT SHALL BE SUBMITTED TO THE ASSIGNED JUDGE FOR ENTRY AND WILL BECOME AN ORDER OF THE COURT.

I served a copy of these document(s) on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 3.203. I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

STATE OF MICHIGAN 48TH CIRCUIT COURT FOR THE COUNTY OF ALLEGAN 113 CHESTNUT ST, ALLEGAN, MI 49010 (877) 543-2660

Stephanie Marsh (kna Spedowski),

Case No. 18-59153- DM

Plaintiff.

HON. Matthew Antkoviak

Brett Marsh,

Defendant.

Kendra Ortega P82611 Attorney for Plaintiff 77 Monroe Center, Ste. 406 Grand Rapids, MI 49503

Tara Sharp P72908 Attorney for Defendant 6312 W. Main Kalamazoo, MI 49009

REFEREE RECOMMENDATION AND ORDER REGARDING CHILD SUPPORT

Hearing Date: 2/21/2024

Presiding Referee: Jaclyn K. Jelsema

Present: \boxtimes Plaintiff \boxtimes Plaintiff's Attorney

☐ Defendant ☐ Defendant's Attorney

Method of Appearance:

Zoom

Zoom

A court order referred this matter to the Friend of the Court for a child support review with an effective date of 7/1/2023. Plaintiff did not provide the requested information for the review. A review recommendation was submitted to the parties. Defendant filed an objection on the basis of Plaintiff's income, Defendant's child care expenses, Defendant's insurance expenses, and overnights. Also addressed was Plaintiff's insurance expenses.

Plaintiff's Income

At the time of the review and the proceeding period encompassing the effective period, Plaintiff was not employed. She testified that she had a high-risk pregnancy and was ordered by her doctor to "take it easy" but was not officially placed on bed-rest or given restrictions because she was not working at the time. Plaintiff gave birth by a planned induction on August 1st and stated it was a fairly typical birth without complications. She then stayed unemployed for about three months as "maternity leave." Towards the end of October, Plaintiff started working part-time for Byron Center Family Medicine, earning \$20 per hour and her hours vary from 25-32 hours per week. She submitted paystubs to verify her employment information. She testified that she does not know if fulltime hours would be available and chooses to work part-time so that she is home for the children and able to run them to appointments.

Because she is not currently working fulltime and was not working prior to the end of October 2023, her potential income was evaluated under 2021 MCSF 2.01(G)(2) for both periods of time.

Plaintiff previously worked for Signature Investigations for about a year and a half at a salary of \$1,200 biweekly. She stopped working there shortly before she learned she was pregnant. She is not eligible to return as the owner of the business has stopped taking on private business and there is no work available for her. Prior to that she worked for Spectrum Health for about 2 years, earning \$14.35 per hour and working fulltime. She left that job to pursue a nursing degree. Prior to that, she worked around 2015-2017 for her current company doing a different, more administrative, job.

Plaintiff has a high school degree and some college. She pursued a nursing degree, but has not finished. She has less than a year remaining towards a degree, but is unsure when she will return. She does possess a certification in medical assisting. She does not have any educational, physical, or mental disabilities that prevent her from working, she does not have issues with age, health, or criminal record, and she has a valid driver's license and access to transportation.

Plaintiff sought a return to Byron Center Family Medicine because she maintained a good rapport with them and they welcomed her back. She is unaware of other opportunities in the region or their average hours or wage rates. She did not do much job searching other than communicating her interest with this company.

There was a period she was unable to work due to her high-risk pregnancy and child birth, which involved hospitalization. She testified that she returned to work as soon as she and her newborn were medically able to do so.

Plaintiff is married, resides with her husband and children at her parent's home, since December 2022. She stated that they are waiting out the housing market and contributing to household expenses, but do not pay rent. Her husband is working fulltime at a factory. Plaintiff states that she does not have any other means of support or income.

The 2 oldest children who reside with her are 15 and 18 and therefore don't impact her ability to work. The youngest 2 children reside primarily with Defendant and therefore do not pose a significant impact to her ability to work. The parties testified that the 2 youngest children have therapy appointments every other week and that they take turns driving them, which is about once per month. The parties also share the responsibility of getting these children to medical, dental, and other types of appointments. Plaintiff testified that she has 6 total children, 2 who are still young and do impact her ability to work as they reside with her. However, as they are not children-in-common with the Defendant, they are not applicable to this consideration. Plaintiff does not have child care expenses for the 2 youngest children-in-common, and this would not change if she worked fulltime due to her parenting time occurring on the weekends. However, she could have some summer expenses, but this was not presented to the court.

Her lack of work was a significant reduction in income preceding this review. Now that she's returned to work following the birth of her child, Plaintiff is capable of fulltime work. She indicated that she didn't know if fulltime hours would be available but she also testified that the office is very short staffed. She stated that she has purposefully taken off every Thursday because it is difficult to find coverage, so that she has the time for the children's appointments, which for the children-in-common is about once per month.

Defendant's Insurance

Defendant testified that the insurance information used by the Friend of the Court was not accurate because the rates changed as of January 1, 2024. He is now paying \$273.20 biweekly for medical, dental, and vision, which covers himself and the 2 youngest children-in-common.

Plaintiff's Insurance

Plaintiff testified that she provides insurance through her spouse's employer. They pay \$69.91 weekly for medical, dental, and vision, which covers 2 adults, her husband's 2 children, the parties' 2 oldest children, Plaintiff's 2 other children, and the parties' 2 youngest children were added in August 2023.

Child Care Expenses

The parties' 2 youngest children still require child care and attend Clipper Care through Martin Public Schools. For both children, the combined rate is \$8 per hour. Defendant's use of child care increased when he changed his work schedule, which occurred near the start of 2024. Previously, he used child care 4 days per week and the children averaged 2.5-3 hours each day, plus the occasional half-day, which costs more. Defendant testified that his average costs, as outlined in the Child Care Verification that was provided to the Friend of the Court, was \$300 per month for Jace, \$160 per month for Josh, for a total of \$460 per month for both children—this works out to approximately 60 hours, which appears to incorporate the half-days that cost more. With the work-schedule change, Defendant is using child care 5 days a week, which is approximately 63 hours. This increases his total expenses for child care to \$315 for Jace, and \$189 for Josh.

The parties exercise week-on/week-off parenting time during the summer. Defendant testified that last year his child care expenses were \$250 per week (just his weeks) for both children. Defendant stated that he will be looking for a new provider as the provider from last year is not providing the service any longer. It is reasonable to expect that Defendant's summer child care expenses will be similar in the coming year.

Overnights

The parties are not in dispute about the proper number of overnights to be used in the calculation for the children and both agree that the overnights for the 2 youngest children is incorrect. The overnights for the 2 oldest children is 365 for Plaintiff and 0 for Defendant. The overnights for the 2 youngest children is 104 for Plaintiff and 261 for Defendant. The parties testified that Plaintiff began exercising a standard Friend of the Court Parenting Time schedule in July of 2022, prior to the effective date of this review, and this schedule is allocated to provide 104 overnights to the noncustodial parent.

Immediate Support Adjustment

Neither party addressed the potential eligibility of the 2 oldest children for post majority support. Thus, as one of the children was nearing majority at the time of the hearing, this has the potential to significantly impact the allocation of support, effective March 1, 2024. This is reflected by the last recommendation's rubric showing support for four children and then three children.

RECOMMENDATION

It is recommended the review recommendation calculation be adjusted as follows:

Effective July 1, 2023:

- Plaintiff's income be continued from the review recommendation, as the objection filed pertains to her acquisition of employment during the review period, not to the imputation.
- Defendant's insurance be continued from the review calculation, as it was accurate for this period of the review.
- Plaintiff be credited for providing insurance via her spouse at a rate of \$69.91 weekly, covering the oldest 2 children-in-common, 4 other children, and 2 adults.
- Defendant's child care expenses be continued from the review calculation, as it was accurate for this period of the review.
- Overnights reflect the parties' arrangement as follows:
 - o The 2 oldest children: 365 for Plaintiff and 0 for Defendant
 - o The 2 youngest children: 104 for Plaintiff and 261 for Defendant.

Effective August 1, 2023:

- Plaintiff be credited with 2 additional children, having given birth to her newest child.
- Plaintiff be credited for providing insurance via her spouse at a rate of \$69.91 weekly, covering all 4 of the children-in-common, 4 other children, and 2 adults.

Effective November 1, 2023:

• Plaintiff's income be set at her hourly rate for 35 hours, based on her acquisition of employment and evaluation of her potential income. This is an average monthly gross income of \$3,045.

Effective January 1, 2024:

- Defendant be credited for providing insurance at a rate of \$273.20 biweekly, covering the youngest 2 children-in-common and himself.
- Defendant be credited with child care expenses as follows:
 - o Jace a monthly average of \$315 for 9 months (school year).
 - o Josh a monthly average of \$189 for 9 months (school year).
 - o Both children a weekly average of \$250 for 6 weeks (summer).

