

AGENDA ITEM

11

FORT BEND COUNTY FY ~~2009~~ 2010 COMMISSIONERS COURT AGENDA REQUEST FORM

Return Completed Form by E-Mail to: Agenda Coordinator, County Judge's Office

Date Submitted: 10/14/2009

Submitted By: Vicki Worsham

Department: Constable, Pct 4

Court Agenda Date: 10/20/2009

Phone Number: (281) 242-4014

SUMMARY OF ITEM:

(1) Take all appropriate action to approve FY 2009 Chapter 59 Asset Forfeiture Audit Report.

RENEWAL AGREEMENT/APPOINTMENT

YES

☐

NO

☒

REVIEWED BY COUNTY ATTORNEY'S OFFICE:

YES

☐

NO

☒

List Supporting Documents Attached: *FY 2009 Chapter 59 Asset Forfeiture Report by Law Enforcement*
Revised 10/19/09

FINANCIAL SUMMARY:

BUDGETED ITEM: YES ☐

NO ☐

FUNDNG SOURCE:

Activity (If Applicable):

DESCRIPTION OF LAWSON ACCOUNT: _____

COUNTY JUDGE
RECEIVED

OCT 14 2009

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms will not be processed.
- Agenda Request Forms should be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:

Original Form Submitted with back up to County Judge's Office ☒ (✓ when completed)

If by E-Mail to ospindon@co.fort-bend.tx.us

If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input checked="" type="checkbox"/> Auditor (281-341-3774)	<input checked="" type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input checked="" type="checkbox"/> Budget Officer (281-344-3954)	<input checked="" type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input checked="" type="checkbox"/> Facilities/Planning (281-633-7022)	<input checked="" type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input checked="" type="checkbox"/> Purchasing Agent (281-341-8642)	<input checked="" type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input checked="" type="checkbox"/> Information Technology (281-341-4526)	<input checked="" type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input checked="" type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

Take all appropriate action to approve FY 2009 Chapter 59 Asset Forfeiture Audit Report.

Special Handling Requested (specify):

10-22-09 copy received

FY 2009
CHAPTER 59 ASSET FORFEITURE REPORT
BY LAW ENFORCEMENT AGENCY

Agency Name: FT BEND COUNTY CONSTABLE, PCT 4	Reporting Period: (local fiscal year) 10/1/08 to 9/30/09
Agency Mailing Address: 12919 Dairy Ashford, Ste 300 Sugar Land, TX 77478	example: 01/01/09 to 12/31/09, 09/01/08 to 08/31/09 etc.
Phone Number: (281) 242-4014	
County: Fort Bend	

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

I. Beginning Balance

A) Forfeited Funds..... \$ **-0-**

INSTRUCTIONS: Include total amount of forfeited funds on hand (in your agency's account or in your agency's possession) at beginning of the reporting period including interest. **Do not** include funds that have been forfeited but not yet received by your agency.

B) Seized Funds..... \$ **-0-**

INSTRUCTIONS: Include total amount of seized funds on hand (in your agency's possession) at beginning of reporting period. Include funds that may have been forfeited but have not been transferred to your agency's forfeiture account. **Do not** include funds that are in an account held by another agency, e.g., the District Attorney's account.

II. Seizures and Forfeiture Receipts during Reporting Period

A) Currency and Negotiable Instruments

1) Amount Seized by Reporting Agency..... \$ **-0-**

INSTRUCTIONS: Include only those seizures which occurred during the reporting period and where the seizure affidavit required by Article 59.03 is sworn to by a peace officer employed by your agency.

2) Amount Forfeited to and Received by Reporting Agency (including interest) \$ **-0-**

INSTRUCTIONS: Do not include amounts forfeited but not yet received by your agency; Interest refers to the amount earned prior to forfeiture and distributed as part of the judgment of forfeiture.

