BROWN COUNTY S O

NOVEMBER 23 2020

	INMATES HOUSED IN COUNTY				1	LOCAL INMATES		
	LOCAL		П	CONTRACT		ĺ		LSEWHERE
	M	F	11	М	F	Ĺ.	M	F
A. Pretrial Class C Misdemeanant	   0		11	0				1 0
B. Pretrial Class A & B Misdemeanant		2	11	1		1	0	0
	1	1	11			1		1
C. Convicted Misdemeanant	0	0	П	0	0	i i	11 0	0
D. Felons Whose Penalty has been	1		11			1		
reduced to a Misdemeanor	0	0	П	0	0	Ĺ.	0	0
E. Bench Warrants (in-state only)	1	1	11	0	   0	1		1 0
F. Pretrial Felons (do no include		1	H		1 1	<u> </u>		1
Parole Violators and state jail felons)	79	15	Ш	1	0	Ĺ.	1	1 0
G. Parole Violators or Blue Warrants	6	1	11	0				
6. Tarote violators of Blue warrants		1	11	0	0		0	0
H. Parole Violators with a New Charge	23	5	Ш	0	0	Ĺ	0	0
I. Convicted Felons sentenced to	1	1	11			1		I
county jail time  J. Convicted Felons sentenced to	1	0	11	0	0	1	0	0
TDJC(ID/Boot Camp/SAFP, White	ì	I	H		1 1			I I
Warrant, PIA)	11	3	Ĥ	0	0	Ì	0	0
K. Federal Inmates	  xxxxxxxx	  xxxxxxxx		0				  xxxxxxxx
	1	ĺ	11			Ī		1
L. Pretrial State Jail Felons (SJF)	3	7	11	0	0	1	0	0
M. Convicted SJF sentenced to			$\Pi$		1	1		
county jail time	0	0	11	0	0	1	0	0
N. Convicted SJF sentenced to			11			1		
state jail time	0	0	11	0	0	Ţ 1	0	0
O. Others (specify)	0	1	П	0	0	L I	0	0
TOTAL		1	П				I	
TOTAL	130	35	11	2	0	1 1	1	0
P. Capacity (All County Facilities)	xxxxxxx	xxxxxxxx		XXXXXXXX	XXXXXXX	196	XXXXXXX	xxxxxxx
Q. Paper-Ready Inmates (ID/Boot Camp			11			1	1	
White Warrant, PIA) less than 45 days	6	0	11	XXXXXXXX	XXXXXXXX	XXXXXXXXXXXX	0	0
R. Paper-Ready Inmates (ID/Boot Camp	1	1	11	1		1		
White Warrant, PIA) 45 days or longer	0	0	11:	XXXXXXX	XXXXXXXX	XXXXXXXXXXX	0	0
	1	j .			1			L

November 23, 2020 (Exhibit #6)

## TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

BROWN COUNTY S O NOVEMBER 23 2020 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 SAN SABA 1 0 XXXXXXXXXXXXX COMANCHE 1 | 0 XXXXXXXXXXXXX U. List, by county the number of male and female inmates you are housing in another facility. Local Inmates housed elsewhere COMANCHE V. Number of pregnant females that were booked into your facility the preceding month. I Certify that the above information is complete and accurate. Sheriff's Signature Phone Number 11/23/2020 Typed Name Date

DUPLICATE AS NECESSARY

Phone Number

Report Prepared by: (print or type)

