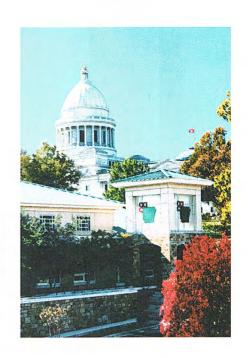
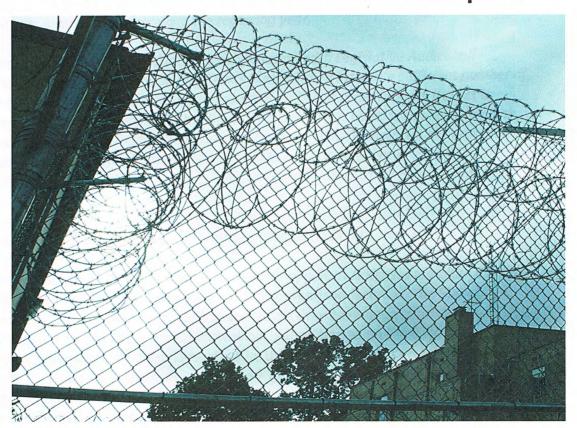
ASSOCIATION of ARKANSAS COUNTIES



Local Government Inmate Cost Report



Association of Arkansas Counties 💢

JUNE 30, 2012

Executive Summary

Association of Arkansas Counties Inmate Cost Report for 2011

Introduction

This report is being issued in compliance with Section 39 of Act 1285 of 2009 and Section 34 of Act 1114 of 2011, both requiring the Association of Arkansas Counties to compile and submit a Local Government Inmate Cost Report to the Arkansas Legislative Council. The report demonstrates the costs incurred by county governments housing state inmates. The special language of the aforementioned sections is as follows:

Each calendar year, the Association of Arkansas Counties shall compile and submit a report to the Arkansas Legislative Council, of all costs incurred, excluding construction costs, by local government units housing inmates sentenced to the Department of Correction and Department of Community Correction. The cost report shall be a representative sample of all counties housing and caring for state inmates. The report shall be submitted no later than July 1 of the calendar year immediately following the reporting year.

The Association of Arkansas Counties in coordination with Legislative Audit shall determine which counties will be included in the sample and shall include a sufficient number of counties from each classification based upon population and each congressional district to ensure a fair report shall be developed by the Division of Legislative Audit in coordination with the Association of Arkansas Counties. The Division of Legislative Audit shall test the accuracy of the information submitted during the routine audit of the applicable county.

The provision of this section shall be in effect only from July 1, 2009 through June 30, 2010.

Section 34 of Act 114 of 2011 extended the provisions of the section to June 30, 2013.

Due to insufficient bed space for state prisoners, the county jails of Arkansas are often used to house state prisoners until space becomes available in state prison facilities. The State of Arkansas assumes the cost of housing these inmates when they have been convicted by the Arkansas court system. In fact, the reimbursement calculation begins on the date of sentencing if the judgment and commitment order is received by the Department of Correction not later than twenty-one (21) days from the sentencing date — or in the case of the Department of Community Correction if the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received not later than twenty-one (21) days from either the date of sentencing or the date of placement on probation accompanied with incarceration. If the proper paperwork is not remitted to the applicable state agency within the first twenty-one (21) days after sentencing the reimbursement is started from the day that the paperwork is received by the agency. We feel that this is an acceptable rule. An onus for an elected official to act and perform in a timely manner is reasonable. [Reference: ACA 12-27-114]

The Arkansas State Legislature in recent years has appropriated about \$9.5 million per year for County Jail Reimbursement. This amount has historically been insufficient by several million dollars which necessitates a supplemental appropriation by the legislature when they convene in order to catch up and fulfill their duty in paying counties for housing state prisoners.

Although the State of Arkansas pays county government a daily per diem for housing state inmates from the date of sentencing, if the proper paperwork is filed in a timely manner, they do not take on the liability of medical costs of a state prisoner until day 31 [ACA 12-27-11(c)(1)(2)].

Objective

Our objective was to comply with Section 39, Act 1285 of 2009 and Section 34, Act 1114 of 2011 and secure a representation sample of the cost for housing state inmates in the county jails of Arkansas.

Scope and Methodology

The "cost report" was conducted for the time period January 1, 2011 through December 31, 2011 – since Arkansas county government operates on a calendar year. Guidelines for preparing the cost report were developed by the Division of Legislative Audit in coordination with the Association of Arkansas Counties. The guidelines are very similar to the guidelines developed several years ago by the Division of Legislative Audit and the Department of Correction to ascertain the same type of information. We have included a copy of the guidelines and instructions for the Inmate Cost Report in this report to the Arkansas Legislative Council.

The law required that a sufficient number of counties from each population classification and each congressional district be included to ensure a fair representation of costs incurred. The State of Arkansas has divided the counties of Arkansas into 7 population classifications with Class 1 being the smallest and Class 7 being the largest. There are eleven (11) Class 1 counties with populations up to 9,999; twenty-seven (27) Class 2 counties with populations of 10,000 to 19,999; fifteen (15) Class 3 counties with populations of 20,000 to 29,999; eight (8) Class 4 counties with populations of 30,000 to 49,999; four (4) Class 5 counties with populations of 50,000 to 69,999; seven (7) Class 6 counties with populations of 70,000 to 199,999; and three (3) Class 7 counties – 200,000 population and above. Among the congressional districts, District 4 is the largest in land area and the number of counties – followed closely by District 1. Districts 2 and 3 are much smaller in land mass and the number of counties per district.

The Association of Arkansas Counties in coordination with the Division of Legislative Audit chose the following fifteen (15) counties from which to secure data:

COUNTY	<u>CLASS</u>	CONGRESSIONAL DISTRICT
Cleveland County	1	4
Woodruff County	1	1
Lee County	2	1
Marion County	2	3
Perry County	2	2
Carroll County	3	3
Clark County	3	4
Poinsett County	3	1
Greene County	4	1
Hot Spring County	4	4
Crawford County	5	3
Crittenden County	5	1
Faulkner County	6	2
Jefferson County	6	4
Pulaski County	7	2

We believe that this cost report, comprised of information from these fifteen (15) counties, is a fair representation sample of all counties housing and caring for state inmates.

Prisoner Care Reimbursement Request Procedure

In accordance with state law, in the first week of each month the Department of Correction and the Department of Community Correction prepares an invoice for each inmate received from a county during the previous month. The invoice reflects the number of days an inmate was in the county jail in an awaiting-bed-space status. The Department of Correction and the Department of Community Correction verifies and forwards the invoices to the applicable county sheriff to certify the actual number of days the sate inmates were physically housed in the county jail. The certified invoices are then returned to the Department of Correction and the Department of Community Correction for payment from the County Jail Reimbursement Fund.

This method and system for reimbursement was developed through legislation in 2003 and has worked well.

Per Diem

The current rate of reimbursement to the counties of Arkansas for housing state prisoners is \$28 per day. This amount includes care, custody, treatment, and transportation of prisoners.

In our review of per diem rates, the Governor and the Chief Fiscal Officer of the State approved the reimbursement rate from \$25 to \$28 per day effective July 1, 2001. It is still \$28 per day some eleven (11) years later.

According to ACA 12-27-130, both the Governor and the Chief Fiscal Officer of the State must approve any increase in the reimbursement rate. And, of course, it does no good to increase the reimbursement rate if you don't increase the appropriation to fund the increased rate.

Per Diem History

Act 737 of 1981 provide for reimbursements to Arkansas counties for housing state inmates until adequate space become available at the Arkansas Department of Correction (ADC). This initial Act provided appropriation and supplemental funding, not to exceed a cumulative reimbursement total of \$100,000 for each years of the 1982 – 1983 biennium. This Act also stated that the rate paid to counties could be between \$8 per day for that biennium based on both the amount of money available for distribution and an estimate of the number of inmates that would be held by the counties during that year. It was an arbitrary number based more on the amount of money appropriated than on actual costs. The legislation also stipulated that reimbursement requests exceeding the appropriated funding would receive priority payment against funds of the year immediately following that fiscal year. ADC continues to employ this method to pay invoices carried forward from a previous fiscal year.

In 1985, the Board of Corrections began using varying rates for reimbursements, according to costs submitted by each county, up to a maximum of \$18 per day. This procedure continued until 1991 when the reimbursement rate per prisoner per day was increased to \$25 for local governments. The reimbursement rate was raised to \$28 per prisoner per day, effective July 1, 2001, with the new rate to include care, custody, treatment, and transportation of state prisoners. The \$28 rate is the current rate.

