

J. Terry Norris
Secretary/Treasurer

Kelly Stiles
Executive Assistant

SHERIFFS' RETIREMENT FUND OF GEORGIA
1000 Sheriffs Way
Madison, Georgia 30650
770-914-1076

Name of Court: _____ County: _____

Mailing Address: _____

Period of Time Covered by this Report: From: _____

To: _____

Indicate below; the Court reporting, the number of cases and amount due at \$2.00 each for fines collected or bonds forfeited of \$5.00 or more for any **criminal or quasi-criminal case**:

SUPERIOR: # OF CASES _____ AMT. DUE \$ _____ **STATE:** # OF CASES _____ AMT. DUE \$ _____

JUVENILE: # OF CASES _____ AMT. DUE \$ _____ **PROBATE:** # OF CASES _____ AMT. DUE \$ _____

MAGISTRATE: # OF CASES _____ AMT. DUE \$ _____ **OTHER:** # OF CASES _____ AMT. DUE \$ _____

MUNICIPAL: # OF CASES _____ AMT. DUE \$ _____ **RECORDERS:** # OF CASES _____ AMT. DUE \$ _____

Indicate below; the Court reporting, the number of cases and amount due at \$1.00 each for **civil proceedings**:

SUPERIOR: # OF CASES _____ AMT. DUE \$ _____ **STATE:** # OF CASES _____ AMT. DUE \$ _____

JUVENILE: # OF CASES _____ AMT. DUE \$ _____ **PROBATE:** # OF CASES _____ AMT. DUE \$ _____

MAGISTRATE: # OF CASES _____ AMT. DUE \$ _____ **OTHER:** # OF CASES _____ AMT. DUE \$ _____

MUNICIPAL: # OF CASES _____ AMT. DUE \$ _____ **RECORDERS:** # OF CASES _____ AMT. DUE \$ _____

PLEASE INDICATE IF THE ABOVE CONTAIN ANY PARTIAL PAYMENTS. Cases _____ Amount _____

Check Number _____ Check Amount _____ Check Number _____ Check Amount _____
Check Number _____ Check Amount _____ Check Number _____ Check Amount _____
Check Number _____ Check Amount _____ Check Number _____ Check Amount _____

To the best of my knowledge this is a correct amount for the period stated due the Sheriffs' Retirement Fund of Georgia as required by official Georgia Code Title 47-16-60 and 47-16-61 as amended.

Signature of Remitter and Title

Date: _____

NOTE: If there were no cases or money collected; please indicate by placing a zero (0) in the proper blank.