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LEGISLATIVE JOINT AUDITING COMMITTEE ARKANSAS LEGISLATIVE AUDIT

November 7, 2016

Senator Bill Sample, Co-Chair Representative David Branscum, Co-Chair Arkansas Legislative Council One Capitol Mall, 5th Floor Little Rock, AR 72201

Senator Sample and Representative Branscum:

Section 34 of Act 266 of 2016 required the Association of Arkansas Counties to compile and submit a Local Government Inmate Cost Report to the Arkansas Legislative Council demonstrating the costs incurred by selected county governments housing state inmates. This section also requires the Arkansas Legislative Audit to test the accuracy of the information submitted. Attached for your review is a listing by county of the State Inmate Cost Per Day reported by the Association of Arkansas Counties and the State Inmate Cost Per Day verified by the Arkansas Legislative Audit.

DIVISION OF LEGISLATIVE AUDIT

Roger A. Norman, J.D., CPA, CFE Legislative Auditor

RAN:ms

INMATE COST REPORT - 2015 COMPARISON OF COST PER DAY REPORTED AND VERIFIED

| | Cost | t per Day | Cost | per Day | | |
|----------------------|------|-----------|------|---------|------|---------|
| COUNTY | Re | ported | Ve | rified | Diff | erence |
| Pulaski | \$ | 94.24 | \$ | 63.76 | \$ | (30.48) |
| Columbia* | \$ | 42.39 | \$ | 57.20 | \$ | 14.81 |
| Crawford | \$ | 45.29 | \$ | 45.11 | \$ | (0.18) |
| Faulkner | \$ | 30.00 | \$ | 39.34 | \$ | 9.34 |
| Franklin | \$ | 40.04 | \$ | 46.76 | \$ | 6.72 |
| Greene | \$ | 30.66 | \$ | 35.02 | \$ | 4.36 |
| Howard | \$ | 49.02 | \$ | 48.88 | \$ | (0.14) |
| Independence | \$ | 35.21 | \$ | 37.75 | \$ | 2.54 |
| Lonoke | \$ | 28.37 | \$ | 25.32 | \$ | (3.05) |
| Miller* | \$ | 45.19 | \$ | 57.81 | \$ | 12.62 |
| Nevada** | \$ | 55.31 | \$ | 91.01 | \$ | 35.70 |
| Poinsett | \$ | 27.06 | \$ | 53.85 | \$ | 26.79 |
| Saline | \$ | 44.63 | \$ | 35.72 | \$ | (8.91) |
| Washington | \$ | 66.98 | \$ | 63.98 | \$ | (3.00) |
| Woodruff | \$ | 51.59 | \$ | 37.82 | \$ | (13.77) |
| | | | | | | |
| average | \$ | 45.73 | \$ | 49.29 | \$ | 3.56 |
| average without high | | | | | | |
| and low | \$ | 43.44 | \$ | 47.92 | \$ | 4.49 |

* Total Inmate days and state inmate days could not be verified

** Total inmate days could not be verified

<u>State Inmate Cost Study for Calendar Year 2015</u> <u>Executive Summary</u>

Introduction

This report is being issued in compliance with Section 34 of Act 266 of 2016 which requires 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 presentation of costs incurred. Guidelines for preparing this cost 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 provisions of this section shall be in effect only from July 1, 2016 through June 30, 2017.

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 in excess of \$10 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. Beginning

in 2013 we have found a trend of rapid increase in numbers of state prisoners housed in county facilities, largely due to the fact that parole revocations have increased in frequency. At the time of this report, in excess of 1,500 state prisoners are being housed in county facilities. This is an notable improvement of over 2,800 state prisoners at this time last year.

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. In 2015 the General Assembly recognized that the \$28/day reimbursement to house state inmates was insufficient, and passed a modest but appreciated increase in the reimbursement rate to \$30/day. However, the results of this year's study (prior to audit) revealed an average cost to the county of \$45.66/day among the 15 counties sampled. With the highest and lowest costs removed, the average cost (prior to audit) was \$43.66/day to house state inmates. The results indicate that the counties are still shouldering a substantial financial burden that is not being completely met by the current reimbursement rate.

<u>Objective</u>

Our objective was to comply with Section 34, Act 266 of 2016 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, 2015 through December 31, 2015 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:

| <u>COUNTY</u> | <u>CLASS</u> | CONGRESSIONAL DISTRICT |
|---------------|--------------|------------------------|
| Columbia | 3 | 4 |
| Crawford | 5 | 3 |

| Faulkner | 6 | 2 |
|--------------|---|---|
| Franklin | 2 | 4 |
| Greene | 4 | 1 |
| Howard | 2 | 4 |
| Independence | 4 | 1 |
| Lonoke | 5 | 1 |
| Miller | 4 | 4 |
| Nevada | 1 | 4 |
| Poinsett | 3 | 1 |
| Pulaski | 7 | 2 |
| Saline | 6 | 2 |
| Washington | 7 | 3 |
| Woodruff | 1 | 1 |

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

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 state 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.

<u>Per Diem</u>

The current rate of reimbursement to the counties of Arkansas for housing state prisoners is \$30.00 per prisoner per day. This amount includes care, custody, treatment, and transportation of prisoners.

Per Diem History

Act 737 of 1981 provided 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. \$28 was the reimbursement rate for 14 years, until the Governor approved an increase to \$30 per prisoner per day, effective for the fiscal year 2015.

| A. | General Information | | | |
|----|---------------------------------------|---------------------------------------|---------------------------------------|--------|
| | Jail Facility Name: | Columbia County Deten | t Total State Inmate Days: | 3805 |
| | County: | Columbia | Total Inmate Days: | 24549 |
| | Jail Facility Capacity (# Beds): | 93 | Percentage of State Inmate Days: | 15.50% |
| | | | - | |
| в. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 810 774 24 | | |
| | Utilities | <u>819,774.24</u> 67,131.62 | | |
| | Food | 103,500.10 | | |
| | Clothing | | | |
| | Insurance | 4,732.72 | | |
| | | 22,514.55 | | |
| | Travel/Training | 2,003.00 | | |
| | Capital Outlay | 0.00 | | |
| | Other (attach list) | 0.00 | | |
| | b) Depreciation | 0.00 | | |
| | c) Overhead | 0.00 | | |
| | d) Treatment/Medical | 21,030.19 | | |
| | e) Education/School | 0.00 | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | · · · · · · · · · · · · · · · · · · · | <u></u> | | |
| | Total Expenditures to be Allocated | | 1,040,686.42 | |
| | Total Expericitures to be Allocated | | 1,040,080.42 | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | | | |
| | State reimbursements for | · · · · · · · · · · · · · · · · · · · | | |
| | medical costs | | | |
| | Total Reimbursements | <u> </u> | 0.00 | |
| | | | · · · · · · · · · · · · · · · · · · · | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 1,040,686.42 | |
| Ε. | Percentage of State Inmate Days (| From A) | 15.50% | |
| _ | | 1 - 4 - X | | |
| F. | Total Allocated State Inmate Costs | s (D*E) | 161,302.37 | |
| | | | | |
| G | Total State Inmate Days (From A) | | 3805 | |
| J. | Total State Initiate Days (FIOIII A) | | | |
| Н. | State Inmate Cost Per Day (F/G) | | \$42.39 | |
| | | | | |
| | | | | |

