



U.S. Department of Justice

Federal Bureau of Prisons

JAN -6 2005

Washington, DC 20534

Jay Hurst
Post Office Box 1687
Lexington, KY 40588-1687

For Further Inquiry Contact:
Federal Bureau of Prisons
320 First Street, N.W.
Room 841 HOLC Building
Washington, DC 20534

Re: Request No. 05-00211

Dear Mr. Hurst:

This is in response to your September 25, 2004 Freedom of Information Act request for the inmate capacity of each facility of the Federal Bureau of Prisons (BOP), as well as private facilities as rated by the BOP.

Enclosed are Program Statement 1060.11, "Rated Capacities for Bureau Facilities" and two reports which provide the Rated Capacity for BOP institutions and privately contracted facilities.

I trust this information is responsive to your request.

Sincerely,

A handwritten signature in cursive script, appearing to read "Wanda M. Hunt", is written over the typed name and title.

Wanda M. Hunt
Chief, FOIA/EA Section



Program Statement

OPI: ADM
NUMBER: 1060.11
DATE: June 30, 1997
SUBJECT: Rated Capacities for Bureau
Facilities

1. PURPOSE AND SCOPE. To establish procedures for determining and reporting each institution's rated capacity and its total capacity.

Determination of available housing for inmates is an essential management information requirement. Bureau capacity planning requires accurate and timely reporting of current institutions' rated capacities.

This information's reliability is critical to:

❖ Bureau budget justifications for capital resources and the budget analyses performed by the Department of Justice Budget Staff, Office of Management and Budget, and the Congress.

❖ Rated capacity is the baseline for the statistical measurement of prison crowding and is essential to managing the Bureau's inmate population to distribute the inmate population throughout the system reasonably and equitably.

2. PROGRAM OBJECTIVES. The expected results of this program are:

a. The Bureau's inmate population will be managed and distributed on an equitable and rational basis in accord with capacity computation formulas, security considerations, and institution needs.

b. Facility design and development plans will ensure sufficient design capacity is available at each security level.

c. Bureau capacity planning will be based on timely and accurate information received from all appropriate sources, including institutions.

3. DIRECTIVES AFFECTED

a. Directive Rescinded

PS 1060.10 Rated Capacities of Bureau Facilities (04/15/94)

b. Directives Referenced

PS 4200.09 Facilities Operations Manual (04/03/96)
PS 5100.06 Security Designation and Custody Classification
Manual (06/07/96)

TRM 005.01 SENTRY General Use Manual (06/01/94)

4. STANDARDS REFERENCED

a. American Correctional Association Foundation/Core
Standards for Adult Correctional Institutions: FC2-4017, FC2-
4018, FC2-4020.

b. American Correctional Association 3rd Edition Standards for
Adult Correctional Institutions: 3-4126, 3-4128, 3-4128-1,
3-4128-2.

c. American Correctional Association Foundation/Core
Standards for Adult Local Detention Facilities: FC2-5017,
FC2-5019, FC.-5089.

d. American Correctional Association 3rd Edition Standards for
Adult Local Detention Facilities: 3-ALDF-2B-04, 2C-01, 2C-01-1,
2C-03.

5. DEFINITIONS

a. Rated Capacity means an institution's total capacity less
hospital/infirmary, administrative detention, and disciplinary
segregation. (The medical bedspace at the medical referral
centers is to be included in the rated capacity for these
institutions). Rated capacity is not necessarily the same as any
institution's design or operating capacity. It is the objective
measurement of inmate housing space without regard to items such
as institution age, location, or infrastructure.

b. Total Capacity means an institution's rated capacity plus
the capacity of housing used for medical and special housing
purposes. This includes administrative detention and
disciplinary segregation.

c. Single Occupancy means a room, cell, or cubicle less than 120 square feet which is to be occupied by one inmate.

d. Double Occupancy means a room, cell, or cubicle less than 120 square feet which is to be occupied by two inmates.

e. Cubicle Housing means the partitioning of a housing area into spaces of less than 120 square feet. This has most often been done by the use of concrete block, but other materials may be used. Cubicle heights vary, but are usually less than six feet.

f. Multiple Occupancy Housing means a room, cell, or area of 120 square feet or more that is not partitioned. The most common form of this kind of housing is an "open dormitory".

g. Permanent housing means any designed inmate housing areas or any offices, buildings, or units which the Regional Director has approved for conversion to **permanent** inmate housing.

h. Temporary housing means the **temporary** use of tv rooms, hallways, mezzanines, gyms etc. as inmate housing to accommodate population increases.

