

COURT ASSESSMENT/FINE SETTLEMENT FORM

Submit to Department of Finance and Administration

COUNTY **OR** MUNICIPALITY OF: _____

COUNTY **OR** MUNICIPALITY CODE: _____

COLLECTIONS FOR THE MONTH & YEAR OF: _____

ASSESSMENT/FINE CODES	CITY COURT	CIRCUIT/ COUNTY COURT	JUSTICE COURT	CHANCERY COURT	TOTAL	ASSESSMENT/FINE CODES
SCEF						SCEF
TV						TV
IC						IC
GF						GF
SL*						SL*
TT						TT
OM						OM
OF						OF
ABF						ABF
VBF						VBF
DVF						DVF
CJF						CJF
CC						CC
DA						DA
HV						HV
MVL*						MVL*
ADT						ADT
CTF						CTF
CEC						CEC
CLA						CLA
ALA						ALA
POF*						POF*
RCV						RCV
DV						DV
EXP						EXP
JSF						JSF
UMI						UMI
STV						STV
WV						WV
TOTAL						TOTAL

*NOTE: "SL" discontinued 07/01/12; "POF" discontinued 07/01/09; "MVL" discontinued 04/13/18

REPORT SUBMITTED BY: _____

DATE OF REPORT: _____

EMAIL: _____

TELEPHONE NUMBER: _____