(Form POP-2) Revised 9/2009

FOR THE MONTH OF: OCTOBER 2020

1	M		STATE	DATE	DATE	DATE
1	/	INMATES	IDENTIFICATION	OF	PAPER	TRANSFERED
	F	NAME	NUMBER (SID)	CONFINEMENT	READY	OR RELEASED
1	M	EARLY, JUSTIN LEIGH	06771709	07/10/2019	09/11/2020	10/28/2020
2	   M	SMITH, ROBERT SHANNON	03908513	07/22/2019	09/11/2020	10/28/2020
1	1		İ	1	1	1
3	M	MALDONADO, JOSHUA LEE	08220971	02/05/2020	09/11/2020	10/28/2020
4	M	SLAYTON, EDWARD JOSEPH	08214911	02/14/2020	09/11/2020	10/28/2020
5	M	MORIN, LEONARD AUGUSTINE	06025058	03/06/2020	09/29/2020	10/28/2020
6	M	SANCHEZ, SAMUEL JR	08486239	03/12/2020	09/29/2020	10/28/2020
7	M	ATKINS, DUSTIN SCOTT	08152090	04/15/2020	09/29/2020	10/28/2020
8	M	JOHNSON, GARRETT MICHAEL	08875453	05/07/2020	09/29/2020	10/28/2020
9	   M	RODRIGUEZ, DEFRAIN	08605167	12/19/2019	10/20/2020	11/12/2020
1	1		İ	I	I	11/12/2020
LO	M	NELSON, CHARLES KYLE	07260587	05/09/2019	11/19/2020	
.1	M	LOPEZ,ALEX JR	05997629	08/30/2019	11/19/2020	
2	M	PEREZ, LUIS ALFONSO	08958499	12/27/2019	11/19/2020	
13	M	STRASDIN, DARRIN	06573270	02/07/2020	11/19/2020	1
L4	M	STOKES, DAVID LEE	16932146	05/05/2020	11/19/2020	
L5	M	TAWATER, JAMES BRYAN	03064634	10/18/2020	11/19/2020	
16				[ [		
 L7	1		[			
1	1		ĺ		İ	
18				1	1	
19	1					
20			I [			
21		[4				
21	1			1		
-	I					
23				I		
24	1			1	1	
25	1				i.	t. f

(FORM PR-2) REVISED 9/2009

SHERIFF'S SIGNATURE

TYPED NAME

DUPLICATE AS NECESSARY

11/23/2020

DATE

TELEPHONE NO.

## TEXAS COMMISSION ON JAIL STANDARDS MONTHLY PAPER-READY REPORT

BROWN COUNTY S O

FOR THE MONTH OF: OCTOBER 2020

DUE 5TH DAY OF EACH MONTH

PART (A)

DAILY "PAPER-READY" INMATE COUNT

DATE	NUMBER	DATE	NUMBER	DATE	NUMBER
	NONDER	DATE	NONDER	DATE	NUMBER
1	9	11	11	21	
2	9	12	1	22	
3	9	13	1	23	
4	9	14	1	24	
5	1	15	1	25	
6	1	16	111	26	6
7 ]	1	17	1	27	6
8	1	18	1	28	6
9	1	19	1	29	6
10	1	20	×	30	6

PART	(B)

DURING THE REPORTING PERIOD, WERE THERE INMATES FOR WHICH ALL PAPERWORK AND PROCESSING HAD BEEN COMPLETED FOR 45 DAYS OR LONGER? YES IF YES, HOW MANY? 4

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? 6

HOW MANY INMATES WERE RELEASED/TRANSFERRED DURING THE REPORTING MONTH? 9

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

SHERIFF'S SIGNATURE

TELEPHONE NUMBER

11/23/2020

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

### **TEXAS COMMISSION ON JAIL STANDARDS**

#### **Pregnant Inmate Report**

County:

BROWN COUNTY S O

Due by 5th day after the end of the Reporting Month.

Month:

OCTOBER 2020

**Daily Inmate Count** 

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

#### DO NOT ALTER THIS FORM

# TEXAS COMMISSION ON JAIL STANDARDS PREGNANT INMATE REPORT (Form PIR -2)

As mandated by Government Code § 511.0101(A)(3), this monthly report is due by the 5th day of each month. The reporting period includes each day of the previous month.

FOR EXAMPLE: The report due ON October 5th includes the daily count for the entire reporting month of September.

Indicate the daily count of the number of inmates confined who are known to be pregnant. BE SURE TO INCLUDE ALL PREGNANT INMATES HOUSED IN YOUR FACILITY. IF YOUR COUNTY IS HOUSING A PREGNANT INMATE FOR ANOTHER FACILITY, THE COUNTY HOUSING THE PREGNANT INMATE SHALL REPORT THAT INMATE(S).

If you do not have any pregnant inmates, then the PIR-1 Report does not need to be filled out.

Accurate and complete records should be maintained for audit purposes. Records should include the source documents used to complete the PIR-1 and PIR-2.

This report form is available at: www.tcjs.state.tx.us under TCJS resources. Please e-mail the report to melissa.johns@tcjs.state.tx.us. If you have any questions, contact Melissa Johns at 512-463-8079 or at her e-mail listed above.

PIR-2

Effective 12/1/2019