



**MUNICIPAL COURT MONTHLY FINANCIAL  
 REPORT**

County Name Milwaukee		County Code # 40		Report for Month/Year January, 2015	
Municipal Name West Allis Municipal Court		Municipal Code # 292		Telephone # 414-302-8030	
<b>I. MUNICIPAL COURT OFFICIAL</b>		<b>Total Amount Collected</b>	<b>Share to be retained by Municipality</b>	<b>Share to be sent to County</b>	<b>Share to be sent to State</b>
1. Forfeitures for Municipal Ordinance Violations (Except for Municipal Ordinances in Conformity with Ch 348, Stats.)		\$ 65,983.53	\$ 65,983.53	\$	\$
2. Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)		\$ 17,908.31	\$ 15,379.71	\$	\$ 2,528.60
3. Penalty Surcharges (s. 757.05, Stats.)		\$ 13,853.81	\$	\$	\$ 13,853.81
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)		\$ 5,097.21	\$	\$ 5,097.21	\$
5. Driver Improvement Surcharges (s. 346.655, Stats.)		\$ 6,571.24	\$	\$ 3,840.83	\$ 2,730.41
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)		\$ 6,563.40	\$	\$	\$ 6,563.40
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) s. 343.301(1))		\$ 150.00	\$	\$ 150.00	\$
10. Adjustments (Attach Explanation)		\$ -830.00	\$ -658.20	\$ -40.00	\$ -131.80
11. Totals		\$ 115,297.50	\$ 80,705.04	\$ 9,048.04	Pay This Amount \$ 25,544.42

**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: 2-2-15

**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: *[Signature]* Date: 2-9-15

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

Name: Ann Drosen Telephone # 414-302-8030 Email Address adrosen@westalliswi.gov