Inmate Cost Report – 2011 State Inmate Cost Per Day

County/Beds	Class	<u>District</u>	Cost Per Day
Cleveland County (10)	1	4	\$ 238.97 Page 6
Woodruff County (24)	1	1 .	\$ 83.78 Page 7
Lee County (1632*)	2	1	\$ 31.80 Page 8
Marion County (19)	2	3	\$ 98.27 Page 9
Perry County (28)	2	2	\$ 27.01 Page 10
Carroll County (96)	3	3	\$ 47.88 Page 11-12
Clark County (50)	3	4 .	\$ 52.92 Page 13-14
Poinsett County (136)	3	1	\$ 21.51 Page 15
Greene County (110)	4	1	\$ 32.31 Page 16
Hot Spring County (50)	4	4	\$ 43.96 Page 17
Crawford County (88)	5	3	\$ 56.84 Page 18
Crittenden County (359)	5	1	\$ 38.53 Page 19
Faulkner County (336)	6	2	\$ 87.92 Page 20-21
Jefferson County (315)	6	4	\$ 24.03 Page 22
Pulaski County (1130)	7	2	\$ 73.50 Page 23-33

^{*}Lee County houses prisoners in the Arkansas Department of Corrections – East AR Correctional Unit

The average "cost per day" of the fifteen (15) counties is \$63.95. Deleting the extremes – the low of \$21.51 and the high of \$238.97 reduces the average "cost per day" to \$53.75.

We believe this fifteen (15) county average is indicative of the state-wide average. The \$53.75 cost per day is slightly higher than the surveys of recent years that included other counties.

A.	General Information			
	Jail Facility Name:	Cleve Co Detention	Total State Inmate Days:	485
	County:	Cleveland	Total Inmate Days:	1093
	Jail Facility Capacity (# Beds):	10	Percentage of State Inmate Days:	44.37%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	217,681.36		
	Utilities	15,591.20		
	Food	9,489.55		
	Clothing			
	Insurance			
	Travel/Training			
	Capital Outlay	11,279.54		
	Other (attach list)			
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical	336.38		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)		
	supplies	1,489.47		
	equipment parts	5330.75		
	repairs and maint.	7,664.10		
	Total Expenditures to be Allocated		261,198.25	
c.	Reimbursements			
	Act 309 Contracts	N/A		
	State reimbursements for medical costs	N/A		
	Total Reimbursements		0.00	
_				
D.	Total Expenditures less Reimburs to be Allocated (B-C)	ements	261,198.25	
E.	Percentage of State Inmate Days	(From A)	44.37%	
F.	Total Allocated State Inmate Cost	s (D*E)	115,902.24	
G.	Total State Inmate Days (From A)		485	
н.	State Inmate Cost Per Day (F/G)		\$238.97	
	Source of Information:			

LOCAL GOVERNMENT INMATE COST REPORT

Α	. General Information			
	Jail Facility Name:	Woodruff County SO	Total State Inmate Days:	365
	County:	Woodruff	Total Inmate Days:	4,150
	Jail Facility Capacity (# Beds):	24	Percentage of State Inmate Days:	8.80%
В	. Expenditures to be Allocated:		·	
			a) Other	
	a) Direct Facility Expenditures:		Printing	
	Salaries & Benefits	216,073.17	Uniforms (officers)	
	Utilities	19,723.94	Postage	
	Food	20,333.29	Special/Legal	
	Clothing	4,292.09	Telephone	
	Insurance	69,529.75	Waste Disposal	
	Travel/Training	2,655.00	Janitorial	
	Capital Outlay	9,022.31	Building/Improvements	
	Other (attach list)	0.00	Misc.	
	b) Depreciation	0.00		
	c) Overhead	1,899.84		
	d) Treatment/Medical	1,171.26		
	e) Education/School	2,996.26		
	f) Other Ancillary Costs (Please list e	each separately)		
		0.00		
		0.00		
	Total Expenditures to be Allocated		347,696.91	
C	Reimbursements		,	
C.	Act 309 Contracts	0.00		
	State reimbursements for			
	medical costs	0.00		
	Total Reimbursements	0.00	0.00	
	Total Neimbarberneits	V		
D.	Total Expenditures less Reimburser	nents		
	to be Allocated (B-C)		347,696.91	
E.	Percentage of State Inmate Days (F	rom A)	8.80%	
F.	Total Allocated State Inmate Costs	(D*E)	30,580.57	
G.	Total State Inmate Days (From A)		365	
н.	State Inmate Cost Per Day (F/G)		\$83.78	
	Source of Information:			

٨	General Information				
А.	Jail Facility Name:	East AR Corr. Unit*		Total State Inmate Days:	3,780
	County:	Lee		Total Inmate Days:	8,832
	Jail Facility Capacity (# Beds):	1632*		Percentage of State Inmate Days:	42.80%
	Jan racinty capacity (# beds).	1002		Tercentage of State minute buys.	12.0070
R.	Expenditures to be Allocated:				
٠.	Experience to be impossible.			a) Other	
	a) Direct Facility Expenditures:			Printing	
	Salaries & Benefits		0.00	Uniforms (officers)	
	Utilities		0.00	Postage	
	Food		0.00	Special/Legal	
	Clothing		0.00	Telephone	
	Insurance		0.00	Waste Disposal	
	Travel/Training		0.00	Janitorial	
	Capital Outlay		0.00	Building/Improvements	
	Other (attach list)		0.00	Misc.	
	b) Depreciation		0.00	111100.	
	c) Overhead		0.00		
	d) Treatment/Medical		0.00		
•	e) Education/School		0.00		
	f) Other Ancillary Costs (Please list e	ach senarately)	0.00		
	1) Other Anemary Costs (Flease list C	acir separately)	0.00		
			0.00		
			0.00		
	Total Expenditures to be Allocated			0.00	
	rotar Experience to be / moduted			0.00	
C.	Reimbursements				
٠.	Act 309 Contracts		0.00		
	State reimbursements for		0.00		
	medical costs		0.00		
	Total Reimbursements		0.00	0.00	
	Total Namburgernents			0.00	
D.	Total Expenditures less Reimburser	nents			
	to be Allocated (B-C)			0.00	
F	Percentage of State Inmate Days (F	rom A)		42.80%	
L.	referrage of state limitate Days (ion Aj		42.00%	
E	Total Allocated State Inmate Costs	(D*E)		0.00	
••	Total Allocated State Inflate Costs	(D L)		0.00	
G	Total State Inmete Dove /Frage A)			2772	
G.	Total State Inmate Days (From A)			3780	
ы	State Inmate Cost Per Day (F/G)			*****	
11.	State initiate Cost Per Day (P/G)			*\$31.80	

^{*} Lee County has a jail operating agreement with the Arkansas Department of Corrections and uses the East Arkansas Regional Unit as its jail. The state charges \$31.80 per day per prisoner and covers all costs. For inmates still under the custody of the Sheriff the state reimburses \$28.00 per day.

	Consult Information				
Α.	General Information	Marian	County CO	Total State Inmate Days	1068
	Jail Facility Name:		County S.O.	Total State Inmate Days: Total Inmate Days:	4337
	County:	Marior 19	<u> </u>	Percentage of State Inmate Days:	24.63%
	Jail Facility Capacity (# Beds):	19		Percentage of State Illinate Days.	24.03%
в.	Expenditures to be Allocated:				
	a) Direct Facility Expenditures:				
	Salaries & Benefits		359,872.23		
	Utilities	\$	12,103.92		
	Food	\$ \$	22,978.58		
	Clothing	\$	577.68		
	Insurance		21,484.23		
	Travel/Training		0.00		
	Capital Outlay		2,953.08		
	Other (attach list)				
	b) Depreciation		0.00		
	c) Overhead	\$	2,953.08		
	d) Treatment/Medical	\$	3,259.97		
	e) Education/School		0.00		
	f) Other Ancillary Costs (Please list	each se	parately)		
	Total Expenditures to be Allocated	1		426,182.77	
C.	Reimbursements				
	Act 309 Contracts		0.00		
	State reimbursements for				
	medical costs		0.00		
	Total Reimbursements			0.00	
D.	Total Expenditures less Reimburs	ements			
	to be Allocated (B-C)			426,182.77	
E.	Percentage of State Inmate Days	(From A))	24.63%	
F.	Total Allocated State Inmate Cost	s (D*E)		104,948.86	
G.	Total State Inmate Days (From A)			1068	
H.	State Inmate Cost Per Day (F/G)			\$98.27	
	Source of Information:				
	ADC, SOMS, MC Treasurer's office				

Δ.	General Information	•		
• • •	Jail Facility Name:	Perry County Detention Center	Total State Inmate Days:	2459
	County:	Perry	Total Inmate Days:	17196
	Jail Facility Capacity (# Beds):	28	Percentage of State Inmate Days:	14.30%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	299,497.56		
	Utilities	23,615.38		
	Food	123,604.57		
	Clothing	33.40		
	Insurance	2,035.49		
	Travel/Training	0.00		
	Capital Outlay	12,585.64		
	Other (attach list)			
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical	3,039.00		
	e) Education/School			
	f) Other Ancillary Costs (Please list	t each separately)		
		·		
	Total Expenditures to be Allocated	d	464,411.04	
C.	Reimbursements			
	Act 309 Contracts	0.00		
	State reimbursements for	0.00		
	medical costs			
	Total Reimbursements		0.00	
	, otal neima arsement			
D.	Total Expenditures less Reimburs	sements		
	to be Allocated (B-C)		464,411.04	
F.	Percentage of State Inmate Days	(From A)	14.30%	
٠.	reformage of state minute sups	(
F.	Total Allocated State Inmate Cos	ts (D*E)	66,410.02	
••		(/		
G	Total State Inmate Days (From A)	1	2459	
J.	Total State Himate Days (From A)		2433	
ш	State Inmate Cost Per Day (F/G)		\$27.01	
11.	State initiate cost Fei Day (F/G)		727.01	
	Source of Information:			
	Jource of Information.			

