

ENTER YOUR OWN HEADER IN THIS SPACE
IN THE CIRCUIT COURT OF FIRST JUDICIAL CIRCUIT,
IN AND FOR ESCAMBIA COUNTY, FLORIDA

Paul A. Sample _____, Case No.: FA-2009-489
Petitioner, Division: Family
and
Martha C. Sample _____,
Respondent.

MOTION TO DEVIATE FROM CHILD SUPPORT GUIDELINES

() Petitioner (**x**) Respondent requests that the Court enter an order granting the following:

SECTION I

[**one** only]

x a. **MORE** child support than the amount required by the child support guidelines. The Court should order MORE child support than the amount required by the child support guidelines because of:

[**all** that apply to your situation]

- x** 1. Extraordinary medical, psychological, educational, or dental expenses;
- _____ 2. Seasonal variations in one or both parent's income;
- _____ 3. Age(s) of the child(ren), taking into consideration the greater needs of older child(ren);
- x** 4. Special needs that have been met traditionally within the family budget even though the fulfilling of those needs will cause support to exceed the guidelines;
- _____ 5. The amount of time each child will spend with each parent under the shared parental arrangement;
- _____ 6. The direct and indirect financial expenses for each child as set forth in s. 61.30(11)(b)3, Florida Statutes;
- _____ 7. Total available assets of mother, father, and child(ren);
- _____ 8. Impact of IRS dependency exemption and waiver of that exemption;
- _____ 9. Residency of subsequently born or adopted child(ren) with the obligor, including consideration of the subsequent spouse's income;
- _____ 10. The comparative income of each parent, considering all relevant factors, as provided in s. 61.30(2)(a), Florida Statutes;
- _____ 11. The station in life of each parent and each child;
- _____ 12. The standard of living experienced by the entire family during the marriage;
- _____ 13. The financial status and ability of each parent; and/or
- _____ 14. Any other adjustment that is needed to achieve an equitable result, which may include reasonable and necessary expenses jointly incurred during the marriage.

Explain any items marked above: Unreimbursed psychological expenses are \$500 per month and will be a continuing expense. Private school tuition is \$1,000 per month and both parents agree to continue with private school.

_____ b. **LESS** child support than the amount required by the child support guidelines. The Court should order LESS child support than the amount required by the child support guidelines because of:

[**all** that apply to your situation]

- _____ 1. Extraordinary medical, psychological, educational, or dental expenses;
- _____ 2. Independent income of child(ren), excluding the child(ren)'s SSI income;
- _____ 3. Payment of both child support and spousal support to a parent that regularly has been paid and for which there is a demonstrated need;

- ___ 4. Seasonal variations in one or both parent's income;
- ___ 5. Age of the child(ren), taking into consideration the greater needs of older child(ren);
- ___ 6. The amount of time each child will spend with each parent under the shared parental arrangement;
- ___ 7. The direct and indirect financial expenses for each child as set forth in s. 61.30(11)(b), Florida Statutes;
- ___ 8. The comparative income of each parent, considering all relevant factors, as provided in s. 61.30(2)(a), Florida Statutes;
- ___ 9. Total available assets of obligee, obligor, and child(ren);
- ___ 10. Impact of IRS dependency exemption and waiver of that exemption;
- ___ 11. Application of the child support guidelines requires the obligor to pay more than 55% of gross income for a single support order;
- ___ 12. The station in life of each parent and each child;
- ___ 13. The standard of living experienced by the entire family during the marriage;
- ___ 14. The financial status and ability of each parent; and/or
- ___ 15. Any other adjustment that is needed to achieve an equitable result, which may include reasonable and necessary expenses jointly incurred during the marriage.

Explain any items marked above: _____

SECTION II. INCOME AND ASSETS OF CHILD(REN) COMMON TO BOTH PARTIES

List the total of any independent income or assets of the child(ren) common to both parties (income from Social Security, gifts, stocks/bonds, employment, trust fund(s), investment(s), etc.). Attach an explanation.

