



Yamhill County Department of Community Justice

615 E. Sixth Street, McMinnville, Oregon 97128 · Phone: 503-434-7513 · Fax: 503-472-5216

14 OCT -9 P 4:18

To: Yamhill County Board of Commissioners
From: Ted Smietana, Director
Yamhill County Department of Community Justice
Date: October 6th, 2014
Re: Community Corrections Fees

The purpose of this memo is to request your approval of the following fee increases, effective as soon as is practical:

DUII Victim's Panel \$20.00 one-time fee to \$40.00 one-time fee

(last increase February, 2003)

Work Release \$17.00 per day to \$20.00 per day.

(last increase April, 2009)

Department of Revenue: \$50.00 fee for outstanding supervision fee balances under \$250.00 – 19% fee for outstanding supervision fee balances of \$500.00 or more.

(adjustment due to Department of Revenue interest rate increase in October, 2011)

Work Crew Rate: \$200 per day increased to a maximum of \$300 per day.

ADES Reschedule Fee \$20 per increased to \$40.00

My staff and I believe these raises are appropriate, given the natural increases in both the cost of living and wages since these fees were last adjusted. As we have done in the past, our staff will continue assess each client's ability to pay these fees. Staff are allowed discretion to waive or reduce these fees (with supervisor approval) when they are working with a client who has significant financial burdens, a limited income, or both. Please also note that these fee rates are comparable with other community corrections agencies across the state.

Please note the attached spreadsheet which documents all of the fees currently assessed by Community Corrections. Included on this document is information indicating the date of the last adjustment of the particular fee, when the information is available.

Please contact me if you require any further information. Thank you very much for your consideration of this request!

Accepted by Yamhill County
Board of Commissioners on

10.9.14 by Board Order

14-617

Community Corrections Fee Schedule
(August 2014)
With Proposed Fee Increase to be implemented upon Board approval

Fee Type	Last Increase	Current Chg	Proposed Chg
Supervision Fee	April 15, 2009	40.00	No change
UA Fee	Prior to February, 2003 Additional testing	10.00 30.00	No change No change
DNA Fee	Effective July, 2002	10.00	No change
Victim's Panel	February, 2003 <i>Fee increase effective upon BOC approval</i>	20.00	40.00
Compact Fee	Effective September, 2004	100.00	No change
Electronic Monitoring	Effective February, 2006 Effective February, 2006	15.00 30.00	No change No change
GPS Monitoring	April 15, 2009	15.00	No change
Work Release	April 15, 2009 <i>Fee increase effective upon BOC approval</i>	17.00	20.00
Community Service Fee	Effective March 1, 2011	40.00	No change
DOR Fee	Fee to cover the cost incurred to collect fees through Dept of Revenue April 15, 2009 (50.00 flat fee for balances under 500 12% of balance owed if greater than 500) April 15, 2009 <i>Fee increase effective upon BOC approval</i>	50.00 for amt <500 12% of balance for amt >500	50.00 for amt <250 19% of balance for amt >250
Work Crew Rate	Current rate is \$200 per day <i>Fee increase effective upon BOC approval</i>	200.00	Up to 300.00

**On October 1, 2011 DOR increased their collection fee from 12% to 16%.
In order to recoup the cost of sending accounts to DOR,
a 19% fee is to be added to the balances sent for collection.
Effective upon BOC approval.

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	BAKR	BENT	CLAC	CIAT	COLU	COOS	CROO	CURR	DESC	DOUG	GRAN	HARN	HOOD	JACK	JEFF	JOSE
ASSE					150/1			50								
BRBA				75												20
CMPO	250		50	100	100	200	200	75	100	150	100	50	75	150	100	
CSW	35/1		40/EA	35	40/1		25/1	25/M	35				25	30/M; 50/SU		30
DAYR																
DCRT	50/O			300						500/1				150/1		
DMV														25/EA		
DNA				10	10/1		10/1		10				15			
DOR			50 IF BAL >50											100		12%
DUII					150/1									150/1		500
ESP	15/D:35/ SU			12/D:40/SU	10-25/D	15/D:50/SU		20/D	12/D:35/SU		14/D; 20 SU	15/D; 35/SU	2.50- 12/D; 50/SU	30/D; 30/SU		15/D
MAIN			VARIES													
MISC			VARIES													
MSC2			VARIES													
NOSH			\$15/CSW ORIENT					20						30/1		25
POLY		50-250		PER CONTRACT	150-250	150-225		200			300/1					VARIES
PREV			VARIES		VARIES			VARIES								
RE01			VARIES		300/1-MAX									VARIES		
RE02			VARIES											VARIES		
RE03			VARIES													
RE04			VARIES													
RTCF		12.50		25	35	30			20	15	25			25	25	25
SUPM		35:			40						35					
SUPV	35	25 ADMIN CASELOAD	45:35 CASEBANK	40	40	35	35	40	35	35	35	35	35	45	40	35
TANF												20/W				
TRAV						20		10		5						
TRHS	200/M	8.40/D:50/W; 200/M	VARIES		8.50/D									25% OF WAGES		250/M
TX01		50	VARIES		VARIES	3/G		VARIES							20/WK	25
TX02			VARIES							35/1					40	35/MWK
TX03			VARIES							70/1					20/WK	300
TX04																
URIN			VARIES	10	25/P		20/P	10/EA		5/P	10/P	15/1	15/40	15/EA		
WORK					15/D											
XFER						50		25	35		35					

ASSE	KIAM	LAKE	LANE	LINC	LINN	MALH	MARI	MULT	POLK	TILL	TRICTY	UMAT	UNIMVAL	WASC	WASH	YAMH
BRBA												25				
CMPO	50	50	150	50		200	50	50	100	150	50	100/300	100	50	100	100
CSW	30	30				15/1		35	30/EA	25/EA	25/1	40		35	40	40
DAYR												5/D				
DCRT	35		35	0:0 SUPV FEE	0 SUPV FEE @ COMPL				25/M			200				
DMV																
DNA					10	10			10	25	10			10		
DOR				10%/BAL			50				12%					
DUII																150
ESP	VARIES	VARIES		SS	7/D	250/M	1-12/D		10/D		10/D	15/D				14/D
MAIN							50		10							100
MISC							VARIES									
MSC2																
NOSH	100	100					25		25							
POLY	170-270	200-300	150		120-210	200			150-250			VARIES		VARIES		150
PREV																
RE01														VARIES		
RE02																
RE03																
RE04																
RTCF	15:35		15	25	15	25	25	25	28	25	25					25
SUPM						50									600/1	40
SUPV	35	35	35	35	35	35	40	35	40	40	35	40	35	35	35	40
TANF							10									
TRAV				10			5		10			5			3	
TRHS	250-350/M								10/D			200/M				
TX01	30/G-SO				SS							VARIES		VARIES		
TX02							VARIES									
TX03	30/G-DV															
TX04	30/G-SO															
URIN	7/EA	25/EA	30/P	25/P		5:25 TO LAB	20	9:50/P DISPUTED	15/D;25/O	15/EA;25 LAB FEE	10	5/EA		15/EA TO LAB		10:25/O
WORK						35/D										17/D
XFER						10			10			25				

1 - One time fee
D - Day
WK - Week

P - Positive
O - Oral swab
G - Group

M - Month
EA - Each

SU - Set up
SS - Sliding scale

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