REPORTING REQUIRMENTS

Each party shall notify the Friend of the Court in writing of any changes in their mailing address, residence, and employment information. MCR 3.211(C)(2).

CONCLUSION

Child support is pursuant to the attached Uniform Child Support Order.

All other provisions of the orders of this Court, not modified herein, shall remain in full force and effect.

Upon the Circuit Court Judge's approval of the Referee Recommendation above, and if an objection with notice of hearing is not filed with the Allegan County Circuit Court within twenty-one days of the recommendation and order, said Recommendation and Order shall commence.

3/8/24 Date

> Jaclyn K. Jelsema (P70279) Attorney/Referee

ORDER

At a session of said court, held in the City and County of Allegan, State of Michigan, on this day _____ of March, 2024.

PRESENT: HONORABLE MATTHEW ANTKOVIAK

IT IS SO ORDERED.

HONORABLE MATTHEW ANTKOVIAK (P59449) CIRCUIT COURT JUDGE

CERTIFICATE OF MAILING

I served a copy of this motion on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 3.203. I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Th. 4			
Dated		 	

STATE OF MICHIGAN 48TH CIRCUIT COURT ALLEGAN COUNTY

CHILD SUPPORT ORDER RECOMMENDATION MODIFICATION

CASE NO. and JUDGE 2018-059153-DM HON. MATTHEW ANTKOVIAK

Court address 113 Chestnut Street Allegan, MI 49010 Court telephone no. (269) 673-0300

Plaintiff's name, address, and telephone no. STEPHANIE ANN MARSH 4379 Tracy Trl Dorr, MI 49323
Plaintiff's attorney, bar no., address, and telephone no. Kendra J Ortega P82611 77 Monroe Center Nw Ste 406 Grand Rapids, MI 49503 (616) 454-7937
Plaintiff's source of income name, address, and telephone no.

Defendant's name, address, and telephone no.
BRETT DAVID MARSH
11140 Keller Rd
Shelbyville, MI 49344-9612

Defendant's attorney, bar no., address, and telephone no.
Tara Lyn Sharp P72908
6312 W Main St
Kalamazoo, MI 49009
(269) 978-6560

Defendant's source of income name, address, and telephone no.
Precision Aerospace Corporation
5300 Corporate Grove Se Ste 350
Grand Rapids MI 49512-5512
Phone: (616) 243-8112

The Referee recommends child support be ordered as follows.

If you disagree with this recommendation, you must file a written objection with the Clerk of the Court on or before 21 days from the date this order is mailed. If you do not object, this proposed order will be presented to the court for entry.

Attached are the calculations pursuant to MCL 552.505(1)(h) and MCL 552.517b.

IT IS ORDERED, unless otherwise ordered in item 11 or 12: [X] Standard provisions have been modified (see item 11 or 12):

Payer:		ed under this order	Payee:		
Brett David Marsh			Stephanie Ann	Marsh	
Children's names and annu Children's nan		payer:		Overnights	
NICKOLAS ROBERT	MARSH		0		
JONATHON RAY MA	ARSH		0		
JACE ALLEN MARS	H		261		
JOSHUA THOMAS	MARSH		261		
ffective <u>07-01-2023,</u> t Children supported:	1 child	2 children	3 children	4 children	ed above. 5 or more children
Base support: (includ			adjustment for healt	th-care insurance)	
Support:	\$8.00	\$59.00	\$1,129.00	\$1,912.00	\$
Premium adjust:	\$2.00	\$5.00	\$5.00	\$5.00	\$
Subtotal:	\$10.00	\$64.00	\$1,134.00	\$1,917.00	\$
Ordinary medical:	\$32.00	\$64.00	\$96.00	\$129.00	\$
Child care:	\$0.00	\$-25.00	\$-25.00	\$-25.00	\$
Other:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Benefit credit:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Total:	\$42.00	\$103.00	\$1,205.00	\$2,021.00	\$

Uninsured Health-Care Expenses. All uninsured health-care expenses exceeding the annual ordinary medical amount will be paid 15% by the plaintiff and 85% by the defendant. Uninsured expenses exceeding the annual ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.

The annual ordinary medical amount is \$1,816.00 for four children, \$1,362.00 for three children, \$908.00 for two children, \$454.00 for one child.

Obligation Ends. Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.

[] **Post-majority Support:** The following children will be attending high school on a full-time basis after turning 18 years of age. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age. (Specify name of child and date obligation ends.)

Child Care. The parties must notify each other of changes in child-care expenses and must additionally notify the friend of the court if the changes end those expenses. The child-care obligation for each child ends on August 31 following the child's 12th birthday, at which time the total child care obligation reduces by that child's pro rata share unless specified differently in this order.

2A. Health-Care Coverage. For the benefit of the children, the [X] plaintiff [X] defendant shall maintain health-care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health-care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage not to exceed 6% of the plaintiff's/defendant's gross income.

1B. The children who	o allo o appointed		Payee:		
Brett David Marsh				Marsh	<u> </u>
Children's names and annu Children's nam		yer:		Overnights	
NICKOLAS ROBERT	MARSH		0		
JONATHON RAY MA	ARSH		0		
JACE ALLEN MARS	H		261		
JOSHUA THOMAS I	MARSH		261		
Effective <u>08-01-2023</u> , t	he payer shall pa	y a monthly child	support obligation for	or the children nam	ed above.
Children supported:	1 child	2 children	3 children	4 children	5 or more children
Base support: (includ	es support plus o	r minus premium	adjustment for healt	h-care insurance)	
Support:	\$15.00	\$65.00	\$1,132.00	\$1,913.00	\$
Premium adjust:	\$-2.00	\$-4.00	\$21.00	\$47.00	\$
Subtotal:	\$13.00	\$61.00	\$1,153.00	\$1,960.00	\$
Ordinary medical:	\$33.00	\$65.00	\$98.00	\$130.00	\$
Child care:	\$0.00	\$-23.00	\$-23.00	\$-23.00	\$
Other:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Benefit credit:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Total:	\$46.00	\$103.00	\$1,228.00	\$2,067.00	\$

Uninsured Health-Care Expenses. All uninsured health-care expenses exceeding the annual ordinary medical amount will be paid 14% by the plaintiff and 86% by the defendant. Uninsured expenses exceeding the annual ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.

The annual ordinary medical amount is \$1,816.00 for four children, \$1,362.00 for three children, \$908.00 for two children, \$454.00 for one child.

Obligation Ends. Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.

[] Post-majority Support: The following children will be attending high school on a full-time basis after turning 18 years of age. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age. (Specify name of child and date obligation ends.)

Child Care. The parties must notify each other of changes in child-care expenses and must additionally notify the friend of the court if the changes end those expenses. The child-care obligation for each child ends on August 31 following the child's 12th birthday, at which time the total child care obligation reduces by that child's pro rata share unless specified differently in this order.

2B. Health-Care Coverage. For the benefit of the children, the [X] plaintiff [X] defendant shall maintain health-care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health-care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage not to exceed 6% of the plaintiff's/defendant's gross income.

Payer:	s order and the payer and payee are: Payee:
Brett David Marsh	Stephanie Ann Marsh
Children's names and annual overnights with payer: Children's names	Overnights
NICKOLAS ROBERT MARSH	0
JONATHON RAY MARSH	0
JACE ALLEN MARSH	261
JOSHUA THOMAS MARSH	261

Effective 11-01-2023, the payer shall pay a monthly child support obligation for the children named above.

1 child	2 children			5 or more children
es support plus	or minus premium	adjustment for heal	th-care insurance)	
\$0.00	\$0.00	\$850.00	\$1,683.00	\$
\$0.00	\$0.00	\$-28.00	\$-5.00	\$
\$0.00	\$0.00	\$822.00	\$1,678.00	\$
\$0.00	\$0.00	\$86.00	\$115.00	\$
\$0.00	\$0.00	\$-40.00	\$-40.00	\$
\$0.00	\$0.00	\$0.00	\$0.00	\$
	\$0.00	\$0.00	\$0.00	\$
\$0.00	\$0.00	\$868.00	\$1,753.00	\$
	es support plus \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$850.00 \$0.00 \$0.00 \$850.00 \$0.00 \$0.00 \$-28.00 \$0.00 \$0.00 \$822.00 \$0.00 \$0.00 \$86.00 \$0.00 \$0.00 \$-40.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	es support plus or minus premium adjustment for health-care insurance) \$0.00 \$0.00 \$850.00 \$1,683.00 \$0.00 \$0.00 \$-28.00 \$-5.00 \$0.00 \$0.00 \$822.00 \$1,678.00 \$0.00 \$0.00 \$86.00 \$115.00 \$0.00 \$0.00 \$-40.00 \$-40.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Uninsured Health-Care Expenses. uninsured health-care expenses exceeding the annual ordinary medical amount will be paid 24% by the plaintiff and 76% by the defendant. Uninsured expenses exceeding the annual ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.

