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.
841	No	Released	Posted bond	11/6/2018	11/6/2018	Zero	всс	No supportive documentation to hold.
842	Yes	Held	Completed CT sentence	11/13/2018	11/14/2018	One	всс	Criminal History - Convicted of a Violent Offense.
843	No	Released	Completed CT sentence	11/15/2018	11/15/2018	Zero	всс	No supportive documentation to hold.
844	No	Released	Posted bond	11/19/2018	11/19/2018	Zero	BCC	No supportive documentation to hold.
845	No	Released	Completed CT sentence	11/21/2018	11/21/2018	Zero	всс	No supportive documentation to hold.
846	No	Released	Posted bond	11/26/2018	11/26/2018	Zero	BCC	No supportive documentation to hold.
847	No	Released	Posted bond	11/28/2018	11/28/2018	Zero	всс	No supportive documentation to hold.

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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	7	7	1	6	1	0	0	0	Yes

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ald Bellion Biological Control of Control

841

IMA RATION DETAINER - NOTICE OF AUTION

Subject ID:	MATION DETAIL	TER INCIDE OF AUTIO	'N .
Event #:		File No: Date: #	ovember 5, 2018
TO: (Name and Title of Institution - OR Any Enforcement Agency) BRIDGEPORT P. 300 COMGRESS BRIDGEFORT,	olice deet. ST.	FROM: (Dapartment of Homeian HARTFORD, CT, DOCKET COMI ICE ERO HARTFORD Sub Offi 450 MAIN ST 5th FLOOR, BOOM 501 HARTFORD, CT 06103	POT. ANDTON
Name of Allen:		martine, cr pero	
Date of Birth:	Citizenship:	EL SALVADOR	Sex: N
1. DHS HAS DETERMINED THAT PRODETERMINATION IS BASED ON (6)	OBABLE GAUSE EXISTS complete box 1 or 2).	That the subject is a rem	OVABLE ALIEN. THIS
A final order of removal against the The pendency of ongoing removal Biometric confirmation of the alier or in addition to other reliable information and the statements made by the alien to a lacks immigration status or notwiti	of proceedings against the ris identity and a records of mation, that the alien either law; and/or	check of federal databases that aff her lacks immigration status or not	Withstanding such status is
		Micropia under U.S. immigration i	law.
2. DHS TRANSFERRED THE ALIEN TO Upon completion of the proceedin custody of the alien to complete proceeding the complete process.	or investigation for which	h the aller was transferred to be	
IT IS THEREFORE REQUESTED THAT		deminstally detainingle	
Genter at. (602) 672-6020.	n and Customs Enforceme ach an official at the numb	ant (ICE) or US. Custome an ler(s) provided, please contact the	nd Border Protection (CRP) at Law Enforcement Support
 Maintain custody of the alien for a p been released from your custody to a detainer to take effect. This detainer a rehabilitation, parola, release, diversit Relay this detainer to any other law ent 	mow DHS to assume cust arises from DHS authoritie on, oualody classification, forcement agency to which	ody. The alien must be served wi as and should not impact decisions work, quarter assignments, or oth you transfer custody of the alien	ith a copy of this form for the s about the allen's ball, ar matters
• Notify this office in the event of the all			
if checked: please cancel the detail	iner related to this alien pi on Officer	Leviousià aripili <u>litro (o non ou</u>	(date).
(Name and title of Immigratio		, Signature of Immigra	tion Officer) (Sign in ink)
Notice: If the alien may be the victim of a notify the ICE Law Enforcement Support concerns about this matter.	a crime or you want the al Center at (802) 872-602(ien to remain in the United States). You may also call this number if	for a law enforcement purpose, you have any other questions or
TO BE COMPLETED BY THE LAW ENFONOTICE:	RCEMENT AGENCY CUP	RENTLY HOLDING THE ALIEN W	VHQ IS THE SUBJECT OF THIS
Please provide the information below, sign	ı, and retum to DHS by m	alling, emailing or faxing a copy to	•
.ocal Booking/Inmate #: EatIm	aled release date/time:		
Date of latest criminal charge/conviction:	Last offe	nse charged/conviction:	
This form was served upon the alien on			
In person by inmate mail deliv	ery Other (please s	pecify):	
(Name and title of Officer)		(Signature o	of Officer) (Sign In Ink)

DHS Form I-247A (3/17)

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DEPARTMENT OF HOMELAND SECURIT (MEMORATION DETAINER - NOTICE OF AUTION

