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	1	0	1	0	0	0	Yes
Corrigan CC	1	1	1	0	0	0	0	1	No
Manson YI	1	1	1	0	0	0	0	1	No

Trac k#	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.
792	No	incorrect hold	dismissed	4/29/2016	5/2/2016	3 day		He went to court on Friday 4/29/16 and his charges were dismissed. MYI Records staff called the courts to see if he was being returned, and the court said that his charges were dismissed. He was wrongly returned to MYI on second shift. The normal second shift A/P was of duty and a newer third shift A/P officer incorrectly accepted him. There wasn't any second shift records staff, so the review didn't occur until Monday morning at which time the staff knew he should not have been held. The facility supervisor addressed the ICE policy with the third shift officer.
793	No	incorrect hold	suspended sent.	5/18/2016	5/19/2016	1 day		He went to court and was convicted on the charges and received a suspended sentence and probation time. Records staff initiated the ICE review; however, she used an old form previous to 12/15/14 revision. The inmate had "a final order of removal" noted, which met the previous policy to hold, but not the current policy. I sent the records staff the new form and they made copies of the new form.
794	Yes	Felony	Time served	5/24/2016	5/25/2016			

DEPARTMENT OF HOMELAND SECURITY (DHS) IMMIGRATION DETAINER - REQUEST FOR VOLUNTARY ACTION

Subject (#792	File No:
Event#;	77 / 12	Date: April 6, 1016
TO: (Name and Title of Institution - OR Any Subsequent Enforcement Agency) Mulson Yours 1481 Enforcement Agency) 41 Japvie Street CHERIRE. CT 66410	ICB 450	OM: (DHS Office Address) TYOED, CT, DOCKET CONTROL OPPICE BRO HARTPORD Sub Office MAIN ST PLOOM . ROOM 501
Name of Subject:		
	enship; QUATERALA	Sex: <u>M</u>
1. OHS HAS DETERMINED THAT (mark at least	one option in subsection A	and one option in subsection of or skip to section 2)
A THE SUBJECT IS AN IMMIGRATION ENFOR	CEMENT PRIORITY BEC	AUSE HE/SHE: Inmate #:
has engaged in or is suspected of terrorism of	r espionage, or otherwise	poses a danger to national security;
521(a) or is at least 16 years old and intention	nally participated in an or	cipation in a criminal street gang, as defined in 18 U.S.C. § ganized criminal gang to further its illegal activities;
	a a felony, other than a sti	ate or local offense for which an essential element was the
alian's immigration status; That been convicted of an aggravated felony,	as defined under 8 U.S.C.	§ 1101(a)(43) at the time of conviction;
Thas been convicted of a significant misdeme	anor," as defined under D	HS policy; and/or
That been convicted of 3 or more misdemeans	ors, not including minor tra	afflo offenses and state or local offenses for which
immigration status was an essential element,	provided the offenses arts	se out of a separate incidents.
	LIECT IS A REMOVABLE	ALIEN. THIS DETERMINATION IS BASED ON:
e final order of remove I against the subject;	of of the	<u> </u>
the pendency of ongoing removal proceeding	s against the subjective	advert detailed that office at the indicate by the makes
or in addition to other reliable information, that	t the subject either lacks (f	ederal databases that affirmatively indicate, by themselves mmigration status or notwithstanding such status is
statements made voluntarily by the subject to subject ofther lacks immigration status or not	an immioration officer an	d/or other reliable evidence that affirmatively indicate the removable under U.S. immigration law.
		DCEEDING OR INVESTIGATION
Upon completion of the proceeding or investiguated of the subject to complete processing	gation for which the subject	ct was transferred to your custody, DHS intends to resume
time when he/she would otherwise have been effect only if you serve a copy of this form to beyond 48 hours. This request arises from the shabilitation, parole, release, diversion, or the shabilitation.	n released from your custo on the subject, and it does on DHS authorities and sho custody classification, w	ner for a period <u>NOT TO EXCEED 48 HOURS</u> beyond the ody to allow DHS to assume custody. This request takes a not request or authorize that you hold the subject build not impact decisions about the subject's ball, or other matters.
