TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

BROWN COUNTY S O

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NOVEMBER 1 2021

DITE STU DAY OF FACU MONTH

	N				DUE 5TH	DAY OF EAG	CH MONTH	
	INMATES HOUSED IN COUNTY					DAY OF EACH MONTH LOCAL INMATES HOUSED ELSEWHERE M F 0 0 0 0 0 0 0 0		
	LOCAL CONTRACT		TRACT	1	HOUSED ELSEWHERE			
	M	F	M	F	1 1	М	F	
							!	
A. Pretrial Class C Misdemeanant	2	0	0	0	L 1	0	0	
1								
B. Pretrial Class A & B Misdemeanant	14	3	0	0	L l	0	0	
						1		
C. Convicted Misdemeanant	0	0	0	0	L 1	0	0	
D. Felons Whose Penalty has been						1		
reduced to a Misdemeanor	0	0	0	0	L l	0	0	
	1					1		
E. Bench Warrants (in-state only)	5	0	0	0	L I	0	0	
F. Pretrial Felons (do no include	1							
Parole Violators and state jail felons)	76	17	0	9	1 1	3	0	
	1							
G. Parole Violators or Blue Warrants	12	2	0	0	1	1	0	
	1		ĺ					
H. Parole Violators with a New Charge	6	0		0	L I	1	0	
I. Convicted Felons sentenced to			l					
county jail time	1	0	0		1	0	0	
J. Convicted Felons sentenced to						1		
TDJC(ID/Boot Camp/SAFP, White	Ì	I I				1	i i	
Warrant, PIA)	13	, 1	0	0		I 0	0	
	1		1		+ + 			
K. Federal Inmates			0					
	1				+ + 			
' L. Pretrial State Jail Felons (SJF)	6	1	0	1 0 1	1	0	0	
M. Convicted SJF sentenced to	1					1	1	
county jail time	1 0	0	0		1	1 0	0	
N. Convicted SJF sentenced to						1		
state jail time	3	, I 0 I	0			1 0	0	
	1				+ + 			
0. Others (specify)	6	 1	0			0		
				L. V I	⊥ ⊥ 	 		
TOTAL	144	25	1 0	9		4.	· · · ·	
	1 144		1		L	1 /		
P. Capacity (All County Facilities)					196		 xxxxxxxx	
	<u> </u>	<u> ^^^^^</u>]	<u> ^^^^^^^^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ </u>			1 AAAAAAAAA	<u>^^^^^</u>	
Q. Paper-Ready Inmates (ID/Boot Camp) White Warrant, PIA) less than 45 days							 0	
	8							
R. Paper-Ready Inmates (ID/Boot Camp								
White Warrant, PIA) 45 days or longer	0							
S. Paper-Ready SAFP Inmates	1	0				0	0	

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9 Movember 1, 2021 (Exhibit #9)

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BROWN COUNTY S O	NOVEM	MBER 1 2021	
	DUE	5TH DAY OF E	EACH MONTH
T. List, by county the number of male a	nd female inmates you are housing for another facility.		
	Contract		
County	MF		
SAN SABA	0 1 XXXXXXXXXXXXXX		
HOOD	0 8 XXXXXXXXXXXXX		
U. List, by county the number of male a	nd female inmates you are housing in another facility.		
		Local	Inmates
		housed	elsewhere
	County	М	F
COMANCHE		5	0
V. Number of pregnant females that wer	e booked into your facility the preceding month.		0
I Certify that the above information is	complete and accurate.		
Sheriff's Signature	Phone Num	ber	
	11/01/202	1	
Typed Name	Date		
	<u> </u>		
Report Prepared by: (print or type)	Phone Num	ber	
(Form POP-2) Revised 9/2009	DUPLICATE AS NECESSARY		

TEXAS COMMISSION ON JAIL STANDARDS MONTHLY PAPER-READY INMATE ROSTER

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FOR THE MONTH OF: OCTOBER 2021

 	M /	INMATES	STATE IDENTIFICATION	DATE OF	DATE PAPER	DATE TRANSFERED
	F	NAME	NUMBER (SID)	CONFINEMENT	READY	OR RELEASED
1	<u> </u> M	HUBER, ZACHERY COOPER	50280670	02/19/2020	09/13/2021	10/11/2021
2	M	GRIFFIN, DAVID DUKE	06275011	09/11/2020	09/21/2021	10/18/2021
3	M	LEATHERMAN, RODNEY	06172245	08/22/2019	10/06/2021	
4	 M	MANNING, DALTON	18849274	09/25/2020	 10/06/2021	
5	M	CELEDON, PABLO II	06314210	07/16/2021	10/06/2021	
6	M	VALDEZ, BRANDON TYLER	 50585259	09/02/2021	10/06/2021	
7	M	EVANS, BOBBY PRESTON	07703667	 09/02/2021	10/06/2021	
8	M	FLORES, GILBERT JR	05635385	 05/14/2020	 10/25/2021	
9	M	MOORE, JONATHON COLBY	07599970	 07/27/2021	 10/28/2021	
 LO	M	NOSSEK, JONATHAN	16909074	08/08/2021	10/28/2021	
 L1						
 L2	 					
 L3						
 L4						
 L5						
16						
 L7						
 18					 	
 9						
 20						
 21						
22			 			
23						
 24			 			
 25						
CER		THAT THE ABOVE INFORMATION IS	COMPLETE AND ACCURATE.			
1	12	SIGNATURE	. /		11/01/2021	

DUPLICATE AS NECESSARY

TEXAS COMMISSION ON JAIL STANDARDS MONTHLY PAPER-READY REPORT

BROWN COUNTY S O

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

DATE	NUMBER	DATE	NUMBER	DATE	NUMBER
1	2	11	6	21	5
]]			
2	2	12	6	22	6
- 1	_				
3	7	13	6	23	6
4	7	14	6	24	6
			Ŭ		~~~~~~
5	7	15	6	25	
1					
6	7	16	5	26	8
7	7	17		27	
8	7	18	5	28	8
U					
9	6	19	5	29	8
					544 6 ^{- 2}
10	6	20	5		
1					
					· · · · · · · · · · · · · · · · · · ·

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? 8

HOW MANY INMATES WERE RELEASED/TRANSFERRED DURING THE REPORTING MONTH? 2

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE.

SHERIFF'S SIGNATURE

TYPED NAME

TELEPHONE NUMBER 11/01/2021 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