STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DIVISION OF EXECUTIVE BUDGET AND FINANCE DOA-2778 (R08/2010)

See Instructions on page 2.

County Name



STATE CONTROLLER'S OFFICE-CMO 101 E. WILSON STREET, 5<sup>TH</sup> FL PO BOX 7932 MADISON, WI 53707-7932 (608) 267-0324

Report for Month/Year

## MUNICIPAL COURT MONTHLY FINANCIAL REPORT

County Code Number

Milwaukee		40 Feb 11		
Municipal Name (Indicate if Town, Village or City)		1 1		hone Number
West Allis		292		) 3028030
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.)	78,515.05	100% 78,515.05		
Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)	00 000 54	100% of amount in excess of \$5.00 for each forfelture		\$5.00 for each forfeiture
(Onlaptor 0.14) Outbondpior II, c. 0.1 No.9 Octoby	22,388.54	18,547.34		3,841.20
3. Penalty Surcharges (s. 757.05, Stats.)	16,666.04			16,666.04
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)	7,708.00		100% 7,708.00	
5. Driver Improvement Surcharges (s. 346.655, Stats.)	7,159.00		60% 4,295.40	40% 2,863.60
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	9,140.00			100% 9,140.00
	9,140.00			9,140.00
7. Domestic Abuse Surcharges (s. 973.055(2)(b), Stats.)				
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.)			100%	
Adjustments (Attach Explanation)				
11. Totals	141,576.63	97,062.39	12,003.40	Pay This Amount 32,510.84
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: Odl M. Mul Jate: 03/25/2011				
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: Date: 3/29/11				
In the event the Department of Administration has questions about this report and payment, who should we contact?				
Name:	Telephone Number		Email Address	
Ann Drosen Court Clerk	(414 ) 3028030		adrosen@westalliswi.gov	