As early as possible prior to the time you oth Customs Seferement (ICS) or Till S. Customs	erwise would release the a	subject, please notify DHS by calling IXIU.S. Immigration and
If you cannot reach an official at the number(Notify this office in the event of the subject's	s) provided, please conta	Ct the Law Enforcement Support Center at. (SUZ) 672-5020.
U If checked: Please cancel the detainer relation	ed to this subject provious	
(Name and title of immigration Officer)		(Signature of Immigration Officer)
a standard and a second a second and second	ほんみ くてきたり チャアコ じいい みらげん	of from the United States. If the subject may be the victim of a reement purpose, please notify the ICE Law Enforcement ave any other questions or concerns about this matter.
TO DE COMPLETED BY THE LAW ENFORCEME	NT AGENCY CURRENTLY	Y HOLDING THE SUBJECT OF THIS NOTICE:
Please provide the information below sign, and r	eturn to DHS by mailing,	âmailing, or faxing a copy to White
Local Booking/Inmate 1 t rele	ase date/time:	Date of fatest commission cocytetoms.
Latest offense charged/convicted: 190013	A Status. 33	2-1814 3814-301 14-109 14 14-16) 436, 14:1
This Form 1-247D was served upon the subject o	n	in the following manner:
□ in person. □ D by inmate mail delive	ery 🛭 ather (ple	ase specify):
(Name and title of Officer) DHS Form (-247D (5/15'	<u> </u>	(Signature of Officer) Page 1 of 3

	REQUEST FOR V	DLUNTARY TRANSF	(S)	
Subject ID.				· · · · · · · · · · · · · · · · · · ·
Event#:		7 S File		
TO! (Name and Title of the stand		DATE	: May 11, 2016	
TO: (Neme and Tille of Institution - C Enforcement Agency) Indicial	MATANAI H OFFICE	FROM: (DHS Office Address of the HARTPORD, CT, BOCKE	395) · CONTROL OFFICE	
112 Broa New Land	d Street lon, CT 06320	ICE ERO MARTFORD Sul	Office	•
PAX; 860	-417-5186	Ece I-831		•
Name of Subject:		424.54		
Date of Birth:	Suspected or Known Citize		Sex: <u>u</u>	_
A. DHS REQUESTS VC LUNTAR	Y TRANSFER OF THE SUBJE	CT BECAUSE (complete ba	x 1 or 2 below):	
m 1. Otto suspects mat the ample	it is an immigration enforceme	ent priority because <i>(mark a</i>	it least one):	Transferred Assessment Con-
(1 (\$)he was apprahended a	of the border or ports of entry wi	bile attempting to unlawfully a	enter the United States .	
i (2)iid was applishended ii	n ine United States after unlawf	ally entering or re-entering th	a United States after Janu	lary 1, 2014;
0 (s)he was issued a final o	used the visa or viza waiver pro order of removal after January 1	grams; - 2014: and/or		• .
m in the judgment of a design	nated senior DHS official, his/h	ier removal would serve an ir	nportant federal interest	
 IJ 2. DHS transferred the subject 	to your custody for a process	fing or investigation and time	n completion of that proce	edina or
investigation, DHS ntends to	resume custody of the subject t	o complete processing.		ounig or
B. DHS REQUESTS YOUR COOP	FRATION AS FOLLOWS from	interest of 2 holows		
1. 1. NOTIFICATION. Please notif	fy DHS as early as practicable	(at least 48 hours if possible	hefore the publication rela-	and fract ward
custody to allow DHS an opportu	nity to determine whether there	is probable cause to conclude	that (s)he is a removable :	ageo itotu koni.
NOTE: This voluntary notification	request does not request or a			
currently scheduled for release fro	om your custody.			