A.	General Information			
	Jail Facility Name:	Carroll Co. Det. Center	Total State Inmate Days:	7,890
	County:	Carroll	Total Inmate Days:	29,503
	Jail Facility Capacity (# Beds):	96	Percentage of State Inmate Days:	26.74%
В.	Expenditures to be Allocated:			1
	\		a) Other	1
	a) Direct Facility Expenditures:	070 746 47	Printing	
	Salaries & Benefits	970,746.17	Uniforms (officers)	
	Utilities	70,445.31	Postage	
	Food	71,747.76	Special/Legal	
	Clothing	6,575.21	Telephone	
	Insurance	24,230.60	Waste Disposal	
	Travel/Training	6,732.93	Janitorial	
	Capital Outlay	11,501.40	Building/Improvements	
	Other (attach list)	0.00	Misc.	
	b) Depreciation	0.00		
	c) Overhead	0.00		
	d) Treatment/Medical	85,369.34		
	e) Education/School	0.00		
	f) Other Ancillary Costs (Please list e	• • • • • • • • • • • • • • • • • • • •		
	See attached	194,650.15		
		0.00		
	Total Expenditures to be Allocated		1,441,998.87	
c.	Reimbursements			
	Act 309 Contracts	29,265.00		
	State reimbursements for			
	medical costs	0.00		
	Total Reimbursements	· · · · · · · · · · · · · · · · · · ·	29,265.00	
D.	Total Expenditures less Reimburser	ments		
	to be Allocated (B-C)		1,412,733.87	
E.	Percentage of State Inmate Days (F	rom A)	26.74%	
F.	Total Allocated State Inmate Costs	(D*E)	377,808.03	
G.	Total State Inmate Days (From A)		7890	
٠.	Total state initiate bays (From A)		7030	
н.	State Inmate Cost Per Day (F/G)		\$47.88	
	Source of Information: Pam Webb, Administrative Assistar Carroll County Sheriffs Office Arkansas Department of Correction Budget Section		t	*
		ns state inmate waiting lis	t	

OTHER EXPENDITURES

Printing & Supplies 5,536.43

General Office Supplies 4,645.96

Small Equipment 1,384.08

Janitorial Supplies 11,976.07

Chemicals & Cleaning 12,042.06

Fuel, Oil, and Lubricants 12,435.17

Tires 2,241.81

Building Materials & Supplies 4,375.96

Plumbing & Electrical 5,915.95

Repair Parts 2,064.87

Service Contracts 8,421.94

Telephone 13,923.48

Postage 3,114.31

Advertising 2,404.40

Building Improvements 2,579.91

Machinery & Equipment 86,289.23

Judgments 500.00

Miscellaneous 2,916.77

Other Professional Services <u>11,881.75</u>

194,650.15

Α.	General Information			
	Jail Facility Name:	Clark County Detention	Total State Inmate Days:	2,576
	County:	Clark	Total Inmate Days:	12,878
	Jail Facility Capacity (# Beds):	50	Percentage of State Inmate Days:	20.00%
в.	Expenditures to be Allocated:			•
			a) Other	
	a) Direct Facility Expenditures:		Printing	
	Salaries & Benefits	305,324.67	Uniforms (officers)	
	Utilities	59,693.05	Postage	
	Food	109,919.02	Special/Legal	
	Clothing	0.00	Telephone	
	Insurance	5,967.00	Waste Disposal	
	Travel/Training	0.00	Janitorial	
	Capital Outlay	0.00	Building/Improvements	
	Other (attach list)	94,672.64	Misc.	
	b) Depreciation	0.00		
	c) Overhead	0.00		
	d) Treatment/Medical	105,984.08		
	e) Education/School	0.00		
	f) Other Ancillary Costs (Please list			
		0.00		
		0.00		
	Total Expenditures to be Allocated		681,560.46	
_				
C.	Reimbursements	2.22		
	Act 309 Contracts	0.00		
	State reimbursements for			
	medical costs	0.00		
	Total Reimbursements		0.00	
D.	Total Expenditures less Reimburse	ments		
_	to be Allocated (B-C)		681,560.46	
E.	Percentage of State Inmate Days (I	rom A)	20.00%	
F.	Total Allocated State Inmate Costs	(D*E)	136,333.26	
G.	Total State Inmate Days (From A)		2576	
н.	State Inmate Cost Per Day (F/G)		\$52.92	
	Source of Information:			

OTHER EXPENDITURES

Medicine/Drugs

\$15,020.31

Misc. Law Enforcement

\$63,182.44 (Includes housing outside of Clark County)

Janitorial/Chemicals/Cleaning

\$5,079.63

Other Sundry Supply.

\$3,061.97

Plumbing & Electrical

\$4,402.71

Repair Parts

\$1,052.87

Misc. Labor

\$2,872.71

\$94,672.64

LOCAL GOVERNMENT INMATE COST REPORT

A.	General Information			
	Jail Facility Name:	Poinsett Co.De	, Total State Inmate Days:	8567
	County:	Poinsett	Total Inmate Days:	1529
	Jail Facility Capacity (# Beds):	136	Percentage of State Inmate Days:	
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	660,435.00		
	Utilities	130.746.00		
	Food	80,630.00		
	Clothing	1,757.00		
	Insurance	17,900.00		
	Travel/Training	-0-0		
	Capital Outlay	-0-		
	Other (attach list)	-0-		
	b) Depreciation	180,200.00		
	c) Overhead	130,556.00 30,363.00		
	d) Treatment/Medical	30,303.00		
	e) Education/School			
	f) Other Ancillary Costs (Please lis	t each separately)		
	A A A A A A A A A A A A A A A A A A A			
	Total Expenditures to be Allocate	d '	1,070,587 0.0	00
_	5. Audinos			
C.	Reimbursements	18.706.00		
	Act 309 Contracts State reimbursements for	42.706.00		
	medical costs	-0-		
	Total Reimbursements		47,116 0.0	00
	Total Kellindusements			<u> </u>
Ď.	Total Expenditures less Reimburg	sements		
	to be Allocated (B-C)			00
E.	Percentage of State Inmate Days	(From A)	18 %	
F.	Total Allocated State Inmate Cos	ts (D*E)	184,225,	
		-	THE STATE OF THE S	
G.	Total State Inmate Days (From A) · .	8567	0
н.	State Inmate Cost Per Day (F/G)		~	and the bord
	Source of Information:			

A.	General Information			
	Jail Facility Name:	Greene Co. Jail	Total State Inmate Days:	10,220
	County:	Greene	Total Inmate Days:	49,357
	Jail Facility Capacity (# Beds):	110	Percentage of State Inmate Days:	20.71%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	979,198.45	Jail Staff, Sheriff, Secretary	
	Utilities	97,943.24	•	
	Food	168,323.75		
	Clothing	6,622.50		
	Insurance	20,984.00		
	Travel/Training	7,094.07		
	Capital Outlay			
	Other (attach list)	88,328.40	Bedding \$9,630.32; Repairs \$78,698.0	8
	b) Depreciation	100,000.00		
	c) Overhead	61,005.23		
	d) Treatment/Medical	72,848.72		
	e) Education/School			
	f) Other Ancillary Costs (Please list	each separately)	*	
	legal expense	14,106.84		
	Total Expenditures to be Allocated	ı	1,616,455.20	
r	Reimbursements			
٠.	Act 309 Contracts	21,900.00		
	State reimbursements for	N/A		
	medical costs	1.47.		
	Total Reimbursements	21,900	21,900.00	
		·		
D.	Total Expenditures less Reimburs	ements		
	to be Allocated (B-C)		1,594,555.20	
E.	Percentage of State Inmate Days	(From A)	20.71%	
F.	Total Allocated State Inmate Cost	s (D*E)	330,173.11	
_	Tabel Chata Issues to Boson (Format)			
G.	Total State Inmate Days (From A)		10220	
н.	State Inmate Cost Per Day (F/G)		\$32.31	
	Source of Information:			

A.	General information Jail Facility name: County:	Hot Spring County Detention C		4,998.00 16,200.00
	Jail Facility Capacity (# Beds)	50	Percentage of State Inmate Days:	30.85
В.	Expenditures to be allocated:			
	A) Direct Facility Expenditure Salaries & Benefits Utilities Food Clothing Insurance Travel/Training Capital Outlay Other (attach list) B) Depreciation C) Overhead D) Treatment/Medical E) Education/School F) Other Ancillary Costs (Ple 3990.92 Total Expenditures to be	318,799.51 32,735.09 76,151.78 1,171.04 6,623.00 999.28 0.00 785.16 316,469.12 34,788.42 73,062.71 0.00 ase list each separately)	865,576.77	
c.	Reimbursements Act 309 Contracts State Reimbursements for med Total Reimbursements	13,470.00 dical costs 0.00	153,392.00	
D.	Total Expenditures less Reimbo To be allocated (B-C)	ursements	712,184.77	
E.	Percentage of State Inmate Da	ys (from A)	30.85	
F.	Total Allocated State Inmate Co	osts	219,709.00	
G.	Total State Inmate Days (From	A)	4,998.00	
н.	State inmate Cost Per Day (F/G	;)	43.96	
	Source of Information: Hot Sp	ring County Sheriff's Departmen	t	

