

TYLER COUNTY COMMISSIONER'S COURT
SPECIAL MEETING
April 28, 2011 --- 3:30 p.m.

THE STATE OF TEXAS ON THIS THE 28th day of April, 2011 the
Commissioner's Court in and for Tyler County, Texas convened in a Special meeting at
the Commissioners Courtroom in Woodville, Texas, the following members of the
Court present, to wit:

MARTIN NASH	COMMISSIONER, PCT #1
RUSTY HUGHES	COMMISSIONER, PCT. #2--Presiding
MIKE MARSHALL	COMMISSIONER, PCT #3
DEAN RIVERS	CHIEF DEPUTY CLERK, ex officio

The following were absent: County Judge and Commissioner Walston, thereby
constituting a quorum. In addition to the above were:

JACKIE SKINNER	COUNTY AUDITOR
DAVID HENNIGAN	SHERIFF

A motion was made by **Commissioner Nash** and seconded by **Commissioner Marshall**
to accept the contractual agreement for the **leg monitoring device**, pending approval of a
PR bond by the district judge for the capital murder suspect. All voted yes and none no.
SEE ATTACHED CONTRACT.

A motion was made by Commissioner Nash and seconded by Commissioner Marshall for
the meeting to adjourn. All voted yes.

THERE BEING NO FURTHER BUSINESS, THE MEETING ADJOURNED: 3:35 p.m.

I, DONECE GREGORY, County Clerk and ex officio member of the Tyler County
Commissioners Court, do hereby certify to the fact that the above is a true and correct
record of the Tyler County Commissioners Court session held on April 28, 2011.

Witness my hand and seal of office on this 3rd day of May, 2011

Attest: 
Donece Gregory, County Clerk, Tyler County, Texas



Recovery Healthcare Monitoring Services

Dr. W. Brown
Case Worker
2010-11-11 10:00 AM

- Active GPS Serial # _____
- Passive GPS Serial # _____
- RF Serial # _____
- SCRAM B Serial # _____
- Modem Serial # _____
- Base Station Serial # _____
- Mems Serial # _____
- County Pay Client Pay

Personal Data Form

RHC/Agency use only

DATE _____

NAME

LEGG

DONALD

DAVID

(RESPONSIBLE PARTY TYLER COUNTY SHERIFF'S OFFICE)

ADDRESS

702 N MAGNOLIA

CITY

WOODVILLE

TEXAS ZIP

75979

HOME PHONE

409-283-2172 (SHERIFF'S OFFICE)

CELL PHONE

EMAIL

SOCIAL SECURITY

DE ID NUMBER

STATE

VEHICLE

MAKE/MODEL

YEAR

LICENSE BY STATE

CNS

Please present ID to RHC Staff

DATE OF BIRTH

AGE

SEX (M/F) M F

HEIGHT

WEIGHT

COUNTRY

W

OCCUPATION

RETIRED

WAGE

WORK HOURS

EMPLOYER NAME AND ADDRESS

EMERGENCY CONTACTS

1.

DAVID HENNIWAN

RELATIONSHIP

SHERIFF PERSONEL

409-283-2172

2.

CLINT STURROCK

RELATIONSHIP

CHIEF DEPUTY

(24-HOUR

3.

DIANE HICKS

RELATIONSHIP

CHIEF SAILER

DISPATCH)

JUDGE

STOVER

COUNTY

TYLER

CAUSE CODE

STATE SUPERVISOR PROBATION BOND PRETRIAL

PROBATION OFFICER

PROBATION OFFICER ADDRESS

ARE YOU CURRENTLY CHARGED WITH AN OFFENSE? YES NO

IF YES, WHAT IS THE CHARGE?