| Α. | General Information | | | |
|----|--|-----------------------|--|--------|
| | Jail Facility Name: | Crawford County Deten | t Total State Inmate Days: | 15066 |
| | County: | Crawford County Deten | · · · · · · · | 35329 |
| | Jail Facility Capacity (# Beds): | 88 | Percentage of State Inmate Days: | 42.64% |
| | | | - | |
| Β. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 1,126,390.73 | | |
| | Utilities | 61,858.66 | | |
| | Food | 80,929.00 | | |
| | Clothing | 8,280.20 | | |
| | Insurance | 35,360.00 | | |
| | Travel/Training | 1,500.00 | | |
| | Capital Outlay | 0.00 | | |
| | Other (attach list) | 0.00 | | |
| | b) Depreciation | 0.00 | | |
| | c) Overhead | 104,500.00 | | |
| | d) Treatment/Medical | 144,198.47 | | |
| | e) Education/School | 0.00 | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | | | | |
| | | <u> </u> | | |
| | Total Expenditures to be Allocated | | 1,563,017.06 | |
| r | Reimbursements | | | |
| с. | Act 309 Contracts | 0.00 | | |
| | State reimbursements for | 0.00 | | |
| | medical costs | 0.00 | | |
| | Total Reimbursements | 0.00 | 0.00 | |
| | Total Nembursements | | | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 1,563,017.06 | |
| Ε. | Percentage of State Inmate Days | (From A) | 42.64% | |
| | | | · · · · · · · · · · · · · · · · · · · | |
| F. | Total Allocated State Inmate Cost | s (D*E) | 666,546.32 | |
| | | | | |
| _ | _ | | | |
| G. | Total State Inmate Days (From A) | | 15066 | |
| н | State Inmate Cost Per Day (F/G) | | \$44.24 | |
| | | | ۲.۲.۲ پر در میں | |
| | | | | |

| Α. | General Information | | |
|----|--|----------------------------------|----------------------------------|
| | Jail Facility Name: | Faulkner County Detention Center | Total State Inmate Days: |
| | County: | Faulkner | Total Inmate Days: |
| | Jail Facility Capacity (# Beds): | 484 | Percentage of State Inmate Days: |
| В. | Expenditures to be Allocated: | | |
| | a) Direct Facility Expenditures: | | |
| | Salaries & Benefits | 3,905,052.83 | |
| | Utilities | 249,108.84 | |
| | Food | 397,137.46 | |
| | Clothing | 8,758.68 | |
| | Insurance | 49,487.78 | |
| | Travel/Training | 8,313.99 | |
| | Capital Outlay | | |
| | Other (attach list) | | |
| | b) Depreciation | | |
| | c) Overhead | | |
| | d) Treatment/Medical | 209,838.84 | |
| | e) Education/School | | |
| | f) Other Ancillary Costs (Please list each | n separately) | |
| | From attached list | 546,947.00 | |
| | ****** | | |
| | Total Expenditures to be Allocated | | 5,374,645.42 |
| C. | Reimbursements | | |
| | Act 309 Contracts | 68,016.00 | |
| | State reimbursements for | | |
| | medical costs | 8,321.49 | |
| | Total Reimbursements | | 76,337.49 |
| | | | · |
| D. | Total Expenditures less Reimburseme | nts | |
| | to be Allocated (B-C) | | 5,298,307.93 |
| E. | Percentage of State Inmate Days (From | n A) | 27.21% |
| | | | |
| F. | Total Allocated State Inmate Costs (D* | *E) | 665,714.00 |
| | | | |
| G. | Total State Inmate Days (From A) | | 107226 |
| | | | |
| н. | State Inmate Cost Per Day (F/G) | | \$30.00 |
| | | | |

| 107,226 |
|------------|
| 394,135.06 |
| 27.21% |

| Α. | General Information | Freudin Co. Joil | Tatal Stata Jamata Davis | 4700 |
|----|---|--|--|----------|
| | Jail Facility Name: | Franklin Co. Jail Franklin | Total State Inmate Days: | 4726 |
| | County: Jail Facility Capacity (# Beds): | FIGHKIIN | Total Inmate Days: Percentage of State Inmate Days: | 30.56% |
| | Jan Facility Capacity (# Deus). | | Percentage of State Inflate Days. | |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 469,077.00 | | |
| | Utilities | 30,500.00 | | |
| | Food | 40,000.00 | | |
| | Clothing | 4,000.00 | | |
| | Insurance | •••••••••••••••••••••••••••••••••••••• | | |
| | Travel/Training | 6,250.00 | | |
| | Capital Outlay | | | |
| | Other (attach list) | | | |
| | b) Depreciation | | | |
| | c) Overhead | | | |
| | d) Treatment/Medical | 45,000.00 | Advance Correctional Healthcare | |
| | e) Education/School | | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | ACIC fees | 5,000.00 | | |
| | Misc Inmate Supplies | 31400 | | |
| | | \ | | |
| | Total Expenditures to be Allocated | | 631,227.00 | <u>)</u> |
| c. | Reimbursements | | | |
| | Act 309 Contracts | 11,856.00 | | |
| | State reimbursements for | <u> </u> | | |
| | medical costs | 0.00 | (included in ACH above) | |
| | Total Reimbursements | ······································ | 11,856.00 | <u>)</u> |
| ~ | | | | |
| υ. | Total Expenditures less Reimburse | ements | 610 271 0 | 'n |
| r | to be Allocated (B-C) | [From A] | 619,371.00 | _ |
| с. | Percentage of State Inmate Days | From A) | 30.56% | <u> </u> |
| F. | Total Allocated State Inmate Cost | s (D*E) | 189,251.14 | 1 |
| | | | | |
| G. | Total State Inmate Days (From A) | | 4726 | 5 |
| н. | State Inmate Cost Per Day (F/G) | | \$40.04 | 1 |
| | Source of Information | | | |

| A. | General Information | | | |
|----|---------------------------------------|---|----------------------------------|--------|
| | Jail Facility Name: | Walling and With the second | o Total State Inmate Days: | 20107 |
| | County: | Greene County | Total Inmate Days: | 73000 |
| | Jail Facility Capacity (# Beds): | 418 | Percentage of State Inmate Days: | 27.54% |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 1,512,541.09 | | |
| | Utilities | 89,992.35 | | |
| | Food | 429,246.54 | | |
| | Clothing | 12,525.81 | | |
| | Insurance | 214.00 | | |
| | Travel/Training | 1,295.97 | | |
| | Capital Outlay | | | |
| | Other (attach list) | | | |
| | b) Depreciation | | | |
| | c) Overhead | | | |
| | d) Treatment/Medical | 231,521.00 | | |
| | e) Education/School | 1,210.00 | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | Total Expenditures to be Allocated | | 2,278,546.76 | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | 28,872.00 | | |
| | State reimbursements for | · · · · · · · · · · · · · · · · · · · | | |
| | medical costs | 11,251.03 | | |
| | Total Reimbursements | | 40,123.03 | |
| | | | | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 2,238,423.73 | |
| Ε. | Percentage of State Inmate Days | (From A) | 27.54% | |
| F. | Total Allocated State Inmate Cost | s (D*E) | 616,547.75 | |
| | | | | |
| G. | Total State Inmate Days (From A) | | 20107 | |
| н. | State Inmate Cost Per Day (F/G) | | \$30.66 | |
| | | | · · · | |

| Α. | Howard County Detention | Fotal State Inmate Days: | 7313 |
|----|---|---------------------------------|------------|
| | Howard | Fotal Inmate Days: | 14967 |
| | 41 P | Percentage of State Inmate Days | 49% |
| B. | EXPENDITURES TO BE ALLOCATED: | | |
| | Direct Facility Expenditures: | | |
| | Salaries & Benefits | \$ | 548,467.09 |
| | Utilities | \$ | 39,347.97 |
| | Food | \$ | 52,838.17 |
| | Food | | |
| | Clothing | \$ | 9,008.97 |
| | Insurance | \$ | 2,000.00 |
| | Travel/Training | \$ | 1,074.19 |
| | Depreciation | \$ | 52,000.00 |
| | Overhead | | |
| | Treatment / Medical | \$ | 10,406.83 |
| | Debt Service | | |
| | Education/ School | | |
| | Other Ancillary Costs (Please List Each Separately | \$ | 54,234.53 |
| | Building Materials | | |
| | Plumbing | | |
| | MACHINERY & EQUIPMENT PURCHASES | | |
| | MACHINEY & EQUIPMENT REPAIRS | | |
| | JANITORIAL SUPPLIES | | |
| C. | TOTAL EXPENDITURES TO BE ALLOCATED REIMBURSEMENTS | \$ | 769,377.75 |
| | Act 309 Contracts | \$ | 37,824.00 |
| | Other Local reimbursements | | |
| D. | Total reimbursements TOTAL EXPENDITURES LESS REIMBURSEI to be allocated (B - C) | | 731,553.75 |
| E. | Percentage of State Inmate Days (From A) | | 49.00% |
| | Total Allocated State Inmate Costs (D*E) | \$ | 358,461.34 |
| G. | Total State Inmate Days (From A) | | 7313 |
| H. | State Inmate Cost Per Day (F/G) (add total allocated state costs (f) to direct s | \$ state inmate expenses (g) | 49.02 |