A.	General Information	Crawford County Jail	Total State Inmate Days:	19,99
	Jail Facility Name: County:	Crawford	Total Inmate Days:	26,53
	Jail Facility Capacity (# Beds):	88	Percentage of State Inmate Days:	75.369
	Jan Facility Capacity (# Beus).		rescentage of State inmate Days.	
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	848,331.82		
	Utilities	70,513.29		
	Food	98,942.70	•	
	Clothing	9,897.61		
	Insurance			
	Travel/Training	1,528.93		
	Capital Outlay	81,473.98	•	
	Other (attach list)			
	b) Depreciation			
	c) Overhead	272,122.79		
	d) Treatment/Medical	98,960.16		
	e) Education/School	445.00		
	f) Other Ancillary Costs (Please list	each separately)		
	Special Projects	26,039.28		
	-			
				_
	Total Expenditures to be Allocated	• • • • •	1,508,255.56	5
_				
C.	Reimbursements			
	Act 309 Contracts	0.00		
	State reimbursements for	2.22		
	medical costs	0.00		
	Total Reimbursements		0.00	<u>, </u>
n	Total Expenditures less Reimburse	aments		
υ.	to be Allocated (B-C)	anicits	1,508,255.56	
F.	Percentage of State Inmate Days (From A)	75.36%	
	t c. cetage of state initiate bays (73.307	<u>-</u>
F.	Total Allocated State Inmate Cost	s (D*E)	1,136,606.11	L
		· · · -,		
	·			
G.	Total State Inmate Days (From A)		19995	5
				_
H.	State Inmate Cost Per Day (F/G)		\$56.84	<u>.</u>
	Source of Information:	Jeff Marvin, Crawford Co		
		Teresa Armer, Crawford	County Clerk	
	والمعارض وال	*****		
			•	

A,	General Information			
	Jail Facility Name:	Critt. Co. D etention	Total State Inmate Days:	24,818
	County:	Crittenden	Total Inmate Days:	107,354
	Jail Facility Capacity (# Beds):	359	Percentage of State Inmate Days:	23.12%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	3,043,678.00		
	Utilities	175,696.00		
	Food	360,784.00		
	Clothing	16,834.00	•	
	Insurance	51,234.00		
	Travel/Training	13,258.00		
	Capital Outlay	63,748.00		
	Other (attach list)	110,883.00		
	b) Depreciation			
	c) Overhead	What constitutes the constitute of the constitut		
	d) Treatment/Medical	295,897.00		
	e) Education/School	4,155.00		
	f) Other Ancillary Costs (Please list	each separately)		
	Dall'escuantiment of the theory	Lighten and the second	•	
		MANAGEMENT STATE OF THE STATE O		
	Total Expenditures to be Allocated		4,136,167.00	
C.	Reimbursements			
	Act 309 Contracts			
	State reimbursements for	TANKARAMAN AMATA AMAMAMAN PARAMAN INTERNATIONAL TOTAL		
	medical costs			
	Total Reimbursements	THE PARTY OF THE P	0.00	
-	Takal formulations to 12 to be			
U.	Total Expenditures less Reimburse	ments	440046700	
24	to be Allocated (8-C)	F44-4 NX	4,136,167.00	
£.	Percentage of State Inmate Days (rion aj	23.12%	
F.	Total Allocated State Inmate Costs	(D*E)	956,195.32	
G,	Total State Inmate Days (From A)	•	24818	
Н.	State Inmate Cost Per Day (F/G)		\$38.53	
	Source of Information:			

LOCAL GOVERNMENT INMATE COST REPORT

A.	General Information			
	Jail Facility Name:	Faulkner Co. Detention	Total State Inmate Days:	8204
	County:	Faulkner	Total Inmate Days:	97249
	Jail Facility Capacity (# Beds):	366	Percentage of State Inmate Days:	8.44%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits	4,240,515.48		
	Utilities	2,263,476.15		
	Food	270,075.04		
	Clothing	6,925.97		
	Insurance	40,740.00		
	Travel/Training	3,205.14		
	Capital Outlay	1,194.03		
	Other (attach list)			
	b) Depreciation	282,851.50		
	c) Overhead	3,484,922.67		
	d) Treatment/Medical	85,549.92		
	e) Education/School			
	f) Other Ancillary Costs (Please list of	each separately)		
	Total Expenditures to be Allocated		8,679,455.89	
C.	Reimbursements			
	Act 309 Contracts	109,155.00		
	State reimbursements for			
	medical costs	19,880.52		
	Total Reimbursements		129,035.52	
D.	Total Expenditures less Reimburse	ments		
	to be Allocated (B-C)		8,550,420.37	
E.	Percentage of State Inmate Days (F	From A)	8.44%	
		,		
F.	Total Allocated State Inmate Costs	(D*E)	721,320.00	
G.	Total State Inmate Days (From A)		8204	
			5204	
н.	State Inmate Cost Per Day (F/G)		\$87.92	
			707.32	
	Source of Information:			

Other

Bldg. maint	\$92,923.74
Prisoner housing & sup.	\$111,826.28
Office sup. & computer	\$58,484.64
Telephone	\$19,616.83
-	•
Total	\$282,851.49

Δ.	General Information			
۸.	Jail Facility Name:	Dub Brassell Detention	Total State Inmate Days:	19,340
	County:	Jefferson	Total Inmate Days:	109,500
	Jail Facility Capacity (# Beds):	315	Percentage of State Inmate Days:	17.66%
В.	Expenditures to be Allocated:			
٠.	Expenditures to be 7 moduled.		a) Other]
	a) Direct Facility Expenditures:		Printing	1
	Salaries & Benefits	2,089,088.57	Uniforms (officers)	1
	Utilities	181,247.37	Postage	
	Food	325,808.67	Special/Legal	
	Clothing	27,434.15	Telephone	1
	Insurance	0.00	Waste Disposal	Ì
	Travel/Training	0.00	Janitorial	
	Capital Outlay	0.00	Building/Improvements	
	Other (attach list)	0.00	Misc.	
	b) Depreciation	0.00		
	c) Overhead	0.00		
	d) Treatment/Medical	7,184.00		
	e) Education/School	0.00		
	f) Other Ancillary Costs (Please list e			
	., - a	0.00		
		0.00		
	Total Expenditures to be Allocated		2,630,762.76	
				•
C.	Reimbursements			
	Act 309 Contracts	0.00		
	State reimbursements for			
	medical costs	0.00		
	Total Reimbursements		0.00	
D.	Total Expenditures less Reimburser	nents		
	to be Allocated (B-C)		2,630,762.76	
E.	Percentage of State Inmate Days (F	rom A)	17.66%	
F.	Total Allocated State Inmate Costs	(D*E)	464,647.96	ı
			•	
G.	Total State Inmate Days (From A)		19340	
н.	State Inmate Cost Per Day (F/G)		\$24.03	
	Source of Information: Major Tyra Tyler - Jefferson County	Sheriff's Office		

LOCAL GOVERNMENT INMATE COST REPORT

A.	General Information	ılaski County		
	Jail Facility Name: Re	eg. Det. Facility	Total State Inmate Days:	_56,608
	County:	Pulaski	Total Inmate Days:	322,205
	Jail Facility Capacity (# Beds):	1130	Percentage of State Inmate Day	ys: <u>#DIV/0!</u> 18%
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits		•	
	Utilities			
	Food			•
	Clothing			
	Insurance			
	Travel/Training			
	Capital Outlay	192,119.00		
	Other (attach list)	22,281,901.00		
	b) Depreciation	451,979.00		
	c) Overhead d) Treatment/Medical			
	e) Education/School	Om 464 00		
	f) Other Ancillary Costs (Please I	95,661.00	(salaries for 1 Sgt. 1	
	if Other Ancillary Costs (Flease I	ist each separatery,	these totals were ded	ucted from salaries abov
	Sheriff's Salary	91,593.00		
	Total Expenditures to be Allocat	ed	23,113,253.00	0.00
c.	Reimbursements			
/1º -	Act 309 Contracts		•	
• •	State reimbursements for		•	
	medical costs			
	Total Reimbursements		- Lead of the Land	0.00
D.	Total Expenditures less Reimbu	rsements		
	to be Allocated (B-C)		23,113,253,00	0.00
E.	Percentage of State Inmate Day	s (From A)	18% #DIV/0!	
_			4,160,385 _{#DIV/0!}	
F.	Total Allocated State Inmate Co	sts (D*E)	* * #DIV/0!	
•				
G.	Total State Inmate Days (From A	A)	56,608	0
	• .		73.50	
н.	State Inmate Cost Per Day (F/G)		#DIV/0!	
	Source of Information:			

PUL CO SHERIFF

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PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2011

