## FY 2014 CHAPTER 59 ASSET FORFEITURE REPORT BY LAW ENFORCEMENT AGENCY

Agency Name:	Fort Bend County Narcotics Task Force	Reporting Period: (local fiscal year)	10/01/13 - 09/30/14
Agency Mailing Address:	1410 Williams Way Blvd.	example:	01/01/14 to 12/31/14, 09/01/13 to 08/31/14 etc.
	Richmond, TX 77469		
	201 241 4754		
Phone Number: County:	281-341-4754 Fort Bend		
Email Address:		This should be a permanent agency	
	josh.dale@fortbendcountytx.gov	email address	

### NOTE: PLEASE ROUND ALL DOLLAR FIGURES TO NEAREST WHOLE DOLLAR.

I.		SEIZED FUNDS PURSUANT TO CHAPTER 59	
	A)	Beginning Balance:	<b>\$</b> 0
	B)	Seizures During Reporting Period:	
		1) Amount seized and retained in your agency's custody.	ş 0
		2) Amount seized and transferred to the District Attorney pending forfeiture.	<b>\$</b> 0
	C)	Interest Earned on Seized Funds During Reporting Period:	<b>\$</b> 0
	D)	Amount Returned to Defendants/Respondents:	<b>\$</b> 0
	E)	Amount Transferred to Forfeiture Account:	<b>\$</b> 0
	F)	Other Reconciliation Items:	<b>\$</b> 0
	G)	Ending Balance: Instructions: Add lines A, B(1), C and F, subtract lines D and E, put total in line G.	s0
II.		FORFEITED FUNDS AND OTHER COURT AWARDS PURSUANT TO CHAPTER 59	
	A)	Beginning Balance:	<sub>\$</sub> 721,897
	B)	Amount Forfeited to and Received by Reporting Agency (Including Interest) During Reporting Period:	<sub>\$</sub> 187,234
	C)	Interest Earned on Forfeited Funds During Reporting Period :	<b>\$1,500</b>
	D)	Amount Awarded Pursuant to 59.022 (f)(1):	<b>\$</b> 0
	E)	Amount Awarded Pursuant to 59.023 (a):	<b>\$</b> 0
	F)	Proceeds Received by Your Agency From Sale of Forfeited Property:	<b>\$</b> 0
	G)	Amount Returned to Crime Victims:	\$0
	H)	Other Reconciliation Items:	s O

I)	Total Expenditures of Forfeited Funds During Reporting Period:	§ 420,252
J)	Ending Balance: Instructions: Add lines A, B, C, D E, F and H, subtract lines G and I, place total in line J.	s 490,379

### III. OTHER PROPERTY

Please note - this should be a number not a currency amount. Example 4 cars seized, 3 cars forfeited and 0 cars put into use.	SEIZED	FORFEITED TO AGENCY	RETURNED TO DEFENDANTS / RESPONDENTS	PUT INTO USE BY AGENCY
MOTOR VEHICLES (Include cars, motorcycles, tractor trailers, etc.)	0	0	0	0
2) REAL PROPERTY (Count each parcel seized as one item)	0	0	0	0
3) COMPUTERS (Include computer and attached system components, such as printers and monitors, as one item)	0	0	0	0
4) FIREARMS (Include only firearms seized for forfeiture under Chapter 59. Do not include weapons disposed under Chapter 18.)	0	0	0	0
5) Other Property - Description:	0	0	0	0
Other Property -Description:	0	0	0	0
Other Property -Description:	0	0	0	0

IV.			FORFEITED PROPERTY RECEIVED FROM ANOTHER AGENCY	
	A)		Motor Vehicles:	# 0
	B)		Real Property:	# 0
	C)		Computers:	# 0
	D)		Firearms:	# 0
	E)		Other:	# 0
V.			FORFEITED PROPERTY TRANSFERRED OR LOANED TO ANOTHER AGENCY	
	A)		Motor Vehicles:	# 0
	B)		Real Property:	<sub>#</sub> 0
	C)		Computers:	# 0
	D)		Firearms:	# 0
	E)		Other:	<sub>#</sub> 0
VI.			EXPENDITURES	
	A)		SALARIES	
		1.	Increase of Salary, Expense, or Allowance for Employees (Salary Supplements):	ş 0