| - | General Information | | | |
|----|--|---|----------------------------------|--------|
| | Jail Facility Name: | Independence lo | Total State Inmate Days: | 10720 |
| | County: | Endre Dendrure | Total Inmate Days: | 18 138 |
| | Jall Facility Capacity (# Beds): | 118 | Percentage of State Inmate Days: | 45564 |
| | | | rereentage of state minate Days: | _41 |
| E | 3. Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | 6 a | | |
| | Salaries & Benefits | \$28,803.55 | | |
| | Utilities | \$ 92,353,90 | | |
| | Food | \$143,577.01 | | |
| | Clothing | #13.75.28 | | |
| | Insurance | #13.448.24 | | |
| | Travel/Training | 11,519.1.8 | | |
| | Capital Outlay | \$ 23 413.71 | | |
| | Other (attach list) | | | |
| | b) Depreciation | \$269 444 44 | | |
| | c) Overhead | \$188572.30 | | |
| | d) Treatment/Medical | \$ 69.114.92 | | |
| | e) Education/School | #25 | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | | an and a second s | | |
| | | · · · · · · · · · · · · · · · · · · · | 41111 | |
| | Total Expenditures to be Allocated | 1 | #1,641,648.03 | |
| | | | | - |
| c. | Reimbursements | A - | | |
| | Act 309 Contracts | \$32,268 | | |
| | State reimbursements for | | | |
| | medical costs | | | |
| | Total Reimbursements | | * 32.21.8.00 | |
| | | | | |
| D. | Total Expenditures less Reimburse | ements | #1. | |
| | to be Allocated (B-C) | | \$1,609,380.03 | |
| E. | Percentage of State Inmate Days (| From A) | 41 %0 | - |
| | | | 4 | |
| F. | Total Allocated State Inmate Cost | s (D*E) | \$659,845.81 | |
| | | | | - |
| | | | 10 | |
| G. | Total State Inmate Days (From A) | | 18,738 | - |
| | | | \$35.21 | |
| Н. | State Inmate Cost Per Day (F/G) | | : JJ. A | |

Sing Wilson

| A. | General Information | | | |
|------------|---------------------------------------|--|----------------------------------|--------|
| | Jail Facility Name: | Lonoke County | Total State Inmate Days: | 23268 |
| | County: | Lonoke | Total Inmate Days: | 53490 |
| | Jail Facility Capacity (# Beds): | ····· | Percentage of State Inmate Days: | 43.50% |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 1,051,470.35 | | |
| | Utilities | 106,672.03 | | |
| | Food | 161,674.45 | | |
| | Clothing | 12,471.74 | | |
| | Insurance | 31,593.01 | | |
| | Travel/Training | 2,209.81 | | |
| | Capital Outlay | <u> </u> | | |
| | Other (attach list) | | | |
| | b) Depreciation | Mar 19 19 19 19 19 19 19 19 19 19 19 19 19 | | |
| | c) Overhead | 104,920.67 | | |
| | d) Treatment/Medical | 53,682.14 | | |
| | e) Education/School | | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | Total Expenditures to be Allocated | | 1,524,694.20 | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | 7,428.00 | | |
| | State reimbursements for | | | |
| | medical costs | | | |
| | Total Reimbursements | | 7,428.00 | |
| п | Total Expenditures less Reimburse | aments | | |
| υ. | to be Allocated (B-C) | | 1,517,266.20 | |
| F. | Percentage of State Inmate Days (| From A) | 43.50% | |
| L . | rereentage of otate minate pays (| | | |
| F. | Total Allocated State Inmate Cost | s (D*E) | 660,006.54 | |
| G. | Total State Inmate Days (From A) | | 23268 | |
| н. | State Inmate Cost Per Day (F/G) | | \$28.37 | |
| | | | | |

| Α. | General Information | Miller County | T (10) (1) (1) | 40200 |
|----|---------------------------------------|------------------|----------------------------------|---------|
| | Jail Facility Name: | Detention Center | Total State Inmate Days: | 48208 |
| | County: | Miller | Total Inmate Days: | 48208 |
| | Jail Facility Capacity (# Beds): | 284 | Percentage of State Inmate Days: | 100.00% |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 1,557,787.00 | | |
| | Utilities | 177,000.00 | | |
| | Food | 350,000.00 | | |
| | Clothing | 40,000.00 | | |
| | Insurance | 40,000.00 | | |
| | Travel/Training | 5,000.00 | | |
| | Capital Outlay | 29,000.00 | | |
| | Other (attach list) | | | |
| | b) Depreciation | | | |
| | c) Overhead | | | |
| | d) Treatment/Medical | | | |
| | e) Education/School | <u> </u> | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | | | | |
| | | | | |
| | Total Expenditures to be Allocated | | 2,198,787.00 | |
| с. | Reimbursements | | | |
| | Act 309 Contracts | 20,028.00 | | |
| | State reimbursements for | | | |
| | medical costs | | | |
| | Total Reimbursements | | 20,028.00 | |
| | | | | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 2,178,759.00 | |
| Ε. | Percentage of State Inmate Days (| From A) | 100.00% | |
| F. | Total Allocated State Inmate Costs | s (D*F) | 2,178,759.00 | |
| •• | | / | 2,2,0,,33,00 | |
| | | | | |
| G. | Total State Inmate Days (From A) | | 48208 | |
| ц | State Inmate Cost Per Day (F/G) | | ርዝር ላጥ | |
| п. | State minate Cost Per Day (P/G) | | \$45.19 | |
| | | | | |

| А. | General Information | | | |
|----|---------------------------------------|--|----------------------------------|--------|
| | Jail Facility Name: | Nevada Co Jail | Total State Inmate Days: | 365 |
| | County: | Nevada | Total Inmate Days: | 3650 |
| | Jail Facility Capacity (# Beds): | 10 | Percentage of State Inmate Days: | 10.00% |
| | | | | |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 126 692 00 | | |
| | | 126,682.00 | | |
| | Utilities | 21,053.15 | | |
| | Food | 25,000.00 | | |
| | Clothing | 5,208.19 | | |
| | Insurance | 8,000.00 | | |
| | Travel/Training | 5,000.00 | | |
| | Capital Outlay | | | |
| | Other (attach list) | | | |
| | b) Depreciation | 0.00 | | |
| | c) Overhead | 2,500.00 | | |
| | d) Treatment/Medical | 15,000.00 | | |
| | e) Education/School | | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | | | | |
| | <u> </u> | Walaan ta'a daga daga daga daga daga daga daga d | | |
| | | ····· | | |
| | Total Expenditures to be Allocated | | 208,443.34 | |
| | | | | |
| с. | Reimbursements | | | |
| | Act 309 Contracts | 6,570.00 | | |
| | State reimbursements for | | | |
| | medical costs | 0.00 | | |
| | Total Reimbursements | | 6,570.00 | |
| | | | | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 201,873.34 | |
| F | Percentage of State Inmate Days (| From A) | 10.00% | |
| | reneemage of state inmate pays | | 10.0070 | |
| F | Total Allocated State Inmate Cost | s (D*F) | 20,187.33 | |
| | Total Anotated State Inmate Cost | 5(0 L) | | |
| | | | | |
| c | Total State Inmate Dave (Event A) | | 265 | |
| ы. | Total State Inmate Days (From A) | | 365 | |
| Н. | State Inmate Cost Per Day (F/G) | | \$55.31 | |
| | | | | |
| | Source of Information: | | | |
| | various | | | |
| | | | | |