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	NTY GENERAL INTION MEDICAL ACCOUNT NAME	CYTO REVISED BUDGET	CURRENT MONTH EXPENDITURES	YTD EXPENDITURES	OUTSTANDING ENCUMBRANCES	AVAILABLE BUDGET	CYTO PERCENT OF BUDGET REMAINING
001.000.240100.01.000000	SALARIES FULL-TIME	1,085,476,00	85,477.55	1,070,270.72	0.00	15,205.28	1.40
001.000.240100.02.000000		122,000.00	8,991.36	85,156.88	0.00	36,843.12	30.20
001.000.240100.05.000000	OVERTIME	57.344.00	5,372.23	24,110.03	0.00	33,233,97	57.96
001.000.240100.06,000000	SOCIAL SECURITY	116,378.00	10,529.60	92,727.42	0.00	23,650.58	20.32
001,000.240100.07.000000	RETIREMENT	196,904.00	18,581.92	154,304.26	0.00	42,599.74	20.32
001.000.240100.08.000000	ONE TIME PAY DISBURSEMENT	38,087.00	38,087.53	38,087.53	0.00	-0.53	0.00
001.000.240100.09.000000	HEALTH & LIFE INSURANCE	157,402.00	11,498.75	130,962.25	0.00	26,439.75	16.80
001.000.240100.10.000000		- 27,327.00	0.00	0.00	0.00	27,327.00	100.00
001,000,240100,11,000000	UNEMPLOYMENT INSURANCE	15,182.00	15,000.00	15,000.00	0.00	182,00	1.20
001.000.240100.13.000000	SHIFT DIFFERENTIAL	30,000.00	2,098.15	23,370.03	0.00	6,629,97	22.10
001.000.240100.16.000000	PRINTING & SUPPLIES	1,000.00	0.00	890.15	0.00	109.85	10.99
001.000.240100.17.000000	•	23,000.00	0.00	1,430.96	0.00	21,569.04	93.78
001.000.240100.18.000000	SMALL EQUIPMENT	14,000.00	0.00	576.62	0.00	13,423.38	95.88
001,000,240100,19,000000		2,000.00	384.62	384.62	0.00	1,615.38	80.77
001.000.240100.22.000000	MEDICINE AND DRUGS	236,897.00	52,212.50	267,170.95	0.00	-30,273.95	-12.78
001.000,240100,23.000000		1,029.00	0.00	0.00	0.00	1,029.00	100.00
001.000.240100.27.000000	OTHER SUNDRY	5,000.00	0.00	0.00	0.00	5,000.00	100.00
001.000.240100.47.000000	"MEDICAL, DENTAL AND HOSPITAL"	1,352,927.00	154,866.08	1,190,095.04	0.00	162,830.96	12.04
001.000.240100.48,000000	OTHER PROFESSIONAL SERVICE	7,442.00	727.22	7,380.48	0.00	61.52	
001.000.240100.52.000000	TRAVEL	1,000.00	0.00	0.00	0.00	1,000.00	0.83
001.000.240100.53.000000	"COMMON CARRIER, MEALS & LODGE	3,121.00	0.00	0.00	0.00	3,121.00	100.00
001.000.240100.54.000000		2,200.00	0.00	0.00	0.00		100.00
001.000.240100.55.000000		1,000.00	0.00	0.00	0.00	2,200.00	100.00
001.000.240100.64.000000		5,000.00	561.22	5,692.28		1,000.00	100.00
20 (10001E10 1001011000000		0,000.00	50 1.22	J,U32.20	0.00	-692.28	-13.85

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DECEMBER 2011

	GENERAL ON MEDICAL COUNT NAME	CYTD REVISED BUDGET	CURRENT MONTH EXPENDITURES	YTD EXPENDITURES	OUTSTANDING ENCUMBRANCES	AVAILABLE BUDGET	CYTD PERCENT OF BUDGET REMAINING
001.000.240100.68.000000 MA	ACHINERY AND EQUIPMENT	5,000.00	0.00	0.00	0.00	5,000.00	100.00
001.000.240100.71.000000 OT	THER	3,200.00	0.00	0.00	0.00	3,200.00	100.00
001.000.240100.73.000000 "DI	UES, MEMBERSHIPS, AND SUBSC	2,720.00	0.00	2,880.00	0.00	-160.00	-5.88
001.000.240100.79.000000 SE	MINAR/CONF/WORKSHOP REGIS	1,040.00	0.00	0.00	0.00	1,040.00	100.00
001.000.240100.88.000000 CC	OMPUTER SOFTWARE OR UPGRA	1,601.00	0.00	0.00	0.00	1,601.00	100.00
		3,515,277.00	404,388.73	1100 12	0.00	404,785.78	11.52

PUL CO SHERIFF



PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2011

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	ITY GENERAL IFF - DETENTION ACCOUNT NAME	CYTD REVISED BUDGET	CURRENT MONTH EXPENDITURES	YTD EXPENDITURES	OUTSTANDING ENCUMBRANCES	AVAILABLE BUDGET	CYTD PERCENT OF BUDGET REMAINING
001.000.240000.01.000000	SALARIES FULL-TIME	10,416,727.00	820,262.61	10,389,298.01	0.00	27,428.99	0.26
001.000.240000.05.000000	OVERTIME	567,363.00	56,914.28	423,861.42	0.00	143,501.58	25.29
001.000.240000.06.000000	SOCIAL SECURITY	873,977.00	94,538.89	859,914.98	0.00	14,062.02	1.61
001.000.240000.07.000000	RETIREMENT	1,481,717.00	159,034.56	1,387,304.82	0.00	94,412.18	6.37
001.000.240000.08.000000	ONE TIME PAY DISBURSEMENT	382,716.00	378,346.67	378,346.67	0.00	4,369.33	1.14
001.000.240000.09.000000	HEALTH/LIFE INSURANCE	1,613,010.00	128,516.46	1,478,984.08	0.00	134,025.92	8.31
001.000.240000.10.000000	WORKERS' COMPENSATION	205,599.00	0.00	0.00	0.00	205,599.00	100.00
001.000.240000.11.000000	UNEMPLOYMENT INSURANCE	114,246.00	41,000,00	45,000.00	0.00	69,246.00	60.61
001.000.240000.16.000000	PRINTING	15,325.00	1,041.57	15,553.16	0.00	-228.16	-1.49
001.000.240000.17.000000	GENERAL OFFICE SUPPLIES	40,245.46	8,099.20	43,459.23	0.00	-3,213.77	-7.99
001.000,240000.18.000000	SMALL EQUIPMENT	79,408.00	6,413.03	54,345.02	0.00	25,062.98	31.56
001.000.240000.19.000000	OTHER SUNDRY	5,011.00	339.47	4,844.49	0.00	166,51	3.32
001.000.240000.20.000000	JANITORIAL SUPPLIES	49,648.00	13,015.66	59,065.92	0.00	-9,417.92	-18.97
001.000.249000.21.000000	CHEMICALS & CLEANING	36,993.00	1,465.16	9,773.31	0.00	27,219.69	73.58
001.000,240000.22.000000	MEDICINE & DRUGS	9,512.00	0.00	627.46	0.00	8,884.54	93.40
001.000.240000.23.000000	FOOD	1,181,025.00	169,408.58	1,154,283.23	0.00	26,741.77	2.26
001.000.240000.24.000000	CLOTHING & UNIFORMS	120,031.48	2 ,6 54.48	116,162.37	0.00	3,869.11	3.22
001.000.240000.25.000000	"FUEL, OIL & LUBRICANTS"	120,136.00	12,211.77	111,278.74	0.00	8,857.26	7.37
001.000.240000.26.000000	TIRES & TUBES	5,478.00	544.75	5,741.24	0.00	-263.24	-4.81
001,000.240000.27.000000	OTHER SUNDRY	7,000.00	0.00	6,825.07	0.00	174.93	2.50
001.000.240000.28.000000	BUILDING MATERIALS & SUPPLIES	11,000.00	106.24	6,733.96	0.00	4,266.04	38.78
001.000.240000.29.000000	PAINTS & METALS	14,000.00	346,63	6,551.76	0.00	7,448.24	53.20
001.000.240000.30.000000	PLUMBING & ELECTRICAL	86,654.78	2,856.18	85,794.64	0.00	860.14	0.99
001.000.240000.31.000000	REPAIR PARTS	18,697.00	1,940.82	15,925.15	0.00	2,771.85	14.83

PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2011

FUND 001 :4 DEPARTMENT 2400 :3 ACCOUNT NUMBER		TY GENERAL FF - DETENTION ACCOUNT NAME	CYTD REVISED BUDGET	CURRENT MONTH EXPENDITURES	YTD EXPENDITURES	OUTSTANDING ENCUMBRANCES	AVAILABLE BUDGET	CYTD PERCENT OF BUDGET REMAINING
001.000.240000.32.000	0000	MOTOR REPAIRS	4,000.00	0.00	0.00	0.00	4,000.00	100.00
001.000.240000.33.000	0000	SERVICE CONTRACTS	121,705.00	18,124.49	82,238,64	40,000.00	-533.64	-0.44
001,000.240000.38.000	0000	SMALL TOOLS	4,065.57	0.00	3,277.39	0.00	788.18	19.39
001.000.240000,48.000	0000	OTHER PROFESSIONAL SERVICES	27,000.00	9,189.05	28,988.97	0.00	-1,988.97	-7.37
001.000.240000.49.000	0000	TELEPHONE	61,818.00	7,240.88	54,952.80	0.00	6,865.20	11.11
001,000.240000.50.000	0000	POSTAGE	3,000.00	0.00	2,920.23	0.00	79.77	2.66
001.000.240000.55.000	0000	ADVERTISING	8,500.00	0.00	412.00	0.00	00.880,8	95.15
001.000.240000.61.000	0000	ELECTRICITY	520,662.00	53,826.56	522,551,68	0.00	-1,889.68	-0.36
001,000,240000.62,000	0000	GAS (NATURAL)	226,085.00	39,994.36	198,447.57	0.00	27,637.43	12.22
001,000.240000.63.000	0000	WATER	220,000.00	44,573.30	263,778.06	0.00	-43,778.06	-19.90
001.000.240000.64.000	0000	WASTE DISPOSAL	21,000.00	3,865.27	20,145.54	0.00	854.46	4.07
- 001.000.240000.65.000	0000	BUILDINGS & IMPROVEMENTS/REPA	76,781.00	45,196.00	62,187.85	2,882.00	11,711.15	15.25
001.000.240000.66.000	0000	MACHINERY & EQUIPMENT REPAIRS	148,607.82	18,645.31	143,708.76	0.00	4,899.06	3.30
001.000.240000.68.000	0000	MACHINERY & EQUIPMENT RENTAL	43,000.00	3,652.38	39,984.90	0.00	3,015.10	7.01
001.000.240000,69.000	0000	POSTAGE MACHINE/PO BOX RENTA	1,108.00	182.76	1,096.56	0.00	11.44	1.03
001.000.240000.71.000	0000	SOFTWARE LICENSE/HARDWARE L	548,000.00	46,616.00	594,382.11	0,00 .	-46,382.11	-8.46
001.000.240000.73.000	0000	DUES/MEMBERSHIP/SUBSCRIPTION	6,700.00	5,014.11	11,846.32	0.00	-5,146.32	-76.81
001.000.240000.78.000	0000	MISC. LAW ENFORCEMENT	19,500.00	0.00	19,347.26	0.00	152.74	0.78
001.000.240000.80.000	0000	PAUPERS & WELFARE	10,000.00	2,474.02	11,051.12	0.00	-1,051.12	-10.51
001.000.240000.84.000	0000	JUDGEMENTS & DAMAGES	167,500.20	0.00	167,500.20	0.00	0.00	0.00
001.000.240000.87.000	0000	OTHER MISCELLANEOUS	52,100.00	8,521.72	52,865.76	0.00	-765.76	-1.47
001,000,240000.88.000	0000	COMPUTER SOFTWARE/SOFTWARE	3,795.00	2,209.00	5,936.94	0.00	-2,141.94	-56.44
001.000.240000.93.000	0000	MACHINERY & EQUIPMENT	1,018,063.00	55,382.36	127,655,83	917,121.75	-26,714.58	-2.62
001.000.240000.94.000	0000	VEHICLES	276,522.18	0.00	192,119.36	84,349.00	53.82	0.02

2/2/2012

PULASKI COUNTY STATEMENT OF OPERATIONS

DECEMBER 2011

FUND 001 :COUNTY GENERAL CYTD :SHERIFF - DETENTION DEPARTMENT 2400 CYTD CURRENT PERCENT OF REVISED MONTH YTD **OUTSTANDING** AVAILABLE BUDGET ACCOUNT NUMBER ACCOUNT NAME BUDGET **EXPENDITURES** EXPENDITURES ENCUMBRANCES BUDGET REMAINING 21,045,032.49 2,263,764.58 **61044,352.75** 733,609.16 3.49

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REPORT: GLSUMMARY

GENERATED: 26 OCT 10 17:52

Report Parameters

Organization #: 1

Report Option : Account Range

Beginning Account # : 110_000.000000.00.000000

Ending Account # (110.009.999999.00.000000

Beginning Date : 01/01/11

Ending Date : 12/31/11

Range Of Account Types : All

Detail Option : Detail

Include Year End Closing Entries : Y

Print/Extract Option : Print Only

DREPORT: GLSUMMARY	GENERATED: 26 OCT 10 17:	:52	RUN: MONDAY MAR262012 10:11		PAGE 3
Account # Type Ref # Vendor/Whse	Account Name PO/Stock Bank Check #	† Date Description Project Grant Task	WO #	Credit	Balance
110,000,000000,00,00000	O COMMUNICATION FACILITY	/ EQUIP-ESCROW	Status A		
CR 0) .	10311 CR INTERFUND ENTRIES	126.40	0.00	126.40
CR 0	·	10711 CR INTERFUND ENTRIES	26589.46	0.00	26715.86
CR 0)	11311 CR INTERFUND ENTRIES	14880.00	0.00	41595.86
CR 0)	20111 CR INTERFUND ENTRIES	27561.39	0.00	69157,25
CR / C)	30111 CR INTERFUND ENTRIES	130.81	0.00	69288.06
CR C)	30311 CR INTERFUND ENTRIES	27589.25	0.00	96877.31
CR 0)	40111 CR INTERFUND ENTRIES	29865.31	0.00	126742.62
CR 0)	50211 CR INTERFUND ENTRIES	153.63	0.00	126896.25
CR C)	50311 CR INTERFUND ENTRIES	31014.76	0.00	157911.01
CR 0)	50911 CR INTERFUND ENTRIES	17590.00	0.00	175501.01
CR C)	60111 CR INTERFUND ENTRIES	28844.04	0.00	204345.05
CR ()	60611 CR INTERFUND ENTRIES	14300.00	0.00	218645.05

Page 1

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CR CR CR CR	0 0 0				90111 91311 91411	CR INTER CR INTER CR INTER CR INTER	FUND E	NTRIES NTRIES NTRIES			191.05 185.32 25476.50 14300.00 21079.87	0.00 0.00 0.00 0.00 0.00	281719.24 281904.56 307381.06 321681.06	
CR CR CR CR CR CR	0 0 0				100311 101811 110111 120111	CR INTER CR INTER CR INTER CR INTER CR INTER	FUND E FUND E FUND E	NTRIES NTRIES NTRIES NTRIES			28600.00 28265.89 184.56	0.00 0.00 0.00 0.00	342760.93 342925.91 371525.91 399791.80 399976.36 414276.36	
CR CR JE	0 0 9676				120611	CR INTER CR INTER COMMUNIC	FUND E	NTRIES	ry fund	т	14300.00 31096.79 0.00	0.00 0.00 451979.00-	445373.15	CR
							Accou	int Tota	1		445373.15		6605 . 850	CR
110.000.750000.00 GL	.000000 123111	UNEXPENDE	D FUND	BALANCE	123111	YEAREND			Status	Α .	6605.85	0.00	6605.85	
							ACCOL	ınt Tota	1 .		6605.85	0.00	6605.85	
110.000.801000.00 CR CR CR CR CR CR CR CR CR CR CR CR CR	.000000 11076 11194 11349 11509 11632 11785 11930 12050 12192 12301 12438 12576 123111	INTEREST	ON CHEC		20111 30111 40111 50211 60111 70111 80111 100311 110111 120111	INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST INTEREST YEAREND			Status	; A	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	126.40- 134.00- 130.81- 151.44- 153.63- 169.46- 176.39- 191.05- 185.32- 164.98- 184.56- 0.00	126 . 400 260 . 400 391 . 210 542 . 656 696 . 286 865 . 740 1042 . 133 1233 . 186 1418 . 500 1583 . 486 1764 . 289 1948 . 856	CR CR CR CR CR CR CR CR CR
OREPORT: GLSUMMAR	Υ (GENERATED:	26 ост	10 17:52	2				RUN: N	ONDAY	MAR262012 10:J	.1	PAGE	4
Account # Type R Vendor/Whse	ef#	Account N PO/Stock	lame Bank	Check #	Date Proje		scrip	tion Task	WO #		Debit	Credit	Balance	e

