

BRANDY VICK UPSHUR COUNTY TREASURER P.O. BOX 730 GILMER, TX 75644 903-680-8137 903-843-3478(FAX)

07/14/2017

Upshur County Commissioner's Court

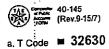
Dear Commissioner's Court,

Please approve the Upshur County Treasurer to prepare and print her Quarterly State Fees reports and checks as completed so as to meet the due date of 07/31/17.

With appreciation, Thank you.

Brandy Vick

Upshur County Treasurer







Do not write in shaded areas.

State Criminal Costs and Fees

• COUNTY QUARTERLY REPORT - This report must be filed by the due date even if no payment is due.

	. An a	amount or a zero (0) MUST	be entered on	all lines for Colum	nns i and 3.	
c. C		or quarter ending TER ENDING 43017		e. Due date of report		
_=	County name and r	mailing address		h, IMPORTANT		
d.	· · · · · · · · · · · · · · · · · · ·	· ·		Blacken this box if v	our address has 1	
				changed. Show cha	nges by the 🚤 🟲 🕍 📗	
	<u>:</u>	Outroop 4	Column		Column 3	
,	See back for instructions.	Column 1 TOTAL COLLECTED (State court costs only) Dollars and cents	SERVICE (See instruc	FEE AN	OUNT DUE STATE (Col. 1 minus Col. 2)	
	1. 01-01-04 Forward	= \$ 82,820.16				
	2. 09-01-01 12-31-03	<u> </u>				
 committed	3. 08-31-99 08-31-01	=				
Ē	4. 09-01-97 08-30-99	·		 4. _		
Æ	l. 5. 09-01-91 08-31-97					
	6. Bail Bond Fee (BB)	= <u>~~~~~</u>	- 5.	6	_ 	
N Ses	6. Bail Bond Fee (BB) 7. DNA Testing Fee - Felony Convictions (DNA) 8. DNA Testing Fee - MSDM & CS (DNA CS)	#			- 1	
SECTION I	8. DNA Testing Fee - MSDM & CS (DNA CS)	<u> 125.40</u>	· · · · · ·	8	 	
SEC off	9. DNA Testing Fee - Juvenile (DNA JV)		<u>No Servic</u>			
	9. DNA Testing Fee - Juvenile (DNA JV)	<u> 1,208.52</u>		10		
, L	:10. EMS Trauma Fund (EMS) :11. Juvenile Probation Diversion Fee (JPD) :12. Jury Reimbursement Fee (JRF)	20.00		11		
ports	12 Jury Reimbursement Fee (JRF)	1,880.68		12	·	
ě	1:13 Indicent Defense Fund (II)E)			13	<u> </u>	
Œ				14		
	14. Moving Violation Fees (MVF) 15. State Traffic Fine (STF)	7.124.06	(5%)	15		
	1: 1:16 Peace Officer Fees (Report 20% of fees from ac	tions by state officers only.) _Co-	2408.36	16. ■ <u>\$</u>	602.09	
	1.17 Faillire to Annear/Pay Fees (FTA) (Depois Veo O	A DIS SOUTHINGUAGES AND A TOTAL		18.■	580.87	
= \frac{1}{26}	18. Judicial Fund - Constitutional County Court			19.■	, ,	
S :2	19. Judicial Fund - Statutory County Court					
SECTION s applica	20. Motor Carrier Weight Violations (MCW) (Report	50% of the tines collected.)	4	21. ■	1567.05	
SE(20. Motor Carrier Weight Violations (MCW) (Heport 21. Time Payment Fees (TP) (Report 50% of the \$2.	5 fee.)	<u> </u>			
`∢	22. Driving Records Fee (DRF) (Report 100% of fee	s collected.)		23. ■	つべんしつ5	
	23. Judicial Support Fee (JS)				A. C.O.O.	
	24. Truancy Prevention and Diversion Fund (TPD)			25. ■ \$		
25.	TOTAL DUE FOR THIS PERIOD (Total of Items 1 thro	ough 24 in Column 3.)		Z0, ■ <u>Ψ</u>		
	*** DO NOT DETACH ***					
				•		
	•					
	:					
26	TOTAL AMOUNT DUE AND PAYABLE(Same as Ite	em 25)		26, ≡ <u>\$</u>		
			46			
Cou	nty name					
<u> </u>					400 4070	
· ≡ T(Code County identification no. Period	For assistance	call 1-800-531-544	11, ext. 3-4276 or 512-	-403 - 42/0.	
		I, (type or print name)			certify	
32	620	true as shown in the	records of the treasury of			
	• -	mar nie montration above is			<u> </u>	
		- sign \				
Ι.	Make the amount in Item 26 payable to:	here /	Data			
L	State Comptroller	Title		. Date	1	
1	Mail to: Comptroller of Public Accounts	Phone number				
	P.O. Box 149361 Austin, TX 78714-9361	(Area code and number)				