The annual ordinary medical amount is \$1,816.00 for four children, \$1,362.00 for three children, \$908.00 for two children, \$454.00 for one child.

Obligation Ends. Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.

[] **Post-majority Support:** The following children will be attending high school on a full-time basis after turning 18 years of age. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age. (Specify name of child and date obligation ends.)

Child Care. The parties must notify each other of changes in child-care expenses and must additionally notify the friend of the court if the changes end those expenses. The child-care obligation for each child ends on August 31 following the child's 12th birthday, at which time the total child care obligation reduces by that child's pro rata share unless specified differently in this order.

- 2C. Health-Care Coverage. For the benefit of the children, the [X] plaintiff [X] defendant shall maintain health-care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health-care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage not to exceed 6% of the plaintiff's/defendant's gross income.
- 3. **Income Withholding.** Income withholding takes immediate effect. Payments shall be made through the Michigan State Disbursement Unit unless otherwise ordered in item 12.
- 4. Qualified Medical Support Order. This order is a qualified medical support order with immediate effect pursuant to 29 USC 1169. To qualify this order, the friend of the court shall issue a notice to enroll pursuant to MCL 552.626b. A parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable cost.
- 5. Retroactive Modification, Surcharge for Past-Due Support, and Liens for Unpaid Support. Except as provided by MCL 552.603, support is a judgment the date it is due and is not modifiable retroactively. A surcharge may be added to past-due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.
- 6. Address, Employment Status, Health Insurance. Both parties shall notify the friend of the court in writing of: a) their mailing and residential addresses and telephone numbers; b) the names, addresses, and telephone numbers of their sources of income; c) their health-maintenance or insurance companies, insurance coverage, persons insured, or contract numbers; d) their occupational or drivers' licenses; and e) their social security numbers unless exempt by law pursuant to MCL 552.603. Both parties shall notify the friend of the court in writing within 21 days of any change in this information. Failure to do so may result in a fee being imposed.
- 7. Foster-Care Assignment. When a child is placed in foster care, that child's support is assigned to the Michigan Department of Health and Human Services while under the state's jurisdiction and to the funding county while placed in a county-funded program.
- 8. **Redirection and Abatement.** As provided by MCL 552.605d and subject to statutory procedures, the friend of the court may redirect support paid for a child to the person who is providing the actual care, support, and maintenance of that child, and shall abate support charges to zero for a child who resides on a full-time basis with the payer of support or if the payer of support will be incarcerated for 180 consecutive days or more without the ability to pay.

When friend of the court becomes aware that the payer's condition meets the definition of incapacitation as defined in the current or subsequent Michigan Child Support Formula, monthly support charges shall abate and be temporarily reduced to zero effective the date that the friend of the court office provides notice of the abatement to the parties and to the court. Support charges shall be reinstated effective 60 days after the incapacitation ends. The office shall provide notice of reinstatement to the parties and to the court that specifies the date charges will be effective.

Either party may object to the abatement or reinstatement by filing a written objection with the court within 21 days following when the notice was filed, or by filing a motion. If a timely objection is received, the friend of the court shall either set the objection for hearing or complete a support review with an effective date no earlier than the date of filing of that notice.

Based on a motion by either party or a recommendation following a review by the friend of the court, the amount abated may be later corrected based on the parties' incomes or ability to pay during the abatement period.

- 9. Fees. The payer of support shall pay statutory and service fees as required by law.
- 10. Review. Each party to a support order may submit a written request to have the friend of the court review the order. The friend of the court is not required to act on more than one request received from a party each 36 months. A party may also file a motion to modify this support order.
- []11. Michigan Child Support Formula Deviation. The support provisions ordered do not follow the Michigan Child Support Formula. The attached deviation addendum (FOC10d) provides the basis for deviation and the required findings by the court.
- [X]12. Other: (Attach separate sheets as needed.)

A review was conducted based on the Referral Order dated August 29, 2023.

13. Prior Orders. This order supersedes all prior child support orders and all continuing provisions are restated in this order. Past-due amounts owed under any prior support order in this case are preserved and paid at the rate calculated using the arrearage guideline in the Michigan Child Support Formula.

3/13/24

Friend of the Court Representative

CERTIFICATE OF MAILING

I served a copy of this uniform child support order on the parties or their attorneys by first-class mail addressed to their last-known addresses as defined by MCR 3.203. I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

Date

riend of the Court Representative

STATE OF MICHIGAN **48TH CIRCUIT COURT ALLEGAN COUNTY**

CHILD SUPPORT ORDER RECOMMENDATION MODIFICATION

CASE NO. and JUDGE 2018-059153-DM HON. MATTHEW ANTKOVIAK

Court address 113 Chestnut Street Allegan, MI 49010 Court telephone no. (269) 673-0300

Plaintiff's name, address, and telephone no. STEPHANIE ANN MARSH 4379 Tracy Trl Dorr, MI 49323
Plaintiff's attorney, bar no., address, and telephone no. Kendra J Ortega P82611 77 Monroe Center Nw Ste 406 Grand Rapids, MI 49503 (616) 454-7937
Plaintiff's source of income name, address, and telephone no.

Defendant's name, address, and telephone no. **BRETT DAVID MARSH** 11140 Keller Rd Shelbyville, MI 49344-9612 Defendant's attorney, bar no., address, and telephone no. Tara Lyn Sharp P72908 6312 W Main St Kalamazoo, MI 49009 (269) 978-6560 Defendant's source of income name, address, and telephone no. Precision Aerospace Corporation 5300 Corporate Grove Se Ste 350 Grand Rapids MI 49512-5512

Phone: (616) 243-8112

The Referee recommends child support be ordered as follows.

If you disagree with this recommendation, you must file a written objection with the Clerk of the Court on or before 21 days from the date this order is mailed. If you do not object, this proposed order will be presented to the court for entry.

Attached are the calculations pursuant to MCL 552.505(1)(h) and MCL 552.517b.

IT IS ORDERED, unless otherwise ordered in item 11 or 12: [X] Standard provisions have been modified (see item 11 or 12):

	ulo ouppoin	ed under this order	Payee:		
Payer: Brett David Marsh			Stephanie Ann	Marsh	
Children's names and annu Children's name	al overnights with	payer:		Overnights	
NICKOLAS ROBERT			0		
JONATHON RAY MA			0		
JACE ALLEN MARS			261		
JOSHUA THOMAS			261		
Effective 01-01-2024, t Children supported: Base support: (includ	l 1 abild	12 children	13 Chillaren	T Cilliai Cil	5 or more children
	es support più	\$0.00	\$851.00	\$1,684.00	\$
Support:	\$0.00	\$0.00	\$-27.00	\$-4.00	\$
Premium adjust:	\$0.00	\$0.00	\$824.00	\$1,680.00	\$
Subtotal:	\$0.00	\$0.00	\$86.00	\$115.00	\$
Ordinary medical:	\$0.00	\$0.00	\$-97.00	\$-97.00	\$
Child care:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Other:	\$0.00	\$0.00	\$0.00	\$0.00	\$
Benefit credit:	\$0.00		\$813.00	\$1,698.00	\$
Total:	\$0.00	\$0.00	1 40 10.00	141,000.00	

Uninsured Health-Care Expenses. All uninsured health-care expenses exceeding the annual ordinary medical amount will be paid 24% by the plaintiff and 76% by the defendant. Uninsured expenses exceeding the annual ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.

The annual ordinary medical amount is \$1,816.00 for four children, \$1,362.00 for three children, \$908.00 for two children, \$454.00 for one child.

Obligation Ends. Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.

[] **Post-majority Support:** The following children will be attending high school on a full-time basis after turning 18 years of age. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age. (Specify name of child and date obligation ends.)

Child Care. The parties must notify each other of changes in child-care expenses and must additionally notify the friend of the court if the changes end those expenses. The child-care obligation for each child ends on August 31 following the child's 12th birthday, at which time the total child care obligation reduces by that child's pro rata share unless specified differently in this order.

2A. Health-Care Coverage. For the benefit of the children, the [X] plaintiff [X] defendant shall maintain health-care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health-care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage not to exceed 6% of the plaintiff's/defendant's gross income.

1B. The children who are supported under this	order and the payer and payee are:
Payer:	Payee:
Stephanie Ann Marsh	Brett David Marsh
Children's names and annual overnights with payer: Children's names	Overnights
JACE ALLEN MARSH	104
JOSHUA THOMAS MARSH	104

Effective <u>Upon minor child Jonathon reaching the age of majority</u>, the payer shall pay a monthly child support obligation for the children named above.