6. GUIDELINES FOR DETERMINING PERMANENT AND TEMPORARY HOUSING

The following are examples of permanent and temporary housing:

a. Because of an institution's overcrowding, cots are placed in hallways and tv rooms. Since the hallways and tv rooms are only temporarily converted to living areas to accommodate the population increase, the use of additional cots in these areas shall be reported as temporary housing and not included in the institution's rated capacity.

b. An institution's mission changes from an FCI to a detention facility. The UNICOR factory is moved to another institution and the factory building is converted to an inmate housing unit for general population inmates. This represents a permanent housing addition and the area shall be included in the institution's rated capacity.

c. A cell range in a detention center unit is converted from segregation cells to holdover cells. This is a permanent housing change and shall be reflected in the institution's rated capacity.

d. A general housing unit is converted to a drug treatment unit and two inmate rooms are converted to offices. This represents a permanent housing change and shall be reflected in the institution's rated capacity.

e. A facility is under construction and trailers are placed on the site to house minimum security inmates before completion of the project. The trailers shall be reported as temporary housing.

7. CAPACITY COMPUTATION

a. Square Footage Measurement. The square footage measurement for rooms and cells, less than 120 square feet, is determined by measuring the space from interior wall to interior wall and includes the space occupied by beds, desks, plumbing fixtures (except showers) and closets. The square footage measurement for cubicles is determined by measuring the space from interior wall to interior wall including the space occupied by beds and desks but excluding hallways and walkways. The square footage measurement for multiple occupancy housing areas is determined by measuring the entire open dorm or living area and includes hallways and walkways. All square footage measurements shall be "rounded" to the nearest whole number. Computations shall be made according to the Guidelines for Inmate Housing Unit Capacity Computation (Attachment A).

b. Total Capacity. Each institution shall compute the capacity of its administrative detention/disciplinary segregation and medical/infirmatory space using the high security standards. These figures shall be added to rated capacity to determine total capacity.

c. Rated Capacity. The computation of rated capacity for each institution is the total capacity less hospital/infirmatory and detention/segregation.

The rated capacity for an institution or an individual unit shall be determined as stated below, according to the security level mission of the institution or inmate housing unit. (The rated capacity for cadre inmates at detention facilities (e.g. MCC, MDC, FDC) shall be determined using the low security guidelines. For institutions that do not have camps, a minimum security quota shall be determined for outside work details). The rated capacity for each SENTRY reporting unit shall be "rounded" to the nearest whole number. Rated capacity shall be reported on the Rated Capacity Computation Form (EMS 36). Refer to Attachment B for a copy of the form and instructions for completing the report.

(1) High Security. This includes high security institutions, court/detention units and institutions, and any single unit that requires a high level of security, such as a Protective Custody Unit.

(a) Rooms, Cells and Cubicles. If less than 75 square feet, space shall be rated for single occupancy only; if 75 square feet or more, but less than 120 square feet, 25 percent of rooms, cells and cubicles shall be rated for double occupancy, 75 percent for single occupancy. If 120 square feet or more, refer to the high security multiple occupancy section below.

(b) Multiple Occupancy Housing Areas. If 120 square feet or more, rated capacity is computed by dividing the total space of each sleeping area or unit by 80 square feet.

(2) Medium Security

(a) Rooms, Cells and Cubicles. If less than 70 square feet, space shall be rated for single occupancy only; if 70 square feet or more, but less than 120 square feet, 50 percent of rooms, cells and cubicles shall be rated for double occupancy, 50 percent for single occupancy. If 120 square feet or more, refer to the medium security multiple occupancy section below.

The Bureau design standard for construction of medium security institutions provides for rooms and cells with a "nominal" 75 square feet each. Depending on design techniques and building materials, the actual square footage may vary slightly. Thus, the medium security square footage measurement in this directive was adjusted to 70 square feet to allow equitable capacity measurements among institutions of similar design generation. This rated capacity change does not constitute a change in the design standard of 75 square feet.