3) Amount Returned to Defendants..... \$ **-0-**

B) Other Property

List the number of items seized for the following categories. Include only those seizures where the seizure affidavit required by Article 59.03 is sworn to by a peace officer employed by the agency filing this report. If property is sold or is to be sold, list under "Proceeds Received by Reporting Agency from Sale of Above-Listed Property" (see below) in the reporting year in which the proceeds are received.

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	PUT INTO USE BY AGENCY
1) MOTOR VEHICLES (Include cars, motorcycles, tractor trailers, etc.)	-0-		
2) REAL PROPERTY (Count each parcel seized as one item)	-0-		
3) COMPUTERS (Include computer and attached system components, such as printers and monitors, as one item)	-0-		
4) FIREARMS (Include only firearms seized for forfeiture under Chapter 59. Do not include weapons disposed under Chapter 18.)	-0-		
5) Other Property: Description: _____	N/A		
Other Property: Description: _____	N/A		
Other Property: Description: _____	N/A		

III. Proceeds Received by Reporting Agency from Sale of Above-Listed Property (Categories 1 through 5).....

\$ -0-

INSTRUCTIONS: Include amounts received for all property sold during the reporting period, even if the subject property was forfeited in a prior reporting period.

IV. Forfeited Property and Proceeds Received From Another Agency

INSTRUCTIONS: Enter the total dollar amount or total number of items received pursuant to a sharing agreement where the forfeiture judgment awarded ownership of the property to another agency prior to it being transferred to your agency.

A. Proceeds - (should be a dollar amount).....

\$ -0-

B. Vehicles.- (should be a number not a currency amount).....

-0-

C. Other - (should be a number not a currency amount).....

-0-

V. Interest Earned on Forfeited Funds During Reporting Period.....

\$ -0-

INSTRUCTIONS: Include only the amount of interest earned on forfeited funds or interest earned on funds derived from the sale of forfeited property. Do not include interest earned if funds are on deposit in an account that does not belong to your agency, e.g. the District Attorney's account.

VI. Expenditures

INSTRUCTIONS: List the total amount expended for each of the following categories. **This category is ONLY for expenditures made from Chapter 59 funds.** If proceeds are expended for a category not listed, state the amount and nature of the expenditure under the "Other" category.

Salaries.....	\$	<u>-0-</u>
Overtime.....	\$	<u>-0-</u>
Equipment (includes vehicles, computers & software, maintenance costs, etc.).....	\$	<u>-0-</u>
Supplies (includes cellular air time, miscellaneous commodities).....	\$	<u>-0-</u>
Travel.....	\$	<u>-0-</u>
Training.....	\$	<u>-0-</u>
Paid to or Shared with Cooperating Agency.....	\$	<u>-0-</u>
Confidential Informant Payments.....	\$	<u>-0-</u>
Prevention / Treatment Programs.....	\$	<u>-0-</u>
Facility Costs (building purchase, lease payments, remodeling, maintenance fees etc.).....	\$	<u>-0-</u>
Miscellaneous Fees (bank account service charges, insurance, audit fees, witness fees etc.).	\$	<u>-0-</u>
Other: (attach additional sheets if necessary)		
Description: _____ \$ _____		
Description: _____ \$ _____		
Description: _____ \$ _____		
	Other Total	\$ <u>-0-</u>
<u>TOTAL EXPENDITURES:</u>	\$	<u>-0-</u>

CERTIFICATION

COUNTY JUDGE, MAYOR OR OTHER
APPROPRIATE HEAD OF GOVERNING
BODY OR DESIGNEE:

TITLE:

SIGNATURE:

DATE:

ROBERT E. HEBERT

FORT BEND COUNTY JUDGE

October 20, 2009

RETURN COMPLETED FORM TO:

renee.grav@oag.state.tx.us
(512)305-8882

Office of the Attorney General
Criminal Prosecutions Division, ATTN: Kent Richardson
P.O. Box 12548
Austin, TX 78711-2548
kent.richardson@oag.state.tx.us
(512)936-1348
FAX (512)494-8283