Children supported:	1 child	2 children	3 children	4 children	5 or more children
Base support: (includ	es support plus c	r minus premium	adjustment for heal	th-care insurance)	
Support:	\$198.00	\$302.00	\$	\$	\$
Premium adjust:	\$25.00	\$49.00	\$	\$	\$
Subtotal:	\$223.00	\$351.00	\$	\$	\$
Ordinary medical:	\$9.00	\$18.00	\$	\$	\$
Child care:	\$0.00	\$97.00	\$	\$	\$
Other:	\$0.00	\$0.00	\$	\$	\$
Benefit credit:	\$0.00	\$0.00	\$	\$	\$
Total:	\$232.00	\$466.00	\$	\$	\$

Uninsured Health-Care Expenses. All uninsured health-care expenses exceeding the annual ordinary medical amount will be paid 24% by the plaintiff and 76% by the defendant. Uninsured expenses exceeding the annual ordinary medical amount for the year they are incurred that are not paid within 28 days of a written payment request may be enforced by the friend of the court.

The annual ordinary medical amount is \$908.00 for two children, \$454.00 for one child.

Obligation Ends. Except for child care, or as otherwise ordered, support obligations for each child end on the last day of the month the child turns age 18.

[] Post-majority Support: The following children will be attending high school on a full-time basis after turning 18 years of age. Therefore, the support obligation for each specific child ends on the last day of the month as follows, except in no case may it extend beyond the time the child reaches 19 years and 6 months of age. (Specify name of child and date obligation ends.)

Child Care. The parties must notify each other of changes in child-care expenses and must additionally notify the friend of the court if the changes end those expenses. The child-care obligation for each child ends on August 31 following the child's 12th birthday, at which time the total child care obligation reduces by that child's pro rata share unless specified differently in this order.

- 2B. Health-Care Coverage. For the benefit of the children, the [X] plaintiff [X] defendant shall maintain health-care coverage (as defined in MCL 552.602) that includes payment for hospital, dental, optical, and other health-care expenses when that coverage is accessible to the child and available at a reasonable cost. The reasonable cost is the parent's net cost of adding the children to the parent's coverage not to exceed 6% of the plaintiff's/defendant's gross income.
- 3. **Income Withholding.** Income withholding takes immediate effect. Payments shall be made through the Michigan State Disbursement Unit unless otherwise ordered in item 12.
- 4. Qualified Medical Support Order. This order is a qualified medical support order with immediate effect pursuant to 29 USC 1169. To qualify this order, the friend of the court shall issue a notice to enroll pursuant to MCL 552.626b. A parent may contest the notice by requesting a review or hearing concerning availability of health care at a reasonable cost.
- 5. **Retroactive Modification, Surcharge for Past-Due Support, and Liens for Unpaid Support.** Except as provided by MCL 552.603, support is a judgment the date it is due and is not modifiable retroactively. A surcharge may be added to past-due support. Unpaid support is a lien by operation of law and the payer's property can be encumbered or seized if an arrearage accrues in an amount greater than the periodic support payments payable for two months under the payer's support order.
- 6. Address, Employment Status, Health Insurance. Both parties shall notify the friend of the court in writing of: a) their mailing and residential addresses and telephone numbers; b) the names, addresses, and telephone numbers of their sources of income; c) their health-maintenance or insurance companies, insurance coverage, persons insured, or contract numbers; d) their occupational or drivers' licenses; and e) their social security numbers unless exempt by law pursuant to MCL 552.603. Both parties shall notify the friend of the court in writing within 21 days of any change in this information. Failure to do so may result in a fee being imposed.
- Foster-Care Assignment. When a child is placed in foster care, that child's support is assigned to the
 Michigan Department of Health and Human Services while under the state's jurisdiction and to the funding
 county while placed in a county-funded program.
- 8. Redirection and Abatement. As provided by MCL 552.605d and subject to statutory procedures, the friend of the court may redirect support paid for a child to the person who is providing the actual care, support, and maintenance of that child, and shall abate support charges to zero for a child who resides on a full-time basis with the payer of support or if the payer of support will be incarcerated for 180 consecutive days or more without the ability to pay.

When friend of the court becomes aware that the payer's condition meets the definition of incapacitation as defined in the current or subsequent Michigan Child Support Formula, monthly support charges shall abate and be temporarily reduced to zero effective the date that the friend of the court office provides notice of the abatement to the parties and to the court. Support charges shall be reinstated effective 60 days after the incapacitation ends. The office shall provide notice of reinstatement to the parties and to the court that specifies the date charges will be effective.

Either party may object to the abatement or reinstatement by filing a written objection with the court within 21 days following when the notice was filed, or by filing a motion. If a timely objection is received, the friend of the court shall either set the objection for hearing or complete a support review with an effective date no earlier than the date of filling of that notice.

Based on a motion by either party or a recommendation following a review by the friend of the court, the amount abated may be later corrected based on the parties' incomes or ability to pay during the abatement period.

- 9. Fees. The payer of support shall pay statutory and service fees as required by law.
- 10. Review. Each party to a support order may submit a written request to have the friend of the court review the order. The friend of the court is not required to act on more than one request received from a party each 36 months. A party may also file a motion to modify this support order.

Friend of the Court Representative

Date

Summary

2018-059153-DM Calculation 1796126 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$2,021.00 a month. (Note: See following pages for further detail)

Family Used for Calculation Results

Family Used for Calculation Results					
JOSHUA MARSH JACE MAI	<u>Children in Comm</u> RSH JONATH	<u>on <i>(youngest t</i></u> ION MARSH	<u>o oldest)</u> NICKOLAS N	MARSH	
		IIE MARSH	and	BRETT MA	RSH
Calculation Between	STEPHAN	IIE WARSH	and	DIVELLING	il (Ol I
Total Other Children - 2021 MCSF 2.08(A)	4.05.71	1	O Children	None 4 Children	
Payer	<u>1 Child</u> BRETT	2 Children BRETT	<u>3 Children</u> BRETT	<u>4 Children</u> BRETT	5+ Children
Average Overnights with Payer	261	261	174	130.5	
Base Support after PTO	\$8.00	\$59.00	\$1,129.00	\$1,912.00	
HC Premium Adjustment	\$2.00	\$5.00	\$5.00	\$5.00	
Subtotals	\$10.00	\$64.00	\$1,134.00	\$1,917.00	
Ordinary Medical	\$32.00	\$64.00	\$96.00 -\$25.00	\$129.00 -\$25.00	
Child Care	\$0.00 \$0.00	-\$25.00 \$0.00	\$0.00	\$0.00	
Benefit Credit Totals	\$42.00	\$103.00	\$1,205.00	\$2,021.00	
Totals	Ψ12.00	Ψ.00.00	ψ1,200.00	*-,*	
Net Income Calculation - 2021 MCSF 2.	01(C)	STEPHA MARS		В	RETT MARSH
Monthly Gross Income		\$1.	537.72		\$7,320.26
Monthly Deductions and Adjustments			548.32		\$1,667.44
Monthly Net Income		\$	989.40		\$5,652.82
Family Net Income				\$6,642.22	05.400/
Share of Net Income		•	14.90%		85.10%
Base Support Calculation - 2021 MCSI	= 3.02(A)				40.070.00
Base Support Amount			\$99.00		\$2,376.00
Average Overnights (Highest Tier)	- ^		234.5		130.5 \$1,912.00
Payer's Base Support Amount after PT	O		\$0.00		φ1,912.00
Health Care Premium Allocation - 20	21 MCSF 3.05(C)				
Monthly Insurance Premiums		\$	304.11		\$600.87
Calculation Children Covered			2		2
Additional Qualifying Children Covered	l		4		0
Additional People Covered			2		\$200.29
Per Capita Amount Attributable to Children on Cal	oulation		\$38.01 \$76.03		\$400.58
Share of Premiums	Guiation		15%		85%
Payer's Monthly Share			\$0.00		\$5.00
r dyor o morning ornaro			,		
Ordinary Medical Expense - 2021 MCS	SF 3.04(B)			*4.040.00	
Annual Ordinary Medical Expense for	4 Children		4.507	\$1,816.00	85%
Share of Medical Expense			15% \$0.00		\$129.00
Payer's Monthly Share			\$0.00		ψ120.00
Child Care Expense Reimbursemen	t - 2021 MCSF 3.06(C)				* *****
Monthly Gross Child Care Expenses			\$0.00		\$208.80
Subsidies, Reimbursements, Credits			\$0.00		\$41.76 \$167.04
Monthly Net Child Care Expenses			\$0.00 15%		\$167.04 85%
Share of Child Care			\$0.00		-\$25.00
Payer's Monthly Share			Ψ0.00		420.00

Details

2018-059153-DM Calculation 1796126 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$2,021.00 a month. (Note: See following pages for further detail)

Family/Children Details - 2021 MCSF 2.08(A)

	STEPHANIE MARSH	BRETT MARSH
Additional Children from Other Relationships	1	0
Children-in-Common in Other Custodial	0	0
Arrangements		_
Total Other Children	1	0
Income Adjustment Percentage Multiplier	83%	-
Provided Information For Support Calculation	No	Yes

Family Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024. BRETT MARSH: Per the Referee Recommendation dated March 8, 2024.

