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.
836	No	Released	completed CT sentence	10/12/2018	10/12/2018	Zero	всс	No supportive documentation to hold.
837	No	Released	completed CT sentence	10/25/2018	10/25/2018	Zero		No supportive documentation to hold.
		Released	posted bond	10/30/2018	10/30/2018	Zero		No supportive documentation to hold.
838	No		posted bond	10/30/2018	10/30/2018	Zero		No supportive documentation to hold.
839 840	No No	Released Released	posted bond	10/30/2018	10/30/2018	Zero	всс	No supportive documentation to hold.

Facility	Number of ICE Reviews Required	Number of ICE Reviews Completed	Number of Holds	Number of Releases	Number of Holds for Prior Violent Felonies	Number of Holds for Terrorist Screening Response	Number of Holds for ICE Judicial Warrant	Number of Times Held that Were Not Supportive	Compliant with AD 9.3?
Bridgeport CC	5	5	0	5	0	0	0	0	Yes

#836

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

Subject ID:			File No:		
Event #:			Date: April 2, 201	18	<u> </u>
TO: (Name and Title of Institution - OR Any Subsequ Enforcement Agency) BRIDGEPORT CORR CEI 1106 NORTH AVENUE BRIDGEPORT, CT 0660	NTER	FROM: (Department HARTFORD, CT, I ICE ERO HARTFOR 450 MAIN ST 5th FLOOR, ROCHARTFORD, CT 06	M 501	ice Address)	
Name of Alien:				······································	
Date of Birth: C	itizenship;	GUATEMI	ALA	Sex:	M ·
1. DHS HAS DETERMINED THAT PROBABL DETERMINATION IS BASED ON (comple	E CAUSE EXISTS T te box 1 or 2).	HAT THE SUBJEC	CT IS A REMOVABLE A	LIEN. THIS	
A final order of removal against the alier The pendency of ongoing removal proce Biometric confirmation of the alien's ider or in addition to other reliable informatio removable under U.S. immigration law; Statements made by the alien to an imm lacks immigration status or notwithstand	edings against the al hitty and a records che n, that the alien either and/or higration officer and/or	eck of federal datal lacks immigration rother reliable evic	status or notwithstanding	g such status	S IS
2. DHS TRANSFERRED THE ALIEN TO YOU				mplete box	1 or 2).
Upon completion of the proceeding or in custody of the alien to complete process	vestigation for which	the alien was trans	ferred to your custody, [
IT IS THEREFORE REQUESTED THAT YOU:					
Notify DHS as early as practicable (at least DHS by calling \(\overline{\text{N}} \) U.S. Immigration and \(\frac{860-240-3012}{2} \). If you cannot reach at Center at: (802) 872-6020. Maintain custody of the alien for a period been released from your custody to allow I detainer to take effect. This detainer arises rehabilitation, parole, release, diversion, or Relay this detainer to any other law enforce. Notify this office in the event of the alien's	Customs Enforcement official at the number NOT TO EXCEED 4 DHS to assume custos from DHS authorities ustody classification, ament agency to which death, hospitalization	nt (ICE) or	S. Customs and Border I se contact the Law Enforthe time when he/she wit to served with a copy spact decisions about the nments, or other matters y of the alien.	Protection (Concernent Supported otherwise of this form a silen's ball, s	port se have n for the
If checked: please cancel the detainer	related to this alien pr	eviously submitted			
- Deportation	Officer	*	च के कि	y signed by	
(Name and title of Immigration Off	icer)	(Siġr	Might Quartermin to entre	1189/a07,572/p	1:13 -04'00'
Notice: If the alien may be the victim of a crimotify the ICE Law Enforcement Support Cerconcerns about this matter.	me or you want the al hter at (802) 872-6020	ièn tọ remain in the). You may also cá	United States for a law Ill this number if you hav	enforcement e any other o	purpose, luestions or
TO BE COMPLETED BY THE LAW ENFORCE NOTICE:	EMENT AGENCY CUF	RENTLY HOLDIN	G THE ALIEN WHO IS T	HE SUBJEC	T OF THIS
Please provide the information below, sign, ar	nd return to DHS by m	alling, emailing or	faxing a copy to	<u> </u>	*
	I release date/time:_				7.
Date of latest criminal charge/conviction:	Last offe	ense charged/convi	ction:		
This form was served upon the alien on	, in the	following manner.			
in person by inmate mail delivery	- A - A	specify):			
(Name and title of Officer)	Specialist	40 Audit#	(Signature of Officer) (Sign in ink)	,
DHS Form I-247A (3/17)					Page 1 of