#	84	12
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Subject ID: Event #:		File No Date: Febr	cuary 14, 2016	,
TO: (Name and Title of Institution - OR Enforcement Agency) NORWALK 1 1 MONROE NORWALK,	POLICE DEPT. ,	FROM: (Department of Homeland S HARTFORD, CT, DOCKET CONTRO ICE ERC HARTFORD Sub Office 450 MAIN ST 5th FLOOR, ROCM 501 HARTFORD, CT 06103	L OFFICE	
Name of Alien:				
Date of Birth:	Citizenship:	GUATEMALA	Sex:	
TODES LASIDETERNINED LIA TODETERNINATION ASBASED	ansagalvene avanjene draf. Dragonijsko povetovene	्राम् भूत्रम् हो इत्याप्त स्थापति । स्थापन	VARIGEARIENTRIBE	
Biometric confirmation of the or in addition to other reliable removable under U.S. immly	emoval proceedings against the e allen's identity and a records of e information, that the allen elti- gration law; and/or	check of federal databases that affin er lacks immigration status or notwi for other reliable evidence that affim	natively indicate the allen either	٠.
lacks immigration status or a	notwithstanding such status is r	emovable under U.S. iminigration la	w.	4
THE PROPERTY OF THE PARTY OF TH	Control of the Contro	र स्वतरचन्द्रकोपट्रच्यापप्रस्कर्णस्य		
Upon completion of the proc custody of the alien to comp	peeding or investigation for which plete processing and/or make a	th the allen was transferred to your on admissibility determination.	custody, DHS intends to resume	
IT IS THEREFORE REQUESTED	THAT YOU:		Dlanca polific	
DHS by calling U.SImm If you can	igration and Customs Enforcerr not reach an official at the num	ble) before the alien is released from nent (ICE) or U.S. Customs and ber(s) provided, please contact the	Law Enforcement Support	
 Maintain custody of the alien been released from your custo detainer to take effect. This de rehabilitation, parole, release, 	dy to allow DHS to assume cus tainer arises from DHS authorit diversion, custody classification	48 HOURS beyond the time when it tody. The alien must be served with ies and should not impact decisions to work, quarter assignments, or other	about the alien's bail,	
• Polov this delainer in any other	law enforcement agency to which	h you transfer custody of the allen. on or transfer to another institution.		
If checked: please cancel the	ne detainer related to this alien	previously submitted to you on	(date).	
Depo	restion Officer			
. (Name and tille of im	migration Officer)	(Signature of immigra	tion Officer) (Sign in ink)	
Notice: If the allen may be the vinotify the ICE Law Enforcement soncerns about this matter.	ctim of a crime or you want the Support Center at (802) 872-60	alien to remain in the United States 20. You may also call this number i	for a law enforcement purpose, f you have any other questions of	
NOTICE: .		URRENTLY HOLDING THE ALIEN (
Please provide the information bel	ow, sign, and return to DHS by	malling, emailing or faxing a copy to		
Local Booking/Inmate #:	Estimated release date/time:		•	
		ffense charged/conviction:		E a š
This form was served upon the ali				
in person by inmate n	nail delivery 🔲 other (pleas	e specify):		
(Name and Ulle of	Officer)	. (Signature	of Officer) (Sign in Ink)	
fishiilm alia and ai	•	•	Page 1 o	rs