TOTAL VALUE OF ASSETS OF CHILD(REN)	\$ _____
TOTAL MONTHLY INCOME OF CHILD(REN)	\$ _____

SECTION III. EXPENSES FOR CHILD(REN) COMMON TO BOTH PARTIES

All amounts must be MONTHLY. See the instructions with this form to figure out money amounts for anything that is NOT paid monthly. Attach more paper, if needed. Items included under "other" should be listed separately with separate dollar amounts.

1. Monthly nursery, babysitting, or other child care	1. \$ <u>250</u>
2. Monthly after-school care	2. \$ _____
3. Monthly school tuition	3. \$ <u>1,000</u>
4. Monthly school supplies, books, and fees	4. \$ <u>30</u>
5. Monthly after-school activities	5. \$ _____
6. Monthly lunch money	6. \$ <u>45</u>
7. Monthly private lessons/tutoring	7. \$ <u>65</u>
8. Monthly allowance	8. \$ <u>25</u>
9. Monthly clothing	9. \$ <u>12</u>
10. Monthly uniforms	10. \$ _____
11. Monthly entertainment (movies, birthday parties, etc.)	11. \$ <u>25</u>
12. Monthly health and dental insurance premiums	12. \$ _____
13. Monthly medical, dental, prescription charges (unreimbursed)	13. \$ <u>217</u>
14. Monthly psychiatric/psychological/counselor (unreimbursed)	14. \$ <u>500</u>
15. Monthly orthodontic (unreimbursed)	15. \$ _____
16. Monthly grooming	16. \$ <u>10</u>
17. Monthly non-prescription medications/cosmetics/toiletries/sundries	17. \$ <u>15</u>
18. Monthly gifts from children to others (other children, relatives, teachers, etc.)	18. \$ <u>10</u>
19. Monthly camp or other summer activities	19. \$ <u>300</u>

20. Monthly clubs (Boy/Girl Scouts, etc.) or recreational fees 20. \$ _____
 21. Monthly visitation expenses (for nonresidential parent) 21. \$ _____
 Explain: _____
 22. Monthly insurance (life, etc.) {explain}: _____ 22. \$ _____

Other {explain}:

23. Childrens gifts (for children) 23. \$ 33
 24. _____ 24. \$ _____
 25. _____ 25. \$ _____

26. TOTAL EXPENSES FOR CHILD(REN) COMMON TO BOTH PARTIES
 (add lines 1 through 25) 26. \$ 2,537

I have filed, will file, or am filing with this form the following additional documents:

- 1. Florida Family Law Family Law Financial Affidavit, Florida Family Law Rules of Procedure Form 12.902(b) or (c).
- 2. Child Support Guidelines Worksheet, Florida Family Law Rules of Procedure Form 12.902(e).

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this motion and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: June 21, 2009

 Signature
 Printed Name: Martha C. Sample
 Address: 200 Eldon Lane
 City, State, Zip: Pensacola, FL 32502
 Telephone Number: 850-123-4444
 Fax Number: 850-123-7777

STATE OF FLORIDA
 COUNTY OF Escambia

Sworn to or affirmed and signed before me on June 21, 2009 by Martha C. Sample.

 NOTARY PUBLIC or DEPUTY CLERK

Clyde Groten
 [Print, type, or stamp commissioned name of notary or clerk.]

X Personally known
 _____ Produced identification
 _____ Type of identification produced _____

I certify that a copy of this document was [**one** only] (mailed (faxed and mailed (hand delivered to the person(s) listed below on {date} June 21, 2009.

Other party or his/her attorney:

Name: Allison Standish

Address: 3240 Federal Street

City, State, Zip: Pensacola, FL 32501

Fax Number: 850-234-0943

Financial Affidavit Prepared by: _____

Clyde Groten
Whitmore, Jacobsen, and Prout
Attorneys at Law
55 Spring Avenue
Pensacola, FL 32501

Attorney for Martha Sample