STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DIVISION OF EXECUTIVE BUDGET AND FINANCE DOA-2778 (R07/2015)

Name:

Ann Drosen



STATE CONTROLLER'S OFFICE-CMO 101 E. WILSON STREET, 5th FL PO BOX 7932 MADISON, WI 53707-7932

(608) 267-0324

MUNICIPAL COURT MONTHLY FINANCIAL REPORT

County Name Milwaukee				County Code # Report f			(608) 267-0324 rt for Month/Year	
Municipal Name West Allis Municipal Court			40 Municipal Code # 292			January, 2016 Telephone # 414-302-8030		
I. MUNICIPAL COURT OFFICIAL	Total Amount Collected		Share to be retained by Municipality		Share to be sent to County		Share to be sent to State	
Forfeitures for Municipal Ordinance Violations (Except for Municipal Ordinances in Conformity with Ch 348, Stats.)	\$	68,100.28	\$	68,100.28				
2. Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)	\$	19,380.48	\$	16,785.28	100		\$	2,595.20
3. Penalty Surcharges (s. 757.05, Stats.)	\$	16,326.57			Helicalia Helicalia Helicalia		\$	16,326.57
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)	\$	5,195.50			\$	5,195.50		
5. Driver Improvement Surcharges (s. 346.655, Stats.)	\$	5,277.40			\$	2,851.20	\$	2,426.20
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	\$	6,763.59					\$	6,763.59
7. Domestic Abuse Surcharges (s. 973.055(2)(b), Stats.)	\$.00					\$.00
8. Truck Weight Restrictions (Municipal Ordinances in Conformity with Ch. 348, Stats., s. 66.12(3)(c))	\$.00	\$.00			\$.00
9. Ignition Interlock Device Surcharge (s. 343.301(5), Stats.)	\$	250.00			\$	250.00		
10. GPS Tracking Surcharge (for violations of ordinances conforming to s. 813.12 or s.813.125, Stats.)	\$.00					\$.00
11. Safe Ride Program (s. 85.55, Stats.)	\$	200.00					\$	200.00
12. Adjustments (Attach Explanation)	\$.00	\$	100.	\$.00	\$.00
13. Totals	\$	121,493.82	\$	84,885.56	\$	8,296.70	Pay T \$	his Amount 28,311.56
I. CERTIFICATION OF MUNICIPAL COURT OFF		uinina fanfaituna	a a a a v w t		1		,1	
I hereby certify that this report reflects all actions and the signature of this report as a Administration with this report.	re: 4	all M. T	After s	Date:	opy of the to the De	is report	the mont	h designated.
reasurer:	Comment of	<i></i>		Date:	2	1		
In the event the Department of Administration h	as ques	tions about this	report a	and payment, wh	o should	we contact?		

Email Address

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Telephone #

414-302-8030