

MONTHLY COMMUNITY SUPERVISION AND CORRECTIONS REPORT

**TEXAS DEPARTMENT OF CRIMINAL JUSTICE
COMMUNITY JUSTICE ASSISTANCE DIVISION**

County : TYLER

Report Month-Year : 10-23

I. END OF MONTH SUPERVISION STATUS	FEL	MISD	TOTAL
A. Adults Receiving DIRECT Supervision	128	29	157
1. Level 1 (High)	18	1	19
2. Level 2 (Moderate)	37	9	46
3. Level 3 (Low/Moderate)	24	1	25
4. Level 4 (Low)	49	18	67
5. Residential			
B. Adults on INDIRECT Status	117	33	150
1. Intrastate Transfers (out)	72	13	85
a. Transfers Out of CSCD	61	11	72
b. Transfers Within CSCD	11	2	13
2. Interstate Transfers (out)	4		4
3. Absconders/Fugitives	25	14	39
a. New to Absconder/Fugitive Status	2		2
4. Report by Mail		1	1
5. Inactive Indirects Due to Incarceration	8		8
a. Sentenced to County Jail	3		3
b. Sentenced to TDCJ-ID	3		3
c. Serving Time in Substance Abuse Felony Punishment Facility (SAFPF)	2		2
d. Sentenced to State Jail			
6. Other Indirect	8	5	13
C. Pretrial Services	26	21	47
1. Pretrial Supervision (court-approved)	21	16	37
2. Pretrial Diversion	5	5	10
D. Civil Probation			1
II. MONTHLY ACTIVITY			
A. Community Supervision Placements			
1. Original Community Supervision Placements	6	7	13
a. Adjudicated Community Supervision	2	5	7
b. Deferred Adjudication	4	2	6
c. Return From:			
1) Shock Incarceration			
2) State Boot Camp			
2. Subsequent Supervision Placements Within the CSCD	1		1

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II. Monthly Activity (Cont'd)

A. Community Supervision Placements (Cont'd)

3. Transferred in for Supervision	7	7	7
4. Deferred to Adjudicated Status	_____	_____	_____
5. Pretrial Services Placements	_____	1	1
a. Pretrial Supervision (court-approved)	_____	1	1
b. Pretrial Diversion	_____	_____	_____

B. COMMUNITY SUPERVISION SUBTRACTIONS

1. Supervision Terminations	12	8	20
a. Early Termination	_____	_____	_____
b. Expired Term of Community Supervision	1	1	2
1) Regular	1	1	2
2) Time Credit	_____	_____	_____
c. Revoked to County Jail	_____	3	3
d. Revoked to State Jail	_____	_____	_____
e. Revoked to TDCJ	3	_____	3
1) Institutional Division	3	_____	3
2) State Boot Camp	_____	_____	_____
f. Other Revocations	_____	_____	_____
g. Administrative Closures	6	3	9
1) Return of Courtesy Supervision	6	2	8
2) Other Administrative Closures	_____	1	1
h. Deaths	_____	_____	_____
i. Pretrial Terminations	2	1	3
2. Reasons for Revocation	3	3	6
a. New Offense Conviction	1	_____	1
b. Subsequent Arrest/Offense Alleged in MTR	1	1	2
c. Other	1	2	3

CERTIFICATION:

Signature of CSCD Director: _____



DATE: _____

10/3/23

Signature of District Judge: _____

DATE: _____