Net Income Calculation - 2021 MCSF 2.01(C)

	STEPHANIE MARSH	BRETT MARSH
Income Type	None	Employer Wages
Employer Name	None	Precision Aerospace
		Corp
Monthly Gross Income	None	\$7,320.26
Monthly Overtime	None	\$0.00
Monthly Shift Premium	None	\$0.00
Income Type	Other - All Taxes Apply (F	None None
Monthly Gross Income	\$1,537.72	None
Total Monthly Gross Income	\$1,537.72	\$7,320.26
Total Monthly Gross medine	\$1,001112	~~
Filing Status	Single	Head of Household
Tax Exemptions	3	3
Child Tax Credit Children Claimed Every Year		
Child Tax Credit Children Claimed Alternating		
Years		
FICA Tax	\$117.64	\$560.00
Federal Tax	\$32.11	\$655.54
State Tax	\$5.85	\$251.61
Local Resident Tax	\$0.00	\$0.00
Local Non-Resident Tax	\$0.00	\$0.00
Additional Children Adjustment	\$202.65	\$0.00
Health Insurance - Other Qualifying Children	\$152.06	\$0.00
Mandatory Health Insurance - Parent's Self-	\$38.01	\$200.29
Coverage Portion of Premiums		
Total Monthly Gross Deductions and	\$548.32	\$1,667.44
Adjustments		
Monthly Net Income	\$989.40	\$5,652.82
Family Net Income	·	\$6,642.22
Share of Net Income	14.90%	85.10%

Disclaimer: Unless identified as an adjusted tax amount (M), the tax amounts listed are estimates calculated by the Michigan Child Support Enforcement System. (P) Indicates Potential. (O) Indicates Omitted.

Income Comments

STEPHANIE MARSH: Potential income factors considered include:

a. Prior employment experience and history, including earnings history, and reasons for any termination or changes in employment. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

- b. Educational level, literacy, and any special skills or training. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- c. Physical and mental disabilities that may affect a parent's ability to work, or to obtain or maintain gainful employment. No documentation was provided to indicate Plaintiff is medically prohibited from working full time, therefore income was imputed to minimum wage \$10.10 per hour at 35 hours per week.
- d. Availability for work (exclude periods when a parent could not work or seek work, e.g., hospitalization, incarceration, debilitating illness, etc.). The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- e. Availability of opportunities to work in the local geographical area. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- f. The prevailing wage rates and number of hours of available work in the local geographical area. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- g. Diligence exercised in seeking appropriate employment. The party failed to provide information relevant for this factor.

 The FOC does not have independent knowledge as to this factor.
- h. Evidence that the parent in question is able to earn the imputed income. No documentation was supplied to indicate that the Plaintiff is unable to earn the imputed income.
- i. Personal history, including present marital status, age, health, residence, means of support, criminal record, ability to drive, and access to transportation, etc. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- j. The presence of the parties' children in the parent's home and its impact on that parent's earnings. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.
- k. Whether there has been a significant reduction in income compared to the period that preceded the filing of the initial complaint or the motion for modification. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

BRETT MARSH: Based on the employer's disclosure provided with year to date gross earnings information.

Deductions Comments

STEPHANIE MARSH: The Plaintiff did not provide any taxes, therefore the Friend of the Court defaulted to single with three exemptions; one being herself and the other two being the oldest minor children in her care.

BRETT MARSH: Based on the tax filing information provided by the Defendant.

Base Support Calculation - 2021 MCSF 3.02(A)

		STEPHANIE	E MARSH	BRETT MA	ARSH
	Children in Comn ommon on Calculat Base Support Equat	tion	4 4 • Equation -	General Care I	4 4 Equation -
	Base Support Amo	2021 MC ount	SF 3.02(C) \$99.00 \$0.00		\$F 3.02(B) \$2,376.00 \$1,912.00
Children:	<u>JOSHUA</u> MARSH	JACE MARSH	JONATHON MARSH	NICKOLAS MARSH	
Obligation End Date Post Majority	01/31/2034 No	04/30/2032 No	08/31/2026 No	02/29/2024 No	

Parenting	Time (Overnigh	ts -	2021	MCSF 3.03(A)

	STEPHANIE MARSH	BRETT MARSH
JOSHUA MARSH - age 8	104	261
JACE MARSH - age 9	104	261
JONATHON MARSH - age 15	365	. 0
NICKOLAS MARSH - age 18	365	0
Average Overnights (Highest Tier)	234.5	130.5

Health Care Allocations and Medical Obligations - 2021 MCSF 3.05(C), 2021 MCSF 3.04(B)

	STEPHANIE MARSH		BRETT MARSH
Recommended to Provide Health Insurance	Yes		Yes
Health Care Coverage Type	Private or Public		Private or Public
Reasonable Cost of Health Care	6%		6%
Share of Health Care	15%		85%
Monthly Insurance Premiums	\$304.11		\$600.87
Calculation Children Covered	2		2
Additional Qualifying Children Covered	4		0
Additional People Covered	2		1
Per Capita Amount	\$38.01		\$200.29
Payer's Monthly Share	\$0.00		\$5.00
Share of Medical Expense	15%		85%
Annual Ordinary Medical Expense per MCSF		\$1,816.00	
Monthly Ordinary Medical Expense		\$151.33	A.00.00
Payer's Monthly Share	\$0.00		\$129.00

Health Care Comments

STEPHANIE MARSH: Per Referee Recommendation dated March 8, 2024.

BRETT MARSH: The Defendant has the minor children Joshua and Jace covered under his insurance.

Child Care Obligations - 2021 MCSF 3.06(C)

		STEPHAN	IE MARSH	BRETT N	/IARSH	
Children: (youngest	Share of Child Monthly Child Care Ex JOSHUA MARSH - JACE MARSH - JOSHUA MARSH	pense age 8	15% \$0.00 \$0.00 \$0.00 JONATHON MARSH	NICKOLAS MARSH	¥	/9 /9
to oldest) Child Care Reimbursement End Date	08/31/2028	08/31/2026	08/31/2020	08/31/2018		
	es, Reimbursements, (Net Child Care Expend Payer's Monthly	ditures	\$0.00 \$0.00 \$0.00		\$41.76 \$167.04 -\$25.00	

Child Care Comments

STEPHANIE MARSH: No child care info provided.

BRETT MARSH: Based on the child care verification form submitted by the Defendant.

Administrative Information

Calculation ID Docket County Calculation Completed by		SF Supplement Year (Year culation Completed Date	2021 2021 2024 03/12/2024
Calculation Parties	STEPHANIE MARSH and BRETT	Γ MARSH	

Calculation Results:

BRETT MARSH paying STEPHANIE MARSH \$2,021.00 a month.

Support amount based on known actual income of parent(s) is BRETT MARSH paying STEPHANIE MARSH \$2,077.00.

Summary

2018-059153-DM Calculation 1796127 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$2,067.00 a month. (Note: See following pages for further detail)

Family Used for Calculation Results	nildren in Commo	on (voundest ti	n oldest)		
JOSHUA MARSH JACE MARSI		ON MARSH	NICKOLAS M	IARSH	
Calculation Between	STEPHAN	E MARSH	and	BRETT MA	RSH
Total Other Children - 2021 MCSF 2.08(A) Payer Average Overnights with Payer Base Support after PTO HC Premium Adjustment Subtotals Ordinary Medical Child Care Benefit Credit Totals		2 Children BRETT 261 \$65.00 -\$4.00 \$61.00 \$65.00 -\$23.00 \$0.00 \$103.00	3 Children BRETT 174 \$1,132.00 \$21.00 \$1,153.00 \$98.00 -\$23.00 \$0.00 \$1,228.00	None 4 Children BRETT 130.5 \$1,913.00 \$47.00 \$1,960.00 \$130.00 -\$23.00 \$0.00 \$2,067.00	5+ Children
Net Income Calculation - 2021 MCSF 2.01(c)	STEPHA MARS		В	RETT MARSH
Monthly Gross Income Monthly Deductions and Adjustments Monthly Net Income Family Net Income Share of Net Income		\$1, \$ \$	537.72 615.18 922.55 14.03%	\$6,575.37	\$7,320.26 \$1,667.44 \$5,652.82 85.97%
Base Support Calculation - 2021 MCSF 3. Base Support Amount Average Overnights (Highest Tier) Payer's Base Support Amount after PTO	02(A)		\$92.00 234.5 \$0.00		\$2,376.00 130.5 \$1,913.00
Health Care Premium Allocation - 2021 Monthly Insurance Premiums Calculation Children Covered Additional Qualifying Children Covered Additional People Covered Per Capita Amount Attributable to Children on Calcu Share of Premiums Payer's Monthly Share			\$304.11 4 4 2 \$30.41 \$121.64 14% \$0.00		\$600.87 2 0 1 \$200.29 \$400.58 86% \$47.00
Ordinary Medical Expense - 2021 MCSF Annual Ordinary Medical Expense for 4 (Share of Medical Expense Payer's Monthly Share	3.04(B) Children		14% \$0.00	\$1,816.00	86% \$130.00
Child Care Expense Reimbursement - Monthly Gross Child Care Expenses Subsidies, Reimbursements, Credits Monthly Net Child Care Expenses Share of Child Care Payer's Monthly Share	2021 MCSF 3.06(C)		\$0.00 \$0.00 \$0.00 14% \$0.00		\$208.80 \$41.76 \$167.04 86% -\$23.00

Details

2018-059153-DM Calculation 1796127 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$2,067.00 a month. (Note: See following pages for further detail)

Family/Children Details - 2021 MCSF 2.08(A)

	STEPHANIE MARSH	BRETT MARSH
Additional Children from Other Relationships	2	0
Children-in-Common in Other Custodial	0	0
Arrangements Total Other Children	2	0
Income Adjustment Percentage Multiplier	75%	-
Provided Information For Support Calculation	No	Yes

Family Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024. **BRETT MARSH:** Per the Referee Recommendation dated March 8, 2024.

