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.
801	Yes	Held	Suspended sentence	7/10/2017	7/11/2017	1 dav	GCI	Convicted of E2- co
802	No	Released	Time served	7/21/2017	7/21/2017	zero	ВСС	Convicted of 53a-60.  No supportive documentation to hold.



\* #80 l

## DEPARTMENT OF HOMELAND SECURITY (DIS) REQUEST FOR VOLUNTARY TRANSFER

REQUEST FOR VO	OLUNTARY TRANSFER
Subject (D: Event #):	File No;
TO Marine and This are	Date: Pabruary 18, 2017
TO: (Name and This of Institution - OR Any Subsequent Law Enforcement Agency) BRIDGEPORT CORE CENTER 1206 MORTH AVENUE BRIDGEPORT, ET DEFOA	FROM: (DHS Office Address)  MARYPHI, UZ. DOZET CONTROL, OFFICE  LET BUT HERPOIND FOR PAGEO
L	Sub reor , mode hol Hariyord, er ofter
Name of Subject	
Date of Birth; Suspected or Known Citize	Popular Guardiana
A. DHS REQUESTS VOLUMEARY TRANSPERSOR FOR SULLEY	
is 1. DHS suspects that the subject is an immigration enforcement (s) he was apprehended at the border or name of a present	of METATRIC (complete box 1 or 2 helow).
[] (s)ha was donor handed at the free to	III huntily becanke (work of least offe):
U (s)he was apprehended in the United States after unlewft	illo attempting to unlawfully enter the United States; illy entering or re-entering the United States after January 1, 2014; grams;
[] (s)he has significantly abused the visa or visa waiver prog	pame;
(a) he was issued a final order of removal after January 1,  in the judgment of a designated septemble after January 1.	2014; and/or
in the judgment of a designated senior DHS official, his/he  [1] 2. DHS transferred the subject to your pivete at the	r removal would serve an important federal Interest.
hvestigation, DHS intends to resume custody of the subject to	ng or investigation and, upon completion of that proceeding or complete processing.
IL DIS REQUESTS YOUR COOPERATION AS FOLLOWS (com)	dele box 1 or 2 helpw):
oustody to allow DHS an opportunity to determine whether there is NOTE: This voluntary nutification request does not request or an expense of the contractions and request or an expense of the contractions are the contractions.	probable cause to conclude that (s)he is a removable allen.
offrently solvedular for telease from your protect	courses may you detail the subject beyond the time he are to
3 2. DETAINER. Please serve a copy of this form on the subject a 48 HOURS beyond the time when he/she would otherwise have b	nd maintain custody of him/her for a period NOT TO EVERT
This is a removable alien. This	sen released from your ouslody to allow DI-3 to assume custody.
l a linal order of removal analyst the subject	the state of the state of the policy of the state of the
1 B TO DEDICENCY of protection representations of the contract	e subject;
Biallia is reprint the form of the form of the first of t	The state of the s
11 SISTAMONIC INSTANTANTAL LA SILA CALLA C	
indicate the subject either tacks immigration status or notwithst NOTE: This request takes effect only if you serve a capy of this form	anding such status is removable under U.S. immigration by
NOTE: This request takes effect only if you serve a copy of this form hold the subject beyond 48 hours.	1 4n the subject, and it does not request or authorize that you
IMPORTANT NOTICES;	
This request arises from DHS authorities and should also	Adam book as a
This request arises from DHS authorities and should not impact release, diversion, sustody classification, work, quarter assign. As early as possible prior to the time are the prior to the time.	i decisions about the subject's ball, rehabilitation, parole,
. As early as possible prior to the time you otherwish would also	the state of the state of
Customs Enforcement (ICE) or II U.S. Customs and Border Protein from Cannot reach in official at the purphership and Border Proteins	ation (CBP) at #60-240-2012
If you cannot reach in official at the number(s) provided, plonge of Please notify this office in the event of the subjects doubt, hospital	
The state of the s	acenuit, of tightfor to bhother institution
If checked: Please cancel the detainer related to this subject prev	viaudiy dubmined to you on(date).
DEPORTATION OFFICER	
(Name and title of immigration Officer)	(Elgristure or Minigration Officer)
Notice: if the subject is taken into DHS custody, he or she may be remaine or you want the subject to remain in the United States for a law e	oved from the United States, If the subject may be the work of a
support Center at (802) 372-8020. You may also call this number if you	U have any other questions or concerns should be water
riease provide the infortistion below, sign, and return to DHS by mailin	a manifest or favor
IO DE COMPLETED BY THE LAW ENFORCEMENT AGRACO A	DESCRIPTIVIDADES PARA PARA PARA PARA PARA PARA PARA PAR
CM. 181888 DAIS/IMD!	Data of lateral put a v 1 to 1
Box B.2. is chacked above, please indicate the manner in and data of	in which this Form I-247X was served upon the subject:
□ in person □ by Irmate mall delivery □ other	(please specify) date:
(Name and interpretation)	(Signature of Officer)
6 Form I-247X (08/18)	Page 1 of 3
DESCRIPTION AND ADDRESS OF THE PROPERTY OF THE	· • • • • • • • • • • • • • • • • • • •

## DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

Subject ID:		The monde of Acrie	
Event #: .k	A 802	File No:	pril 4, 2017
TO: (Name and Title of Institution - OF Enforcement Agency) BRIDGERO 1106 NOR BRIDGERO	Any Subsequent Law	FROM: (Department of Homelan HARTFORD, OT, DOCKET CONTICE ERO HARTFORD Sub Offi 450 MAIN ST Sth FLOOR, ROOM 501 HARTFORD, CT 06103	d Security Office Address)
Name of Alien:	•		
Date of Birth:	Citizenship:	Guatemala	Sex:
A final order of removal again  The pendency of ongoing ren	ost the allen;	THATTHE SUBJECTUS A REM	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
removable under U.S. immigr	alion law; and/or	neck of federal databases that affi r lacks immigration status or notw	lihatanding such status is
	arrang addi sidila 19 lell	r other reliable evidence that affin novable under U.S. immigration la	MAY
ZIDHSTRANSFERREDTHE ALIE	MITO AOMY CRETODA LOUA	PROCEEDING OF INVESTIGA	TION (corophde box ( or 2)
Upon completion of the proces	eding or investigation for which i te processing and/or make an a	he allen was transferred to the	oustody, DHS intends to resume
IT IS THEREFORE REQUESTED TH	•	,	* * * * * * * * * * * * * * * * * * *
Maintain custody of the alien for been released from your custody the detainer to take effect. This detain	reach an official at the numbers a period NOT TO EXCEED 48 o allow DHS to assume custody	(ICE) or U.S. Customs and (s) provided, please contact the L. HOURS beyond the time when he for the alien must be served with the bould post insert the served with the served	Border Protection (CBP) at aw Enforcement-Support e/she would otherwise have a copy of this form for the
* Relay this detainer to any other law	enforcement agency to which yo	rK, quarter assignments, or other u transfer ctistody of the allen	matters
<ul> <li>Notify this office in the event of the</li> <li>If checked: please cancel the de</li> </ul>	alien s death, nospitalization of Stainer related to this alien previ	transfer to another institution,	ALAN MARKET MARK
	TION DEFICER		4.04 14:59:12 -04'00'
(Name and title of immigra	allon Officer)	<del></del> ,	n.Officer) (Sign/in ink) (3)-3).
Notice: If the alien may be the vicilm on notify the ICE Law Enforcement Supposoncerns about this matter.	of a crime or you want the alien ort Center at (802) 872-6020, Y		
TO BE COMPLETED BY THE LAW ENF	ORCEMENT AGENCY CURRE	NTLY HOLDING THE ALIEN WHO	D IS THE SUBJECT OF THIS
Please provide the Information below, al	gn, and return to DHS by mailln	g, emailing or faxing a copy to	्रा स्टब्स्य स्ट्रियुं सन्द्रेत्र । स्टब्स्य स्ट्राय्य स्ट्रियुं सन्द्रेत्र । स्टब्स्य
	mated release date/time:		A the second of
Dale of latest criminal charge/conviction:	Last offense	charged/conviction:	to the fill that the second
This form was served upon the allen on	, in the follow	ving mannar	
4)	Ivery other (please special	(y):	in the second of
(Name and title of Officer)	pecualist.	length of Ol	fficer) (Sign to frik)
DHS Form I-247A (3/17)			Page 4 http:

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	1	1	0	1	0	0	0	0	Yes
Garner CI	1	1	1	0	1	0	0	0	Yes

•