## Quarterly Report of Non-State Paid\* Transcript Income

\*Transcript income from the SPD and other state agencies that is paid on your biweekly State of Wisconsin payroll check should **not** be reported on this form.

_			
_	$\sim$	r	•
	u		

- 1. 1st Quarter (Non-State Paid transcript income received from October December)
- 2. 2<sup>nd</sup> Quarter (Non-State Paid transcript income received from January March)
- 3. 3<sup>rd</sup> Quarter (Non-State Paid transcript income received from April June)
- 4. 4<sup>th</sup> Quarter (Non-State Paid transcript income received from July September)

Name of Court Reporter (Please print or type)	Employee ID Number				
I certify that this is a true and complete report of the transcript income I have received this quarter from sources other than my State of Wisconsin paycheck:					
Gross Earnings Fro	om Transcript Fees	\$			
	Signature ( if electronically signed)				
		Date Date			

Please mail this report to:

Wisconsin Court System
Payroll Office
110 E Main Street, Suite 430
Madison, WI 53703-3356

or email signed copy to payrolloffice@wicourts.gov