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

843

	1	and a X	
Subject ID: Event #:		File No: Date: April	1 2, 2018
TO: (Name and Tilis of Institution - OR Any Subseq Enforcement Agency) BRIDGEPORT CORR CE 1106 NORTH AVENUE BRIDGEPORT, CT 066	INTER	FROM: (Department of Homeland Se HARTFORD, CT, DOCKET CONTROL ICE ERO HARTFORD SUB Office 450 MAIN ST 5th FLOOR, ROOM 501 HARTFORD, CT 06103	curliy Office Address) OFFICE
Name of Alien:			
Date of Birth:	Citizenship:	GUATEMALA	Sex: <u>M</u>
1. DHS HAS DETERMINED THAT PROBAB DETERMINATION IS BASED ON (comple	LE CAUSÉ EXISTS ete box 1 or 2).	THAT THE SUBJECT IS A REMOV	ABLE ALIEN, THIS
A final order of removal against the alie The pendency of ongoing removal proc Blometric confirmation of the alien's ide or in addition to other reliable informatio removable under U.S. Immigration law;	eedings against the nlity and a records c on, that the alien eith and/or	heck of federal databases that affirm er lacks immigration status or notwith	nstanding such status is
Statements made by the allen to an Imralacks immigration status or notwithstand	migration officer and ding such status is re	or other reliable evidence that affirm emovable under U.S. immigration law	atively indicate the alien either i.
2. DHS TRANSFERRED THE ALIEN TO YO	UR CUSTODY FOR	A PROCEEDING OR INVESTIGAT	ION (complete box 1 or 2).
Upon completion of the proceeding or i custody of the alien to complete process	nvestigation for whic sing and/or make ar	h the alien was transferred to your ou admissibility determination.	ustody, DHS intends to resume
IT IS THEREFORE REQUESTED THAT YOU	4 \$		
Center at: (802) 872-6020. • Maintain custody of the alien for a period been released from your custody to allow detainer to take effect. This detainer arise rehabilitation, parole, release, diversion, c • Relay this detainer to any other law enforce • Notify this office in the event of the allen's	Customs Enforcement official at the number of the number o	ent (ICE) or U.S. Customs and per(s) provided, please contact the Later(s) provided, please contact the Later the La	Border Protection (CBP) at aw Enforcement Support e/she would otherwise have a copy of this form for the about the alien's ball, matters
If checked: please cancel the detainer	related to this alien p	previously submitted to you on	(data).
) - Deportation			
(Name and title of Immigration Of	ficer)	(Signature of tramigration	on Officer) (Sign in Ink)
Notice: If the alian may be the victim of a cri notify the ICE Law Enforcement Support Cer concerns about this matter.	me or you want the a nter at (802) 872-602	alien to remain in the United States fo 20. You may also call this number if y	or a law enforcement purpose, you have any other questions or
TO BE COMPLETED BY THE LAW ENFORCE NOTICE:	EMENT AGENCY CL	RRENTLY HOLDING THE ALIEN W	HO IS THE SUBJECT OF THIS
Please provide the information below, sign, ar	nd return to DHS by	mailing, emailing or faxing a copy to	*
Local Booking/Inmate #: Estimated			
Date of latest criminal charge/conviction:		fense charged/conviction:	
This form was served upon the alien on	, in the	o following manner:	
in person by inmate mail delivery	other (please	specify):	
(b) 1306 of Officer)	/.	(Signalure o	If Officer) (Sign in lnk)

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

844

. Page 1 of 3

IMMIGRATION DE	.IAIII-IC III	CELL MAN		
Subject ID:			18, 2018	
Event#: TO: (Name and Title of institution - OR Any Subsequent Law DAMBURY POLICE DEFT. Enforcement Agency) 375 MAIN ST. DAMBURY, CT 068100000	FROM; (Department of the property of the prope) KWB 1934	y Office Address)	
Name of Allen:				K
Citizenship	DOVA		Sex:	
Date of Birth: A PHS HAR DETERMINED THAT PROBABLE ON THE PROPERTY OF THE PROP	EKISTS HATTIRE SUBI			
A final order of removal against the alien: The pendency of ongoing removal proceedings against the pendency of ongoing removal proceedings against the alien's identity and a or in addition to other reliable information, that the removable under U.S. Immigration law; and/or Statements made by the alien to an immigration of the pendency of the pen	alien either lacks immigration	vidence that affirmativ		
The state of the s	Ø1011am 1			
AND BRITTAN BEFORED THE ATTENTOWN OTHERS	OSMEORMPROCEEDING	03/13/55/19/3/S	Adv. DHS intende	s to resume
Upon completion of the proceeding or investigation custody of the allen to complete processing and/o	on for which the alien was tre or make an admissibility dete	msjerred to your cover rmination.		
Notify DHS as early as practicable (at least 48 hour DHS by calling U.S. Immigration and Customs U.S. Immigration and Customs U.S. Immigration and Customs U.S. Immigration and Customs U.S. If you cannot reach an official at Center at: (802) 872-6020. Maintain custody of the allen for a period NOT TO been released from your custody to allow DHS to at detainer to take effect. This detainer arises from DH rehabilitation, parole, release, diversion, ouslody classes.	EXCEED 48 HOURS beyon	ease contact the Law Id the time when he/s ust be served with a impact decisions abo	Enforcement Su the would otherw copy of this for out the alien's be	ise have
rehabilitation, parole, release, diversion, boatedy see Relay this detainer to any other law enforcement age. Notify this office in the event of the allen's death, he	ncy to which you lialistal cya	OGA OF HIS OWNER.		
If checked: ploase cancel the detainer related to	this alien previously submitted	ed) to you, of	(date).
(Name and title of immigration Officer)	,	galature of American	.59	· · · · · · · · · · · · · · · · · · ·
Notice: If the allen may be the victim of a crime or you notify the ICE Law Enforcement Support Center at (80 concerns about this matter.				
TO BE COMPLETED BY THE LAW ENFORCEMENT A				
Please provide the information below, sign, and return	date/llme:			
Date of latest criminal charge/conviction:	Last offense charged/co	nviotion:		
This farm was panied upon the allen on	, in the following manni	er:		
In person by Inmate mail delivery o	ther (please specify):			
We down		(Olgnature of	Officer) (Sign in in	<)

