Track #	Un-accep Risk to Release Y/N	Held, Discretionary detention or release?	Reason State Custody Expired	Start Hold Date	Release Date	Days held	Fac.	Reason for exercise of discretion to detain or release.
808	Yes	Held	Unknown	10/3/2017	10/4/2017	1 day	всс	ICE Warrant 1-205
809	Yes	Held	Unknown	10/10/2017	10/11/2017	1 day	CRCC	ICE Warrant I-205
810	Yes	Held	Time served	10/20/2017	10/23/2017	1 day	CRCC	ICE Warrant I-205

PARTMENT OF MAD SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

Event#:	2808	File No Date: septem	bar 30, 2017
TO: (Name and Title of Institution Enforcement Agency) BRIDG 300 C	- DR Any Subsequent Lew BEGORT POLICE DEPT. CONGRESS ST. SEPORT, CT 066040000	FROM: (Department of Homeland Secundary), CT, DOCKET CONTROL OF ICE ENG NARWORD HUD OFFICE 450 NATA OF ROOM 501 HARRYORD, CT 06105	rity Office Address) wateck
Name of Allen:			
Date of Birth:	- Cilizenahip;	вхвидион	Sex; M
4 DAS HAS DETERMINED T DETERMINATION IS BAS	HAT PROBABLE CAUSE EXISTS ED ON <i>(complete box 1 or 2).</i>	THAT THE SUBJECT IS A REMOVAE	ile Alien. This
Biometric confirmation of or in addition to other rel removable under U.S. in:	g remoyal proceedings against the i f the alien's identily and a records c lable information, that the alien eith imigration law; and/or	alien; heck of federal databases that affirmativ er lacke immigration status or notwithsta for other reliebte evidence that affirmative	inding such status la
lacks immigration status	or notwithstanding eyeh status is re	movable under U.S. immigration law.	-
<u></u>		A PROCEEDING OR INVESTIGATION	
	roceeding or invesligation for which mplete processing and/or make an	n the alien was transferred to your custon admissibility determination.	dy, DHS intends to resums
IT IS THEREFORE REQUESTE	D THAT YOU:	•	4 4
DHS by calling \(\times \) U.S. In a60-240-3012 . If you c Center at: (802) 872-8020. * Waintain custody of the alloheen released from your out detainer to take effect. This cretabilitation, parole, rolease Relay this detainer to any oth Notify this office in the event	amigration and Customs Enforcement annot reach an official at the number of for a period <u>NOT TO EXCEED 4</u> alody to allow DHS to assume custo detainer arises from DHS authorities of diversion, custody classification, to be law enforcement agency to which of the allen's death, hospitalization	or transfer to another institution.	der Protection (CBP) at inforcement Support the would otherwise have opy of this form for the I the alien's ball,
If checked: please cancel	the detainer related to this allen pro	eviously submitted to you on	(dels).
	mmigration officer)	(Signature of Immigration Offi	icer) (Sign in ink)
Notice: If the allen may be the notify the ICE Law Enforcement concerns about this matter.	Acilm of a orime or you want the alic Support Center at (802) 872-6020.	en to remain in the United States for a la You may also call this number if you he	w enforcement purpose, ave any other questions or
TO BE COMPLETED BY THE LA NOTICE:	W ENFORCEMENT AGENCY CUR	RENTLY HOLDING THE ALIEN WHO IS	THE SUBJECT OF THIS
Please provide line information be	olow, sign, and return to DHS by ma	illing, emailing or faxing a copy io	<u> </u>
Local Booking/Inmete #: _t 1	Estimated release date/time:/	10/02/17 530-ia B1	reach of prace End.
Date of latest criminal charge/pon	violion: <u>09/30/17</u> Last offen	ise charged/conviolion: 53a-18(A	
This form was served upon the al	on on <u>09/30/17</u> , in the fo	illowing manner;	•
In person Dy Ininate :	nail delivery 🔲 other (please sp	recl(y):	-
(Nanjo and title of	(Officer)	#SIZINATURO UI UII.CO	er) (Sign in lak)
043 Form 1-247A (3/17)	eniotes)		Page 1 of 3

