

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

See Instructions on page 2.				D	- Manth Waar	
County Name		County Code Number		Report for Month/Year SEPT 10		
MILWAUKEE		10				
Municipal Name (Indicate if Town, Village or City) WEST ALLIS		Municipal Code Number 292			3028030	
I. MUNICIPAL COURT OFFICIAL	Total Amount Collected	Share to be retained by Municipality	Share to b to Cou		Share to be Sent to State	
Forfeitures for Municipal Ordinance Violations (Except for Municipal Ordinances in Conformity with Ch 348, Stats.)	56,582.47	100% 56,582.47				
Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)	14,353.42	100% of amount in excess of \$5.00 for each forfeiture 11,792.42			\$5.00 for each forfeiture 2,561.00	
3. Penalty Surcharges (s. 757.05, Stats.)	13,020.81				100% 13,020.81	
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)	5,142.20		100% 5,142.20			
5. Driver Improvement Surcharges (s. 346.655, Stats.)	5,489.00		60% 3,293.40		40% 2,195.60	
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	6,395.00				100% 6,395.00	
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	
Ignition Interlock Device Surcharge (s. 343.301(5), Stats.)	50.00		100% 50.0			
10. Adjustments (Attach Explanation)						
11. Totals	101,032.90	68,374.89	8,485.	.60	Pay This Amount 24172.41	
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:	Pall MIM	99/4/2010 10/4/2010			
III. TREASURER'S CERTIFICATION						
I hereby certify that the above amou will be returned to the signer of this rof Administration with this report.	nt due the state has report as a receipt a	been received. After so nd the stated amount will	certifying a be remitted	copy of d to the	this report Department	
Treasurer:	Jehl Siehl	Date: 10/5/10				
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			