(b) Multiple Occupancy Housing Areas. If 120 square feet or more, rated capacity is computed by dividing the total space of each sleeping area or unit by 70 square feet.

(3) Low Security

(a) Rooms, Cells and Cubicles. If less than 65 square feet, space shall be rated for single occupancy only; if 65 square feet or more, but less than 120 square feet, 100 percent of rooms, cells, and cubicles shall be rated for double occupancy.

(b) Multiple Occupancy Housing Areas. If 120 square feet or more, rated capacity is computed by dividing the total space of each sleeping area or unit by 60 square feet.

(4) Minimum Security

(a) Rooms, Cells and Cubicles. If less than 55 square feet space shall be rated for single occupancy only; if equal to or greater than 55 square feet but less than 120 square feet space would be rated for 100 percent double occupancy.

(b) Multiple Occupancy Housing Areas. If equal to or greater than 120 square feet or more, rated capacity is computed by dividing the total space of each sleeping area or unit by 45 square feet.

(5) Medical Referral Centers (MRCs). It may be inappropriate to use the above standards to compute rated capacity of Bureau units which provide medical (including psychiatric) care to inmates. More space may be needed for a variety of reasons having to do with necessary staff activities, hospital equipment, special treatment needs, etc. Since these reasons may vary considerably, each medical unit must be evaluated separately.

As a first step, MRCs will use the standards for high security to determine the institution's rated capacity. The Warden will review this rated capacity in consultation with the institution's medical staff. If the Warden believes that rated capacity should be different from that derived from using high security computation procedures, a thorough rationale must be documented on the survey. Prior to submitting the survey to the Regional Office, the Warden shall obtain the written approval of the Assistant Director, Health Services Division, for recommended rated capacity figures. MRC's health care rated capacity will be reported for only two categories:

- (a) Medical¹
- (b) Mental Health¹

¹ Includes those beds necessary to support the mission but which are not available for direct admissions, e.g. suicide watch, seclusion, recovery, etc.

There may be more than one Medical or Mental Health Unit in the MRC's organization and this can be noted on SENTRY, e.g. Medical Unit 1, Medical Unit 2, Mental Health Unit 1 and Mental Health Unit 2. SENTRY Population Reports provide the total number of beds by rated capacity and the current population.

In medical institutions, it should be noted that the amount of space per inmate need not be consistent throughout a unit. For example, the same size room might be rated for one inmate if used for intensive care, two inmates if used for inpatient care, and three inmates if used for chronic (nursing home) care.

Non-medical housing at MRCs is to be rated according to the predominant inmate security level found in that housing. The Warden shall document the reasons for selecting that security level in all reports.

d. Computation Problems. The Capacity Planning Branch, Administration Division, shall be contacted concerning any questions about the computation of rated capacity. A summary of the rated capacity formulas, for each security level, is included in Attachment A.

8. REPORTING

a. Wardens shall forward an original signed Rated Capacity Computation Form (EMS 36) (Attachment B) to the Regional Director upon activation of a new institution. This form must also be submitted at any time either an institution's or individual reporting unit's rated capacity changes by 10 or more beds.

b. All permanent housing areas are included in the determination of the institution's rated capacity and shall be reported on the Rated Capacity Computation Form (EMS 36).

c. Temporary housing shall be reported on the Rated Capacity Computation Form (EMS 36) but **not** be used to determine the institution's rated capacity.

d. The Regional Director shall sign and forward the Rated Capacity Computation Form to the Assistant Director, Administration Division within 30 days.

e. The Assistant Directors for the Administration and Correctional Programs Divisions shall review and approve all rated capacity surveys and adjustments on the Rated Capacity Change Notification Form (Attachment C), prior to any change being made to the SENTRY System. The Capacity Planning Branch is responsible for reporting all approved surveys and adjustments to the Office of Information Systems, for inclusion in appropriate SENTRY reports.

f. The Capacity Planning Branch will input and maintain information from the Rated Capacity Computation Form in a central database.