DH5 Form I-447A (3/17)

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	#	0	7	
	•	0	2	

IMMIGRATION DETAINER - NOTICE OF ACTION

Subject PD:		File No:	i
Event#:		Date: August 87	, 2017
TO: (Name and Tille of Iralitudion - C Enforcement Agency) STAMPOR 805 BEI	R Any Subsequent Law D POLICE DEPT. NEORD ST. ND, CT 059010000	FROM: (Decement of Horreland Security Lan Enforcement Support Canter = TON Who Williston Aub office	Office Address)
STARRON	n, CI deserves	MALLISTON, VI 05499	Marcon to the state of the stat
Name of Allen:		A STATE OF THE PROPERTY OF THE	end management considerate a management of thought only the fill the management on the fill of
Date of Birth:	_ Cltizenship:	GJATEPALA	Sex: 18
1. DHSMAS DETERMINED THE DETERMINATION IS BASE	AT PROBABLE CAUSE EXI D DN (complete box 1 or 2).	STS THA'! THE SUBJECT IS A REMOVABL	E ALIEN THIS I
Flowettic confirmation of or in addition to other religion to other religions and by the	the aller's identity and a reco able information, that the aller migration law; and/or allen to an immigration officer	t this alien: I do check of federal databases that affirmative in alther tacks immigration status or notwithstate and other reliable syldence that affirmative is removable under U.S. Immigration law.	1978 of commit American
		for a froceeding of investigation	Licomplete Doxigor 2).
[] Linear completion of the t	roceeding or investigation for	Which the ellen was transferred to your clisto ite an admissibility determination.	
IT IS THEREFORE REQUESTE	ED THAT YOU:		and a sile
CHS by calling . U.S II (860) 210-3012 . If you	mmigration and Quatoms Enfo cannot reach an official at the	cossible) before the alien is released from you proemant (ICE) or	Enforcement Bupport
 Maintain custody of the a geen released from your or coteiner to take effect. This rehabilitation, parels, release 	atody in pilow DHS to assum s detainer adses from DHS au se, diversion, custody classific	度色 48 HOURS beyond the sime when helsi to ourlody. The aller must be served with a therifies and should not impact decisions about the cation, work, quarter assignments, or other חיים	copy of the fairt for the
 Righay this cloteiner to any or Motify this office in the sys 	ther law enforcement agency to nt of the allen's death, hospile	a which you transfer custody of the silan. Hization or transfer to another institution.	,
If checked: please card	el the detainer related to this	alien previously submitted to you on	(dese).
(Mamp and life :	्र = 20 र्ज (मार्ज्जपुरन्त्रीकर (भिन्ना)	Signature of immigration	Officer) (Sign in res)
Notice: If the allen may be in notify the ICE Law Enforcement concerns about this matter.	e victim of a crime of you war ant Support Center at (802) 87	it the alies to remain in the United States for a 72-8020. You may also call this number if you	k law enforcement purpose, k itawe any other questions or
TO BE COMPLETED BY THE NOTICE:	LAW ENFORCEMENT AGEN	CY CURRENTLY HOLDING THE ALIEN WHO) IS THE SUBJECT OF THIS
Please provide the information Local Booking/Inmate #:	Estimated :elease date/	4S by maining, emailing or 1337-13 ti copy in	
Date of latest criminal charge/	conviction: L	est offense charged/conviction:	A
	no risilla e		
[in person] by nm	ate mall sellivory other (please reacity):	Ah, besteundigsperiorensensensensen / 25, / 19402011 ti za rak var f. /
(Nama art ii	Se of Off carl	(Sichelia &)	Tiber (Sign of ork:

