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| --- | --- | --- |
| State of Wisconsin  Department of Administration  Division of intergovernmental Relations  DOA-7108 (R12/2014)  ss.59.72 (3) & (5), WIS Stats  ss. 59.43 (2) (ag) 1. & (e), Wis. Stats. |  | Return Completed form to:  Wisconsin Land Information Program  PO Box 7869, Madison, WI 53707-7869  Voice (608) 267-3369  FAX (608) 267-6917  TTY (608) 267-9629 |

Register of Deeds Recording Fee Submission Report

Instructions:

Send all fees by the 16th of each month following the reporting month. Make check payable to: Wisconsin Department of Administration. Include this form with your payment. If you have questions please call (608) 267-3369.

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| **WISCONSIN LAND INFORMATION PROGRAM**  **PO BOX 7869**  **MADISON WI 53707-7869** | | | This Return address block is placed for use in a standard window envelope for your convenience. | | |
| Wisconsin Land Information Program  County Recording Fee Submission | | | | | |
| County | | 3-Digit County FIPS Code | | | |
|  | |  | | | |
| Name of Register of Deeds | | Recording Month and Year | | | |
|  | |  | | | |
| Street Address | City | | | Zip +4 | |
|  |  | | |  | |
| Register of Deeds Phone Number | | | | | |
|  | | | | | |
| Name of Land Information Officer | Land Information Officer Phone Number | | | |  |
|  |  | | | |  |

(NAME AND ADDRESS CORRECTION REQUESTED)

|  |  |  |
| --- | --- | --- |
| 1. Does the County Land Information Office established by the County Board per s. 59.72(3), Wis. Stats. continue to perform the duties specified in s. 59.72, Wis. Stats.? | Yes | No |
| 1. Will/Has the county used the $8 of each $30 fee collected under s. 59.72(5), Wis. Stats. to develop, implement, and maintain the countywide plan for land records modernization on the internet? | Yes | No |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Certification**  I, the designee or contact person for the County Land Information Office, certify under the penalty of perjury that the information provided in questions 1-2 is true and correct to the best of my knowledge. | | | | | | |
|  |  |  |  |  |  |  |
|  | Land Information Officer Signature |  | Date (mm/dd/ccyy) |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Number of documents recorded and filed in the County Office of Register of Deeds under ss. 59.43(2)(ag)1. & (e), Wis. Stats. | | |  |
| 1. If questions 1-2 are both answered yes, multiply the amount on Line 3 by $7 & enter the total here | | | $ |
| 1. If questions 1 or 2 are answered no, multiply the amount on Line 3 by $15 & enter the total here | | | $ |
| 1. Check amount |  |  | $ |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Certification**  I, the County Register of Deeds, certify under the penalty of perjury that the information provided in questions 1-6 is true and correct to the best of my knowledge. | | | | | | |
|  |  |  |  |  |  |  |
|  | Register of Deeds Signature |  | Date (mm/dd/ccyy) |  |  |  |

This document can be made available in alternate formats to individuals with disabilities upon request.