

TEXAS COMMISSION ON JAIL STANDARDS  
JAIL POPULATION REPORT

BROWN COUNTY S O

OCTOBER 15 2018

DUE 5TH DAY OF EACH MONTH

	INMATES HOUSED IN COUNTY				LOCAL INMATES	
	LOCAL		CONTRACT		HOUSED ELSEWHERE	
	M	F	M	F	M	F
A. Pretrial Class C Misdemeanant	0	0	1	0	0	0
B. Pretrial Class A & B Misdemeanant	11	4	0	0	0	0
C. Convicted Misdemeanant	0	0	0	0	0	0
D. Felons Whose Penalty has been reduced to a Misdemeanor	0	0	0	0	0	0
E. Bench Warrants (in-state only)	4	0	0	0	0	0
F. Pretrial Felons (do no include Parole Violators and state jail felons)	48	15	9	6	0	0
G. Parole Violators or Blue Warrants	8	3	0	0	0	0
H. Parole Violators with a New Charge	22	7	0	0	0	0
I. Convicted Felons sentenced to county jail time	1	2	1	0	0	0
J. Convicted Felons sentenced to TDJC(ID/Boot Camp/SAFP, White Warrant, PIA)	16	3	0	0	0	0
K. Federal Inmates	XXXXXXXX	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX
L. Pretrial State Jail Felons (SJF)	2	1	0	0	0	0
M. Convicted SJF sentenced to county jail time	1	0	0	0	0	0
N. Convicted SJF sentenced to state jail time	6	2	0	0	0	0
O. Others (specify)	0	0	1	0	0	0
TOTAL	119	37	12	6	0	0
P. Capacity (All County Facilities)	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	196	XXXXXXXX
Q. Paper-Ready Inmates (ID/Boot Camp White Warrant, PIA) less than 45 days	5	1	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXXXXXX	0
R. Paper-Ready Inmates (ID/Boot Camp White Warrant, PIA) 45 days or longer	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXXXXXX	0
S. Paper-Ready SAFP Inmates	1	0	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXXXXXX	0

October 15, 2018  
(Exhibit #8)

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BROWN COUNTY S O

OCTOBER 15 2018

DUE 5TH DAY OF EACH MONTH

T. List, by county the number of male and female inmates you are housing for another facility.

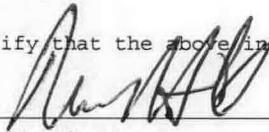
County	Contract	
	M	F
COLEMAN	8	1
MCCULLOCH CO SHERIFF	3	4
TAYLOR	0	1
BROWNWOOD POLICE DEPARTMENT	1	0

U. List, by county the number of male and female inmates you are housing in another facility.

County	Local Inmates housed elsewhere	
	M	F

V. Number of pregnant females that were booked into your facility the preceding month. 2

I Certify that the above information is complete and accurate.

  
 \_\_\_\_\_  
 Sheriff's Signature

\_\_\_\_\_  
 Typed Name

\_\_\_\_\_  
 Phone Number  
 10/15/2018  
 \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Report Prepared by: (print or type)  
 (Form POP-2) Revised 9/2009

\_\_\_\_\_  
 Phone Number

DUPLICATE AS NECESSARY

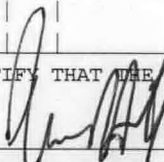
TEXAS COMMISSION ON JAIL STANDARDS  
MONTHLY PAPER-READY INMATE ROSTER

BROWN COUNTY S O

FOR THE MONTH OF: SEPT 2018  
DUE 5TH DAY OF EACH MONTH

	M / F	INMATES NAME	STATE IDENTIFICATION NUMBER (SID)	DATE OF CONFINEMENT	DATE PAPER READY	DATE TRANSFERED OR RELEASED
1	F	LATTIG, KRISTI DEANNA	08292016	07/21/2018	08/23/2018	09/19/2018
2	M	GUERRA, RICKY JAMES	08298585	09/27/2017	09/07/2018	10/01/2018
3	M	COPPIC, JESSE MICHAEL	08494739	02/21/2018	09/07/2018	09/24/2018
4	M	RODRIGUEZ, JOSE LUIS	02174710	07/30/2018	09/07/2018	10/01/2018
5	M	MCBRIDE, JASON DANIEL		08/04/2017	09/19/2018	
6	M	JOHNSON, NICHOLAS OSBOURNE JR	50707558	01/05/2018	09/19/2018	
7	M	DOBBINS, DUSTIN LEE	08300798	08/29/2018	09/19/2018	10/08/2018
8	M	BOYKIN, PAUL ALLEN JR	08657218	04/08/2018	09/25/2018	
9	M	JONES, ELIJAH RAY	08563886	06/01/2018	09/25/2018	
10	M	CROSSON, JAMES MONROE JR	01150227	03/26/2018	10/09/2018	
11	F	BASIO, MALLORIE BROOKE POPE	07387206	08/17/2018	10/09/2018	
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

  
\_\_\_\_\_  
SHERIFF'S SIGNATURE

10/15/2018  
\_\_\_\_\_  
DATE

TYPED NAME

\_\_\_\_\_  
TELEPHONE NO.

TEXAS COMMISSION ON JAIL STANDARDS  
MONTHLY PAPER-READY REPORT

BROWN COUNTY S O

FOR THE MONTH OF: SEPT 2018  
DUE 5TH DAY OF EACH MONTH

PART (A)  
DAILY "PAPER-READY" INMATE COUNT

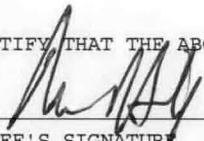
DATE	NUMBER	DATE	NUMBER	DATE	NUMBER
1	4	11	7	21	5
2	7	12	7	22	6
3	6	13	7	23	6
4	6	14	7	24	6
5	6	15	5	25	6
6	6	16	5	26	6
7	6	17	5	27	6
8	7	18	5	28	6
9	7	19	5	29	
10	7	20	5	30	
				31	

PART (B)  
DURING THE REPORTING PERIOD, WERE THERE INMATES FOR WHICH ALL PAPERWORK AND PROCESSING HAD BEEN COMPLETED FOR 45 DAYS OR LONGER? NO IF YES, HOW MANY? 0

ON THE LAST DAY OF THE PERIOD, HOW MANY OF THESE ARE STILL CONFINED? 0

PART (C)  
HOW MANY INMATES BECAME PAPER-READY DURING THE REPORTING MONTH? 7  
HOW MANY INMATES WERE RELEASED/TRANSFERRED DURING THE REPORTING MONTH? 5

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

  
\_\_\_\_\_  
SHERIFF'S SIGNATURE

\_\_\_\_\_  
TYPED NAME

\_\_\_\_\_  
TELEPHONE NUMBER  
10/15/2018  
\_\_\_\_\_  
DATE

\_\_\_\_\_  
REPORT PREPARED BY: (PRINT OR TYPE)

\_\_\_\_\_  
TELEPHONE NUMBER

IF NOT SIGNED BY THE SHERIFF, PLEASE SUBMIT A LETTER OF AUTHORIZATION, SIGNED BY THE SHERIFF, INDICATING THE NAMES OF THE INDIVIDUALS AUTHORIZED TO SIGN.