Subject ID:		7	•	File No:	· ·	
Event#:					ber 15, 2018	
	itulion - OR Any Subbec Danbury Police del 375 Main 87. Danbury, CT 06010	PT.	HARIFORD, CT,	DOCKET CONTROL DRD Sub Office DOM 501	ecurity Office Addre	\$E)
Name of Allen:		AKA!		***		
Date of Birth:	· · · · · · · · · · · · · · · · · · ·	Citlzenshlp:	ECUA	OOR	Sex:	М
1. DHS HAS DETERMIN DETERMINATION IS				CT IS A REMOV	/ABLE ALIEN. TI	His.
The pendency of one of the second of the sec	her reliable Information J.S. immigration law; by the alien to an Imr	eedings against entity and a recor on, that the alien and/or migration officer i	ds check of federal data either lacks immigration and/or other reliable evi	status or notwith	hstanding such state that a state of the sta	alus is
			is removable under U.S		······································	
2. DHS TRANSFERRED) THE ALIEN TO TO	UK CUSTONY F	-ur a pruceeding.i	or investigat	IUN (complete b	ox i or zh.
	4.13					
			which the allen was tran e an admissibility deten		ustody. DHS inten	ds to resum
	n to complete proces	eing and/or make			uatody, DHS inten	ds to resum
custody of the alle I IS THEREFORE REQU Notify DHS as early DHS by calling X 860-240-3012	n to complete proces JESTED THAT YOU: as practicable (at lead U.S. immigration and if you cannot reach at	eing and/or make : st 48 hours; if po I Customs Enforc		nination, is released from y S. Customs and	your custody. Ple Border Protection	ease notify (CBP) at
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(Signature of Officer) (Sign in Ink)

☐ In person ☐ by inmate mail delivery ☐ other (please specify):

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

4859

Subject ID Event #:		File No Date: Octobe	er 28, 2019
TO: (Name and Tile of Institution - OR Any to Enforcement Agency) DANBURY FOLIC 375 MAIN ST. DANBURY, CT (DE DEPT.	FROM: (Department of Homeland Sectionary), CT, DOCKET CONTROL of ICE ERO HARTFORD Sub Office 450 MAIN ST 5th FLOOR, ROOM 501 HARTFORD, CT 06103	urily Office Address)
Name of Alien:	AKA:		
Date of Birth:	_ Citizenship:	· · · · · ERAZIL .	Sex: M
TEDHS HAS DETERMINED THAT PRO DETERMINATION IS BASED ON (A	DBABLE CAUSE EXISTS omplete box 1 or 2);	THAT THE SUBJECT IS A REMOVA	BLE ALIEN, THIS
or in addition to other reliable info removable under U.S. Immigration Statements made by the alien to	I proceedings against the 's identity and a records or mation, that the alien eith a law; and/or and/or and/or	alien; heck of federal databases that affirmat er lacks immigration status or notwithst or other reliable evidence that affirmati movable under U.S. immigration law.	landing such status is
2 DHS TRANSCERRED THE ALIEN T		-	N (complete box 1 on 2)
Upon completion of the proceeding custody of the allen to complete p	g or investigation for which rocessing and/or make an	n the alien was transferred to your cust admissibility determination.	ody, DHS Intends to resume
IT IS THEREFORE REQUESTED THAT	YOU:		x ,
	n and Customs Enforcement of ach an official at the number of act of the number of the	ent (ICE) or U.S. Customs and Bo er(s) provided, please contact the Law IS HOURS beyond the time when he/s ody. The alian must be served with a is and should not impact decisions abo work, quarter assignments, or other m	ender Protection (CBP) at Enforcement Support the would otherwise have copy of this form for the but the alien's bail.
Notify this office in the event of the a	•		
If checked; please cancel the deta	liner related to this alien pi on officer	Digitalina	lender
(Name and title of Immigration	on Officer)	(Signature of Immigration C	***************************************
Notice: If the alien may be the victim of notify the ICE Law Enforcement Support concerns about this matter.	a crime or you want the al t Cenler at (802) 872-6020	len to remain 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 NOTICE:	RCEMENT AGENCY CUF	RENTLY HOLDING THE ALIEN WHO	IS THE SUBJECT OF THIS
Please provide the information below, sig	n, and return to DHS by m	alling, emailing or faxing a copy to	• •
Local Booking/Inmate*#: Estim			
Date of latest criminal charge/conviction:	Last offe	nse charged/conviction:	
This form was served upon the alien on	, in the f	ollowing manner:	
in person by inmate mail dell	very	pecify):	
(Name and fille of Officer)	· · · · · · · · · · · · · · · · · · ·	(Signature of Off	licer) (Sign in lnk)