CAPITAL MURDER

NEXT COURT DATE

ATTORNEY

SONNY CRIBBS

PH: 409-866-6761

(RF/GPS ONLY)

HOME CURFEW YES _____ NO _____

INCLUSION ZONES

EXCLUSION ZONES

	OUT	IN	OUT	IN	OUT	IN
MONDAY						
TUESDAY						
WEDNESDAY						
THURSDAY						
FRIDAY						
SATURDAY						
SUNDAY						

(MEMS ONLY)

ALCOHOL UNIT # _____

PHONE # (WHERE MEMS WILL BE CONNECTED) _____

START DATE _____ END DATE _____

COMMENTS/SPECIAL INSTRUCTIONS _____

ALCOHOL TEST SCHEDULE

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
OM TO # FROM TO #	FROM TO #					

Participant Contract
Program Rules and Regulations

You have been placed in the Recovery Healthcare Corporation Electronic Monitoring Program (EMP). Electronic monitoring is a technology used to ensure that you do not leave your home except as specifically allowed by the Supervising Authority. A case manager will determine your daily schedule when you are enrolled in the program and this schedule will be strictly enforced. Any variations in your schedule must be pre-approved by a case manager and must be documented in writing. Any failures to comply with program objectives will result in a violation notice being forwarded to the Supervising Authority.

On the day you begin the program, a transmitter will be fitted to your ankle. This equipment enables us to monitor your presence at home during your assigned curfew hours. This equipment can be removed only after you complete the program, unless other direction is received from the Supervising Authority. Additional equipment may be necessary if enhanced monitoring is required.

While on the electronic monitoring program or "house arrest", you are required to remain at your home except for activities authorized by the Supervising Authority. You may be authorized to perform activities outside your residence such as work, counseling, drug and alcohol treatment and additional activities **only** with prior Supervising Authority approval. You must be informed that the participant will verify all approved activities by the Supervising Authority for example: Employment must be verified, in writing, by someone in a supervisory position. In addition, all timecards and paycheck stubs must be submitted as further verification of employment.

At the time of enrollment, a case manager or the court will establish a schedule based on your permitted activities. All other schedule changes require a case manager's approval 24 hours advance notice. Any changes to your curfew must be approved by your officer and will not be adjusted without proper permission.

PROGRAM COMPLIANCE

You must understand that any time while on the Electronic Monitoring Program you may immediately be terminated for the following reasons.

- A. Failure to follow program rules and/or regulations (including providing all documentation).
- B. Failure to pay agreed upon program fees.
- C. Failure of the equipment to perform due to your actions or neglect for any reason which results in the inability to monitor you effectively.
- D. Any negative behavior resulting in the Court or Probation Officer's belief that you may not complete the program successfully.

A Non-Compliance Report will be sent to the Supervising Authority for any program violation, including but not limited to:

1. Returning home later than your schedule allows [Curfew Violation]
2. Leaving home earlier than your schedule allows [Curfew Violation]
3. Missing scheduled appointments with your case manager. [No Call / No Show]
4. Failing to provide acceptable verification of work and other Court/Probation authorized activities.
5. Failing to pay program fees
6. Failing to maintain telephone service for any reason. [Cell Phone is OK]
7. Failing to comply with any additional conditions set by the Supervising Authority.
8. Tampering with or damaging any part of the electronic monitoring equipment

PROGRAM EQUIPMENT

The transmitter fitted to your ankle, and any other equipment given to you by Recovery Healthcare Corporation is your responsibility. If the equipment is damaged, lost or destroyed, you will be required to pay the following amounts:

ANKLE TRANSMITTER WMTD	\$ 1300.00
ANKLE STRAP	\$ 20.00
CHARGER	\$ 50.00
Radio Frequency Base Unit	\$ 400.00
Radio Frequency Bracelet	\$ 200.00

If the monitoring units are not returned to Recovery Healthcare Corporation, you will be charged with theft by taking (felony).

PROGRAM FEES

Program participants are responsible for payments of their program fees in advance on a Bi-weekly basis. Participants must provide proof of household and/or personal income on which program fees are based. All payments must be made in the form of cash, credit card, certified check, or money order payable to Recovery Healthcare Corporation. You will be required to pay a non-refundable processing fee of \$75. **REFUSAL TO PAY PROGRAM FEES MAY RESULT IN TERMINATION FROM THE RECOVERY PROGRAM.**

if you are terminated from the program or you decide to complete your sentence in custody, you will forfeit all rights to any program fees, including those paid in advance. If the Court completes you early for good behavior, any pre-paid program fees beyond that date will be refunded to you.

Fee Agreement

I agree with this current financial assessment of my ability to pay the daily fees. The daily rate as agreed is based on income. As income changes, so can this rate. As a participant in the ELM program in Tarrant County, RHC requires the participant to submit pay stubs every month verifying income.