Kathleen M. Hawk
Director

GUIDELINES FOR INMATE HOUSING UNIT CAPACITY COMPUTATION

| RATED CAPACITY | Room / Cell Cubicle < 120 Sq Ft | Multiple Occupancy Area ≥ 120 Sq Ft |
|---------------------|--|---|
| High Security | < 75 / RC = (SO) ≥ 75 / RC = 25% Double Occupancy | All space in room/cube area divided by 80 |
| Medium Security | < 70 / RC = (SO) ≥ 70 / RC = 50% Double Occupancy | All space in room/cube area divided by 70 |
| Low Security | < 65 / RC = (SO) ≥ 65 / RC = 100% Double Occupancy | All space in room/cube area divided by 60 |
| Minimum Security | < 55 / RC = (SO) ≥ 55 / RC = 100% Double Occupancy | All space in room/cube area divided by 45 |

RC = Rated Capacity

< = Less Than

SO = Single Occupancy

≥ = Equal To or Greater Than

RATED CAPACITY COMPUTATION (EMS 36 - 02/93)*

 * (THIS FORM REPLACES RATED CAPACITY FORMS EMS 36, 37, 38 AND 39,
 DATED JULY 1991)

INSTITUTION NAME: _____ DATE: _____
 SENTRY REPORTING UNIT: _____ SECURITY LEVEL: _____

TOTAL INSTITUTION CAPACITY: _____ (SUM OF ITEMS 1 AND 2)
 SPECIAL HOUSING CAPACITY (-) _____ (ITEM 1 TOTAL, IF ANY)
 R A T E D C A P A C I T Y : _____ (ITEM 2 LESS ITEM 1)

1. SPECIAL HOUSING: ADMINISTRATIVE DETENTION/DISCIPLINARY
 SEGREGATION AND HOSPITAL/INFIRMARY (NON
 MEDICAL FACILITIES)

| UNIT NAME | HOUSING TYPE (ROOM, CELL, ETC) | WET/ DRY | NUM- BER | SQUARE FOOTAGE EACH | CAPACITY |
|--------------|-----------------------------------|-------------|-------------|---------------------------|----------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

SPECIAL HOUSING CAPACITY: _____

2. PERMANENT HOUSING

| UNIT NAME | HOUSING TYPE (ROOM, CELL, ETC) | WET/ DRY | NUM- BER | SQUARE FOOTAGE EACH | CAPACITY |
|--------------|-----------------------------------|-------------|-------------|---------------------------|----------|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |

PERMANENT HOUSING RATED CAPACITY: _____

RATED CAPACITY COMPUTATION (CONTINUED) (EMS 36 - 02/93) PAGE 2

INSTITUTION NAME: _____ DATE: _____
SENTRY REPORTING UNIT: _____ SECURITY LEVEL: _____

PLEASE REPORT ANY TEMPORARY HOUSING, RENOVATIONS OR EXPANSIONS OF HOUSING UNITS UNDER ITEMS 3 AND 4 BELOW. ENTER NONE UNDER UNIT NAME IF THERE ARE NONE TO REPORT.

3. TEMPORARY HOUSING - THESE AREAS WERE NOT DESIGNED FOR/HAVE NOT BEEN PERMANENTLY CONVERTED TO INMATE BEDSPACE AND ARE NOT PART OF RATED OR TOTAL INSTITUTION CAPACITY

| UNIT NAME | HOUSING TYPE (TV ROOM, GYM, ETC) | WET/ DRY | NUM- BER | SQUARE FOOTAGE | | CAPACITY |
|--------------|-------------------------------------|-------------|-------------|-------------------|-------|----------|
| | | | | EACH | | |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |

4. RENOVATION/EXPANSION (FUTURE RATED CAPACITY)

| UNIT NAME | HOUSING TYPE (TV ROOM, GYM, ETC) | WET/ DRY | NUM- BER | SQUARE FOOTAGE | | DATE | CAPACITY |
|--------------|-------------------------------------|-------------|-------------|-------------------|-------|-------|----------|
| | | | | EACH | | | |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ | |

EXPLANATION FOR ANY CHANGES TO RATED CAPACITY: _____

PREPARED BY: (FACILITIES MANAGER) _____
DATE PREPARED: _____
APPROVED: (CHIEF EXECUTIVE OFFICER) _____
DATE APPROVED: _____
(RETAIN COPY OF THE SIGNED FORM AT THE INSTITUTION FOR AUDIT PURPOSES) -- FORWARD THE ORIGINAL SIGNED FORM TO THE REGIONAL DIRECTOR)