	2.	Salary Budgeted Solely From Forfeited Funds:	<b>\$ 0</b>	
	3.	Number of Employees Paid Using Forfeiture Funds:	# 0	_
	4.	TOTAL SALARIES PAID OUT OF CHAPTER 59 FUNDS:		* 0
B)		OVERTIME		
	1.	For Employees Budgeted by Governing Body:	\$11,925	_
	2.	For Employees Budgeted Solely out of Forfeiture Funds:	s O	
	3.	Number of Employees Paid Using Forfeiture Funds:	#1	_
	4.	TOTAL OVERTIME PAID OUT OF CHAPTER 59 FUNDS:		s 11,925
<b>C</b> )		EQUIPMENT		
	1.	Vehicles:	<b>\$</b> O	
	2.	Computers:	<sub>\$</sub> 818	_
	3.	Firearms, Protective Body Armor, Personal Equipment:	§ 53	<del></del>
	4.	Furniture:	<b>\$</b> 0	_
	5.	Software:	<b>\$</b> 0	_
	6.	Maintenance Costs:	\$7,041	_
	7.	Uniforms:	s 115	_
	8.	K9 Related Costs:	\$3,847	_
	9.	Other (Provide Detail on Additional Sheet): Equipment Rental	\$1,999	_
	10.	TOTAL EQUIPMENT PURCHASED WITH CHAPTER 59 FUNDS:		s 13,873
D)		SUPPLIES		
	1.	Office Supplies:	\$870	
	2.	Mobile Phone and Data Account Fees:	\$4,365	_
	3.	Internet:	\$ <b>4</b> ,653	
	4.	Other (Provide Detail on Additional Sheet):	§ O	
	5.	TOTAL SUPPLIES PURCHASED WITH CHAPTER 59 FUNDS:		\$ 9,888
E)		TRAVEL		
	1.	Total In State Travel	<b>\$</b> 0	
		a) Transportation:	s O	
		b) Meals & Lodging:	§ O	_
		c) Mileage:	<b>\$</b> 0	_
		d) Incidental Expenses:	<b>\$</b> 0	
	2.	Total Out of State Travel	§ O	_
		a) Transportation:	s O	_
		b) Meals & Lodging:	<b>\$</b> 0	

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		c) Mileage:	<b>\$</b> 0	
		d) Incidental Expenses:	<b>\$</b> 0	_
	3.	TOTAL TRAVEL PAID OUT OF CHAPTER 59 FUNDS:		ş 0
F)		TRAINING		-
	1.	Fees (Conferences, Seminars):	<b>\$</b> 0	_
	2.	Materials (Books, CDs, Videos, etc.):	<b>\$</b> 0	_
	3.	Other (Provide Detail on Additional Sheet):	<b>\$</b> 0	_
	4.	TOTAL TRAINING PAID OUT OF CHAPTER 59 FUNDS		s 0
G)		INVESTIGATIVE COSTS		
	1.	Informant Costs:	\$96,800	_
	2.	Buy Money:	\$8,000	<u></u>
	3.	Lab Expenses:	<b>\$438</b>	_
	4.	Other (Provide Detail on Additional Sheet):	<b>\$</b> O	_
	5.	TOTAL INVESTIGATIVE COSTS PAID OUT OF CHAPTER 59 FUNDS:		\$ 105,238
H)		PREVENTION/TREATMENT PROGRAMS / FINANCIAL ASSISTANCE / DONATIONS		
	1.	Total Prevention/Treatment Programs (pursuant to 59.06 (d-3(6)),(h), (j):	<b>\$</b> 0	_
	2.	Total Financial Assistance (pursuant to Articles 59.06 (n) and (o)):	\$0	
	3.	Total Donations (pursuant to Articles 59.06 (d-2)):	<b>\$</b> 0	
	4.	TOTAL PREVENTION/TREATMENT PROGRAMS / FINANCIAL ASSISTANCE / DONATIONS (pursuant to Articles 59.06 (d-3(6)), (h), (j), (n), (o) (d-2)):		§ 0
I)		FACILITY COSTS		
	1.	Building Purchase:	<b>\$</b> 0	_
	2.	Lease Payments:	\$ <b>41</b> ,580	_
	3.	Remodeling:	<b>\$</b> 0	
	4.	Maintenance Costs:	§4,256	_
	5.	Utilities:	<sub>\$</sub> 692	_
	6.	Other (Provide Detail on Additional Sheet):	\$0	_
	7.	TOTAL FACILITY COSTS PAID OUT OF CHAPTER 59 FUNDS:		\$ 46,528
J)		MISCELLANEOUS FEES		
	1.	Court Costs:	§ O	
	2.	Filing Fees:	§ O	_
	3.	Insurance:	§0	_
	4.	Witness Fees (including travel and security):	\$0	_