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PULASKI COUNTY REGIONAL DETENTION FACILITY												
DAILY POPULATION 2011											·	
Day of Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
							070	4005	4405	1050	4050	4404
1	1015	1115	999	973	1020	1069	970	1065	1105	1050	1050	1121
2	1031	1088	973	956	1028	1057	959	1060	1075	1075	1043	1111
3	1042	1087	979	971	1016	1034	988	1042	1073	1092	1057	1102
4	1031	1069	954	978	1003	986	989	1032	1072	1072	1041	1126
5	1018	1027	943	952	1013	994	1001	1048	1078	1054	1053	1024
6	1023	1039	962	942	1016	1012	981	1047	1103	1073	1067	1093
7	1031	1045	991	957	1011	1031	1002	1053	1104	1018	1074	1095
. 8	1046	1032	994	939	1018	989	996	1067	1120	1000	1091	1068
9	1066	1022	983	952	1034	996	1015	1053	1086	990	1100	1066
10	1067	1020	980	973	1018	1013	1022	1052	1108	1002	1118	1065
11	1080	1024	977	1004	1002	1017	1049	1058	1115	994	1095	1067
12	1057	1002	966	997	1009	1031	1027	1041	1130	1060	1077	1064
13	1068	1011	969	994	988	1066	1026	1028	1120	1075	1104	1023
14	1068	1031	997	982	990	1058	1037	1046	1104	1055	1123	985
15	1039	1025	997	987	1002	1047	1012	1059	1142	1046	1134	999
16	1042	1010	973	1003	1024	1025	1011	1048	1105	1061	1106	1009
17	1046	1004	980	1017	1018	1008	1020	1053	1061	1085	1112	1006
18	1058	998	948	1044	999	990	1026	1061	1071	1077	1106	1017
19	1054	983	994	1040	1001	1007	1023	1051	1096	1066	1083	1013
20	1063	1010	960	1011	1018	1024	1024	1044	1081	1052	1100	1035
21	1033	1012	973	1011	1002	1017	1019	1054	1086	1051	1114	1021
22	1035	1044	963	1011	1015	1010	1010	1065	1067	1064	1088	1004
23	1064	1021	976	992	1053	1047	1021	1076	1073	1069	1035	963
24	1074	1023	984	1010	1049	993	1050	1068	1071	1097	1027	982
25	1073	1005	977	1047	1047	985	1071	1075	1085	1062	1038	993
26	1105	973	963	1045	1077	1021	1070	1082	1104	1044	1049	1002
27	1112	986	973	1021	1041	1032	1055	1102	1076	1074	1081	1013
28	1108	1003	990	1033	1035	1026	1060	1109	1086	1061	1088	1024
29	1102	1000	986	1023	1069	999	1054	1118	1081	1054	1100	1024
30	1100		977	1010	1072	972	1024	1145	1078	1053	1111	999
31	1120		992	1010	1125	0,2	1048			1071		1014
31	1120		332		1120		1040			1071		1014
Total Daily Pop.	832971	28700	30273	20875	*31813	30556	31660	233010	32756	32697	32465	(32128
Avg. Daily Pop.	1060	1025	977	996	1026	1018	1021	1065	1092	1055	1082	1036
Avg. Daily State	178	163	145	151	176	113	75	92	86	72	73	83
Avg. Daily State	170	103	145	131	170	113		- J <u>L</u>	- 00		7.0	
Total Booked	1656	1406	1764	1678	1839	1937	2057	2107	2010	1985	1826	1771
	1656	3062	4826	6504	8343	10280	12337	14444	16454	18439	20265	22036
Total for Year	1000	3002	4020	0304	0343	10200	14331	1 4444	10434	10403	20200	22000
Dave Classet	31	28	31	30	22	0	0	0	0	0	0	0
Days Closed:	31	40	31	30		0	- 0		- 0		- 0	- 0
Voorly Ave Don	1038											
Yearly Avg. Pop.	117											
Yearly Avg. State	117											
Dave Closed Vr	142										,	
Days Closed Yr.	142											

PAYMENTS RECEIVED FROM ADC FOR 2011

Billing		Number of	PCRDF	ADC	PCRDF	ADC		Days
Date	Month	Inmates	Days	Days	Amount	Amt. Paid	Difference	Lost
2/14/2011	January	78	5,828	5,620	163,184.00	157,360.00	5,824.00	208
3/14/2011	February	120	7,947	6,980	222,516.00	195,440.00	27,076.00	967
4/12/2011	March	137	9,920	8,175	277,760.00	228,900.00	48,860.00	1,745
5/11/2011	April	46	2,514	2,056	70,392.00	57,568.00	12,824.00	458
6/14/2011	May	101	6,768	6,077	189,504.00	170,156.00	19,348.00	691
7/12/2011	June	101	7,785	7,118	217,980.00	199,304.00	18,676.00	667
8/15/2011	July	5 9	2,940	2,725	82,320.00	76,300.00	6,020.00	215
9/13/2011	August	47	2,128	1,704	59,584.00	47,712.00	11,872.00	424
10/12/2011	September	102	4,094	3,827	114,632.00	107,156.00	7,476.00	267
11/14/2011	October	48	1,213	1,166	33,964.00	32,648.00	1,316.00	47
12/12/2011	November	48	1,291	1,180	36,148.00	33,040.00	3,108.00	111
1/17/2012	December	99	3,176.00	3,308	92,624.00	88,928.00	3,696.00	132
				t.				
TOTAL		986	हिन्द्	5	1,560,608.00		166,096.00	5932

PAYMENTS RECEIVED FOR 2011:

Date	Ck. Amt.
4/11/2011	157,360.00 This is for January.
5/5/2011	195,440.00 This is for February.
5/23/2011	228,900.00 This is for March.
6/16/2011	57,568.00 This is for April.
7/21/2011	170,980.00 This is for May.
8/15/2011	199,304.00 This is for June.
9/15/2011	76,300.00 This is for July.
10/17/2011	47,712.00 This is for August.
11/15/2011	107,156.00 This is for September.
12/12/2011	32,648.00 This is for October.
1/17/2012	33,040.00 This is for November.
3/27/2012	88,928.00 This is for December. (Check was for 118,636.00 - Dec 2011 and Jan 2012)
Total	1,395,336.00

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ARKANSAS DEPARTMENT OF COMMUNITY CORRECTION 2011

Billing	Month	Number of	PCRDF	DCC	PCRDF	DCC Amt. Paid	Difference	Days Lost
Date	Month	Inmates	Days	Days	Amount			
2/14/2011	January	17	831	348	23,268.00	9,744.00	13,524.00	483
4/11/2011	February	12	495	145	13,860.00	4,060.00	9,800.00	350
5/25/2011	* February	3	99	99	2,772.00	2,772.00	0.00	0
4/11/2011	March	16	495	315	13,860.00	8,820.00	5,040.00	180
5/10/2011	April	· 5	293	184	8,204.00	5,152.00	3,052.00	109
6/21/2011	May	7	281	262	7,868.00	7,560.00	308.00	11
7/11/2011	June	17	672	348	18,816.00	9,744.00	9,072.00	324
8/11/2011	July	4	83		2,324.00			
9/14/2011	August	6	94		2,632.00			
10/13/2011	September	16	190	190	5,320.00	5,320.00	0	0
11/14/2011	October	11	145	145	4,060.00	4,060.00	0	0
12/12/2011	November	6	159	109	4,452.00	3,052.00	1,400.00	50
1/17/2012	December	17	343	258	9,604.00	7,224.00	2,380.00	85
Total		137	Z SED 3	2403	117,040.00	67,508.00	44,576.00	1,592

^{*} February I received these extra invoices on May 25, 2011 for inmates they didn't pay for in February.

Payments received for 2011:

TOTAL	67,508.00
3/12/2012	7,224.00 This is for December. (Received one check for 11,032.00 = Dec and Jan)
2/21/2012	3,052.00 This is for November.
1/10/2012	4,060.00 This is for October.
11/3/2011	5,320.00 This is for September.
8/30/2011	9.744.00 This is for June.
8/30/2011	7,336.00 This is for May. One check in amount of 17,080.00 was sent for May and June.
8/15/2011	5,152.00 This is for April. (\$1,176 was taken from February check and added to this)
8/15/2011	2,772.00 This is for other part of February that was left off.
5/16/2011	224.00 This was for two invoices from May 2010. One check \$13,104.00 for all.
5/16/2011	8,820.00 This is for March.
5/16/2011	4,060.00 This is for February.
5/23/2011	9,744.00 This is for January.

Appendix A

Applicable Arkansas Codes And Cost Per Day Methodology Guidelines/Instructions

12-27-114. Inmates in county jails - Reimbursement of County - Medical care.

- (a)(1)(A)(i) In the event the Department of Correction cannot accept inmates from county jails due to insufficient bed space, the Department of Correction shall reimburse the counties from the County Jail Reimbursement Fund at rates determined by the Chief Fiscal Officer of the State, after consultation and upon approval by the Governor, until the appropriation and funding provided for that purpose are exhausted.
- (ii) The reimbursement rate shall include the county's cost of transporting the inmates to the Department of Correction.
- (B)(i) Reimbursement shall begin on the date of sentencing if the judgment and commitment order is received by the Department of Correction not later than twenty-one (21) days from the sentencing date.
- (ii) If the judgment and commitment order is received by the Department of Correction twenty-two (22) or more days after the sentencing date, reimbursement shall begin on the date the Department of Correction receives the judgment and commitment order.
- (2)(A) In the event the Department of Community Correction cannot accept inmates from county jails due to insufficient bed space or shall have an inmate confined in a county jail under any prerelease program, the Department of Community Correction shall reimburse the counties from the fund at rates determined by the Chief Fiscal Officer of the State, after consultation with the division and the Department of Correction, and upon approval by the Governor, until the appropriation and funding provided for that purpose are exhausted.
- (B)(i) Reimbursement shall begin on either the date of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction if the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received by the Department of Community Correction not later than twenty-one (21) days from either the date of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction.
- (ii) If the judgment and commitment order or the judgment and disposition order, whichever is applicable, is received by the Department of Community Correction twenty-two (22) or more days after the date of sentencing or the date of placement on probation accompanied with incarceration in the Department of Community Correction, reimbursement shall begin on the date the Department of Community Correction receives either the judgment and commitment order or the judgment and disposition order, whichever is applicable.

