## INSTRUCTIONS FOR COMPLETING THE POPULATION REPORT FORM (POP-2)

This is a monthly report of the inmate population on the first day of each month due on the 5th day of each month. Count only the inmates assigned to a housing area, not holding or detox. Count each inmate only once except q. (Paper Ready less than 45 days), r. (Paper Ready 45 days or longer) and s. (SAFP's) which are also included in j. (Convicted Felons). Report inmates with multiple charges or convictions under the most serious.

- a. Pretrial Class C Misdemeanant. Only Class C's.
- b. Pretrial Class A & B Misdemeanant. Class A's & B's even if charged or convicted of Class C.
- c. Convicted Misdemeanant. Class A, B & C's sentenced to jail time.
- d. Felons Whose Penalty has been Reduced to a Misdemeanor Sentence. Convicted third degree felons who are punished as Class A misdemeanants or convicted state jail felons punished as Class B misdemeanant, Penal Code, 12.44 (a).
- e. Bench Warrants (in-state only). Bench Warrant with no other charges.
- f. Pre-trial Felons. DO NOT INCLUDE: Parole Violators or State Jail Felons. INCLUDE: Probation violators awaiting hearing and pending felons with misdemeanor conviction.
- g. Parole Violators or Blue Warrants. Those inmates held on a parole violation only, those without new charges and those parole violators who had new charges but whose new charges have been disposed of, i.e. completed local sentence or had charges dropped. White warrants and new felony convictions are reported under j. (Convicted Felons).
- h. Parole Violators With a New Felony or Misdemeanor Charge. A parole violator with any new felony or misdemeanor charges. Upon conviction on the new charge, report in the appropriate convicted category. Whenever the new charge is disposed of, i.e. local sentence served or charges dropped; report in q. (Parole Violators).
- I. Convicted Felons Sentenced to County Jail Time. Self explanatory. DO NOT INCLUDE: State jail felons.
- j. Convicted Felons Sentenced to TDCJ. Include only those felons sentenced to the Institutional Division. This includes: parole violators with a new conviction, revocation of parole (white warrant), SAFP's, state boot camp, PIA's, or revocation of probation (new offense or technical violation). DO NOT INCLUDE: State jail felons. List contract TDCJ inmates in the contract column. The total of "J" has to be equal to or greater than the totals of "Q,R and S".
- k. Federal Inmates. INS, BOP, U.S. Marshall's Service, etc.
- I. Pretrial State Jail Felon. Self explanatory.
- m. Convicted State Jail Felons Sentenced to County Jail Time. Self-explanatory.
- n. Convicted State Jail Felons Sentenced to State Jail Time. Include those SJF's sentenced to any state facility upon conviction of a SJF and/or those sentenced to a state jail facility for revocation of probation.
- o. Others (specify). Child support, civil contempt, witnesses, out-of state, etc.
- p. Capacity. Rated capacity as determined by TCJS.
- q. Paper-Ready Inmates less than 45 days. Inmates listed in section j. for whom all paper work is complete for transfer to TDCJ confined for less than 45 days. Do not include SJF's or SAFP's.
- r. Paper-Ready Inmates 45 days or longer. Inmates listed in section j. for whom all paper work is complete for transfer to TDCJ confined for 45 days or longer. Do not include SJF's or SAFP's.
- s. SAFP Sentenced Inmates. (Substance Abuse Felony Punishment). Inmates listed in section j. for whom all paper work is complete for transfer to a SAFP facility. Do not include in sections q. and r. ( Paper Ready Inmates).
- t. List by county, the number of male and female inmates you are housing for another facility.
- u. List by county, the number of male and female inmates you are housing in another facility.
- v. The number of pregnant females booked into your facility during the preceding month.

The population report form is available on our web site at www.tcjs.state.tx.us. You may download the report and e-mail it to Melissa at melissa.johns@tcjs.state.tx.us. Or you can print the form and fax it to us at 512-463-3185, or submit the original by mail. If you E-Mail the form, be sure that the Sheriff's signature appears on the form.

If you have any questions, please call Melissa Johns at 512-463-8079.

## TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

County

Date

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

	Inmates Housed in County					Local Inmates		
		Local Contract M F M F			Housed Elsewhere  M F			
	IVI		IVI	Г	-	IVI	Г	
a. Pretrial Class C Misdemeanant					-			
b. Pretrial Class A & B								
Misdemeanant								
c. Convicted Misdemeanant					_			
d. Felons Whose Penalty has been reduced to a Misdemeanor								
e. Bench Warrants								
(in-state only)								
f. Pretrial Felons (do not include								
Parole Violators and state jail felons)								
g. Parole Violators or Blue Warrants								
h. Parole Violators with a New Charge								
i. Convicted Felons sentenced to								
county jail time								
j. Convicted Felons sentenced to								
TDCJ (ID/Boot Camp/SAFP, White								
Warrant, PIA)								
k. Federal Inmates								
I. Pretrial State Jail Felons (SJF)								
m. Convicted SJF sentenced to								
county jail time								
n. Convicted SJF sentenced to								
state jail time								
					-			
o. Others (specify)					-			
TOTAL								
p. Capacity (All County Facilities)								
q. Paper-Ready Inmates (ID/Boot Camp								
White Warrant, PIA) less than 45 days								
r. Paper-Ready Inmates (ID/Boot Camp								
White Warrant, PIA) 45 days or longer								
s. Paper Ready SAFP Inmates								

## TEXAS COMMISSION ON JAIL STANDARDS JAIL POPULATION REPORT

County Date

t. List, by county the number of male and	female inmates you are	housing fo	or another	facility.		
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County		М	F			
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				_		
u. List , by county the number of male and	female inmates you ar	e housing <b>i</b>	<b>n</b> another	facility.		
		Local II housed e				
	County				М	F
V. Number of programs females that we	are booked into your f	aailitu tha	proceding	manth		
V. Number of pregnant females that we		acility the	precearing	month.		
I certify that the above information is comp	plete and accurate.					
	<del>_</del>					
Sheriff's Signature		Phone Nur	nber			
Typed Name Date						
Report Prepared by: (print or type)	<del>-</del>			Phone Nur	nhor	
report Frepared by. (print or type)				PHONE INUI	IIDEI	
(Form POP-2) Revised 12/2018	<b>DUPLICATE AS NEC</b>	ESSARY				