REVIEWED BY: (FACILITIES ADMINISTRATOR) _____
DATE REVIEWED: _____
APPROVED: (REGIONAL DIRECTOR) _____
DATE APPROVED: _____
(RETAIN COPY OF THE SIGNED FORM AT THE REGIONAL OFFICE FOR AUDIT PURPOSES)

MAIL THE ORIGINAL SIGNED FORMS TO:

FEDERAL BUREAU OF PRISONS
ASSISTANT DIRECTOR
ADMINISTRATION DIVISION
320 FIRST ST., NW - ROOM 5009 ADMIN
WASHINGTON, D.C. 20534

INSTRUCTIONS FOR COMPLETING FORM EMS 36

The Rated Capacity Computation Form (EMS 36) has four sections:

1. Special Housing
In section 1, report Administrative Detention, Disciplinary Segregation, and Hospital or Infirmary areas in non-medical facilities. These areas are not designated to and **are not** included in rated capacity.
2. Permanent Housing
In section 2, report areas **designed** as inmate sleeping areas and areas **permanently converted** to inmate sleeping areas, approved by the Regional Director.
3. Temporary Housing
In section 3, report areas **temporarily converted** to inmate sleeping areas (i.e. cots in tv rooms, hallways, gymnasiums, etc.) due to renovations and/or overcrowding. These areas will be restored as living/program space when circumstances permit.
4. Renovation/Expansion
In section 4, report **renovation/expansion projects** that will affect the institution's rated capacity. Any areas/units that are closed for renovation shall be listed in this section. Also, report any projects that will add rated capacity in the future.

Before the rated capacity computation form is completed, the Facilities Manager shall request a copy of the institution SENTRY population report from Inmate Systems. This report will list the **SENTRY Reporting Units** to be measured and reported.

- A. Print a copy of the rated capacity computation form (EMS 36) from the SENTRY EMS BOP FORMS MAIL-ID and complete as indicated in Section B below.
1. After the form is completed, Institution staff shall print the EMS FORM and retain a copy of the signed form for audit purposes. The **original signed** form shall be mailed to the Regional Director.
 2. Regional Office staff shall review the information carefully and if necessary, return any forms with any incomplete or inaccurate information to the institutions for correction. Copies of the signed forms shall be retained for audit purposes. The **original signed** forms shall be mailed to:

Federal Bureau of Prisons
Assistant Director
Administration Division
320 First Street, N.W., Room 5009 ADMIN
Washington, D.C. 20534

PREPARATION OF RATED CAPACITY COMPUTATION FORM (EMS 36)

B. Complete the form as follows:

1. **Institution Name** and **Date** are self-explanatory.
2. **SENTRY Reporting Unit** and **Security Level**: Some institutions have only one reporting unit, such as FPC Alderson -- many institutions have several. These reporting units are separated for designation purposes and are reported, measured, and rated individually according to security level. Following are a few examples of some reporting units and their respective security levels for rated capacity purposes²:

| <u>Reporting Unit</u> | <u>Security Level</u> | <u>Definition</u> |
|-----------------------|-----------------------|--|
| Jail/Detention | High | Pretrial/jail bedspace reserved for use by USMS |
| Holdover | High | All security levels of inmates may be housed in these units. |
| INS | High | Unsentenced Mariel Cuban detainees. |
| Cadre | Low | Work cadres at MCC's and other higher security institutions without satellite camps. |
| General | ² | Regular housing for Population sentenced offenders. |
| Drug | ² | Housing utilized as Treatment part of a formal drug treatment program for sentenced offenders. |

² Security level of the main institution being reported.

3. **Unit Name** - what the unit is called.
4. **Housing Type**: Room, cell, cubicle, dormitory.
5. **Wet or Dry**: if the room or cell has plumbing (sink and toilet), it is wet; if not, it is dry. Dormitories and cubicle housing are considered dry because the plumbing is generally separate from sleeping areas and is shared by several sleeping areas.

PREPARATION OF FORM EMS 36 (continued):

- 6/7. **Number and Square Footage:** separate entries must be made for areas of different sizes, i.e., 6 rooms @ 80 square feet each; 1 dormitory @ 300 square feet each; 2 cubicles @ 144 square feet each, etc.
8. **Rated Capacity:** See Section 6, Capacity Computation, for formulas by security level for computing each unit's rated capacity.