The daily rate is \$ 12.50 per day for monitoring. I agree to pay program fees at the rate of \$ 195 for the first two weeks, and \$ 175 every two weeks until all program fees are paid in full. For sentences of 20 days or less, I understand that I will be charged a minimum fee amounting to the assessed daily rate times 20 days, plus the enrollment fee. I understand that the Court or Sheriff's Dept. will be notified if I fail to pay and five days after written notification of my failure to pay. I may be terminated from the program for refusal to pay fees as agreed.

It is important that you carefully read and clearly understand all the program requirements. Failure to comply with program guidelines will result in a violation notice being forward to the Supervising Authority for further sanctions, including possible termination from the program and incarceration. **IF YOU DO NOT UNDERSTAND OR CANNOT COMPLY WITH THESE RULES, NOTIFY YOUR CASE MANAGER IMMEDIATELY.**

DAVID HENNIGAN, SHERIFF

Participant Name

_____ Date

Participant Signature

_____ Date

Case Manager

_____ Date

Case Manager Signature

_____ Date

RECOVERY HEALTHCARE CORPORATION

GPS CLIENT & WMTD GUIDELINES

Please Initial

_____ You must keep the "PRO TECH WMTD" on your person at all times

_____ When your curfew begins, you must be inside your home. Any outside time in your yard must be authorized by your supervision officer or the court. [Range 150 ft. if approved]

NEVER ALLOW THE WMTD BATTERY TO RUN DOWN

_____ The WMTD requires 2 hours continuous charging time per day, and you must take the charger with you for longer than 10 hour at a time. Do not charge using a power inverter and do not charge while sleeping, failure to follow these instructions will result in a violation.

---A DEAD BATTERY VIOLATION IS CONSIDERED A ZERO TOLERANCE VIOLATION---

_____ During your curfew hours at home, you should stay at your home. If you leave during curfew for any reason, [i.e.] a **medical emergency**, you must document the event and turn all documentation over to your supervision officer and or your case manager.

_____ Do not submerge the WMTD under water. Taking showers are ok. No swimming, hot tubs or sit down baths where WMTD would be under water

_____ When you are in the area of a red zone, always give any red zone a wide margin of space, at least 2 city blocks or more. It is best to avoid these areas completely if possible.

--- A RED ZONE VIOLATION IS CONSIDERED A ZERO TOLERANCE VIOLATION----

_____ Replacement cost of the WMTD is \$1300.00 if not returned undamaged

_____ You must contact this office immediately if you have damaged the WMTD in any way. If damage is done after regular business hours, leave a phone message and be at this office at 8:00am the next business day. Repair cost are \$115.00, \$225.00, or \$1300.00 depending on the amount of damage.

I have read and had all rules regarding the WMTD and G.P.S. explained to me. I understand the proper use of all equipment.

Signature _____ Date _____



TYLER COUNTY COMMISSIONERS COURT

County Courthouse, Room 101 / Woodville, Texas

Thursday
April 28, 2011
3:30 PM

MARTIN NASH
Commissioner, Pct. 1

RUSTY HUGHES
Commissioner, Pct. 2

JACQUES L. BLANCHETTE
County Judge

MIKE MARSHALL
Commissioner, Pct. 3

JACK WALSTON
Commissioner, Pct. 4

NOTICE Is hereby given that a *Special Meeting* of the Tyler County Commissioners Court will be held on the date stated above, at which time the following subjects will be discussed;

Agenda

"the wisdom to know the right thing and the courage to do it"

➤ **CALL TO ORDER**

- Establish quorum

I. CONSIDER/APPROVE:

- A. **Contractual Agreement** with Recovery Healthcare for leg monitoring device pending approval of PR Bond by District Judge for capital murder suspect -- *J. Blanchette*

➤ **ADJOURN**

I do hereby certify that the above Notice of Meeting of the Tyler County Commissioners Court is a true and correct copy of said Notice and that I posted a true and correct copy of said Notice at the Tyler County Courthouse in a place readily accessible to the general public at all times and that said Notice remained so posted continuously for at least 72 hours preceding the scheduled time of said meeting, as is required by Section 551.002 & 551.041.

Executed on April 25 2011 Time 3:00 PM

Donece Gregory, County Clerk/Ex Officio Member of Commissioners Court

By: Wanda Shuster (Deputy)

fax 283-6305