Net Income Calculation - 2021 MCSF 2.01(C)

	STEPHANIE MARSH	BRETT MARSH
Income Type	None	Employer Wages
Employer Name	None	Precision Aerospace
		Corp
Monthly Gross Income	None	\$7,320.26
Monthly Overtime	None	\$0.00
Monthly Shift Premium	None	\$0.00
Income Type	Other - All Taxes Apply (F	
Monthly Gross Income	\$1,537.72	None
Total Monthly Gross Income	\$1,537.72	\$7,320.26
Filing Status	Single	Head of Household
Tax Exemptions	3	3
Child Tax Credit Children Claimed Every Year	_	
Child Tax Credit Children Claimed Alternating		
Years		
FICA Tax	\$117.64	\$560.00
Federal Tax	\$32.11	\$655.54
State Tax	\$5.85	\$251.61
Local Resident Tax	\$0.00	\$0.00
Local Non-Resident Tax	\$0.00	\$0.00
Additional Children Adjustment	\$307.52	\$0.00
Health Insurance - Other Qualifying Children	\$121.64	\$0.00
Mandatory Health Insurance - Parent's Self-	\$30.41	\$200.29
Coverage Portion of Premiums		44.007.44
Total Monthly Gross Deductions and	\$615.18	\$1,667.44
Adjustments		
Monthly Net Income	\$922.55	\$5,652.82
Family Net Income		\$6,575.37
Share of Net Income	14.03%	85.97%

Disclaimer: Unless identified as an adjusted tax amount (M), the tax amounts listed are estimates calculated by the Michigan Child Support Enforcement System. (P) Indicates Potential. (O) Indicates Omitted.

Income Comments

STEPHANIE MARSH: Potential income factors considered include:

a. Prior employment experience and history, including earnings history, and reasons for any termination or changes in employment. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

b. Educational level, literacy, and any special skills or training. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

c. Physical and mental disabilities that may affect a parent's ability to work, or to obtain or maintain gainful employment. No documentation was provided to indicate Plaintiff is medically prohibited from working full time, therefore income was imputed to minimum wage \$10.10 per hour at 35 hours per week.

d. Availability for work (exclude periods when a parent could not work or seek work, e.g., hospitalization, incarceration, debilitating illness, etc.). The party failed to provide information relevant for this factor. The FOC does not have

independent knowledge as to this factor.

e. Availability of opportunities to work in the local geographical area. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

f. The prevailing wage rates and number of hours of available work in the local geographical area. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

g. Diligence exercised in seeking appropriate employment. The party failed to provide information relevant for this factor.

The FOC does not have independent knowledge as to this factor.

h. Evidence that the parent in question is able to earn the imputed income. No documentation was supplied to indicate that the Plaintiff is unable to earn the imputed income.

i. Personal history, including present marital status, age, health, residence, means of support, criminal record, ability to drive, and access to transportation, etc. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

j. The presence of the parties' children in the parent's home and its impact on that parent's earnings. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

k. Whether there has been a significant reduction in income compared to the period that preceded the filing of the initial complaint or the motion for modification. The party failed to provide information relevant for this factor. The FOC does not have independent knowledge as to this factor.

BRETT MARSH: Based on the employer's disclosure provided with year to date gross earnings information.

Deductions Comments

STEPHANIE MARSH: The Plaintiff did not provide any taxes, therefore the Friend of the Court defaulted to single with three exemptions; one being herself and the other two being the oldest minor children in her care.

BRETT MARSH: Based on the tax filing information provided by the Defendant.

Base Support Calculation - 2021 MCSF 3.02(A)

		STEPHANIE	MARSH	BRETT M	ARSH
	Children in Comm		4		4
	mmon on Calculati ase Support Equati		4 Fauation -	General Care	Equation -
D	ase Support Equati		SF 3.02(C)		SF 3.02(B)
	Base Support Amoi ort Amount after P		\$92.00 \$0.00		\$2,376.00 \$1,913.00
Children:	<u>JOSHUA</u> MARSH	JACE MARSH	<u>JONATHON</u> MARSH	NICKOLAS MARSH	
Obligation End Date Post Majority	01/31/2034 No	04/30/2032 No	08/31/2026 No	02/29/2024 No	

Parenting Time Overnights - 2021 MCSF 3.03(A)

	STEPHANIE MARSH	BRETT MARSH
JOSHUA MARSH - age 8	104	261
JACE MARSH - age 9	104	261
JONATHON MARSH - age 15	365	0
NICKOLAS MARSH - age 18	365	0
Average Overnights (Highest Tier)	234.5	130.5

Health Care Allocations and Medical Obligations - 2021 MCSF 3.05(C), 2021 MCSF 3.04(B)

	STEPHANIE MARSH	BRETT MARSH	_
Recommended to Provide Health Insurance	Yes	Y	es
Health Care Coverage Type	Private or Public	Private or Pub	lic
Reasonable Cost of Health Care	6%	6	3%
Share of Health Care	14%		3%
Monthly Insurance Premiums	\$304.11	\$600.	87
Calculation Children Covered	4		2
Additional Qualifying Children Covered	4		0
Additional People Covered	2		1
Per Capita Amount	\$30.41	\$200.	
Payer's Monthly Share	\$0.00	\$47.	00
Share of Medical Expense	14%	86	6%
Annual Ordinary Medical Expense per MCSF		\$1,816.00	
Monthly Ordinary Medical Expense		\$151.33	
Payer's Monthly Share	\$0.00	\$130.	.00

Health Care Comments

STEPHANIE MARSH: Per Referee Recommendation dated March 8, 2024.

BRETT MARSH: The Defendant has the minor children Joshua and Jace covered under his insurance.

Child Care Obligations - 2021 MCSF 3.06(C)

		STEPHAN	IE MARSH	BRETT N	// ARSH
Children: (youngest to oldest)	Share of Chili Monthly Child Care Ex JOSHUA MARSH - JACE MARSH - JOSHUA MARSH	opense - age 8	14% \$0.00 \$0.00 \$0.00 JONATHON MARSH	NICKOLAS MARSH	86% \$208.80 \$104.40 / 9 \$174.00 / 9
Child Care Reimbursement End Date	08/31/2028	08/31/2026	08/31/2020	08/31/2018	
	ies, Reimbursements, (Net Child Care Expen Payer's Monthly	ditures	\$0.00 \$0.00 \$0.00		\$41.76 \$167.04 -\$23.00

Child Care Comments

STEPHANIE MARSH: No child care info provided.

BRETT MARSH: Based on the child care verification form submitted by the Defendant.

Administrative Information

Calculation ID Docket County Calculation Completed by	2018-059153-DM 003	MCSF Year MCSF Supplement Year Tax Year Calculation Completed Date	2021 2021 2024 03/12/2024
Calculation Parties	STEPHANIE MARSH and BE	RETTMARSH	

Calculation Results:

BRETT MARSH paying STEPHANIE MARSH \$2,067.00 a month.

Support amount based on known actual income of parent(s) is BRETT MARSH paying STEPHANIE MARSH \$2,117.00.

Summary

2018-059153-DM Calculation 1796128 completed by BRYNNE EBELS on 03/12/2024.