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A 4

LOCAL GOVERNMENT INMATE COST REPORT CALENDAR YEAR 2015

| | Jail Facility Name: Poins | sett Co. Det.C: | n tri Total State Inmate Days: | 8567 |
|----------|--|---|---------------------------------------|--------|
| | County: | Poinsett | Total Inmate Days: | 1529 |
| | Jail Facility Capacity (# Beds): | 136 | Percentage of State Inmate Days; | A |
| B. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 693456.00 | | |
| | Utilities | 133,500.00 | . ¹ | |
| | Food | 95000.00 | | |
| | Clothing | 4000.00 | | |
| | Insurance | 18795.00 | | |
| | Travel/Training | -0- | | |
| | Capital Outlay | -0- | | |
| | Other (attach list) | -0- | | |
| | b) Depreciation | 189,210.00 | · · · · · · · · · · · · · · · · · · · | |
| | c) Overhead | 137,083.00 | | |
| | d) Treatment/Medical | 39,000.00 | | |
| | e) Education/School 👘 👘 🔒 | Annument and a second se | | |
| | f) Other Ancillary Costs (Please li | st each separately) | | |
| | | | | |
| | n MMARAT | | | |
| | Total Expenditures to be Allocate | ad | 1310044 00 | |
| | The second of th | -u | 1310044.00 | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | 21984.00 | | |
| | State reimbursements for | | _ | |
| | medical costs | 492.00 | - | |
| | Total Reimbursements | 3 | 22,476.00 | |
| | real nethoasements | , | | _ |
| | | | | |
| | Total Expenditures less Reimbur to be Allocated (B-C) | | 12,875,68.00 | |
| D. | Total Expenditures less Reimbur | sements | | - |
| D. E. | Total Expenditures less Reimbur to be Allocated (B-C) Percentage of State Inmate Days | sements ; (From A) | 12,875,68.00 | - - |
| D. E. | Total Expenditures less Reimbur to be Allocated (B-C) | sements ; (From A) | <u>12,875,68.00</u> <u>1.8%</u> | - |
| D. E. | Total Expenditures less Reimbur to be Allocated (B-C) Percentage of State Inmate Days | sements ; (From A) | 12,875,68.00 | |
| D. E. | Total Expenditures less Reimbur to be Allocated (B-C) Percentage of State Inmate Day Total Allocated State Inmate Cos | sements : (From A) ts (D*E) | 12,875,68.00 | |
| D. E. | Total Expenditures less Reimbur to be Allocated (B-C) Percentage of State Inmate Days | sements : (From A) ts (D*E) | <u>12,875,68.00</u> <u>1.8%</u> | |

143,670 279,128 51.47%

LOCAL GOVERNMENT INMATE COST REPORT CALENDAR YEAR 2015

•

| A | . General Information | | |
|----|--|--|---------------------------------------|
| | Jail Facility Name: | Pulaski County Jali | Total State Inmate Days: |
| | County: | Pulaski County | Total Inmate Days: |
| | Jail Facility Capacity (# Beds): | 1210 | |
| | | | Percentage of State Inmate Days: |
| B | Expenditures to be Allocated: | | |
| | | | |
| | a) Direct Facility Expenditures: | | |
| | Səlarles & Benefits | _ | |
| | Utilities | | |
| | Food | | |
| | Clothing | ······································ | |
| | Insurance | | |
| | Travel/Training | | |
| | Capital Outlay | 212,823.00 | |
| | Other (attach list) | 25,770,828.00 | |
| | b) Depreciation | 212,249,00 | |
| | c) Overhead | 212,249,00 | |
| | d) Treatment/Medical | | |
| | e) Education/School | 100.434.00 | |
| | f) Other Ancillary Costs (Please list (| 108,134.00 | |
| | | ach separately) | |
| | · · · · · · · · · · · · · · · · · · · | | |
| | | terrent terrent terrent terrent | |
| | Total Expenditures to be Allocated | | |
| | term expenditores to be Milocateo | | 26,304,034.00 |
| с. | Reimbursements | | |
| | Act 309 Contracts | | |
| | State reimbursements for | | |
| | medical costs | | |
| | Total Reimbursements | | |
| | i o tal mennovi semento | | 0.00 |
| D. | Total Expenditures less Reimburser | Manta | · · · · · · · · · · · · · · · · · · · |
| | to be Allocated (B-C) | 1151112 | |
| Ε. | Percentage of State Inmate Days (F | rom 01 | 26,304,034.00 |
| | a second a second contract Days (P | rom Aj | 51.47% |
| F. | Total Allocated State Inmate Costs | (D*F) | |
| | | ·/ | 13,538,951.90 |
| | | | |
| Ġ. | Total State Inmate Days (From A) | | |
| | | | 143670 |
| H. | State Inmate Cost Per Day (F/G) | | |
| | | 2 | \$94.24 |

DETENTION ADMIN

PULASKI COUNTY REGIONAL DETENTION FACILITY DAILY POPULATION 2015

| Day of Month | Jan | Feb | Mar | Apr | May | June | July | Aug | Sept | Oct | Nov | Dec | 1 |
|--|-------|----------|---------|-------|-------|-----------------|-------|-------|------------|-------|-------|-------|------------|
| | | <u> </u> | | | | | | | | | | | • |
| <u> </u> | 1188 | | 1132 | 1092 | 1174 | 1184 | 1205 | 1182 | 1193 | 1133 | 1149 | 1091 | |
| 2 | 1204 | 1.0.0.0 | 1153 | 1097 | 1148 | 1168 | 1165 | 1192 | 1177 | 1126 | 1167 | 1084 | |
| 3 | 1209 | | 1152 | 1121 | 1148 | 1131 | 1144 | 1217 | 1179 | 1103 | 1168 | 1050 | |
| 4 | 1225 | 1175 | 1109 | 1128 | 1164 | 1135 | 1153 | 1202 | 1167 | 1118 | 1165 | 1056 | |
| 5 | 1243 | 1185 | 1117 | 1153 | | 1128 | 1151 | 1202 | 1140 | 1131 | 1149 | 1060 | |
| 6 | 1256 | 1176 | 1117 | 1163 | 1152 | 1147 | 1162 | 1214 | 1160 | 1126 | 1135 | 1073 | |
| 7 | 1246 | 1198 | 1125 | 1174 | 1145 | | 1179 | 1139 | 1160 | 1126 | 1143 | 1076 | |
| 8 | 1243 | 1217 | 1140 | 1152 | 1143 | 1190 | 1197 | 1153 | 1187 | 1141 | 1153 | 1027 | - |
| 9 | 1188 | 1203 | 1158 | 1167 | 1142 | 1139 | 1215 | 1174 | 1161 | 1141 | 1167 | 1044 | |
| 10 | 1186 | 1217 | 1170 | 1156 | | 1147 | 1190 | 1174 | 1171 | 1134 | 1150 | 1040 | |
| 11 | 1221 | 1182 | 1194 | 1164 | | 1148 | 1203 | 1152 | 1122 | 1142 | 1173 | 1037 | |
| 12 | 1222 | 1198 | 1153 | 1179 | 1153 | 1153 | 1219 | 1199 | 1137 | 1157 | 1174 | 1042 | |
| 13 | 1231 | 1162 | 1144 | 1189 | 1161 | 1151 | 1230 | | 1131 | | 1172 | 1051 | 1 . |
| 14 | 1252 | 1166 | 1173 | 1187 | 1170 | 1169 | 1214 | 1175 | 1145 | | 1182 | 1064 | • |
| 15 | 1268 | 1174 | 1184 | 1187 | 1180 | 1192 | 1221 | 1139 | 1146 | | 1179 | 1066 | |
| 16 | 1187 | 1167 | 1179 | 1187 | 1169 | 1197 | 1155 | 1158 | 1154 | | 1195 | 1066 | |
| 17 | 1200 | 1170 | 1109 | 1165 | 1189 | 1200 | 1176 | 1181 | 1113 | 1119 | 1189 | 1077 | |
| 18 | 1227 | 1170 | 1147 | 1187 | 1210 | 1173 | 1159 | 1184 | 1086 | 1127 | 1161 | 1068 | |
| 19 | 1220 | 1164 | 1120 | 1196 | 1218 | 1174 | 1164 | 1194 | 1123 | 1142 | 1120 | 1049 | |
| 20 | 1231 | 1149 | 1131 | 1198 | 1209 | 1184 | 1181 | 1198 | 1105 | 1144 | 1108 | 1049 | |
| 21 | 1243 | 1147 | 1141 | 1178 | 1206 | 1192 | 1193 | 1231 | 1123 | 1148 | 1108 | 1003 | |
| 22 | 1243 | 1165 | 1146 | 1170 | 1200 | 1219 | 1217 | 1206 | 1124 | 1152 | 1121 | 1013 | |
| 23 | 1221 | 1171 | 1163 | 1158 | 1181 | 1189 | 1201 | 1226 | 1135 | 1130 | 1132 | 1013 | |
| 24 | 1214 | 1170 | 1149 | 1166 | 1181 | 1221 | 1213 | 1241 | 1131 | 1146 | 1093 | 1003 | |
| 25 | 1238 | 1177 | 1142 | 1184 | 1190 | 1190 | 1211 | 1234 | 1123 | 1162 | 1099 | 1003 | |
| 26 | 1224 | 1124 | 1148 | 1184 | 1208 | 1178 | 1224 | 1183 | 1131 | 1168 | 1061 | 1002 | |
| 27 | 1191 | 1148 | 1107 | 1207 | 1199 | 1152 | 1227 | 1195 | 1128 | 1174 | 1063 | 1012 | |
| 28 | 1192 | 1128 | 1068 | 1229 | 1225 | 1177 | 1231 | 1155 | 1152 | 1145 | 1073 | 1010 | |
| 29 | 1203 | | 1087 | 1213 | 1158 | 1199 | 1228 | 1171 | 1122 | 1145 | 1086 | | |
| 30 | 1211 | , | 1094 | 1229 | 1148 | 1187 | 1208 | 1176 | 1114 | 1126 | 1000 | 1035 | |
| 31 | 1188 | | 1085 | ····· | 1171 | | 1206 | 1215 | 1)14 | 1151 | 1090 | 1044 | |
| | | | | , | | 11 -1 16 | | | | 1101 | | 1048 | |
| Total Daily Pop. | 37815 | 32872 | 35237 | 35160 | 36418 | 35180 | 37042 | 36870 | 34240 | 35392 | 34133 | 32439 | 422,798 |
| Avg. Daily Pop. | 1220 | 1174 | 1137 | 1172 | 1175 | 1173 | 1195 | 1189 | 1141 | 1142 | 1138 | | 76571 |
| Avg. Dally State | 226 | 245 | 197 | 191 | 235 | 251 | 205 | 189 | 128 | 151 | 169 | 1046 | |
| | | | | | | | | | 129 | 101 | 109 | 135 | |
| Total Booked | 2349 | 1800 | 2006 | 2138 | 2093 | 2088 | 2016 | 2110 | 2037 | 2050 | 4740 | 40.85 | |
| Total for Year | 2349 | 4149 | 6155 | 8293 | 10386 | 12474 | 14490 | 16600 | 18637 | 2052 | 1746 | 1830 | |
| | | | | | | 16-7/4 | 14420 | 10000 | 10037 | 20689 | 22435 | 24265 | |
| Days Closed: | 0 | 0 | 0 | Ō | 0 | 0 | ō | | | | | | |
| | | | | | | | . U | 0 | 0 | 0 | 0 | 0 | |
| Yearly Avg. Pop. | 1220 | 1197 | 1177 | 1176 | 1176 | 1175 | 4470 | | A A 194 19 | | | | |
| Yearly Ave. State | 226 | 236 | 223 | 215 | 219 | | 1178 | 1179 | 1175 | 1172 | 1169 | 1159 | |
| | | ~~~~ | | 410 | 219 | 225 | 221 | 217 | 207 | 199 | 199 | | |
| Annual Closed: | 0 | ō | 0 | 0 | | | | | | | | | |
| | ¥ | V | <u></u> | Ų | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