SRATION DETAINER - NOTICE OF . CTION Subject IE File No: Event #: Date: October 30, 2018 TO: (Name and This of Institution - OR Any Subsequent Law FROM: (Department of Homeland Security Office Address) Enforcement Agency) BRIDGEFORT POLICE DEPT. 300 CONGRESS ST. HARTFORD, CT, DOCKET CONTROL OFFICE ICE ERO HARTFORD Sob Office BRIDGEPORT, OF 066040000 450 MAIN ST Sch FLOOR , ROOM 501 HARTFORD, CT 06103 Name of Alien: Date of Birth: Citizenship; ALDHS HAS DETERMINED THAT PROBABLE CAUSE EXISTS THAT THE SUBJECT IS A REMOVABLE ALLEN THIS DETERMINATION IS BASED ON COMPLETE SOV 7872 A final order of removal against the allen; The pendency of ongoing removal proceedings against the alien; Blometric confirmation of the allen's identity and a records check of federal detabases that affirmatively indicate, by themselves or in addition to other reflable information, that the alien either lacks immigration status or notwithstanding such status is removable under U.S. immigration law; and/or Statements made by the allen to an immigration officer and/or other reliable evidence that affirmatively indicate the allen either lacks immigration status or notwithstanding such status is removable under U.S. immigration law. 2 DHS TRANSFERRED THE ALIENTO YOUR GUSTODY FOR A PROCEEDING OR INVESTIGATION (COMMUNICATION) Upon completion of the proceeding or investigation for which the alien was transferred to your custody, DHS intends to resume custody of the alien to complete processing and/or make an admissibility determination. IT IS THEREFORE REQUESTED THAT YOU: · Notify DHS as early as practicable (at least 48 hours, if possible) before the alien is released from your custody. Please notify DHS by calling U.S. Immigration and Customs Enforcement (ICE) or U.S. Customs and Border Protection (CBP) at 860-240-3012 . If you cannot reach an official at the number(s) provided, please contact the Law Enforcement Support Center at: (802) 872-6020. Maintain custody of the alien for a period NOT TO EXCEED 48 HOURS beyond the time when he/she would otherwise have been released from your custody to allow DHS to assume custody. The allen must be served with a copy of this form for the detainer to take effect. This detainer arises from DHS authorities and should not impact decisions about the allen's bail, rehabilitation, parole, release, diversion, quatody classification, work, quarter assignments, or other matters Relay this detainer to any other law enforcement agency to which you transfer custody of the allen. Notify this office in the event of the alien's death, hospitalization or transfer to enother institution. If checked: please cancel the detainer related to this alien previously submitted to you on__ (Name and title of immigration Officer) (Signature of immigration Officer) (Sign in ink) Notice: If the alien may be the victim of a crime or you want the alien to remain in the United States for a law enforcement purpose, notify the ICE Law Enforcement Support Center at (802) 872-6020. You may also call this number if you have any other questions or concerns about this matter. TO BE COMPLETED BY THE LAW ENFORCEMENT AGENCY CURRENTLY HOLDING THE ALIEN WHO IS THE SUBJECT OF THIS NOTICE: Please provide the information below, sign, and return to DHS by mailing, emailing or faxing a copy to Local Booking/Inmate #: Estimated release date/time: Date of latest criminal charge/conviction: Last offense charged/conviction: This form was served upon the alien on , in the following manner: by Inmate mail delivery other (please specify): in person (Name and title of Officer) (Signature of Officer) (Sign in Ink)

DHS Form I-247A (3/17)