

State Controller's Office-CMO 101 E. Wilson Street, 5th Fl PO Box 7932 Madison, WI 53707-7932 (608) 267-7984

MUNICIPAL COURT MONTHLY FINANCIAL REPORT

County Name Milwaukee			County Code #		Report for Month/Year			
Municipal Name West Allis Municipal Court			Municipal Code # 292		Telephone # 414-303-8030			
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.)	\$	71,605.30	\$	71,605.30	\$	1	\$	
2. Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.)	\$	15,400.22	\$	12,586.42	\$		\$	2,813.80
3. Penalty Surcharges (s. 757.05, Stats.)	\$	16,825.10	\$		\$		\$	16,825.10
4. County Jail Surcharges (s. 302.46(1)(a), Stats.)	\$	5,645.40	\$		\$	5,645.40	\$	
5. Driver Improvement Surcharges (s. 346.655, Stats.)	\$	5,903.00	\$		\$	3,603.00	\$	2,300.00
6. Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	\$	7,333.20	\$		\$		\$	7,333.20
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))	\$	300.00	\$		\$	300.00	\$	
10. Adjustments (Attach Explanation)	\$.00	\$.00	\$.00	\$.00
11. Totals	\$	123,012.22	\$	84,191.72	\$	9,548.40	Pay \$	This Amount 29,272.10

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. Signature: 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. Date: Treasurer: In the event the Department of Administration has questions about this report and payment, who should we contact? Telephone # Name: **Email Address** Ann Drosen adrosen@westalliswi.gov