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06/08/2016 13:40 Pulaski Co. Detention Facility

(FAX)501 210 7531

PAGE 04/11

P.001/002

ARKANSAS DEPARTMENT OF COMMUNITY CORRECTION 2015

| Billing | | Number of | PCRDF | DCC | PCRDF | DCC | | Days |
|------------|-----------|-------------|-------|------|-------------|-------------|-------------------|------|
| Date | Month | lhmates | Days | Days | Amount | Amt. Pald | Difference | Lost |
| 2/27/2015 | January | 28 | 463 | 285 | \$12,964.00 | \$7,980,00 | \$4,984.00 | 178 |
| 3/18/2015 | February | 17 | 373 | 83 | \$10,444.00 | \$2,324.00 | \$8,120.00 | 290 |
| 4/29/2015 | March | 6 | 33 | 33 | \$924.00 | \$924.00 | \$0.00 | 0 |
| 5/18/2015 | March | 19 | 234 | 162 | \$6,552.00 | \$4,536,00 | \$2,018.00 | 72 |
| 6/11/2015 | April | 24 | 297 | 30p | \$8,318.00 | \$8,400.00 | -\$84.00 | 3 |
| 7/8/2016 | May | 26 | 111 | 119 | \$3,108.00 | \$9,332.00 | | |
| 8/8/2015 | June | 20 | 112 | 207 | \$8,316,00 | \$5,796.00 | | |
| 8/20/2016 | July | 23 | 421 | 141 | \$11,788.00 | \$5,368,00 | \$6,420.00 | 280 |
| 10/30/2016 | August | 23 | 364 | 478 | \$15,124.00 | \$13,320,00 | \$1,604.00 | -++ |
| | September | | | | , | | + | |
| 12/3/2015 | Öctober | प् र | 511 | 378 | \$15,330,00 | \$10,590.00 | \$4,740.00 | 133 |
| 2/3/2016 | Nov | 20 | 264 | 235 | \$7,920.00 | \$6,570.00 | \$1,350.00 | 29 |
| | Dacember | | | | •••• | | V (1800.00 | ~~ |

| TOTAL | 250 | 3,183 | 2419 | \$100,786.00 | \$60,140.00 | 985 |
|-------|-----|-------|------|--------------|-------------|-----|
|-------|-----|-------|------|--------------|-------------|-----|

PAYMENTS RECEIVED FOR 2015

| TOTAL | \$0.00 | |
|-------|--------|--|

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(FAX)501 210 7531

ADC PAYMENTS RECEIVED FOR 2015

| Billing | | Number of | PCRDF | ADC | PCRDF | ADC | | Days |
|------------|-------|-----------|---------|---------|----------------|----------------|--------------|-------|
| Date | Month | Inmates | Days | Days | Amount | Amt. Paid | Difference | Lost |
| 2/27/2015 | JAN | 126 | 10,186 | 9,666 | \$284,648.00 | \$270,672.00 | \$13,976.00 | 500 |
| 3/18/2015 | FEB | 111 | 11,743 | 10,982 | \$328,804.00 | \$307,496.00 | \$21,308.00 | 1000 |
| 4/29/2016 | MAR | 186 | 14,417 | 13,648 | \$403,676.00 | \$382,144.00 | \$21,000.00 | 769 |
| 5/19/2015 | APR | 50 | 3,202 | 3,237 | \$92,456.00 | \$90,636,00 | \$1,820.00 | 65 |
| 6/16/2015 | MAY | 106 | 8,054 | 7,557 | \$226,512.00 | \$211,596,00 | \$13,915,00 | 497 |
| 7/21/2015 | JUN | 140 | 12,124 | 11,495 | \$339,472.00 | \$321,860.00 | \$17,612.00 | 629 |
| 8/20/2015 | JUL | 127 | 14,956 | 14,212 | \$421,788.00 | \$397,940.00 | \$23,848,00 | 743 |
| 9/21/2015 | AUG | 176 | 16,488 | 16150 | \$476,850.00 | \$452,206.00 | \$1,682.00 | 318 |
| 10/30/2015 | SEP | 1081 | 24654 | 18433 | \$739,452.00 | \$561,117.00 | \$20,040.00 | 8221 |
| 12/7/2016 | ocr | 372 | 8985 | 8929 | \$269,560.00 | \$267,870.00 | \$1,710.00 | 68 |
| 1/20/2016 | NOV | 372 | 8322 | 8760 | \$249,630.00 | 5245,280,00 | \$4,350.00 | |
| 2/10/2016 | DEC | 382 | 7,297 | 7563 | \$218,910,00 | \$211,770,00 | \$7,140.00 | |
| TOTAL | | 3229 | 140,487 | 130,632 | \$4,050,778.00 | \$3,720,587.00 | \$148,402.00 | 10798 |

PAYMENTS RECEIVED FOR 2015 Date Ck. Amt.

