

COUNTY AUDITOR Fort Bend County, Texas

281-341-3769, 281-341-3744 (fax) sturdived@co.fort-bend.tx.us

Memo

To:

County Judge Bob Hebert

Members of Commissioner's Court

Donna Ospina, Agenda Coordinator

From:

Shelley Mays, Auditor's Office

Date:

10/07/10

Re:

Asset Forfeiture Report Audit

COUNTY JUDGE RECEIVED OCT 1 2 2010

This memo shall serve as a notification that the staff of the Fort Bend County Auditor's Office has audited the Asset Forfeiture Reporting documents submitted by Constable Pct 1 (State) and recommends approval for submission to the appropriate state or federal agency.

Respectfully submitted,

Shelley Mays Internal Auditor 281-341-8621

FY 2010 CHAPTER 59 ASSET FORFEITURE REPORT BY LAW ENFORCEMENT AGENCY

Agency Name:		Fort Bend County Constable Pct 1	Reporting Period: (local fiscal year)	09/0	1/09 to 8/31/10	
Agency Mailing Address:		301 Jackson St. Suite 101	301 Jackson St. Suite 101		01/01/10 to 12/31/10, 09/01/09 to 08/31/10 etc.	
		Richmond, TX 77469				
Pho	ne Numl	per: (281) 341-4532				
Cou	nty:	Fort Bend County				
Ema	iil Addre	DORRAJ@CO.FORT-BEND.TX.US	This should be a permanent agency email address			
NOTE	E: PLEA	SE ROUND ALL DOLLAR FIGURES TO NEAREST WHOL	E DOLLAR.			
I.		SEIZED FUNDS				
	A)	Beginning Balance	our agency's possession) en forfeited but have not lude funds that are in an	. \$	0	
	B)	Seizures During Reporting Period: Instructions: Include only those seizures which occurred during where the seizure affidavit required by Article 59.03 is sworn to by by your agency.	a peace officer employed		0	
		Amount seized and retained in your agency's custody			·	
		2) Amount seized and transferred to the District Attorney pending	g forfeiture	<u>\$</u>	0	
	(C)	Amount Returned to Defendants/Respondents (If seized to Defendants/Respondents please complete Schedule A for each can Make copies of the schedule and add additional sheets as necessary	ase in which this applies.	\$	0	
	D)	Ending Balance	ine D.	\$	0	
II.		FORFEITED FUNDS				
	A)	Beginning Balance	e been forfeited to your agency's possession) at	\$	0	
	B)	Amount Forfeited to and Received by Reporting Agency (Inc Reporting Period	lby your agency; interest	\$	0	

Form date 03/03/10

C)	Interest Earned on Forfeited Funds During Reporting Period	\$	0	
D)	Proceeds Received by Your Agency From Sale of Forfeited Property		0	
E)	Total Expenditures of Forfeited Funds During Reporting Period	\$	0	
F)	Ending Balance Instructions: Add lines A through D, subtract line E, place total in line F.	:\$	0	

III. OTHER PROPERTY

Instructions: List the number of items seized for the following categories. Include only those seizures where a seizure is made by a peace officer employed by your agency. If property is sold, list under "Proceeds Received by Your Agency From Sale of Forfeited Property" in Section II (D) in the reporting year in which the proceeds are received. If property is returned to Defendants/Respondents please complete Schedule A for each case in which this applies. Make copies of the schedule and add additional sheets as necessary.

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			
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			
FIREARMS (Include only firearms seized for forfeiture under Chapter 59. Do not include weapons disposed under Chapter 18.)	0			
5) Other Property - Description:				
Other Property -Description:				
Other Property -Description:				

IV.			FORFEITED PROPERTY RECEIVED FROM ANOTHER AGENCY		
			Instructions: Enter the total number of items transferred to your agency where the forfeiture judgment awarded ownership of the property to another agency prior to the transfer.		
	A)		Motor Vehicles (the number of vehicles, not a currency amount)		0
	B)		Real Property (the number of separate parcels of property, not a currency amount)		0
	·C)		Computers (the number of computers, not a currency amount)		0
	D)		Firearms (the number of firearms, not a currency amount)		0
	E)		Other (the number of items, not a currency amount)		0
V.			FORFEITED PROPERTY TRANSFERRED TO ANOTHER AGENCY Instructions: Enter the total number of items transferred from your agency where the forfeiture judgment awarded ownership of the property to your agency prior to the transfer.		
	A)		Motor Vehicles (the number of vehicles, not a currency amount)		0
	B)		Real Property (the number of separate parcels of property, not a currency amount)		0
	C)		Computers (the number of computers, not a currency amount)		0
	D)		Firearms (the number of firearms, not a currency amount)		0
	E)		Other (the number of items, not a currency amount)		0
VI.			EXPENDITURES Instructions: This category is for Chapter 59 expenditures SOLELY for law enforcement purposes - not for expenditures made pursuant to your general budget. List the total amount expended for each of the following categories. If proceeds are expended for a category not listed, state the amount and nature of the expenditure under the Other category.		0
	A)		Total Salaries Paid out of Chapter 59 Funds	<u>\$</u>	0
		1.	Increase of Salary, Expense, or Allowance for Employees (Salary Supplements)	-\$	0
		2.	Salary Budgeted Solely From Forfeited Funds	-\$	0
		3.	Number of employees Paid Using Forfeiture Funds		0
	B)		Total Overtime Paid out of Chapter 59 Funds	_:S	0
		.1.	For employees Budgeted by Governing Body	-\$	0
		2.	For Employees Budgeted Solely out of Forfeiture Funds	\$	0
		3.	Number of employees Paid Using Forfeiture Funds		0
	C)		Total Equipment Paid for with Chapter 59 Funds	\$	0
		1.	Vehicles	S	0
		2.	Computers	\$	0