2. DETAINER. Please serve a c	copy of this form on the subject	and maintain custody of hi	nv/her for a period <u>NOT TC</u>	EXCEED
48 HOURS beyond the time whe Probable cause exists that the s	n nersne would otherwise have Subject is a removable allen. Th	osen reisased from your cus vis determination is based on	lody to allow DHS to assum (check at least one boy b	ne custody. Alow)
Wa final order of removal a	gainst the subject:		Tanada de lande dilla DON De	SIO PA
!! the pendency (fongoing	removal proceedings against	the subject;	•	
o.nonstric continuation to o	f the subject's identity and a rec ther reliable information, that th	cords check of federal databa	ises that affirmatively indic	ale, by
status is removab a under U.S	S. immigration law, and/or	* * *	•	_
i) statements mide voluntai	fly by the subject to an immigra	tion officer and/or other reli	able evidence that affirms	itively
NOTE: This request takes affect on	ks immigration status or notwith	standing such status is remo	vable under U.S. Immigrat	ion law,
hold the subject beyon 1 48 hours.	Aon octae a cubh et nua to	and on the audiece and it do	sa nor codecar or sunious	te triat you
IMPORTANT NOTICES				
This request arises from DHS a	uthorities and should not ima	act decisions about the su	hiact's hail rehabilitation	n narola
release, diversion, custody cla	assification, work, quarter ass	ignments, or other matters	у, Стана при	s, parote,
 As early as possible prior to the t 	time you otherwise would relea:	se the subject, please notify	DMS by calling & U.S. Imm	ons nottergion
Customs Enforcement (ICE) on I	3 U.S. Customs and Border Pro	plection (CBP) at #60-240-3	017	
Please notify this of ice in the cy				872-8020.
	· · · · · · · · · · · · · · · · · · ·	•	e/	
☐ If checked: Please cancel the c		reviously submitted to your	/ (date),	
(Name and title of Immigi	DO			· ·
Notice: If the subject is aken into Di			re of Immigration Officer)	
crime or you want the subject to rema	no custudy, he or she may be n ain in the United States for a lav	emoved mom me unned stat V anforcement burbose, blea	sa, it the subject may be t se notify the ICE Law Enfo	ne vicem er a j
Support Center at (802) 872-6020. Y	ou may also call this number if	you have any other question	s or concerns about this m	iatter,
Please provide the information below	, sign, and return to DHS by ma	alilna, emailina, or faxing a co	ppy to	
TO BE COMPLETED BY THE				ICE:
Local Booking/Inmate #;	lease date/time:	Date of latest cr	iminal charge/conviction: 💆	
Arresting agency, if available, and late	est offense charged/convicted:	DWI MIN		LUSED
If Box B.2. Is checked above, please				ject,
☐ in person ☐ by irmate mail de	livery 🔁 other To HM	COUNDLY (please	specify) date:	110-1
	r.5.		` ' /	
(Name and fille of Office	<u></u>	(Sign	nature of Officer)	
DHS Form I-247X (08/15)	·	· · · · · · · · · · · · · · · · · · ·		Page 1 of 4



DEPARTMENT, QF, POMELAND SECURITY (DHS) INMIGRATION DETAINER - REQUEST FOR VOLUNTARY ACTION

	Subject ID: ; · · · Event #;		1 794	,	File No Date: yar	usry 21, 2016	
,	TO: (Name and Title of Bhforcement Agen	Int litution - OR Any Subseque toy) Share of Connecticut s G.A. 2 Bridgeport, CT	eni Law upbrios Court-	FROM: (DHS Office EARTFORD, CT, DICE ERO HARTFORD SW		OF OLLIGE	4
[ļ	450 MAIN SW ROOM	m 277		
٨	lame of Subject: 🖆				.1,		
)ate of Birth;	Citiza	enship: DONINICAN	REPUBLIC	Sex: M		<u> </u>
í,	COHS HAS DEFER	AIN ED THAT (mark althast)	one opiion Trivibsed	lon A and one colion	in subséction	Bior suld to be officer	10 m 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		AN IMMIGRATION ENFOR					2001 -4
巾	has engaged in or	is suspected of terrorism o	resplonage, or other	wise poses a dange	er to nationals	security;	,
ľ	521(a), or is at leas	d cf an offense of which an at 16 years old and intention	rally participated in s	in <u>organized</u> orimina	al gang to <u>ful</u> th	ner ita illegal activitio	8;
		t cif an offense classified as	a felony, other than	z state or local offe	nse for which	an essential elemen	t was the
 	alien's immigration	ejatus; c f an aggravated felony, a	on defend yeden 9 11	CC 6 1101(a)/42)	at the time of	nonulation	
		t (f a "significant misdemea				SOUAIGRON!	
