STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DIVISION OF EXECUTIVE BUDGET AND FINANCE DOA-2778 (R03/2019)



STATE CONTROLLER'S OFFICE-CMO 101 E. WILSON STREET, 5TH FL PO BOX 7932 MADISON, WI 53707-7932 (608) 261-7749

MUNICIPAL COURT MONTHLY FINANCIAL REPORT

County Name Milwaukee		County Code Number 40		Report for Month/Year July 2019	
Municipal Name (Indicate if Town, Village or City) West Allis Municipal Cjourt		Municipal Code Number 292		Telephone Number (414) 302-8181	
I. MUNICIPAL COURT OFFICIAL	Total Amount Collected	Share to be retained by Municipality	Share to to Co		Share to be Sent
Forfeitures for Municipal Ordinance Violations (Except for Municipal Ordinances in Conformity with Ch 348, Stats.)	49,341.86	100% 49,341.86			
Adjustment (if applicable	(2)				
Municipal Court Costs (Chapter 814, Subchapter II, s. 814.65, Stats.	15,565.98	100% of amount in excess of \$5.00 for each forfeiture 13,557.99			\$5.00 for each forfeiture 2,007.99
Adjustment (if applicable)				
Penalty Surcharges (s. 757.05, Stats.)	9,891.06				100% 9,891.06
Adjustment (if applicable					
4. County Jail Surcharges (s. 302.46(1)(a), Stats.) (a)	4,052.36		100% 4,052.36	6	
Adjustment (if applicable)					
5. Driver Improvement Surcharges (s. 346.655, Stats.)	7,856.51		50.3% 4,063.46	·	49.7% 3,793.05
Adjustment (if applicable)					
Crime Lab and Drug Enforcement Surcharges (s. 165.755(4), Stats.)	5,220.15				100% 5,220.15
Adjustment (if applicable)			************		
7. Domestic Abuse Surcharges (s. 973.055(2)(b), Stats.)	.00				100%
Adjustment (if applicable)					
 Truck Weight Restrictions (Municipal Ordinances in Conformity with Ch. 348, Stats., s. 66.12(3)(c)) 	.00	\$150 for each forfeiture			100% of amount in excess of \$150.00
Adjustment (if applicable)					
9. Ignition Interlock Device Surcharge (s. 343.301(5), Stats.)	380.83		100% 380.83		
Adjustment (if applicable)					er der de de de de de de de de der der d
GPS Tracking Surcharge (for violations of ordinances conforming to s. 813.12 or s. 813.125, Stats.)	.00			.0	100%
Adjustment (if applicable)		***************			
1. Safe Ride Program (s. 85.55, Stats.)	715.00			71	5.00 100%
Adjustment (if applicable)			de disc van ger van jan jan jan da da van jan jan jan de da van jan jan jan jan jan jan jan jan jan j		
2. Totals	93,023.75	62,899.95	8,496.65		Pay This Amount

II. CERTIFICATION OF MUNICIPAL COURT OF	FICIAL				
I hereby certify that this report reflects all the month designated.	l actions requiring forfeitures court costs	s and surcharges collected during			
Name: Paul M. Murphy	Signature: Paul M.	Munypate:			
III. TREASURER'S CERTIFICATION		V			
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: 100gg 3	CONO	Date: 8/6/19			
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	(414)302-8181	adrosen@westalliswi.gov			