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.
						1		
798	Yes	Held	Time Served	2/9/17	2/10/17	day	HCC	convicted of 53a-56b

Page 1 of 3

DEPAREMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

Subject ID:	I	AEK - MOTICE	GFACTION
Event #;]] #79	7.39	<u></u>
		' O	File No:
TO: (Name and Title of Institution - OR Any Sui		•	Date: May 1, 2013
Enforcement Agency)	naedneut NaM	FROM: (Departm	cent of Homeland Security Office Address)
MEN HAVEN CORR CENTER 245 WHALLEY AVENUE		HARTFORD, CT	DOCKET CONTROL OFFICE
NEW HAVEN, CT 06530	i ji	DOCKET CONTROL 450 MAIN STRI	CL OFFICE
	i	HARTFORD, CT	06103
MAINIAIN CUSTO	DY OF ALIEN FOR	A PERIOD NOT T	D EXCEED 48 HOURS
Name of Allen: pr	#	THOU NOT !	PERCEED 48 HOURS
Date of Hirth.			群 、
THE U.S. DEPARTMENT OF HOMELAN THE PERSON IDENTIFIED ABOVE, CU Determined that there is reason to believe	Nationality: ME	XICO	Source
THE PERSON IDENTIFIED ABOVE, CUI	m adewrity (DHS)	HAS TAKEN THE	FOLLOWING ACTION THE
Determined that there is reason in heller	A POLICE IN AONS	CUSTODY:	al from the United Stales. The Individual (check
bil that and v	a ma in機Midnal le au al	ien subloct to row	al from the United States. The Laws
্র has a prior a felony conviction or has bee offense;	n charged with a force		check
fl has three or many at	The sour A teloff	/ 13 has been com	Victed of Illegal entry pursuant to 8 U.S.C. §
☐ has three or more prior misdemeanor con ☐ has a prior misdemeanor constitute out	victions	1329; /	, , , , , , , , , , , , , , , , , , , ,
misdemeanor for an offense the time	s been marged with a	inda illegally ke	entered the country after a previous removal
assaults: sexual abuse or and involves	violence; threats, or	71 has been a	· · · · · · · · · · · · · · · · · · ·
of alcohol or a controlled actions	ing under the Influence	ines been toriu	d by an immigration officer or an immigration
scene of an accident; the unlawful possess of other deadly weapon, the distribution or	dui liight from the	II otherwise a Ja	knowingly committed immigration fraud:
or other deadly weapon, the unlawful possess controlled substance; or other sloullen or	treffolding of a firearm		es a significant risk to national security, border bilc safety; and/or
controlled substance; or other significant the	real to dublic parame		
Initiated removal proceedings and served a attached and was served on Served a warrant of arrest for sevented.	Notice of Annear or or	the section of the se	
allached and was served on Served a warrant of arrest for removal has		mer charging docum	ent. A copy of the charging document to
and the letter buye	readiodis A	• ·	San Sacontiletti 12
Obtained an order of deportation or remova	described of the	warrant is attached a	and was served on
I His dCHOD GOOD HOLDING CO	i H ti	וווויסוסגע טוווי יצי ב	
assignments, or other matters, DHS discours IT IS REQUESTED THAT YOU:	make decisions relate	d to this person's o	tielady classificati
IT IS REQUESTED THAT YOU	ages disinissing crim	Inal charges basied	on the evistance at a series
Maintain quenda est			and another or a detainer.
the time when the subject for a period N	OT TO EXCEED 48 H	OURS avoluding	tund -
Maintain custody of the subject for a period Note that the time when the subject would have otherwise request derives from federal regulation 8.0.5.	ee been released from	Vour custody to shaw	Rurdays, Sundays, and holidays, beyond
ha subject house of the	いっりょくんん Por Dumine	GR of this immigration	this coology of the sublect. This
the subject beyond these 40 hours, As early DHS by calling 860 240 3012 during busines DHS Official at these numbers, please center	/ as possible prior to the	e time you othervise	Would release the cubical authorized to hold
DHS Official at these numbers, please contac	t the CE tower	after hours or	in an ememency. If you person a
DHS by calling 860 240 3012 during business DHS Official at these numbers, please contact X Provide a copy to the subject of this detainer.	CINCOCE LAW Entorcen	nent Support Center	In Burlington, Vermont of 1802) 872 6020
X Natify this affice of the Hand	· · · · · · · · · · · · · · · · · · ·		= ,
Notify this office of the time of release at least Notify this office in the event of the impacts of	t 30 days prior to releas	ie or as far in occurs	
Notify this office in the event of the inmate's d	ooth hoors a	o or do lar ill devalat	ce as possible.
X Consider this request form the	eant hospitalization or	transfer to another It	netitution.
reduced for a decamer operative	Only upon the subjects	Conviction	
Cancel the detainer previous y placed by this	Otto		
ISMIGRATION ENFORCE	MENT ACCUME	(da.o),	•
	THE NT		
(Name and title of immigration Officer)		- TSlad	alum ar m
TO BE COMPLETED BY THE LAW ENFORCE Please provide the information below, sign, and ret to	MENE ACTION		altite of immigration organi
Please provide the information below, sign, and ref	HILL OF THE THE PARTY OF THE	RENTLY HOLDIN	OF THE SUBJECT OF THIS MOTICE.
Please provide the information below, sign, and ret to You should subject beyond the 48-hour period.	Mainbin a convitor you	nvelope enclosed for	your convenience or by faving a conv
Secretary in the Control of the Cont	7 8 8	1	- ''''Y '' CC' INC (Case and not hold the
rocal proking/iomate #:	. i. i. i.	000101	Estimated release: 2,12,17 (date)
Last criminal charge/conviction: 530 05/ in	winer unarge/convict	on: AL2 (gale)	Estimated release: 8.12.17
NUTICE: Unce in our cuelant, the material and	1	Land the second	7 I~I \
Notice: Once in our custody, the subject of this detection or if you want this individual to remain in the task of the control	alnor may be removed	om the United State	15 If the indudual
crime or if you want this individual to remain in the tas and continue the ICE Kaw Enforcement	Inited States for prosec	cution or other law e	nforcement purposes to be the victim of a
Enrorcemen	it appoin Center at (00	12) 8 72-6026 👬	monding acting
7(1)		•	ı
(Name and title of Officer)		······································	19
DHS Form I-247 (12/12)	i ∜ h		(Signatule of Officer)