## TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

**Brown County Sheriffs Office** 

January 22, 2024

Note: Due on or before 5th day of each month

	Inmates Housed In County				Local Inmates		
	Local		Cont			Housed Elsewhere	
*	М	F	М	F	10	М	F
a. Pretrial Class C Misdemeanant			3				
b. Pretrial Class A & B			*				
Misdemeanant	10	3					8
c. Convicted Misdemeanant					U		
d. Felons Whose Penalty has been				æ	8	w.	
reduced to a Misdemeanor							
e. Bench Warrants							
(in-state only)				****			
f. Pretrial Felons (do not include							
Parole Violaters and State Jail Felons)	54	12		1			,
g. Parole Violaters or Blue Warrants	8	1				=	421
h. Parole Violaters with a New Charge	12	3	1				
i. Convicted Felons sentenced to			_			-	
county jail time	1						
j. Convicted Felons sentenced to					2		
TDCJ (ID/Boot Camp/SAFP, White				40			
Warrant, PIA)	. 7	5			*		
k. Federal Inmates	-						
I. Pretrial State Jail Felons (SJF)	8	5	-				
m. Convicted SJF sentenced to	N.		-		2		
county jail time					v	×	ž
n. Convicted SJF sentenced to						*	i¥
state jail time	4	5					
o. Others (specify)	2	1					
TOTAL	106	35	1	1			
p. Capacity (All County Facilities)				,	196		
q. Paper-Ready Inmates (ID/Boot Camp					·		
White Warrant, PIA) less than 45 days	2	2				g <sup>-1</sup>	
r. Paper-Ready Inmates (ID/Boot Camp					10	ė	
White Warrant, PIA) 45 days or longer	1						
s. Paper-Ready SAFP Inmates			_				
7			-		Ļ.,	V/5 066	L

January 29, 2024 (Exhibit #4)

# TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

### **Brown County Sheriffs Office**

January 22, 2024

t. List, by county the number of male and fe	male inmates you are housing for another fa	cility.	**	~		
			Cont	ract		
	County		М	F		
San Saba		Di .	1	1		
u. List, by county the number of male and fe	emale inmates you are housing in another fac	ility.				
		н р	Local Ir housed e			
^	County		M	F		
No Inmates being housed in another co	ounty					
v. Number of pregnant females that were	e confined in your facility the preceding m	onth.		1		
I certify that the above information is comple	ete and accurate:		50 50			
	b.	(325) 641-22	202			
Sheriff's Signature						
Vance Hill, Sheriff		1/29/2024				
Typed Name	<del>-</del>	Date				
Lisa Jowers, Admin Asst.		(325) 641-22	202			
Report Prepared by: (print or type)	-	Phone Number				
(Form POP-2) Revised 9/2019	DUPLICATE AS NECESSARY					

## TEXAS COMMISSION ON JAIL STANDARDS **INMATES WITH IMMIGRATION DETAINER**

For the Month of:

01/2024

					01/2024		
Part (a)			Due 5th day after the end of the				
Daily Immigration detainer inmate count				Reporting Month			
Date	Number	Date	Number	Date	Number		
1	0	11	0	21	0		
2	0	12	0	22	5		
3	0	13	0	23	5		
4	0	14	0	24	5		
5	0	15	0	25	5		
6	0	16	0	26	5		
7	0	17	0	27	5		
8	0	18	0	28	5		
9	0	19	0	29	5		
10	0	20	0	30	0		
	ATTEMA			31	0		
			TOTAL PRISONER DAYS		40		
	Part (b)  1. Per day cost of housing one inmate. \$65.00						
i. rei ua	(Jail budget divided by ja	ail capacity	divided by 365)		*		
2. Total cost of housing inmates with immigration of					\$2,600.00		
	(Total prisoner days X pe	150					
3. If applicable, you may indicate any extrordinary cost incurred in this reporting period associated							
with a particular ICE detainee such as catastrophic medical care			Event	Total	Cost		
Inmate (First Initial, Last Name) Event			LVEIIL	Total	Cost		
2	-						
I certify that the above information is complete and accurate:							
				(325) 641-2202			
Sheriff's Sig	nature ance Hill, Sheriff			Telephone Number			
Typed Nam	ne	<del></del>	1/29 Date	1/29/2024 Date			
Lisa	lowers, Admin Asst.		(325	(325) 641-2202			
Report pre	pared by: (print or type)		Telep	hone Numbe	er		

If not signed by the Sheriff, please submit a letter of authoriation, signed by the Sheriff, indicating the names of the individuals authorized to sign.

**DUPLICATE AS NEEDED** 

Form ID-1 9/11

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

Brown County Sheriffs Office County

For the Month of:

01/2024

()					lay after the end of the	
Daily Pa Date	Number	Date	Number	Reporting Date	Number	
1	0	11	0	21	0	
2	0	12	0	22	5	
3	0	13	0	23	5	
4	0	14	0	24	5	
5	0	15	0	25	6	
6	0	16	0	26	6	
7	0	17	0	27	6	
8	0	18	0	28	6	
9	0	19	0	29	6	
10	0	20	0	30	0	
洲	100-427-32			31	0	
Part (b)  1. During the reporting period, were there inmates for which all paperwork and processing had been completed for 45 days or longer? ✓ Yes? ☐ No?1  2. On the last day of the period, how many of these from (b) 1 are still confined?1						
Part (c)						
	1.How many inmates became Paper-Ready during the Reporting Month? 2					
2.How many inmates were released/transferred during the Reporting Month? 1						
I certify that the above information is complete and accurate: (325) 641-2202						
	Sheriff's Signature Telephone Number					
	ance Hill, Sheriff		<u>1/29</u> Date	9/2024		
LISA	fowers, Admin Asst.			5) 641-22	202	
Report prep	ared by: (print or type)		, <del>, , , , , , , , , , , , , , , , , , </del>	phone Numb		

If not signed by the Sheriff, please submit a letter of authoriation, signed by the Sheriff, indicating the names of the individuals authorized to sign.

**DUPLICATE AS NEEDED** 

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

### **Pregnant Inmate Report**

County: Brown

Due by 5th day after the end of

Month: 1/22/2024 through 1/29/2024

the reporting month.

#### **Daily Inmate Count**

Date	Number	Date	Number	Date	Number
1	0	11	0	21	0
2	0	12	0	22	1
3	0	13	0	23	1
4	0	14	0	24	2
5	0	15	0	25	2
6	0	16	0	26	2
7	0	17	0	27	2
8	0	18	0	28	2
9	0	19	0	29	2
10	0 -	20	0	30	0
				31	0