

AGENDA PLACEMENT FORM

(Submission Deadline – Monday, 5:00 PM before Regular Court Meetings)

Date: _____
Meeting Date: 9/9/2024
Submitted By: County Judge's Office
Department: _____
Signature of Elected Official/Department Head:

Court Decision:
This section to be completed by County Judge's Office



September 9, 2024

Description:
Consider and Ratify Letter Authorizing Reimbursement for Medication/Mental Health Court Hearings Conducted by Wilbarger County for Individual Located at North Texas State Hospital-Vernon Campus, in the Amount of \$860.00-County Judge's Office

(May attach additional sheets if necessary)

Person to Present: _____

(Presenter must be present for the item unless the item is on the Consent Agenda)

Supporting Documentation: (check one) PUBLIC CONFIDENTIAL

(PUBLIC documentation may be made available to the public prior to the Meeting)

Estimated Length of Presentation: _____ minutes

Session Requested: (check one)

Action Item Consent Workshop Executive Other _____

Check All Departments That Have Been Notified:

County Attorney IT Purchasing Auditor
 Personnel Public Works Facilities Management

Other Department/Official (list) _____

**Please List All External Persons Who Need a Copy of Signed Documents
In Your Submission Email**



Re: C.N.
Cause #: DC-F202300523
Commitment Type: 46B.073

To Whom It May Concern:

This letter serves to memorialize an agreement that Johnson County will pay the costs of a hearing related to court-ordered psychoactive medication for a forensic patient from your county and/or civil mental health commitment hearing also for a person from your county. These hearings will be conducted by Wilbarger County Court, having probate court jurisdiction on these matters, regarding the above referenced categories of patients who are currently receiving treatment at North Texas State Hospital - Vernon Campus.

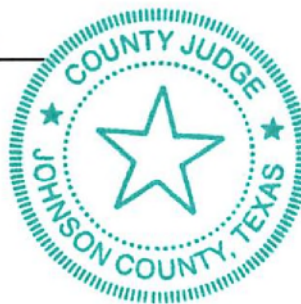
Johnson County authorizes reimbursement for all medication/mental health court hearings concerning the above-named patient.

_____ County DOES NOT authorize Wilbarger County Probate Court for any medication/mental health court hearings. _____ County will organize a hearing for the above-described patient.

Respectfully Submitted,

~~Judge Tiffany Strother
249th District Court~~

Christopher Boedeker
Johnson County Judge



**WILBARGER COUNTY MEDICATION FEE BREAKDOWN
 FILING FEES AND COURT COST AS OF JANUARY 1ST, 2022 based on SB41**

	Appellate Judicial System Fund	\$5.00
	Court Facility Fee Fund.....	\$20.00
	Clerk of the Court Account.....	\$40.00
Records Management and Preservation Fund..	\$15.00	
	Court Reporter Service Fund.....	\$25.00
	County Law Library Fund.....	\$35.00
	Courthouse Security Fund.....	\$20.00
	Language Access Fund.....	\$3.00
	County Jury Fund.....	\$10.00
	County Dispute Resolution Fund....	\$15.00
	Court-Initiated Guardianship Fund.....	\$30.00
	Judicial Education and Support Fund.....	\$5.00
	Clients Attorney Fee.....	\$250.00
	County Judge.....	\$50.00
	County Attorney.....	\$50.00
	Sheriff Fee (2 personal citations)....	\$150.00
	State Consolidated Fee.....	\$137.00
	TOTAL	\$860.00