Total

0.00

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9102/22/20

| 091.000.240100.68.000000 001.000.240100.71.099000 | 001.000.240100.53.000000 001.000.240100.55.000000 001.000.240100.55.000000 001.000.240100.84.000000 | 001.000.240100,47,000080 001.000.240100,47,000080 001.000.240100,48,000000 001.000.240100.52,000000 | 001.000 240100.73 mmmm | 001.000.240400.13.000000 001.000.240100.16.000000 001.000.240100.17.000000 | 001.000.240160.06.00000 001.000.240100.07.000000 001.000.240100.09.000000 001.000.240100.10.000000 001.000.240109.11.000000 | 001.000.240100.01.003000 001.000.240100.02.000000 001.500.240100.05.000000 | ACCOUNT NUMBER | 31/2015 |
|--|--|--|-------------------------------------|--|---|--|---|--|
| | 90 "Common Carrier, Meals & Lodgi 60 Other Sundry 10 Advertising and Publications 10 Waste Disposai | 00 FOOD 90 "MEDICAL, DENTAL AND HOSPITAL" 90 OTHER PROFESSIONAL SERVICE 90 TRAVEL | | | 000 SOCIAL SECURITY 000 RETIREMENT 000 HEALTH & LIFE INSURANCE 000 WORKERS' COMPENSATION 000 UNEMPLOYMENT INSURANCE | 0000 SALARIES FULL-TIME 1000 SALARIES PART-TIME 1000 OVERTIME | COUNTY GENERAL DETENTION MEDICAL ACCOUNT NAME | |
| 30,000,00 5,000,00 700,00 | 1,000,00 3,121,00 2,200,00 1,000,00 | 1,029.08 1,536,427.00 36,942.00 | 22,000.00 2,000.00 448,637.00 | 24,000.00 4,500.00 11,000.00 | 117,549,00 226,339,00 166,867,00 27,603,00 | 1,324,116.00 122,000.00 57,344.00 | cytd Revised Budget | PULASK STATEMENT C |
| 3,869,49 0.00 | 0.00 0.00 | 0.00 117,050,33 13,325.87 | 580,00 0.00 37,537,59 | 2,625.17 0.09 0.00 | 10,409,53 26,707.33 10,929,79 0,00 | 122,160.94 8,489,39 5,7727,88 | CURRENT | PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2015 |
| 39,701.67 0.00 0.00 | 0.00 0.01 790.00 | 0.00 1,515,723.22 48,439.84 | 14,817.90 0.00 446,486.32 | 21,760.32 3,578.81 | 93,603,40 93,603,40 193,229,82 (59,020,97 27,603.00 | 1,197,713,78 59,996,36 | YTD | |
| 0.90 0.00 | 0.00 0.00 0.00 | 8,00 | 0.00 0.90 | 0.00 00.00 | 0.00 0.00 0.00 | ENCLUMBRANCES 0.00 0.00 | OUTSTANDING | |
| -1,201.67 5,000.00 700.00 | 1,090.00 3,121.00 2,200.00 210.00 | -11,497.84 | 7,182,10 2,000.00 2,150.58 | 0.00 2,239.68 4,500.00 7.421.39 | -4,659,41 17,939,60 27,109,18 7,946,03 0.00 | BUDGET 126,402.22 62,003.04 | AVAILABLE | |
| -3.12 100.00 100.00 | 100.00 100.00 21.00 | 0.96 -31.12 | 07.44 32.65 100.00 | 0.00 9.33 | -8.13 15.26 4.70 0.00 | REMAINING 9.55 50.82 | CYTD PERCENT OF BUDGET | PAGE 47 |

10:50 Pulaski County Sheriff Office

P.004/005

08070AE102(XAP)

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| | 5 | 2,273 Salario | 1,842,27 | ١ | | | |
|---------------------|--------------------|---|---------------------|--|--------------------------------|--|------------------------|
| 6.73 | 282,269.78 | 0,00 | 3,913,300.22 | 360,438.41 | 4,195,570.00 | | |
| 52.53 | 841.00 | 0.00 | 760.00 | 760.00 | 1,601,00 | 001.000.240100.88.000000 COMPUTER SOFTWARE OR UPGRA | 001.000.240100.88.0000 |
| 100.00 | 1,040,00 | 0.00 | 0.00 | 0.00 | 1,040.00 | 001,000.240100,79.0300000 SEMINAR/CONF/WORKSHOP REGIS | 001,000,240100,79,0200 |
| 80.38 | 2,990.00 | 0,00 | 730.00 | 130,00 | 3,720.00 | 001.000.240100.73.000000 "DUES, MEMBERSHIPS, AND SUBSC | 061,000,240100,73,0000 |
| BUDGET REMAINING | avalarle Budget | MONTH YTE OUTSTANDING EXPENDITURES ENCLIMBRANCES | YTD EXPENDITURES | MONTH | REVISED | ACCOUNT NAME | ACCOUNT NUMBER |
| SILLS | | | | CURRENT | CYID | DETENTION MEDICAL | DEPARTMENT 2401 :DE |
| | | | | | | COUNTY GENERAL | 100 CMUP |
| PAGE 48 | - | | | PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2015 | Pulask Statement o Decem | | CIRZIECAI |

2,071,027 M.O.

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P.005/005

PAGE 08/11

12/31/2015

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| | | ~ | | | _ | | | | | | | | | | | | | | | | | | | | | • | | | | |
|---------------|-----------------------|--------------------------|-----------------------|---------------------------|---------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------|----------------------|----------------|-------------------------|------------|
| | | 801.000.240000.88.000000 | 000000782,00000240000 | en 1.999.240000.86,000000 | 90 1.000.240000,80,000000 | 001 ANA A MARA A MULICIPALITY A MULICIPA | 001 000 240000.78.000000 | 001.000.240000.73.000000 | 007.000.240080.71.000000 | 001.000.240000.69.000000 | 001.000.240000.68.000000 | 001.000.240000.66.000000 | 001.000.240000.65,000000 | 001.000.240000.64.000030 | 001.000.240000.63.000000 | 001.000.240000.82.000000 | 001.000.240000.61.060000 | 001,000.240000,55,000000 | 001.000.240000.50.000000 | 001.000.240000.49.008000 | 001.000.240000.48.000000 | 001.000.240000.33,000000 | 001.080.242000.38,000000 | 001.000.248900.34.000800 | 001.000.240080.33.000000 | ACCOUNT NUMBER | DEPARTMENT 2400 | | | 12/31/2015 |
| | | | 0 OTHER MISCELLANEOUS | 0 SPECIAL PROJECTS | | | | | | | | | 20 BUILDINGS & IMPROVEMENTS/REPA | 190 WASTE DISPOSAL | DOD WATER | DOD GAS (NATURAL) | 000 ELECTRICITY | 000 ADVERTISING | 1000 POSTAGE | | 1000 OTHER PROFESSIONAL SERVICES | 1000 OTHER SUNDRY | 0000 SMALL TOOLS | | 0000 SERVICE CONTRACTS | ACCOUNT NAME | :SHERIFF - DETENTION | COUNTY GENERAL | | |
| | 00,000 ¹ 0 | 2 707 M | 65.00mm | 3,870.20 | 5,000.00 | 4,500.00 | 48,000.00 | 8,000,00 | 47 47 | | | | eL | 48.164.00 | 445,000,00 | 210,035.00 | 600.000.00 | 2,500,00 | 3.000.00 | -4 | tus | 1.000.00 | 13,580,00 | 13,746.00 | 105.000.00 | REVISED | GLEO | | STATEMENT (| DIFAS |
| | 0.0P | 5, DG1,20 | 7 102 00 | 0.00 | £.00 | 1,708.00 | 17,451,50 | 1,511,13 | 38,003 50 | 270:01 | 2 RHE 72 | 04,000,49 | Vr usu ta | | 21,000,02 | 10 858 73 | 42 287 64 | 2.01 | PUCF | 36 703 67 2/080, 18 | 01 400 5 71-10 | 57 43 | 7 L 857 E | UU U 871 640 | | HINDER | CURRENT | | STATEMENT OF OPERATIONS | |
| | 2,692,16 | 65,295.82 | 11 sta | 2017.20 | 2017-100 | 3 R55 m | 43.868.89 | 5,150,62 | 1,007.50 | 39,279,37 | 01,312.77 | 149,800.64 | 23,736.98 | 44 3,026.85 | Gèrichicos | 575,275.16 | 1,3/4,02 | 1,812.81 | 112,385,611 | 43,341.67 | 1,004,75 | 10,957,80 | 10,140,39 | 110,700,48 | 6 | | | | | |
| | 330.00 | 894,75 | 00.0 | 0.00 | | 0,1200,00 | 0.00 | 0.00 | 0.00 | 0.00 | 0,00 | 31.77 | 0.00 | 0.00 | 0.00 | 0,00 | 0.00 | 0.00 | 0.08 | 0,00 | 800 | 931.59 | 000 | 0.00 | ENCUMBRANCES | OUTSTANDING | | | | |
| | 772,84 | -1,198,57 | 956.00 | 4,738,42 | 845,00 | -4,294.88 | 2,649.38 | 20,059.25 | 0,40 | 3,720.63 | 42,739.83 | 19,833,34 | 24,427.02 | 3,973.15 | 71,175.55 | 27,724.84 | 1,125.98 | 1,187,39 | 6,760,63 | -3,841.67 | -54.75 | -3,369,39 | 0.61 | -5,700,48 | BUDGET | AVAILABLE | | | | |
| | 20,36 | -1.83 | 24,70 | 94.77 | 18.78 | -10,41 | 35.62 | 4,26 | 0.04 | B.65 | 34,45 | 11.69 | 50,72 | J.89 | 33.68 | 4.62 | 45.04 | 39.58 | 5.54 | -9.73 | 5,48 | -25.11 | 0,00 | -5,43 | REMAINING | PERCENT OF | CUD | | PAGE 45 | |
| S00/ i | 200,q | | | | 01 | 107.01 | relog | (XAP) | | | | • | | | | i | ədit. | 10 JJ | i li Jəl | (A 2) | Unc | ነን ዞ | cpin | ut on | | - | · | | | |