a.⊤Code = 32650 Civil Fees

• DO NOT WRITE IN SHADED AREAS

- QUARTERLY REPORT	es viet (district)	Will be seen to see the seen to see the seen to see the see the seen to see the seen to see the see the seen to see the seen to see the see the seen to see the seen to see the see the seen to see the seen to see the see the seen to see the see th	<u> </u>	Stiffer - and the get
	port for quarter ending	9	e. Due date of re	port
City / County name a			h. IMPORTAN	
d. :			Blacken this b	ox if your address Show changes by Information.
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DESCRIPTION	COLUMN 1 Number (#) issued/filed	COLUMN 2 TOTAL COLLECTED	5% SERVICE FEE	COLUMN 4' AMOUNT DUE
1. Birth Certificate Fees	# <u>254</u>	457.20		1. \$
2. Marriage License Fees	. <u> 75</u>	2250.00		2
3, Declaration of Informal Marriage		25.00		3
4. Nondisclosure Fees	. /-0 .	592.00		4.· 5.
Juror Donations Justice Filing Fees - Courts Indigents Legal Services	1110	<u> 5888.00</u>	Western Martin and Military States and States	6
7. Statutory 7a. Filing Fee - Indigents Legal Services	= =		eterkini albak	7a
Court L 7b. Judicial Fund - Filing Fees	=			7b
8. Statutory - 8a. Filing Fee - County - Indigents Legal Services				8a
Filing Fees	1.0	620.00		8b 9a
County Indigents Legal Services Sount Shall services Shall	1.2	2,480.00		9b
10a. Divorce & Family Law cases (Col. 3 is \$0.25 times Col. 1)		3,030 00	\$	10a. <u>\$</u>
Court 10b. Other than Divorce/Family Law (Col. 3 is \$0.50 times Col. 1)	# <u>98</u> \$	4,845.78	<u>'j</u>	. 10b. ^{\$}
(Sec. 133.152)	# 226	9,487.00		110c.\$11. \$
1. Judicial Support Fee	-	•		\$
2. TOTAL DUE FOR THIS PERIOD (Total of all Item				
*** DO NOT DETACH *** DO NOT DET	ACH * * * DO NOT D	ETACH * * *	•	
3. TOTAL AMOUNT DUE AND PAYABLE (Same as	s item 12)			13.
City/County name				
T Code ■ City/County identification no. ■ Period		assistance call (800) 531	-5441, ext. 3-4276, or	(512) 463-4276.
32640		ution above is true as shown	in the records of the treas	certify ury of the city/county named.
Complete this report and make the amount in Item 13 payable	— leian v	orized agent		
STATE COMPTROLLER	Title	· · · · ·	Date	e
Mail to: COMPTROLLER OF PUBLIC ACCOUNTS P.O. Box 149361	Phone number (Area code and ne	umber)		

Austin, Texas 78714-9361

INTERNET





Electronic Filing System - State Fund

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You have certain rights under Chapters 552 and 559, Government Code, to review, request and correct information we have on file about you. Contact us at the address or phone numbers listed on this form.

c. County Identification N	in Times of the second	. 1 1	eport for quarte QUARTER I	•	10/30/17			
9	Coun	ty name and malli	ng address		en de	B	MPORTANT lacken this box if your addre as changed. Show changes ne preprinted information.	ss by 1
en e	;		•	3 2 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1. O.			

- (b) In addition to other fees authorized or required by law, the clerk of the supreme court, a court of appeals, a district court, a county court, a statutory county court, or a statutory probate court shall collect a \$30 fee on the filling of any civil action or proceeding requiring a filling fee, including an appeal, and on the filling of any counterclaim, cross-action, intervention, interpleader, or third-party action requiring a filling fee to be used as provided by Section 51.852 (assessed as \$20 prior to Sept. 1, 2015).
- (c) In addition to other fees authorized or required by law, the clerk of a justice court shall collect a \$10 fee on the filing of any civil action or proceeding requiring a filing fee, including an appeal, and on the filing of any counterclaim, cross-action, intervention, interpleader, or third-party action requiring a filing fee to be used as provided by Section 51.852.
- (d) In addition to other court costs, a person shall pay \$5 as a court cost on conviction of any criminal offense in a district court, county court, or statutory county court.

County treasurers should use this form to report their county's collections of this court cost and to submit payment of the appropriate portion of these costs, as determined by the Code of Criminal Procedures Art. 102.0178(e)(1 & 2). This report must be filed by the due date even if no collections were made and no payment is due.

