



ROCK COUNTY WISCONSIN

Clerk of Circuit Court

OFFICE OF COURT COLLECTIONS / COMPLIANCE

608-743-2216

51 S. Main Street, Janesville WI 53545

DEFERRED PAYMENT PLAN APPLICATION INFORMATION

Please Read and Save

Filling out this Financial Disclosure Statement **does not mean that you have a payment plan.** You must return it, with the \$15.00 payment plan application fee to:

By Mail:

Clerk of Circuit Court
ATTN: Court Collections
51 South Main Street
Janesville, WI 53545

In Person:

Clerk of Circuit Court
Criminal & Traffic Division
Rock County Courthouse
Janesville WI 53545

Payments Only:

Internet or Phone:

Government Payment Services
www.GOVPAYNOW.com
1-888-604-7888
Use: Payment Location Code:
1547

After you pay the \$15.00 application fee, you must contact the Court Collections Officer in person or at (608) 743-2216 to finalize the payment plan. **You will not be contacted by anyone. It is up to you to contact the Court Collections Officer.**

*If you, the defendant, have no employment, income or ability to pay the judgment because of poverty, as that term is used in §814.29(1)(d), please contact the Circuit Court Deferred Payment Plan / Compliance office **PRIOR** to the due date for Indigency information.

*Application for a payment plan and the \$15.00 application fee payment must be received by the Clerk of Circuit Court by final date for payment set by the court.

*Payment plans are not offered on fines that are past the final due date set by the court.

PAYMENT SCHEDULES

Payment amounts will be based on your ability to pay and determined by the Court Collection Officer. Payment plans may only be set up for a one-year period. If the Court Collection Officer determines you need more than one year to pay your fine(s), it is your responsibility to contact the Court Collections Office in person or at 608-743-2216 to renew your plan.

PAYMENT PLAN FEES

A service fee of \$15.00 will be charged for any approved payment plan contracts.

Fines added to existing payment plans and renewal of payment plan contracts will be charged \$15.00.



Fine Due Date: _____

ROCK COUNTY CIRCUIT COURT FINANCIAL DISCLOSURE STATEMENT

Date: _____

Case Number(s): _____

First Name: _____ Mi: _____ Last Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell: _____

Social Security Number: _____

Status (circle one): Married Single Separated Divorced Widowed

Number of minor children in the household: _____

Are you currently on a Payment Plan (circle one)? Yes No

Do you receive assistance for food (circle one)? Yes No

Income:

Employer: _____

Address: _____

Hours Worked per Week: _____

Hourly Rate of Pay: \$ _____ /per (circle one) hour week bi-wkly month year

Benefit Income (circle one) - SSI, Social Security, W-2: \$ _____

Unemployment Compensation: \$ _____

Child Support: \$ _____

Other Income (explain): \$ _____

Total income office use - do not complete \$ _____

Allowable Expenses:

Rent/Mortgage: \$ _____

Utilities (Power, Water & Cable): \$ _____

Phone: \$ _____

Loans (describe): _____ \$ _____

Food (do not include assistance) \$ _____

Child Support: \$ _____

Other Expenses (explain): _____ \$ _____

Taxes (25% of Taxable Income): \$ _____

Total Expenses: office use - do not complete \$ _____

Total Adjusted Income: office use - do not complete \$ _____

-----Office Use Only - Do Not Complete-----

Fine total: _____ **Pmt plan fee:** \$15.00 **Current total:** _____

Prev total: _____ **Plan total:** _____ **Initial payment:** _____

Monthly payment amount: _____ **Start Date:** _____

Notes: _____