PAGE 09/11

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12/31/2015

USIZZIZO16 10:50 Pulaski County Sheriff Office

| | | 001.008.240000.94.000000 VEHICLES | ACCOUNT NUMBER ACCOUNT NAME | DEPARTMENT 2400 SHERIFF - DETENTION | 12/31/2015 |
|-----------------------------|------------------------------|--|---|-------------------------------------|--|
| Capital Oudlay | 2,624,82 | 1,001,758.00 273,415.00 438,078.00 0.00 | | CYTD CURRENT | PULASKI COUNTY STATEMENT OF OPERATIONS DECEMBER 2015 |
| Oudlay 17, 336, 296 Salaris | | 434,654,33 | MONTH YTD OUTSTANDING EXPENDITURES EXPENDITURES ENCUMBRANCES | | |
| Salarius M40 | 0.94 0.00 373,883,37 1.60 | 3,212,67 0.32 | AVAILABLE BUDGET BUDGET REMAINING | CYID | PAGE 46 |

P.003/005

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DETENTION ADMIN

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| | | | | | | | | | | | | | | | | | | | | • | | | | | | | | | | | | | | | | |
|---|---------------------|--|---|--|------------|---------------------------|---------------------|--------------------------|---|----------------------|--------------------|----------------------|------------|---------------------|-------------------|-------------|---------------------|-------------------------------|-------------------|--------------------|--------------------------|-------------------|----------------------|--------------------------|-----------------------|-------------------|----------------------|---------------------------|-------------------|--------------------------|--------------------|--------------------------|------------------------------|------------------|----------------------|--------------------------------------|
| Pàge 2 | | Bålance | | 1156401.68 | 1174001.68 | 11223065.27 1223065.27 | 1223213.40 | 1240813.40 1248954 84 | 1276468,82 | 1234068.82 | 1320632,44 | 1366163.03 | 1364168.46 | 1428105.52 | 1428196.28 | 14057596.28 | 1495872.13 | 1522272.13 | 1529393.35 | 1529517,96 | 1555917.96 1507213 06 | 1611863.90 | 1611995.69 | 1629979.20 1629979.20 | 1630116.58 | 1631516.68 | 1512548.68 | 15125684.48 1543005 03 | 1569401.03 | 1601246.31 1601376 74 | 1623776.74 | 1627908,65 1655199,83 | | 1707248.63 (DOF) | | 1242527.80CR 1825311, 63CR |
| 14:06 | | Credit | noite Basance | 31936.88 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.0 | 0.09 | 0.00 | 10.9 9 | 0.00 | 0.00 | 0.00 | 0.00 | 00.00 24500 00- | 0.00 | 00.9 2 | 00.1 | 0.00 | 00.00 00.01 | 0.00 | 0.00 25000 66- | 00.00 | 116969.00- | 0,00 | 0.00 | 0.00 | 0.00 | 0,00 | 6067.00- 0.00 0.90 | 212249.60~ | | Beginning Balance 0.00 582783.83- |
| THURSDAY JUN092016 14:06 | • | Debit | Bent | 31936.88 | 17600.00 | 31463.59 | 1148.13 11600 00 | 140.64 | 35514,78 | 17600.00 26409.00 | 163.62 | 65-0ESE9 | 26400.00 | 37537.06 | 90,76 25400 00 | 41153.49 | 122.36 | 20200.00 | 31621.22 | 124.61 76400 00 | 26400,00 | 29546.03 | 131.70 6.40 | 55697.51 | 137.48 00.00 | 26400.00 | 0.00 135 90 | 30316.55 | 26400.00 | 130,43 | 26400.00 133 D1 | 27291.18 | 0.00 26400.00 31715.80 | 195032.83 | | Beginni 0,00 |
| RUN: THURS | | 目 Osta 共 | Status A | | מול | о d | <i>n</i> e1 | 1421 | th a | <i>•</i> • • | | | | 74 1. | • | | | ON FACILIT | | | | | ON FACILIT | | D SHERIFY | | J SHERIEF | | | | | 10.011 | -T621-340 | н | | Status A |
| | 01/01/32 - 12/33/12 | Bescription : Grant Task | RUB | er interfund entries Er interfund entries | | | R INTERFUND ENTRIES | | r intereurd Entries R jutrepind Empure | | | S INTEREVUED GWFRIES | | A INTERFUND ENTRIES | | | I LATERFUND ENTRIES | PANSFER COMMUNICATION FACILIT | INTERFUND ERFRICS | INTERFUND ENTRIES | IFTERFORD ENTRIES | INTERFUND ENTRIES | ANSERR COMMUNICATION | INTERFUND ENTRIES | TRAKSTER ACT I108 AND | INTEREUND ENTRIES | CR INTERFUND ENTRIES | INTERFUND ENTRIES | INTERFUND ENTRIES | INTERFUND | INVERFUND ENTRIES | CATERFUND 3198 TO F | | Account Total | | REND |
| 1 15 09:02 PULASKI COUNTY | Account 🖡 | Check # Type Eruject | JTT EQUEPESC | 5 5 8 5 | 2 | ు చ చ | 90 6 | 50 | 3 C | ទ | 50 55 5 5 | 50 | ភ ខ | 5 5 5 5 | 55 | មិដ | វិមី ភីទី | 臣: | | 18 18 | 59 51 | 55 55 | | 56 55 55 | | ы К К | 5 5 5 5 | ୟ ମୁ ମୁ ମୁ | | | | ទទ័ | 55 55 | | | LE CEL KENN |
| GENERATED: 17 JUN 15 09:02 PUEASKI C | G/E Sumary By Acc | | 000 COMMUNICATION FACILITY EQUIP-ESC | 101 | 50 | 00 | 00 | • • | 0 | 00 |) č | • | 5 ¢ | оф I | | 20 | | 1.1 | 00 | 00 | | ,0 | 14502 n | . 0 | 14613 J | 14756 | 00 | 20 | 0. | 00 | 00 | 14966 | | | | undafenuru tallance 115 |
| REPORT: GISUMMARY | | Account 2 Date Ref # Vendor/Fhae | 110.000.000000.00.0 <u>000000</u> 010215 | 010715 | 2915 | 0215 | 2015 1215 | 030315 | 030915 | GECTO GECTO | 040215 | 615 2015 | 1915 | 050115 052115 | 815 11 | 115 | | | 115 | 915 915 | | | | | | | 15 | 115 | 15 | 55 | 15 | | 15 | | 160.758034 00 000040 | 123115 |
| R | | a d | 26 | 55 | 38 | 95 | 25 | 1 E G | | | 140 | 141 045 | 042 | 050 | 220 | 000 | 090 | 076 | 010115 | | 080315 | | 082515 | 060 | 092415 | 6260 1 | EGUI GIUI | 1026 | 1102815 | 1125 | 1202. | 120215 | 1229. | | 110.0 | 12351 |

