



## MUNICIPAL COURT MONTHLY FINANCIAL REPORT

See Instructions on page 2.

County Name <b>MILWAUKEE</b>		County Code Number 40	Report for Month/Year AUG 10	
Municipal Name (Indicate if Town, Village or City) <b>WEST ALLIS</b>		Municipal Code Number 292	Telephone Number ( 414 ) 3028030	
<b>I. MUNICIPAL COURT OFFICIAL</b>	Total Amount Collected	Share to be retained by Municipality	Share to be sent to County	Share to be Sent to State
1. Forfeitures for Municipal Ordinance Violations (Except for Municipal Ordinances in Conformity with Ch 348, Stats.)	66,013.50	100% 66,013.50		
2. Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)	17,083.00	100% of amount in excess of \$5.00 for each forfeiture 14,038.00		\$5.00 for each forfeiture 3,045.00
3. Penalty Surcharges (s. 757.05, Stats.)	12,398.08			100% 12,398.08
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)	6,094.00		100% 6,094.00	
5. Driver Improvement Surcharges (s. 346.655, Stats.)	9,485.00		60% 5,691.00	40% 3,794.00
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	7,597.00			100% 7,597.00
7. Domestic Abuse Surcharges (s. 973.055(2)(b), Stats.)				100%
8. Truck Weight Restrictions (Municipal Ordinances in Conformity with Ch. 348, Stats., s. 66.12(3)(c))		\$150 for each forfeiture		100% of amount in excess of \$150.00
9. Ignition Interlock Device Surcharge (s. 343.301(5), Stats.)			100%	
10. Adjustments (Attach Explanation)				
11. Totals	118,670.58	80,051.50	11,785.00	<b>Pay This Amount</b> 26,834.08

### II. CERTIFICATION OF MUNICIPAL COURT OFFICIAL

I hereby certify that this report reflects all actions requiring forfeitures court costs and surcharges collected during the month designated.

Name: Paul M. Murphy Signature: *Paul M. Murphy* Date: 9/1/2010

### III. TREASURER'S CERTIFICATION

I hereby certify that the above amount due the state has been received. After so certifying a copy of this report will be returned to the signer of this report as a receipt and the stated amount will be remitted to the Department of Administration with this report.

Treasurer: *Paul H. Zeller* Date: 9/2/2010

In the event the Department of Administration has questions about this report and payment, who should we contact?

Name: Ann M. Drosen Telephone Number: ( 414 ) 3028030 Email Address: adrosen@ci.west-allis.wi.us