

TEXAS COMMISSION ON JAIL STANDARDS  
JAIL POPULATION REPORT

BROWN COUNTY S O

JULY 7 2014

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	0	0	0	0
B. Pretrial Class A & B Misdemeanant	18	6	0	0	0	0
C. Convicted Misdemeanant	3	1	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)	5	3	0	0	0	0
F. Pretrial Felons (do not include Parole Violators and state jail felons)	48	19	0	0	0	0
G. Parole Violators or Blue Warrants	8	1	0	0	0	0
H. Parole Violators with a New Charge	25	1	0	0	0	0
I. Convicted Felons sentenced to county jail time	4	1	0	0	0	0
J. Convicted Felons sentenced to TDJC (ID/Boot Camp/SAFP, White Warrant, PIA)	17	11	0	0	0	0
K. Federal Inmates	XXXXXXXX	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX
L. Pretrial State Jail Felons (SJF)	5	2	0	0	0	0
M. Convicted SJF sentenced to county jail time	2	1	0	0	0	0
N. Convicted SJF sentenced to state jail time	4	0	0	0	0	0
O. Others (specify)	3	0	0	0	0	0
TOTAL	142	46	0	0	0	0
P. Capacity (All County Facilities)	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	192	XXXXXXXX
Q. Paper-Ready Inmates (ID/Boot Camp White Warrant, PIA) less than 45 days	4	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	0	1	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXXXXXX	0

July 7, 2014  
(Exhibit #26)

TEXAS COMMISSION ON JAIL STANDARDS  
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BROWN COUNTY S O

JULY 7 2014

DUE 5TH DAY OF EACH MONTH

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

Contract

County

M

F

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

Local Inmates  
housed elsewhere

County

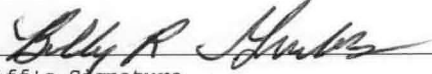
M

F

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

3

I Certify that the above information is complete and accurate.

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

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

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

\_\_\_\_\_  
Date

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

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

DUPLICATE AS NECESSARY

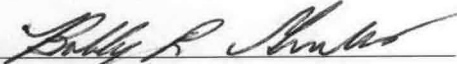
TEXAS COMMISSION ON JAIL STANDARDS  
MONTHLY PAPER-READY INMATE ROSTER

BROWN COUNTY S O

FOR THE MONTH OF: JUNE 2014  
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	M	EISENHAUER, JONATHAN SHANE	06418144	03/25/2014	05/20/2014	06/16/2014
2	F	GONZALES, BRIDGET	08767059	05/13/2014	06/09/2014	06/25/2014
3	M	HARLING, PHILLIP SIDNEY	02374399	08/09/2013	06/12/2014	06/30/2014
4	M	MIRANDA, DAVID MARCUS	07429461	04/01/2014	06/12/2014	
5	M	MASON, CHARLES THOMAS	08554869	04/17/2014	06/12/2014	
6	F	TOOMER, OLIVIA SOPHIA	08946084	05/29/2014	06/12/2014	07/02/2014
7	F	THOMAS, MYRIAH	08992607	05/29/2014	06/12/2014	
8	F	MORGAN, KETURAH	08676901	05/30/2014	06/12/2014	07/02/2014
9	M	FIELDS, EDWARD FRANKLIN	08867347	04/01/2014	06/25/2014	
10	M	MARTINEZ, GUADALUPE JR	08555771	05/13/2014	06/25/2014	
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19						
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22						
23						
24						
25						

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

  
SHERIFF'S SIGNATURE

DATE

TYPED NAME

TELEPHONE NO.

TEXAS COMMISSION ON JAIL STANDARDS  
MONTHLY PAPER-READY REPORT

BROWN COUNTY S O

FOR THE MONTH OF: JUNE 2014  
DUE 5TH DAY OF EACH MONTH

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

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

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? 9

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

REPORT PREPARED BY: (PRINT OR TYPE)

TELEPHONE NUMBER

DATE

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.