BRETT MARSH paying STEPHANIE MARSH \$1,753.00 a month. (Note: See following pages for further detail)

Family Used for Calculati		mmon (voungoet t	a aldaet)		
JOSHUA MARSH		<u>nmon (youngest to</u> ATHON MARSH	NICKOLAS N	MARSH	
Calculation Between	STEPH	IANIE MARSH	and	BRETT MAF	RSH
Payer Average Overnights with Pase Support after PTO HC Premium Adjustment Subtotals Ordinary Medical Child Care Benefit Credit Totals	<u>1 Child</u> STEPHANIE	2 2 Children STEPHANIE 104 \$302.00 \$50.00 \$352.00 \$18.00 \$40.00 \$0.00 \$410.00	3 Children BRETT 174 \$850.00 -\$28.00 \$822.00 \$86.00 -\$40.00 \$0.00 \$868.00	None 4 Children BRETT 130.5 \$1,683.00 -\$5.00 \$1,678.00 \$115.00 -\$40.00 \$0.00 \$1,753.00	<u>5+ Children</u>
Net Income Calculation -	2021 MCSF 2.01(C)	STEPHA MARS		BF	RETT MARSH
Monthly Gross Income Monthly Deductions and Ad Monthly Net Income Family Net Income	djustments	\$3, \$1,	045.00 252.49 792.52	\$7,445.34	\$7,320.26 \$1,667.44 \$5,652.82
Share of Net Income		2	4.08%		75.92%
Base Support Calculation Base Support Amount Average Overnights (Higher Payer's Base Support Amo	est Tier)	\$	580.00 234.5 \$0.00		\$2,206.00 130.5 \$1,683.00
Health Care Premium All- Monthly Insurance Premiur Calculation Children Cover Additional Qualifying Child Additional People Covered Per Capita Amount Attributable to Chi Share of Premiums Payer's Monthly Share	ms red ren Covered l		304.11 4 4 2 \$30.41 121.64 24% \$0.00		\$600.87 2 0 1 \$200.29 \$400.58 76% -\$5.00
Ordinary Medical Expens	se = 2021 MCSF 3.04(B)	90			
Annual Ordinary Medical E Share of Medical Expense Payer's Monthly Share	Expense for 4 Children		24% \$0.00	\$1,816.00	76% \$115.00
Child Care Expense Rein Monthly Gross Child Care Subsidies, Reimbursemen Monthly Net Child Care Ex Share of Child Care	ts, Credits	6(C)	\$0.00 \$0.00 \$0.00 24% \$0.00		\$208.80 \$41.76 \$167.04 76% -\$40.00

\$0.00

Payer's Monthly Share

Details

2018-059153-DM Calculation 1796128 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$1,753.00 a month. (Note: See following pages for further detail)

Family/Children Details - 2021 MCSF 2.08(A)

	STEPHANIE MARSH	BRETT MARSH
Additional Children from Other Relationships	2	0
Children-in-Common in Other Custodial	0	0
Arrangements Total Other Children	2	0
Income Adjustment Percentage Multiplier Provided Information For Support Calculation	75% No	Yes

Family Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024. **BRETT MARSH:** Per the Referee Recommendation dated March 8, 2024.

Net Income Calculation - 2021 MCSF 2.01(C)

	STEPHANIE MARSH	BRETT MARSH
Income Type	None	Employer Wages
Employer Name	None	Precision Aerospace
		Corp
Monthly Gross Income	None	\$7,320.26
Monthly Overtime	None	\$0.00
Monthly Shift Premium	None	\$0.00
Income Type	Other - All Taxes Apply (I	P) None
Monthly Gross Income	\$3,045.00	None
Total Monthly Gross Income	\$3,045.00	\$7,320.26
	48	
Filing Status	Single	Head of Household
Tax Exemptions	3	3
Child Tax Credit Children Claimed Every Year		
Child Tax Credit Children Claimed Alternating		
Years	#222.04	\$560.00
FICA Tax	\$232.94	\$655.54
Federal Tax	\$200.07	\$251.61
State Tax	\$69.91 \$0.00	\$0.00
Local Resident Tax	\$0.00	\$0.00
Local Non-Resident Tax	\$597.51	\$0.00
Additional Children Adjustment	\$121.64	\$0.00
Health Insurance - Other Qualifying Children	\$30.41	\$200.29
Mandatory Health Insurance - Parent's Self- Coverage Portion of Premiums	Ψ00.41	\$2001.20
Total Monthly Gross Deductions and	\$1,252.49	\$1,667.44
Adjustments	Ψ1,202.10	\psi,23111
Adjustilients		
Monthly Net Income	\$1,792.52	\$5,652.82
Family Net Income	• • • •	\$7,445.34
Share of Net Income	24.08%	75.92%

Disclaimer: Unless identified as an adjusted tax amount (M), the tax amounts listed are estimates calculated by the Michigan Child Support Enforcement System. (P) Indicates Potential. (O) Indicates Omitted.

Income Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024.

BRETT MARSH: Based on the employer's disclosure provided with year to date gross earnings information.

Deductions Comments

STEPHANIE MARSH: The Plaintiff did not provide any taxes, therefore the Friend of the Court defaulted to single with three exemptions; one being herself and the other two being the oldest minor children in her care.

BRETT MARSH: Based on the tax filing information provided by the Defendant.

Baca Cupport	Calculation	2021 MCSF 3.02(A)
Dase Support	Calculation	AUET INOUT DIVE(F)

	STEPHANIE MARSH	BRETT MARSH
Children in Common	4	4
Children in Common on Calculation Base Support Equation	Low Income Transition Equation - 2021 MCSF	General Care Equation - 2021 MCSF 3.02(B)
Base Support Amount Base Support Amount after PTO	3.02(D) \$580.00 \$0.00	\$2,206.00 \$1,683.00

Children:	<u>JOSHUA</u> MARSH	JACE MARSH	<u>JONATHON</u> MARSH	NICKOLAS MARSH
Obligation End Date	01/31/2034	04/30/2032	08/31/2026	02/29/2024
Post Majority	No	No	No	No

Parenting Time Overnights	- 2021 MCSF 3.03(A)	
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	STEPHANIE MARSH	BRETT MARSH
JOSHUA MARSH - age 8	104	261
JACE MARSH - age 9	104	261
JONATHON MARSH - age 15	365	0
NICKOLAS MARSH - age 18	365	0
Average Overnights (Highest Tier)	234.5	130.5

Health Care Allocations and Medical Obligations - 2021 MCSF 3.05(C), 2021 MCSF 3.04(B)

	STEPHANIE MARSH		BRETT MARSH
Recommended to Provide Health Insurance	Yes		Yes
Health Care Coverage Type	Private or Public		Private or Public
Reasonable Cost of Health Care	6%		6%
Share of Health Care	24%		76%
Monthly Insurance Premiums	\$304.11		\$600.87
Calculation Children Covered	4		2
Additional Qualifying Children Covered	4		0
Additional People Covered	2		1
Per Capita Amount	\$30.41		\$200.29
Payer's Monthly Share	\$0.00		-\$5.00
Share of Medical Expense	24%		76%
Annual Ordinary Medical Expense per MCSF		\$1,816.00	
Monthly Ordinary Medical Expense		\$151.33	
Payer's Monthly Share	\$0.00		\$115.00

Health Care Comments

STEPHANIE MARSH: Per Referee Recommendation dated March 8, 2024.

BRETT MARSH: The Defendant has the minor children Joshua and Jace covered under his insurance.

Child Care Obligations - 2021 MCSF 3.06(C)

	STEPHANIE MARSH	BRETT MARSH
Share of Child Care	24%	76%
Monthly Child Care Expense	\$0.00	\$208.80

Children: (youngest to oldest)	JOSHUA MARSH - JACE MARSH - JOSHUA MARSH		\$0.00 \$0.00 JONATHON MARSH	NICKOLAS MARSH	\$104.40 /9 \$174.00 /9
Child Care Reimbursement End Date	08/31/2028	08/31/2026	08/31/2020	08/31/2018	
	es, Reimbursements, 0 Net Child Care Expen- Payer's Monthly	ditures	\$0.00 \$0.00 \$0.00		\$41.76 \$167.04 -\$40.00

Child Care Comments

STEPHANIE MARSH: No child care info provided.

BRETT MARSH: Based on the child care verification form submitted by the Defendant.

Administrative Information

Calculation ID	1796128	MCSF Year	2021
Docket	2018-059153-DM	MCSF Supplement Year	2021
County		Tax Year	2024
Calculation Completed by	BRYNNE EBELS	Calculation Completed Date	03/12/2024
Calculation Parties	STEPHANIE MARSH and BF	RETT MARSH	

Calculation Results:

BRETT MARSH paying STEPHANIE MARSH \$1,753.00 a month.
Support amount based on known actual income of parent(s) is BRETT MARSH paying STEPHANIE MARSH \$2,117.00.