² The Security Designation and Custody Classification Manual, lists current SENTRY reporting units by security level and is updated as new units are added.

RATED CAPACITY CHANGE NOTIFICATION

| |
|-----------------------------------|
| DATE: |
| TO: OFFICE OF INFORMATION SYSTEMS |
| RE: CHANGES IN RATED CAPACITY |

Please make the following change(s) on the daily population report:

| Institution | Rated Capacity | From | To | Effective Date |
|-------------|----------------|------|----|----------------|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |

Rationale for change(s):

Assistant Director
Administration Division

Assistant Director
Correctional Programs Division

BOPCB
PAGE 001

POPULATION REPORT

* 12-06-2004
* 08:14:27

FUNCTION: PRT LEVEL.....: ALL SEQUENCE...: AF
ZEROS(?): NY ORGANIZATION: AGEN EQ BOP DETAIL.....: F
OPTION...: TOF.....: T FMB.....: A
 CLASSIF.....: - NEW PAGES.:
 FUNC AREA...: - GROUPING...:
 SEX.....: - CODES ONLY: N

----- COLUMNS -----

1: 2: 3: RCAP 4: 5: 6: 7: 8: 9:

G0002

MORE PAGES TO FOLLOW . . .

POPULATION REPORT

| | RATED CAP |
|------------------------|--------------|
| ALDERSON FPC, WV | 904 |
| ALLENWOOD FPC, PA | 275 |
| ALLENWOOD LOW FCI, PA | 992 |
| ALLENWOOD MED FCI, PA | 938 |
| ALLENWOOD USP, PA | 640 |
| ASHLAND FCI, KY | 1126 |
| ATLANTA USP, GA | 1725 |
| ATWATER USP, CA | 1088 |
| BASTROP FCI, TX | 1057 |
| BEAUMONT LOW FCI, TX | 2024 |
| BEAUMONT MED FCI, TX | 1152 |
| BEAUMONT USP, TX | 960 |
| BECKLEY FCI, WV | 1510 |
| BENNETTSVILLE FCI, SC | 128 |
| BIG SANDY USP, KY | 1088 |
| BIG SPRING FCI, TX | 1035 |
| BROOKLYN MDC, NY | 1618 |
| BRYAN FPC, TX | 736 |
| BUTNER FMC, NC | 743 |
| BUTNER LOW FCI, NC | 992 |
| BUTNER MED FCI, NC | 850 |
| CANAAN USP, PA | 50 |
| CARSWELL FMC, TX | 1074 |
| CHICAGO MCC, IL | 395 |
| COLEMAN LOW FCI, FL | 1536 |
| COLEMAN MED FCI, FL | 1664 |
| COLEMAN USP, FL | 960 |
| CUMBERLAND FCI, MD | 1024 |
| DANBURY FCI, CT | 654 |
| DEVENS FMC, MA | 1220 |
| DUBLIN FCI, CA | 1124 |
| DULUTH FPC, MN | 881 |
| EDGEFIELD FCI, SC | 1664 |
| EGLIN FPC, FL | 724 |
| EL RENO FCI, OK | 912 |
| ELKTON FCI, OH | 2048 |
| ENGLEWOOD FCI, CO | 567 |
| ESTILL FCI, SC | 1024 |
| FAIRTON FCI, NC | 942 |
| FLORENCE ADMAX USP, CO | 490 |
| FLORENCE FCI, CO | 1260 |
| FLORENCE HIGH USP, CO | 640 |
| FORREST CITY FCI, AR | 1792 |
| FORREST CITY MED FCI | 400 |
| FORT DIX FCI, NJ | 3942 |
| FORT WORTH FMC, TX | 1255 |

