

JAIL POPULATION REPORT

BROWN COUNTY S O

AUGUST 14 2017  
DUE 5TH DAY OF EACH MONTH

	INMATES HOUSED IN COUNTY				LOCAL INMATES HOUSED ELSEWHERE	
	LOCAL		CONTRACT		M	F
	M	F	M	F	M	F
A. Pretrial Class C Misdemeanant	2	0	1	1	0	0
B. Pretrial Class A & B Misdemeanant	12	3	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)	13	2	0	0	0	0
F. Pretrial Felons (do no include Parole Violators and state jail felons)	48	12	0	0	0	0
G. Parole Violators or Blue Warrants	7	1	0	0	0	0
H. Parole Violators with a New Charge	12	4	0	0	0	0
I. Convicted Felons sentenced to county jail time	1	0	0	0	0	0
J. Convicted Felons sentenced to TDJC(ID/Boot Camp/SAFP, White Warrant, PIA)	11	5	0	0	0	0
K. Federal Inmates	XXXXXXXX	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX
L. Pretrial State Jail Felons (SJF)	3	0	0	0	0	0
M. Convicted SJF sentenced to county jail time	0	0	0	0	0	0
N. Convicted SJF sentenced to state jail time	4	3	0	0	0	0
O. Others (specify)	3	2	0	0	0	0
TOTAL	117 <del>116</del>	33 <del>32</del>	0	0	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	2	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 SAFF Inmates	0	1	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXXXXXX	0

August 14, 2017  
(Exhibit #5)

JAIL POPULATION REPORT

BROWN COUNTY S O

AUGUST 14 201

DUE 5TH DAY OF EACH MONTH

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

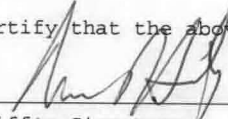
County	Contract	
	M	F
BROWNWOOD POLICE DEPARTMENT	1	1 XXXXXXXXXXXXXXXX

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. | 0

I Certify that the above information is complete and accurate.

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

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

\_\_\_\_\_  
 Phone Number  
 08/14/2017  
 \_\_\_\_\_  
 Date

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

DUPLICATE AS NECESSARY

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

MONTHLY PAPER-READY INMATE ROSTER

BROWN COUNTY S O

FOR THE MONTH OF: JULY 201

DUE 5TH DAY OF EACH MONTH

		M		STATE	DATE	DATE	DATE
		/		IDENTIFICATION	OF	PAPER	DATE
		F		NUMBER (SID)	CONFINEMENT	READY	TRANSFERED
							OR RELEASED
1	M		WATKINS, JASON KYLE	07146443	03/15/2017	06/16/2017	07/31/2017
2	F		WHITE, PAMELA GAYLE	06032395	04/13/2017	06/22/2017	08/02/2017
3	M		SELLERS, JIMMY WAYNE	06864695	08/13/2016	07/07/2017	07/24/2017
4	M		MARTINEZ, ROJELIO JR	05153310	02/24/2017	07/07/2017	07/31/2017
5	M		FERGUSON, ROY GLENN	01679799	03/18/2017	07/12/2017	08/07/2017
6	F		GARCIA, BELINDA MARIA	08075251	05/16/2017	07/12/2017	07/19/2017
7	M		LOPEZ, JULIAN GARCIA JR	02089813	05/19/2017	07/12/2017	08/07/2017
8	M		LEBLANC, CARROLL DWAYNE	06252807	06/19/2017	07/17/2017	08/07/2017
9	M		RUSSELL, CECIL JERMAINE	50337482	06/19/2017	07/21/2017	
10	M		RAMOS, RICHARD JAMES	06484310	05/13/2016	08/03/2017	
11	M		LOPEZ, ARTHUR	04805418	06/18/2016	08/03/2017	
12	M		THOMAS, BILLY WAYNE	04564821	01/05/2017	08/03/2017	
13	M		FUNDERBURG, ADAM WAYNE	07081870	02/28/2017	08/04/2017	
14	F		JONES, AERIAL JWAUN	50141308	07/18/2017	08/04/2017	
15	F		HEREDIA, NANCY	50369785	07/18/2017	08/04/2017	
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

SHERIFF'S SIGNATURE

08/14/2017  
DATE

TYPED NAME

TELEPHONE NO.

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

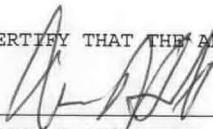
DATE	NUMBER	DATE	NUMBER	DATE	NUMBER
1	8	11	7	21	10
2	8	12	7	22	7
3	7	13	7	23	7
4	8	14	7	24	7
5	8	15	5	25	7
6	8	16	5	26	7
7	8	17	7	27	7
8	7	18	10	28	7
9	7	19	10		
10	7	20	10		

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? 8

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

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

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

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

08/14/2017

\_\_\_\_\_  
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.