		cf 3 or more misdemeano				a) offenses for which	
1	immigration status	was an essential element, p	provided the offense	s arise out of 3 aspe	erete incidents	i,	'
ī		E EXISTS THAT THE SUB	•		440		
L		oval against the subject;					
		g sing removal proceedings	against the subject				
	d blometric confirmat or in addition to other	ich of the subject's identity et reliable information, that	and a records check	of federal database	es that affirma lus or notwiths	tively indicate, by the tanding such status	emsejves Is
-	Terrovable under U	. <u>E. Immigration law; and/or</u> o untarily by the subject to a	en Immlaration office	er and/or other reliat	ola evidence ti	hat affirmatively indic	ate the
L	subject either lacks	inmigration status or notwi	thstanding such sta	lus is removable un	der U,S. Imml	gnation law.	
W.	IDHS TRANSFERRE	I THE SUBJECT TO YOU	R CUSTODY FOR A	PROCEEDING OR	INVESTIGAT	ON TOP PROPERTY	数字 第二章
E	Upon completion of	the proceeding or investigated to complete proceeding.	allon for which the s	ubject was transferr	ed to your ous	rlody, DHS Intends to	amuset c
iT	IS THEREFORE RE	QUESTED THAT YOU:					•
•	time when he/she vertext only if you a beyond 48 hours.	s form on the subject and n vould otherwise have been sive a copy of this form or linic request arises from I calo, release, diversion, cu	released from your c I the gubject, and it DHS authorities and	custody to allow DHS does not request o l ehould not impac	S to essume of r authorize th t decisions al	ustody. This request let you hold the sub bout the subject's t	takes ject
•	As early as possible	e prior to the time you other ent (ICE) or ☐U.S. Custon	wise would release	the subject, please			gration and
	If you cannot reach	an official at the number(s)	provided, please co	ontact the Lew Enfo	roement Supp	ort Center at: (802) f	72-6020.
	Notify this office in i	t ne event of the subject's d	eath, hospitalization	or transfer to anoth	er inatitution.		
	If checked; Please	i cancel the detainer related Deportation	d to this subject prev Officer	riously submitted to	on	(date),	
_	(Name and	the of Immigration Officer)	· · · · · · · · · · · · · · · · · · ·		Signature of Imm	nigration Officer)	
No	tice: If the subject is	aken into DHS custody, he	or she may be rem	oved from the Unite	ed States. If the	ne subject may be the	e viotim of a
9u	pport Center at (802)	bject to remain in the Unite 872-6020. You may also t	all this number if yo	u have any other qu	iestions or cor	ncerns about this ma	emeht Iter,
		THE LAW ENFORCEMENT					
Ple	ase provide the infor	nation below, sign, and ret	urn to DHS by mallir	ig, əmalling, or faxir	ng a copy to _		
Loc	el Booking/Inmate #	Est, release	se date/time: 🚾 💉	Date of In	test criminal c	harge/conviction;	
Lat	est offense charged/	convicted:		Ť.,			
Thi	s Form I-247D was s	erved upon the subject on		, in the follow	ing manner:	. :	
	□ in person	☐ by inmate mail delivery	□ other (please epecify):			<u> </u>
nu	(Name	and litter of Officer)			(Bìgnelli	re of Officer)	2m4a d al 2