BROWN COUNTY S O

JANUARY 9 2017

		<u></u> .				DUE 5TH	DAY OF EAC	H MONTH		
	IN	INMATES HOUSED IN COUNTY					LOCAL INMATES			
	LO	LOCAL		CONTRACT			HOUSED EI	LSEWHERE		
	M	F	Ц	M	F	L 1	M	F		
		1 1		1	1		!			
A. Pretrial Class C Misdemeanant	0	_ 0	L	0	0	L	0	0		
	1				1		1			
B. Pretrial Class A & B Misdemeanant	6	1		0	0	L L	1 0	0		
			П	1	1	1				
C. Convicted Misdemeanant	2	1	11	0	0	L 1	0	0		
D. Felons Whose Penalty has been	1									
reduced to a Misdemeanor	0	0 _	Ш	0	0	L 1		0		
							1			
E. Bench Warrants (in-state only)	7	2	Ш	0	0	L 1	0	0		
F. Pretrial Felons (do no include	ļ	1 1	11					ļ		
Parole Violators and state jail felons)	61	9	Ш	0	0	L 1	0	0		
G. Parole Violators or Blue Warrants	7	4	Ш	0	0	<u> </u>	0	0		
			$ \cdot $		-	1				
H. Parole Violators with a New Charge	28	5	Ш	0	0	L 1	0	0		
I. Convicted Felons sentenced to	1		П	1	1					
county jail time	1	0	Ш	0	0	L L	0	0		
J. Convicted Felons sentenced to	1									
TDJC(ID/Boot Camp/SAFP, White	1	1								
Warrant, PIA)	15	4	Ш	0	0	L 1	0	0		
	1				-		1			
K. Federal Inmates	XXXXXXX	XXXXXXX	Ш	0	0	⊥ 1	\bot xxxxxxxx	XXXXXXX		
	1		$ \cdot $							
L. Pretrial State Jail Felons (SJF)	6	1	Ш	0	0	1	0	0		
M. Convicted SJF sentenced to	1	1					1			
county jail time	0	_0	Ш	0	0	L 1	0	0		
N. Convicted SJF sentenced to	1						1			
state jail time	0	1		0	0	L 1	0	0		
O. Others (specify)	1	2	П	0	0	<u>_</u>	0	0		
	1		11		1					
TOTAL	134	30	Ц	0	0		0	0		
	1 144	/		•		1				
P. Capacity (All County Facilities)	XXXXXXXX	xxxxxxxx	Ш	XXXXXXX	XXXXXXX	192	XXXXXXX	XXXXXXX		
Q. Paper-Ready Inmates (ID/Boot Camp		•					1			
White Warrant, PIA) less than 45 days	5			XXXXXXX	XXXXXXX	XXXXXXXXXXX	0	0		
R. Paper-Ready Inmates (ID/Boot Camp		•	$ \cdot $			1				
White Warrant, PIA) 45 days or longer	0	•			XXXXXXX	XXXXXXXXXXXX	0	0		
1	-		П		1					
S. Paper-Ready SAFP Inmates	1	1	Ш	XXXXXXX	XXXXXXX	XXXXXXXXXXXX	0	0		

January 9, 2017 (Exhibit #8)

TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

BROWN COUNTY S O							JA	NUARY	9 2017
)UE	5TH	DAY OF	EACH	MONTH
T. List, by county the number of male a	and female inmates you are he	ousing	for anothe	r facilit	7.				
		C	ontract						
County		М	F						
U. List, by county the number of male a	and female inmates you are he	ousing	in another	facility					
							Loca	al Inm	ates
							house	ed els	ewhere
	County							M	F
V. Number of pregnant females that wer	re booked into your facility	the p	receding mo	nth.					1
I Certify that the above information is	s complete and accurate.								
Sheriff's Signature				Phone :	Jumb	ber			
Typed Name	_			Date					
Report Prepared by: (print or type)	_			Phone :		ber			
(Form POP-2) Revised 9/2009	DUPLICATE AS NECESSARY								

TYPED NAME

(FORM PR-2) REVISED 9/2009

FOR THE MONTH OF: DECEMBER

TELEPHONE NO.

2016

DUE 5TH DAY OF EACH MONTH DATE DATE | M | STATE DATE OF PAPER TRANSFERED 1 1 / 1 INMATES IDENTIFICATION READY OR RELEASED NAME NUMBER (SID) CONFINEMENT 11/22/2016 12/12/2016 M | SANDERS, VERNON 05905993 09/26/2016 | F | AYALA, CRYSTAL MARIE 50016225 11/21/2016 12/05/2016 12/06/2016 F | ADAMS, KAILEY SHANICE 08895050 10/13/2016 11/08/2016 12/28/2016 F | WILLETT, ELIZABETH LOUISE 07859785 12/12/2016 M OLIN, DAN ROSS JR 04/02/2016 12/28/2016 01/09/2017 05934477 12/28/2016 M SMITH, RYAN OWEN 08/16/2016 50361914 1 1 1 M HALL, KEITH ALLEN 06575569 08/30/2016 12/28/2016 M | GREEN, ZACHERY THRICE 05/27/2016 01/03/2017 | M | MOSELEY, JOE CHANCE 08/30/2016 01/03/2017 | F | DAVIS, KWANTINA 12/13/2016 01/04/2017 111 1 1 1 1 1 1 1 116 1 1 1 20 211 122 | | 23 1 1 1 24 I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE. DATE SHERIFF"S SIGNATURE

DUPLICATE AS NECESSARY

TEXAS COMMISSION ON JAIL STANDARDS MONTHLY PAPER-READY REPORT

BROWN COUNTY S O

FOR THE MONTH OF: DECEMBER 2016

DUE 5TH DAY OF EACH MONTH

PART (A)

DAILY "PAPER-READY" INMATE COUNT

[
DATE	NUMBER	DATE	NUMBER	DATE	NUMBER
1					
1	3	11	3	21	
<u> </u>			_		
2	4	12	2	22	
3	3	 13	2	23	
4	3	14	2	24	
				1	
5	3	15	2	25	
6	3	16	2	26	
!			_		
7	3	17	2	27	
8	3	 18	5	28	
• I	s	10			
9	3		4	29	
10	3	20	4	30	
1		1			
				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	TELEPHONE NUMBER
TYPED NAME	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.

(FORM POP-2) REVISED 9/95

DUPLICATE AS NECESSARY