	4.	Furniture	\$	
	5.	Software	\$	
	6.	Maintenance Costs	\$	
	7.	Uniforms	\$	
	8.	K9 Related Costs	\$	
	9.	Other (Provide Detail on Additional Sheet)	\$	
D)		Total Supplies Paid Out of Chapter 59 Funds	\$	0
	1.	Office Supplies	.\$	
	2.	Cellular Air Time	\$	
	.3.	Internet	S	
	4.	Other (Provide Detail on Additional Sheet)	s	
E)		Total Travel Paid Out of Chapter 59 Funds	\$	0
- /	1.	In State Travel		
		a) Hotel	\$	
		b) Air Fare	\$	
		c) Meals (including per diem)	\$	
			\$	
	2.	Out of State Travel		
		a) Hotel	.\$	
		b) Air Fare	\$	
		c) Meals (including per diem)	\$	
		d) Car Rental	:\$	
	3.	Fuel	-\$	
	<i>3</i> .	Parking	- -	
	5.	Other (Provide Detail on Additional Sheet)	:\$	
E)	5.	Total Training Paid Out of Chapter 59 Funds	<u> </u>	0
r)	1.	Fees (Conferences, Seminars)	:\$	
	2.	Materials (Books, CDs, Videos, etc.)		<u> </u>
	3.	Other (Provide Detail on Additional Sheet)		
C)	Э.	Total Investigative Costs Paid Out of Chapter 59 Funds	\$	0
G)	,	Informant Costs	\$	
	1.	Buy Money	\$	
	2.	·	\$	<u> </u>
	3.	Lab Expenses		
	4.	Other (Provide Detail on Additional Sheet)	\$	

H)		Total Prevention / Treatment Programs / Financial Assistance (pursuant to Articles 59.06 (h), (I), (j), (n))	.\$	0	
I)		Total Facility Costs Paid Out of Chapter 59 Funds	\$	0	
	1.	Building Purchase	\$		
	2.	Lease Payments	\$		
	3.	Remodeling	\$		
	4.	Maintenance Costs	\$		
	5.	Utilities	:\$		
	6.	Other (Provide Detail on Additional Sheet)	:\$		
Ŋ		Total Miscellaneous Fees Paid Out of Chapter 59 Funds	\$	0	
	1.	Court Costs	\$		
	2.	Filing Fees.	.\$	****	
	3.	Insurance	.\$		
	4.	Witness Fees	. \$		
	5.	Audit Costs and Fees	\$		
	6.	Other (Provide Detail on Additional Sheet)	\$		
K)		Total Other Paid Out of Chapter 59 Funds (provide detailed descriptions on additional sheet(s) and attach to this report)	\$	0	
L)		TOTAL EXPENDITURES	\$	0	

NOTE: BOTH CERTIFICATIONS NEED TO BE COMPLETED, unless your agency is not governed by a Commissioner's Court or City Council. Then only the Agency Head Certification needs to be completed.

COMPTETC A THOM

COUNTY JUDGE or MAYOR (Printed Name):	County Judge Bob Hebert
SIGNATURE:	Melecer Bellen
DATE:	10-26-2010

I swear or affirm that the Commissioners Court or City Council has conducted 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 this asset forfeiture report is true and correct and contains all of the required information.

SWORN TO AND SUBSCRIBED before me this 26 day of October, 20 10.



Notary Public in and for the State of Texas

CERTIFICATION

A.J. Dorr, Constable Pct 1

AGENCY HEAD (Printed Name):

SIGNATURE:

DATE:

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 all expenditures reported herein were lawful and proper, and made in accordance with Texas law.

SWORN TO AND SUBSCRIBED before me this Office day of

DIANA M SALINAS
Notary Public, State of Texas
My Commission Expires 08-12-2013

Notary Public in and for the State of Texas

RETURN COMPLETED FORM TO:

Office of the Attorney General Criminal Prosecutions Division P.O. Box 12548 Austin, TX 78711-2548 Attn: Kent Richardson (512)936-1348

FAX (512)494-8283

E-mail: kent.richardson@oag.state.tx:us