| | RATED |
|------------------------|-------|
| | CAP |
| GILMER FCI, WV | 1280 |
| GREENVILLE FCI, IL | 978 |
| GUAYNABO MDC, RQ | 864 |
| HAZELTON USP, WV | 128 |
| HONOLULU FDC, HI | 670 |
| HOUSTON FDC, TX | 693 |
| JESUP FCI, GA | 1380 |
| LA TUNA FCI, TX | 1016 |
| LEAVENWORTH USP, KS | 1604 |
| LEE JSP, VA | 1088 |
| LEWISBURG USP, PA | 1205 |
| LEXINGTON FMC, KY | 1468 |
| LOMPOC FCI, CA | 976 |
| LOMPOC JSP, CA | 1207 |
| LORETTO FCI, PA | 784 |
| LOS ANGELES MDC, CA | 735 |
| MANCHESTER FCI, KY | 1268 |
| MARIANNA FCI, FL | 1083 |
| MARION USP, IL | 920 |
| MCCREARY USP, KY | 1280 |
| MCKEAN FCI, PA | 1148 |
| MEMPHIS FCI, TN | 1023 |
| MIAMI FCI, FL | 850 |
| MIAMI FDC, FL | 1365 |
| MILAN FCI, MI | 1014 |
| MONTGOMERY FPC, AL | 920 |
| MORGANTOWN FCI, WV | 1090 |
| NELLIS FPC, NV | 587 |
| NEW YORK MCC, NY | 518 |
| OAKDALE FCI, LA | 820 |
| OAKDALE FDC, LA | 748 |
| OKLAHOMA CITY FTC, OK | 1065 |
| OTISVILLE FCI, NY | 790 |
| OXFORD FCI, WI | 740 |
| PEKIN FCI, IL | 972 |
| PENSACOLA FPC, FL | 424 |
| PETERSBURG FCI, VA | 1154 |
| PETERSBURG MED FCI, VA | 1179 |
| PHILADELPHIA FDC, PA | 746 |
| PHOENIX FCI, AZ | 1014 |
| POLLOCK USP, LA | 1088 |
| RAY BROOK FCI, NY | 750 |
| ROCHESTER FMC, MN | 681 |
| SAFFORD FCI, AZ | 371 |
| SAN DIEGO MCC, CA | 612 |
| SANDSTONE FCI, MN | 473 |

BOPCB *
PAGE 004 OF 004 *

POPULATION REPORT

* 12-06-2004
* 08:14:27

| | RATED |
|------------------------|-------|
| | CAP |
| SCHUYLKILL FCI, PA | 1016 |
| SEACOVILLE FCI, TX | 1390 |
| SEATAC FDC, WA | 736 |
| SEYMOUR JOHNSN FPC, NC | 576 |
| SHERIDAN FCI, OR | 1341 |
| SPRINGFIELD USMCFP, MO | 913 |
| TALLADEGA FCI, AL | 994 |
| TALLAHASSEE FCI, FL | 818 |
| TERMINAL ISL FCI, CA | 466 |
| TERRE HAUTE USP, IN | 1037 |
| TEXARKANA FCI, TX | 996 |
| THREE RIVERS FCI, TX | 1048 |
| TUCSON FCI, AZ | 415 |
| VICTORVILLE MED FCI | 1408 |
| VICTORVILLE USP, CA | 700 |
| WASECA FCI, MN | 532 |
| WILLIAMSBURG FCI, SC | 128 |
| YANKTON FPC, SD | 566 |
| YAZOO CITY FCI, MS | 1664 |

G0000

TRANSACTION SUCCESSFULLY COMPLETED

BOPCB
PAGE 001

*
*

POPULATION REPORT

*
*

12-06-2004
08:14:49

FUNCTION: PRT
ZEROS(?): NY
OPTION...:

LEVEL.....: ALL * SEQUENCE...: AF
ORGANIZATION: AGEN EQ BOP DETAIL.....: F
TOF.....: T FMB.....: F
CLASSIF.....: - NEW PAGES.:
FUNC AREA...: - GROUPING...:
SEX.....: - CODES ONLY: N

----- COLUMNS -----
1: 2: 3: RCAP 4: 5: 6: 7: 8: 9:

G0002

MORE PAGES TO FOLLOW . . .

BOPCB *
PAGE 002 OF 002 *

POPULATION REPORT

* 12-06-2004
* 08:14:49

| | RATED |
|------------------------|-------|
| | CAP |
| BIG SPRING CI, TX | 2618 |
| CALIFORNIA CITY CI, CA | 2304 |
| CIBOLA COUNTY CI, NM | 1012 |
| DALBY CI, TX | 1046 |
| EDEN CI, TX | 1294 |
| ELOY DC, AZ | 1250 |
| MCRAE CI, GA | 1524 |
| REEVES CI, TX | 2200 |
| RIVERS CI, NC | 1200 |
| TAFT CI, CA | 2048 |