A. General Information

| Α. | General Information | | | |
|-----|---|--|----------------------------------|--------|
| | Jail Facility Name: | Saline County | Total State Inmate Days: | 10,212 |
| | County: | Saline County | Total Inmate Days: | 61,957 |
| | Jail Facility Capacity (# Beds): | 234 | Percentage of State Inmate Days: | 16.48% |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 1,884,583.00 | | |
| | Utilities | 229,000.00 | | |
| | Food | 250,000.00 | | |
| | Clothing | 10,000.00 | | |
| | Insurance | 39,000.00 | | |
| | Travel/Training | 1,000.00 | | |
| | Capital Outlay | 0.00 | | |
| | Other (attach list) | 151,795.00 | | |
| | b) Depreciation | | | |
| | c) Overhead | | | |
| | d) Treatment/Medical | 200,000.00 | | |
| | e) Education/School | • | | |
| | f) Other Ancillary Costs (Please list | each separately) | | |
| | , | | | |
| | \$2018.07%+05\$10+24544*0047204720000000000000000000000000000 | an a | | |
| | | • | | |
| | Total Expenditures to be Allocated | ł | 2,765,378.00 | |
| | · | | | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | | | |
| | State reimbursements for | | | |
| | medical costs | | | |
| | Total Reimbursements | 573,045.90 | 0.00 | |
| | | | • | |
| D. | Total Expenditures less Reimburs | ements | | |
| | to be Allocated (B-C) | | 2,765,378.00 | |
| E. | Percentage of State Inmate Days | (From A) | 16.48% | |
| F. | Total Allocated State Inmate Cost | +c (D*F) | 455,734.29 | |
| ••• | | | | |
| ~ | Tabal State Inuncto David Prove A | | 40.640 | |
| G. | Total State Inmate Days (From A) | | 10,212 | |
| н. | State Inmate Cost Per Day (F/G) | | \$44.63 | |
| | Source of Information: | | | |
| | | | | |

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Janitorial Supplies: \$22,000.00 Inmate Personal Hygiene: \$20,000.00 Chemicals: \$15,000.00 Building Materials/Supplies: \$40,000.00 Parts and Repairs: \$7,500.00 Maintenance: \$20,000.00 Postage: \$6,000.00 Rent-Machinery/Equipment: \$9,000.00 Computer Software/Supplies: \$4,200.00 Other Misc.: \$3,500.00 Petty Cash: \$4,595.00

| А. | General Information | MC Detention Conten | Tabal State Jamata Davis | 77 005 | | |
|----|---------------------------------------|-----------------------------------|--|-------------------|-------------------------------|--------------|
| | Jail Facility Name: County: | WC Detention Center Washington | Total State Inmate Days: Total Inmate Days: | 77,805 224,681 | | |
| | Jail Facility Capacity (# Beds): | 710 | Percentage of State Inmate Days: | 34.63% | | |
| | Jan Pacificy Capacity (# Deus). | | reitentage of State minate Days. | 34.0376 | | |
| B. | Expenditures to be Allocated: | | | | | |
| | a) Direct Facility Expenditures: | | | 8. | a) Other (attach list) | |
| | Salaries & Benefits | 10,328,947.47 | | | Supplies | 74,918.26 |
| | Utilities | 500,039.87 | | | Equipment | 66,360.35 |
| | Food | 867,348.16 | | | Medicine & Drugs | 1,009.64 |
| | Clothing | 60,072.97 | | | Fuel, Oil & Lubricants | 114,473.30 |
| | Insurance | 179,839.20 | | | Tires & Tubes | 13,863.05 |
| | Travel/Training | 58,767.72 | | | Computer Equipment | 11,326.01 |
| | Capital Outlay | 36,747.59 | | | Parts and Repairs | 72,926.83 |
| | Other (attach list) | 455,358.85 | | | Professional Services | 79,476.49 |
| | b) Depreciation | 1,448,517.92 | | | Maintenance Service Contracts | 21,004.92 |
| | c) Overhead | | | | | 455,358.85 |
| | d) Treatment/Medical | 892,938.05 | | | | |
| | e) Education/School | 808.58 | | | b) Depreciation | |
| | f) Other Ancillary Costs (Please list | t each separately) | | | Buildings | 1,011,809.93 |
| | HR, IT, Purchasing, Accounting | 312,316.30 | | | Equipment | 95,812.31 |
| | | | | | Vehicles | 268,288.24 |
| | | | | | Land | 72,607.44 |
| | Total Expenditures to be Allocated | i | 15,141,702.68 | | | 1,448,517.92 |
| C. | Reimbursements | | | | | |
| | Act 309 Contracts | 93,012,00 | | | | |
| | State reimbursements for | | | | | |
| | medical costs | - | | | | |
| | Total Reimbursements | | 93,012.00 | | | |
| - | | | | | | |
| D, | Total Expenditures less Reimburs | ements | | | | |
| - | to be Allocated (B-C) | (*********** | 15,048,690.68 | | | |
| E. | Percentage of State Inmate Days | (From A) | 34.63% | | | |
| F. | Total Allocated State Inmate Cost | ts (D*E) | 5,211,225.60 | | | |
| | | | | | | |
| G. | Total State Inmate Days (From A) | | 77,805.00 | | | |
| н. | State Inmate Cost Per Day (F/G) | | 66.98 | | | |
| | | | | | | |

| Α. | General Information | | | |
|----|---------------------------------------|---------------------------------------|----------------------------------|--------|
| | Jail Facility Name: | Woodruff County Jail | Total State Inmate Days: | 791 |
| | County: | Woodruff | Total Inmate Days: | 3842 |
| | Jail Facility Capacity (# Beds): | 25 | Percentage of State Inmate Days: | 20.59% |
| В. | Expenditures to be Allocated: | | | |
| | a) Direct Facility Expenditures: | | | |
| | Salaries & Benefits | 148,458.91 | | |
| | Utilities | ····· | | |
| | Food | 18,267.07 | | |
| | Clothing | 475.09 | | |
| | Insurance | | | |
| | Travel/Training | 1,365.00 | | |
| | Capital Outlay | 774.13 | | |
| | Other (attach list) | 1,345.38 | | |
| | b) Depreciation | | | |
| | c) Overhead | | | |
| | d) Treatment/Medical | 9,412.79 | | |
| | e) Education/School | 50.00 | | |
| | f) Other Ancillary Costs (Please list | · · · · · · · · · · · · · · · · · · · | | |
| | General & Cleaning Supplies | 6,637.16 | | |
| | Building Supplies & Repairs | 11420.34 | | |
| | | | | |
| | Total Expenditures to be Allocated | | 198,205.87 | |
| C. | Reimbursements | | | |
| | Act 309 Contracts | 0.00 | | |
| | State reimbursements for | 0.00 | | |
| | medical costs | | | |
| | Total Reimbursements | | 0.00 | |
| D. | Total Expenditures less Reimburse | ements | | |
| | to be Allocated (B-C) | | 198,205.87 | |
| Ε. | Percentage of State Inmate Days (| From A) | 20.59% | |
| | | | | |
| F. | Total Allocated State Inmate Costs | s (D*E) | 40,807.09 | |
| | | | | |
| G. | Total State Inmate Days (From A) | | 791 | |
| н. | State Inmate Cost Per Day (F/G) | | \$51.59 | |
| | | | | |