Summary

2018-059153-DM Calculation 1796130 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$1,698.00 a month. (Note: See following pages for further detail)

Family Used for Calculation Results

•	<u>Childrer</u>	n in Common <i>(youngest to</i>	o oldest)
JOSHUA MARSH	JACE MARSH	JONATHON MARSH	NICKOLAS MARSH

Calculation Between	STEP	HANIE MARSH	and	BRETT MA	RSH
Total Other Children - 2021 MCSF 2.0	98(A) 1 Child STEPHANIE	2 <u>2 Children</u> STEPHANIE	3 Children BRETT	None <u>4 Children</u> BRETT	5+ Children
Payer Average Overnights with Payer	104	104	174	130.5	
Base Support after PTO HC Premium Adjustment	\$198.00 \$25.00	\$302.00 \$49.00	\$851.00 -\$27.00	\$1,684.00 -\$4.00	
Subtotals	\$223.00	\$351.00	\$824.00	\$1,680.00	
Ordinary Medical	\$9.00 \$0.00	\$18.00 \$97.00	\$86.00 -\$97.00	\$115.00 -\$97.00	
Child Care Benefit Credit	\$0.00	\$0.00	\$0.00	\$0.00	
Totals	\$232.00	\$466.00	\$813.00	\$1,698.00	
Net Income Calculation - 2021 MC	SF 2.01(C)	STEPH MAR		B	RETT MARSH
Monthly Gross Income			3,045.00		\$7,320.26
Monthly Deductions and Adjustment Monthly Net Income	nts		1,252.49 1,792.52		\$1,665.22 \$5,655.04
Family Net Income		*		\$7,447.56	•
Share of Net Income			24.07%		75.93%
Base Support Calculation - 2021 /	MCSF 3.02(A)		\$580.00		\$2,207.00
Base Support Amount Average Overnights (Highest Tier)			234.5		130.5
Payer's Base Support Amount after			\$0.00		\$1,684.00
Health Care Premium Allocation	- 2021 MCSF 3.05(C)		*		\$504.04
Monthly Insurance Premiums Calculation Children Covered			\$304.11 4		\$594.21 2
Additional Qualifying Children Cov	ered		4		0
Additional People Covered			2 \$30.41		1 \$198.07
Per Capita Amount Attributable to Children on	Calculation		\$121.64		\$396.14
Share of Premiums			24%		76% -\$4.00
Payer's Monthly Share			\$0.00		-94.00
Ordinary Medical Expense - 2021	MCSF 3.04(B)			\$1,816.00	
Annual Ordinary Medical Expense Share of Medical Expense	for 4 Unitaren		24%	φ1,010.00	76%
Payer's Monthly Share			\$0.00		\$115.00
Child Care Expense Reimburser		06(C)			
Monthly Gross Child Care Expense	es		\$0.00		\$503.00 \$100.00
Subsidies, Reimbursements, Cred Monthly Net Child Care Expenses	IES		\$0.00 \$0.00		\$403.00
Share of Child Care			24%		76%
Payer's Monthly Share			\$0.00		-\$97.00

Details

2018-059153-DM Calculation 1796130 completed by BRYNNE EBELS on 03/12/2024. BRETT MARSH paying STEPHANIE MARSH \$1,698.00 a month. (Note: See following pages for further detail)

Family/Children Details - 2021 MCSF 2.08(A)

	STEPHANIE MARSH	BRETT MARSH
Additional Children from Other Relationships		0
Children-in-Common in Other Custodial	0	0
Arrangements		
Total Other Children	2	0
Income Adjustment Percentage Multiplier	75%	-
Provided Information For Support Calculation	No	Yes

Family Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024. BRETT MARSH: Per the Referee Recommendation dated March 8, 2024.

Net Income Calculation - 2021 MCSF 2.01(C)

	STEPHANIE MARSH	BRETT MARSH
Income Type	None	Employer Wages
Employer Name	None	Precision Aerospace
		Corp
Monthly Gross Income	None	\$7,320.26
Monthly Overtime	None	\$0.00
Monthly Shift Premium	None	\$0.00
Income Type		P) None
Monthly Gross Income	\$3,045.00	None
Total Monthly Gross Income	\$3,045.00	\$7,320.26
Filing Status	Single	Head of Household
Tax Exemptions	3	3
Child Tax Credit Children Claimed Every Year		
Child Tax Credit Children Claimed Alternating		
Years		
FICA Tax	\$232.94	\$560.00
Federal Tax	\$200.07	\$655.54
State Tax	\$69.91	\$251.61
Local Resident Tax	\$0.00	\$0.00
Local Non-Resident Tax	\$0.00	\$0.00
Additional Children Adjustment	\$597.51	\$0.00
Health Insurance - Other Qualifying Children	\$121.64	\$0.00
Mandatory Health Insurance - Parent's Self-	\$30.41	\$198.07
Coverage Portion of Premiums	*4.050.40	¢4 cc= 22
Total Monthly Gross Deductions and	\$1,252.49	\$1,665.22
Adjustments		
Monthly Net Income	\$1,792.52	\$5,6 55.04
Family Net Income		\$7,447.56
Share of Net Income	24.07%	75.93%

Disclaimer: Unless identified as an adjusted tax amount (M), the tax amounts listed are estimates calculated by the Michigan Child Support Enforcement System. (P) Indicates Potential. (O) Indicates Omitted.

Income Comments

STEPHANIE MARSH: Per the Referee Recommendation dated March 8, 2024.

BRETT MARSH: Based on the employer's disclosure provided with year to date gross earnings information.

Deductions Comments

STEPHANIE MARSH: The Plaintiff did not provide any taxes, therefore the Friend of the Court defaulted to single with three exemptions; one being herself and the other two being the oldest minor children in her care.

BRETT MARSH: Based on the tax filing information provided by the Defendant.

Base Support	Calculation - 202	21 MCSF 3.02(A)
Dage oupport	COLOMINSTALL VAL	

	STEPHANIE MARSH	BRETT MARSH
Children in Common	4	4
Children in Common on Calculation	4	4
Base Support Equation	Low Income Transition Equation - 2021 MCSF 3.02(D)	General Care Equation - 2021 MCSF 3.02(B)
Base Support Amount Base Support Amount after PTO	\$580.00 \$0.00	\$2,207.00 \$1,684.00

NICKOLAS Children: **JOSHUA JACE MARSH JONATHON MARSH MARSH MARSH** 04/30/2032 08/31/2026 02/29/2024 **Obligation End Date** 01/31/2034 No **Post Majority** No No No

Parenting Time Overnights - 2021 MCSF 3.03(A)

	STEPHANIE MARSH	BRETT MARSH
JOSHUA MARSH - age 8	104	261
JACE MARSH - age 9	104	261
JONATHON MARSH - age 15	365	0
NICKOLAS MARSH - age 18	365	0
Average Overnights (Highest Tier)	234.5	130.5

Health Care Allocations and Medical Obligations - 2021 MCSF 3.05(C), 2021 MCSF 3.04(B)

	STEPHANIE MARSH		BRETT MARSH
Recommended to Provide Health Insurance	Yes		Yes
Health Care Coverage Type	Private or Public		Private or Public
Reasonable Cost of Health Care	6%		6%
Share of Health Care	24%		76%
Monthly Insurance Premiums	\$304.11		\$594.21
Calculation Children Covered	4		2
Additional Qualifying Children Covered	4		0
Additional People Covered	. 2		1
Per Capita Amount	\$30.41		\$198.07
Payer's Monthly Share	\$0.00		-\$4.00
Share of Medical Expense	24%		76%
Annual Ordinary Medical Expense per MCSF		\$1,816.00	
Monthly Ordinary Medical Expense	40.00	\$151.33	\$445.00
Payer's Monthly Share	\$0.00		\$115.00

Health Care Comments

STEPHANIE MARSH: Per Referee Recommendation dated March 8, 2024. **BRETT MARSH:** Per the Referee Recommendation dated March 8, 2024.

Child Care Obligations - 2021 MCSF 3.06(C)

	STEPHANIE MARSH	BRETT MARSH
Share of Child Care	24%	76%
Monthly Child Care Expense	\$0.00	\$503.00

Children: (youngest to oldest)	JOSHUA MARSH - JOSHUA MARSH - JACE MARSH - JACE MARSH - JOSHUA MARSH	age 8 age 9	\$0.00 \$0.00 \$0.00 \$0.00 JONATHON MARSH	NICKOLAS MARSH	\$62.50 / 12 \$189.00 / 9 \$315.00 / 9 \$62.50 / 12
Child Care Reimbursement End Date	08/31/2028	08/31/2026	08/31/2020	08/31/2018	
Subsidies, Reimbursements, Credits Net Child Care Expenditures Payer's Monthly Share		\$0.00 \$0.00 \$0.00		\$100.00 \$403.00 -\$97.00	

Child Care Comments

STEPHANIE MARSH: No child care info provided.

BRETT MARSH: Based on the child care verification form submitted by the Defendant.

Administrative Information

Calculation ID	1796130	MCSF Year	2021
Docket	2018-059153-DM	MCSF Supplement Year	2021
County	003	Tax Year	2024
Calculation Completed by	BRYNNE EBELS	Calculation Completed Date	03/12/2024
Calculation Parties	STEPHANIE MARSH and BF	RETT MARSH	

Calculation Results:

BRETT MARSH paying STEPHANIE MARSH \$1,698.00 a month.
Support amount based on known actual income of parent(s) is BRETT MARSH paying STEPHANIE MARSH \$2,095.00.