- (b)(1)(A) In the first week of each month, the Department of Correction and the Department of Community Correction shall prepare an invoice for each inmate received from a county during the previous month.
- (B) The invoice shall reflect the number of days an inmate was in the county jail in an awaiting-bed-space status.
- (2)(A) The Department of Correction and the Department of Community Correction shall verify and forward the invoices to the applicable sheriff to certify the actual number of days the state inmates were physically housed in the county jail.
- (B)(i) Upon written request of a county judge, county treasurer, or county sheriff, the Department of Correction and the Department of Community Correction shall provide to the county official making the request of a written report summarizing the year-to-date county jail reimbursement invoices prepared and forwarded for verification by the Department of Correction and the Department of Community Correction and payment from the fund.
- (ii) In addition, the report shall include a summary of invoices returned by each county for payment for previous months within the fiscal year, the amounts paid, and any balances owed.
- (3) The certified invoices shall then be returned to the Department of Correction and the Department of Community Corrections for payment from the fund.
- (4) The sheriff shall maintain documentation for three (3) calendar years to confirm the number of days each inmate was housed in the county jail.
- (5) The documentation maintained by the sheriff is subject to review by the division.
- (c)(1) The Board of Corrections shall adopt regulations by which the Department of Correction or the Department of Community Correction may reimburse any county, which is required to retain an inmate awaiting delivery to the custody of either the Department of Corrections or the Department of Community Correction for more than thirty (30) days, for the actual costs paid for any emergency medical care for physical injury or illness of the inmate retained under this section of the injury or illness is directly related to the incarceration and the county is required by law to provide the care for inmates in the jail.
- (2) The Director of the Department of Corrections or his or her designee or the Director of the Department of Community Corrections or his or her designee may accept custody of any inmate as soon as possible upon request of the county upon determining that the inmate is required to have extended medical care.

History. Acts 1985, No. 648, § 19; 1991, No. 329, §§ 2, 3; 1991, No. 574, §§ 2, 3; 1991, No. 644, § 3; 1995, No. 316, § 13; 2003, No. 370, § 1; 2003(2nd Ex. Sess.), No. 16, § 1; 2005, No.2192, §1.

12-27-130. Reimbursement of County.

Notwithstanding any other provision of law or Department of Corrections' commitment which may exist to the contrary, the Board of Corrections shall not increase any reimbursement rate for payments made to any county for the purpose of reimbursing the expenses of the care and custody of state inmates without first seeking and receiving the approval of the Governor and the Chief Fiscal Officer of the State.

History. Acts 1993, No. 911, § 19; 1995, No. 158, § 13.

COST PER DAY METHODOLOGY LOCAL GOVERNMENT INMATE COST REPORT Calendar Year 2011 Guidelines/Instructions

GENERAL INFORMATION

The Local Government Inmate Cost Report for 2011, required by Section 34, Act 1114 of 2011, requires the Association of Arkansas Counties (AAC) to compile and submit a report to the Arkansas Legislative Council, of all costs incurred, excluding construction costs, by local government units housing inmates sentenced to the Department of Corrections and the Department of Community Corrections. The cost report shall be a representative sample of all counties housing and caring for state inmates.

The following guidelines were developed by the Division of Legislative Audit in coordination with AAC as required by Act 1114. The Local Government Inmate Cost Report must be submitted to the Arkansas Legislative Council the calendar year immediately following the reporting year. The following information is provided to assist in calculating the direct and indirect costs of housing state inmates. All documentation used in preparing this report should be properly maintained. The Division of Legislative Audit will test the accuracy of the information submitted. Please compile the information utilizing the format provided on the attached spreadsheet and send to:

Mr. Chris Villines, Director Association of Arkansas Counties 1415 West Third Street Little Rock, Arkansas 72201

DEFINITIONS

- A. STATE INMATES Inmates held who have been committed to the Arkansas Department of Correction (ADC) or Arkansas Department of Community Correction (ADCC) or held as a result of revocation of parole. Recognizing that the jail census may fluctuate daily, total state inmate days should accumulate the number of state inmates held daily by the population count at midnight. Do not include Act 309 inmates housed by contractual agreement.
- **B.** County Inmates All other inmates and jail detainees housed by the local jail facility including Act 309 inmates.
- C. Allocation of Costs Accumulate the number of inmates housed each day throughout the calendar year for which costs are being reported (exclude all inmates that may be housed in other facilities). The accumulation shall result in the total inmate days. The number of days state inmates are held in proportion to the total facility census days shall be used to determine allocated costs for state inmates. The total facility costs as determined below should be multiplied by the percentage of state inmate days that were a proportion of the total census days of the facility.

METHODOLOGY/INSTRUCTIONS FOR COST REPORTING (see related attached form)

A. General Information – Please list the jail facility name, county in which the facility is located, jail facility capacity, total state inmate days, and total inmate days in the space provided. Divide the

Total State Inmate Days by the Total Inmate Days to obtain the Percentage of State Inmate Days.

- B. Total Expenditures to be Allocated (January December 2011)
 - a. **Direct Facility Expenditures** Record only the direct facility expenditures for housing inmates. Direct facility expenditures are determined as follows:
 - Record all expenditures in a manner that provides for the association of costs for the facility. This shall include the cost of salaries, wages, payroll taxes, and other miscellaneous payroll-related benefits for all employees directly engaged in housing inmates, including the Sheriff. Also include maintenance and operations expenditures such as utilities, clothing, insurance, travel, training, food, etc. (only exclude costs for depreciation, overhead, treatment/medical, education/school, and other ancillary costs that are to be reported separately);
 - Include capital outlay expenditures other than construction costs. Be sure to include any interest expense on indebtedness to purchase capital outlay items other than construction.
 - > Include the matching requirements associated with federal grant expenditures.

 Documentation must be maintained sufficient to identify such costs by grant.
 - b. Depreciation Expense Include depreciation expenses for all fixed assets relating to the housing of state prisoners. Examples of fixed assets include buildings housing inmates, related furnishings, electronic equipment and vehicles used for the jail. Another County Official may already retain this information in a computer program such as the Fixed Asset Tracking System (FATS). Otherwise, depreciation for each asset may be calculated using the following formula:

Original cost of asset/ Asset's useful life= Annual Depreciation Expense

Suggested useful lives: Buildings 25 years

Furnishings & Equipment 5 years

Note: Depreciation expense is \$0 if the years of ownership have exceeded the asset's useful life.

Example: Computer purchased in 2008 for \$5,000 with a useful life of 5 years \$5,000/5 years=\$1,000 annual depreciation expense for 2008-2012 Depreciation expense for 2012 and subsequent years =\$0.

- c. Overhead Expense Include administrative or other expenditures that are not directly attributable to the operation of the jail facility such as the Sheriff's office expenditures/ Do not include any expenditure that is reported with the Direct Facility Expenditures.
- d. Education/School Include educational and rehabilitation costs that are also made available to state inmates. This should include costs incurred by the local government unit or other public agencies.

- e. Other Ancillary Costs Include any remaining ancillary costs incurred by the local government unit not specifically indentified or included above. List each item individually in space provided.
- C. Reimbursements Include any amounts received from city, county, state or federal sources specifically allocated for operation of county/jail detention facilities (county aid funds, state payments for Act 309 contract inmates, federal reimbursements, any reimbursements received for meals, medical, etc. do not include reimbursements received from ACD or ADCC for housing state inmates) if such funds offset costs included in direct facility or administrative costs for housing "county" inmates as previously defined.
- **D.** Total Expenditures less Reimbursement to be Allocated Deduct Total Reimbursements (c.) form Total Expenditures to be Allocated (B.).
- E. Percent of State Inmate Days Insert amount calculated in General Information (A.).
- F. Total Allocated State Inmate Costs Multiply Total Expenditures less Reimbursements to be Allocated (D.) times Percentage of State Inmate Days (E.).
- G. Direct Safe Inmate Expenditures-Medical Costs Include expenditures incurred during the initial 30-day period from the date of commitment for state inmates. Medical expenses incurred after thirty (30) days are paid by ADC or ADCC. Do not include any costs for medical expenditures of county inmates.
- **H.** Total State Inmate Costs Add Total Allocated State Inmate Costs (F.) to Direct State Inmate Expenses (G.).
- Total State Inmate Days Enter the Total State Inmate Days from the General Information (A.).
 Each local unit must maintain documentation of number of inmates housed. Documentation will be reviewed by the Division of Legislative Audit.
- J. State Inmate Cost Per Day Divide the Total State Inmate Costs (H.) by the Total State Inmates Days (I.).

A.	General Information Jail Facility Name:		Total State Inmate Days:	
	County:		Total Inmate Days:	
	Jail Facility Capacity (# Beds):	1	Percentage of State Inmate Days:	#DIV/0!
В.	Expenditures to be Allocated:			
	a) Direct Facility Expenditures:			
	Salaries & Benefits			
	Utilities			
	Food			
	Clothing			
	Insurance			
	Travel/Training			
	Capital Outlay			
	Other (attach list)			
	b) Depreciation			
	c) Overhead			
	d) Treatment/Medical			
	e) Education/School			
	f) Other Ancillary Costs (Please list e	each separately)		
	Total Expenditures to be Allocated		0.00	
C.	Reimbursements			
	Act 309 Contracts			
	State reimbursements for			
	medical costs			
	Total Reimbursements		0.00	
D.	Total Expenditures less Reimburser	ments		
	to be Allocated (B-C)	none.	0.00	
E.	Percentage of State Inmate Days (F	rom A)	#DIV/0!	
	t disentage of state innate pays (i		110170.	
F.	Total Allocated State Inmate Costs	(D*E)	#DIV/0!	
G.	Total State Inmate Days (From A)		0	
Н.	State Inmate Cost Per Day (F/G)		#DIV/0!	
	Source of Information:			