Criminal Costs on Convictions (\$5 in all courts) 5. District Court convictions 6. County Courts convictions (Constitutional and Statutory Courts) 7. Total amount of criminal costs collected (All Courts) 8. TOTAL AMOUNT DUE (Add Items 4 and 7) *** DO NOT DETACH *** (Rev:8-15/2) 9. TOTAL AMOUNT OF PAYMENT (Same as Item 8) 9. \$	Filing Fees (Civil Cases) 1. District Court filing fees (@ \$30) 2. County Courts filing fees (Constitutional, Statutory and Statutory Probate Courts) (@ \$30) 3. Justice Courts filing fees (@ \$10) 4. Total amount of filing fees collected (All Courts)	3.÷ <u>m</u> \$	4224 00 1870 00 1480 00 9574 00
(Rev;8-15/2)	District Court convictions County Courts convictions (Constitutional and Statutory Courts) Total amount of criminal costs collected (All Courts)	7. ■ \$	113 .07 160 .91 273 .98 9847 .98
County name	(Rev;8-15/2) 9. TOTAL AMOUNT OF PAYMENT (Same as Item 8)	9. • \$	

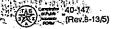
<u>-</u>	
■ T Code ■ County identification no. ■ Period	
32470	I, (type or print name) certify that the information above is true and correct as shown in the records of the reporting office of the county named.
<u> </u>	Authorized agent
Complete this report and make the amount in Item 9 payable to:	sign here
State Comptroller	Title Date
Mail to: Comptroller of Public Accounts	Daytime phone

For assistance call 1-800-531-5441, ext. 3-4276, or 512-463-4276.

Austin, TX 78714-9361

P.O. Box 149361

(Area code and number)





You have certain rights under Chapters 552 and 559

Government Code, to review, request and correct we have on file about you. Contact us at

pecialty Court Program Account

a T Code ≡ 32260	0		Do NOT write i	n shaded areas	the add	lress or phone numbers lis	ted on this form
c. County Identification N	lumber	d. Report for qua	uter ending (mm) ENDING	4 (30)		f. Due date of report	man - Total
9	County na	ne and mailing address			Blad	PORTANT cken this box if your addre	ss "
	• ,	* *			has the	changed. Show changes preprinted information.	by 1

A specialty court is defined in Gov. Code 772.0061(2XA-D) as: Gov. Code, Chapter 122, family drug court program; Chapter 123, drug court program; Chapter 124, veterans court program; and Chapter 125, a mental health court program.

Code of Criminal Procedures Article 102.0178; Costs Attendant to Certain Intoxication and Drug Convictions.

- (a) In addition to other costs on conviction, a person shall pay \$60 (Previously Drug Court Program Account, \$50 for offenses between 6/15/07-12/31/09 or \$60 for offenses on or after 1/1/10-8/31/2013) as a cost of court on conviction of an offense punishable as a Class B misdemeanor or any higher category of offense under:
 - (1) Chapter 49, Penal code (Intoxication and Alcoholic Beverage Offenses); or
 - (2) Chapter 481, Health and Safety Code (Texas Controlled Substance Act).
- (e) A county is entitled to:
 - (1) if the custodian of the county treasury complies with subsection (d), retain 10 percent of the funds collected under this article by an officer of the county during the calendar quarter as a service fee; and
 - (2) if the county has established a drug court program or establishes a drug court program before the expiration of the calendar quarter, retain in addition to the 10 percent authorized by Subdivision (1) another 50 percent of the funds collected under this article to be used exclusively for the maintenance of drug court programs operated within the county.

County treasurers should use this form to report their county's collections of this court cost and to submit payment of the appropriate portion of these costs, as determined by the Code of Criminal Procedures Art. 102.0178(e) (1 & 2). This report must be filed by the due date even if no collections were made and no payment is due.

	· · ·	11 0	101 53
1. Total amount of specialty court program fees collected	ed	1, =	101.00
2. Amount retained (50%) for established specialty co	ourt programs within the county	¢	
(per CCP 102.0178(e)(2), 50% of Item 1, if applicable)		2. ■ •	
3. Allowable service fee for timely filing		CZ2	21
(per CCP 102.0178(e)(1), 10% of Item 1, if applicable)	*************************************	3, ₹₹ <u>₽</u> ⊊	
(per 001 102.0710(0)(1))		HS H	
4. AMOUNT DUE THE STATE (Subtract Items 2 and 3 from	n Item 1.)	4.	
T, Fill Coll 1 Bot 11 B		(0,0)	
40-147 *** DO NOT DETACH ***			
(Rev.8-13/5)	·	別グ当	A 1000
3		리 * <	ESS SSS
5. TOTAL AMOUNT OF PAYMENT (Same as Item 4)			-<u>-</u>
			
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County name		avsie (15 júst læ	
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■ T Code ■ County identification no. ■ Period			·
· :	I, (type or print name)	i- the seconds of the	certify that the
32080	information above is true and correct as she county named.	DAU IU Nie Lecords of Die	teboring onice of the

sign

here !

Daytime phone

Title

For assistance call 1-800-531-5441, ext. 3-4276, or 512-463-4276.

Complete this report and make the amount in Item 5 payable to:

State Comptroller

Mail to: Comptroller of Public Accounts

Austin, TX 78714-9361

P.O. Box 149361

(Area code and number)

Authorized agent