



**OFFICE OF THE STATE AUDITOR**  
**MUNICIPAL COURT CERTIFICATION**  
 (Form MCC 17-1)

**Instructions**

Fill out via computer, print to apply signature.

Email completed certification along with required addendum to: [localgovernment@auditor.mo.gov](mailto:localgovernment@auditor.mo.gov) or mail to:

**Missouri State Auditor's Office**

**P.O. Box 869**

**Jefferson City, MO 65102**

**CITY OF BELLA VILLA**

Name of County, City, Town, or Village

751 AVENUE H

Mailing Address

BELLA VILLA

City

MO

State

63125

Zip

314-638-8840

Phone

BUCHATTY@AOL.COM

Email Address

**BELLA VILLA MUNICIPAL COURT**

Name of Municipal Court

751 AVENUE H

Mailing Address

BELLA VILLA

City

MO

State

63125

Zip

314-638-8840

Phone

DONNA.THARP@CITYOFBELLAVILLA.ORG

Email Address

7/1/19-6/30/20

Fiscal Year Certified

I certify that the municipal court over which I preside has adopted the procedures required by section 479.360 RSMo and substantially complied with the procedures during the fiscal year ended 6/30/2020.

Signature

WILLIAM G BUCHHOLZ II

Name of Municipal Judge (Printed or Typed)

8/19/2021

Date (MM/DD/Year)

**NOTICE - Each city, town, or village with a municipal court and each county with a municipal court is required to file a municipal court certification pursuant to sections 479.360 and 479.362 and 15 CSR 40-3.180.**