	iM		T-171 PANA /AAA F-96
Subject IU. Event#'		1 mg a,	2001/00001 00
		Late. Sapte	NBWY 26, 201/
Enforcement Agency) Judicia Worwich 1 Court	l Marchel's Office Superior Court house Square	FROM: (Department of Homeland Sec HARTFORD, CT, DOCKET CONTROL ICE ERG HARTFORD Sub Office 450 MAIN ST 5th FLOOR, ROOM 501 HARTFORD, CT 06103	urity Office Address) oreside
Name of Alien:		#80	9.
Date of Birth:	Citizenship;	GUATEMALA ·	Sex: H
		's that the subject 18 a remova	BLE ALIEN, THIS
The pendency of ongoing r Biometric confirmation of the or in addition to other reliate removable under U.S. imm Statements made by the all	Date: supcember 29. 2013 Di (Name and Title of Institution - CR Any Subsequent Law Enforcement Agency) 3-06 (scal.) makeshal 1 of trice Morrich Repeated Coast Service Repeated Repeat		
2. DHS TRANSFERRED THE A	LIEN TO YOUR CUSTODY FO	r a proceeding or investigation)R (complete box 1 or 2).
Upon completion of the pro- custody of the alien to com	cseding or investigation for whi plate processing and/or make a	ich the alien was transferred to your ous an admissibility determination.	tody. DHS intends to resume
		· .	•
DHS by calling X U.S. Imm 860-240-3012 If you can Center at: (802) 872-8020. Maintain custody of the alien been released from your custo detainer to take effect. This de	nigration and Customs Enforcer nnot reach an official at the num of for a period <u>NOT TO EXCEED</u> ody to allow DHS to assume cur elainer arises from DHS authori	ment (ICE) or U.S. Customs and B nber(s) provided, please contact the Lav 0.48 HOURS beyond the time when help stody. The allen must be served with a ties and should not impact decisions ab	order Protection (CBP) at v Enforcement Support she would otherwise have a copy of this form for the out the allen's ball.
Relay this detainer to any other	law enforcement agency to which	ch you transfer oustody of the alien.	•
		•	(date).
-a man qua	- DO	· () · · · · · · · · · · · · · · · · ·	
in to elli one emery)	migration Officer)	(Signeture of Immlgration	Officer) (Sign in ink)
Notice: If the alien may be the vinotify the ICE Law Enforcement Sconcerns about this matter.	ctim of a crime or you want the Support Center at (802) 872-60	alien to remain in the United States for 20. You may also call this number If yo	a law enforcement purpose, u have any other questions or
NOTICE:			•
Please provide the information beli	ow, sign, and return to DHS by	mailing, emailing or faxing a copy to	240-2021
Local Booking/Inmals #.	Estimated release date/time:	~/A I	accused
Date of latest criminal charge/conv			
·			
in person by inmate m		specify):	
(Name and illa of	F RS	18 innation of C	Officer) (Sign in Ink)
(Name and Ittle 61)	Jiligef)	(0.9,4.0.00.	Page 1 of 3

DEPARTMENT OF HOMELAND SECURITY

O Marida			
Subject ID Event#	#810	File No:	n
			9. 2017
TO: (Name and Tille of Institution - OR Apy : Finiorcement Agency) NORWICH PD (C FBI# 121294HC SIDH CT137463	(I) (3	FROM: (Department of Homeland Sac ERO - Meditainster, CA Sub Off ICE ERO PERC LAGUNA NIGUEL 24000 AVILA RD RM# 1552 LAGUNA NIGUEL, CA 92677	urily Office Address) ice
Name of Alien:	hotel Apple Ables	#	
Date of Birth:	Cltizenship:	Guatemala	Sex: %
1: DHS HAS DETERMINED THAT PRO DETERMINATION IS BASED ON (c	BABLE CAUSE EXISTS omplete box 1 or 2).	コー・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス・ス	BLE ALIEN THIS
or in addition to other reliable info removable under U.S. immigration	proceedings against the a 's identily and a records ch mation, that the alien eithe law; and/or	lien; eck of federal databases that affirmal r lacks immigration status or notwiths r other reliable evidence that affirmati	landing such status is
lacks immigration status or notwith	standing such status is ren	novable under U.S. immigration law.	
2. DHS TRANSFERRED, THE ALIEN TO	YOUR CUSTODY FOR	L BROGEEDING OK INNESTIGATIO	N (complete box for 2).
custody of the alier to complete pi	ocessing and/or make an a	the allen was transferred to your cust omissibility determination.	ody, DHS intends to resume
IT IS THEREFORE REQUESTED THAT			
 Notify DH6 as early as practicable (s OHS by calling	and Customs Enforcement on an official at the number	of (ICE) or U.S. Customs and Bor(s) provided, please contact the Law	rder Protection (CBP) at Enforcement Support
been released from your custody to a datainer to take affect. This detainer a rehabilitation, parole, release, diversion	low DHS to assume custon rises from DHS authorities	ly. The alien must be served with a and should not impact decisions abo	copy of this form for the ut the alien's ball,
 Relay this detainer to any other law onl Notify this office in the event of the ati 	orcement agency to which y	ou transfer custody of the slien.	
•	•	viously submitted of you on	(date).
(Name and title of Immigration	o Officer)	(Signature of Immigration C	Officer) (Sign in Ink)
Notice; if the alien may tie the victim of a notify the ICE Law Enforcement Support concerns about this matter.	crime or you want the alle Center at (802) 872-8020.	n to remein in the United States for a You may also call this number if you	law enforcement purpose, have any other questions or
TO BE COMPLETED BY THE LAW ENFO	RCEMENT AGENCY CURR	ENTLY HOLDING THE ALIEN WHO	IS THE SUBJECT OF THIS
Please provide the information below, sign	, and return to DHS by mai	ling, emailing or faxing a copy to	
Local Booking/Inmale #: ima	ited release date/time:	41	
Date of latest criminal charge/conviction:	NA Last offens	e charged/conviction:	
This form was served upon the alien on	41 A	lowing manner:	
in person by inmate mail deliv	ery 🔲 other (please spi	egify):	Part this area and a second se
(Name and title of Officer)	177	(Signature of Oif	cert (Sino in ink)
(Name and like of Officer) OHS Form I-247A (3/17)		10.8121212 01 011	Page 1 of 3