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	5.	Audit Costs and Fees (including audit preparation and professional fees):	<b>\$</b> 0	
	6.	Other (Provide Detail on Additional Sheet):	s O	<b>-</b> _
	7.	TOTAL MISCELLANEOUS FEES PAID OUT OF CHAPTER 59 FUNDS:		<b>\$</b> 0
K)		PAID TO STATE TREASURY / GENERAL FUND / HEALTH & HUMAN SERVICES COMMISSION:		
	1.	Total paid to State Treasury due to lack of local agreement pursuant to 59.06 (c):	<b>\$</b> 0	_
	2.	Total paid to State Treasury due to participating in task force not established in accordance with 59.06 (q)(1):	\$0	_
	3.	Total paid to General Fund pursuant to 59.06 (C-3) (c) (Texas Department of Public Safety only):	\$0	_
	4.	Total forfeiture funds transferred to the Health and Human Services Commission pursuant to 59.06 (p):	<b>\$0</b>	_
	5.	TOTAL PAID TO STATE TREASURY / GENERAL FUND / HEALTH & HUMAN SERVICES COMMISSION OUT OF CHAPTER 59 FUNDS:		<b>s</b> 0
L)		TOTAL PAID TO COOPERATING AGENCY(IES) PURSUANT TO LOCAL AGREEMENT:		\$ 232,800
M)		TOTAL OTHER EXPENSES PAID OUT OF CHAPTER 59 FUNDS WHICH ARE NOT ACCOUNTED FOR IN PREVIOUS CATEGORIES (provide detailed descriptions on additional sheet(s) and attach to this report):		\$ 0
N)		TOTAL EXPENDITURES:		<b>\$</b> 420,252

### NOTE: BOTH CERTIFICATIONS MUST BE COMPLETED

# AUDITOR / TREASURER / ACCOUNTING PROFESSIONAL/PREPARER CERTIFICATION

I swear or affirm that the Commissioners Court, City Council or Agency Head (if no governing body) has requested that I conduct the audit required by Article 59.06 of the Code of Criminal Procedure and that upon diligent inspection of all relevant documents and supporting materials, I believe that the information contained in this report is true and correct to the best of my knowledge.

AUDITOR, TREASURER, ACCOUNTING PROFESSIONAL or PREPARER (Printed Name):	Robert Ed Sturdivant
TITLE:	Fort Bend County Auditor
SIGNATURE:	Phil & this
DATE:	11/18/2014

#### AGENCY HEAD CERTIFICATION

I swear or affirm, under penalty of perjury, that I have accounted for the seizure, forfeiture, receipt, and specific expenditure of all proceeds and property subject to Chapter 59 of the Code of Criminal Procedure, and that upon diligent inspection of all relevant documents and supporting materials, this asset forfeiture report is true and correct and contains all information required by Article 59.06 of the Code of Criminal Procedure. I further swear or affirm that, to the best of my knowledge, all expenditures reported herein were lawful and proper, and made in accordance with Texas law.

AGENCY HEAD (Printed Name):

RETURN COMPLETED FORM TO:

Troy Nehls, Fort Bend County Sheriff

SIGNATURE:

DATE:

Office of the Attorney General

Criminal Prosecutions Division

P.O. Box 12548

Austin, TX 78711-2548 Attn: Kent Richardson

(512)463-1591

Chapter59AuditReport@texasattorneygeneral.gov

WE CANNOT ACCEPT FAXED OR EMAILED COPIES. PLEASE MAIL THE SIGNED, ORIGINAL DOCUMENT TO OUR OFFICE AT THE ADDRESS ABOVE.