(Name and title of Officer)

2018-09-30 14:58: (GMT -08:00) Page 2/4

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

Subject ID: Event#:		,	File No; Date: september		
TO: (Name and Title of Institution - OR Any Subsequence of the Police of		FROM: (Department of the Pero Pero Pero Pero Pero Pero Pero Per	RM# 1552	Office Address)	
Name of Allen:					***************************************
,	Citizenship:	ECUAD		Sex:	X
1. DHS HAS DETERMINED THAT PROBAB DETERMINATION IS BASED ON (COMPL	LE CAUSE EXISTS ste box 1 or 2).	ALBUŞ ƏHT TAHT	CT IS A REMOVABLE	SIO #:	4
A final order of removal against the alle The pendency of ongoing removal proc Blometric confirmation of the allen's ide or in addition to other reliable informatio removable under U.S. Immigration law; Statements made by the alien to an immigration status or notwithstan	eedings against the nilly and a records on, that the allen eith and/or migration officer and ding such status is n	er lacks immigration or other reliable evi emovable under U.S	dence that affirmatively i, immigration law.	y indicate the ali	ien either
2, DHS TRANSFERRED THE ALIEN TO YO	UR CUSTODY FOR	A PROCEEDING	OR INVESTIGATION (complete box	(or 2).
Upon completion of the proceeding or a custody of the alien to complete proces	sing and/or make a	sh lhe ellen was tren a admissibility delen	sferred to your custody mination.	y, DHS Intends	la resume
*Notify DHS as early as practicable (at lease DHS by calling DHS. Immigration and DHS by calling DHS. If you cannot reach a Center at: (802) 872-6020. *Maintain custody of the allen for a parious been released from your custody to allow detainer to take affect. This detainer arise rehabilitation, parola, release, diversion, or	est 48 hours, if possit I Customs Enforcem on official at the num NOT TO EXCEED DHS to essume cus s from DHS authorit restory classification	ber(s) provided, pleased ber(s) provided, pleased beyond the glien must be and should not like york, quarter assignments.	the time when he/she it be served with a compact decisions about griments, or other matt	would otherwis to of this form the allen's ball.	e hava
 Relay this detainer to any other law enforce Notify this office in the event of the alien's 	imani anencu in Willi	ai vou ii aiibidi overie:	N. M. Prim mirror	. 2	
If checked: please cancel the detainer	related to this alien	previously submilled	d to уош оп	(dale).	**
(Name and title of Immigration Of			Valuro of immigration Off		· · · · · · · · · · · · · · · · · · ·
Notice: If the allen may be the victim of a cr notify the ICE Law Enforcement Support Ca concerns about this matter.	littel of facility -				
TO BE COMPLETED BY THE LAW ENFORCE NOTICE:		•	•*		rofthis
Please provide the information below, sign, as	nd return to DHS by	mailing, emailing or	faxing a copy to		* `
Local Booking/Inmate #: Estimated	d release dale/time:		, j	•	
Date of latest criminal charge/conviction:		•	Talion:		······································
This form was served upon the alien on	, in th	e following manner:			
in person by inmate mail delivery	other (please	epacify):			
(Name and title of Officer)	•	**************************************	(Signature of Office	cor) (Bign in ink)	Page 1 of 3



EPARTMENT OF HOMELAND SECURITY (MINISTRATION DETAINER - NOTICE OF ACTION

#840

					7 14
Subject ID: Event #:		,	File No: Date: November 24	, 201B	•
Enforcement Agency)	illuion - OR Any Subsequent Law BRIDGEPORT CORR CENTER 1106 NORTH AVENUT BRIDGEPORT, CT 05604	FROM: (Department of the control of	RM# 1552	Mce Address)
Name of Allen:	***************************************				. ^
Date of Birth:	Cltizenship:	GUATEM	XXX	Sex:	. K
	NEDTILATE ROBINETE BATGE LEMS		TIS & REMOVEBUE	CN COURTSON.	
The pendency of a Biometric confirms or in addition to of removable under to	noval against the alien: ongoing removal proceedings against the ation of the alien's identity and a records her reliable information, that the alien eli U.S. immigration law; and/or	check of federal data ther lacks immigration	status or notwithstandin	g such stett	al al
	by the allen to an immigration officer an status or notwithstanding such status is			idicate the a	allen alther
Z DAS TRANSFERRE	THE ALENTAYOUR JUSTION IFO		ÜNVÄSTIGATIÖN GÖ	nidele és	
	of the proceeding or investigation for whi in to complete processing and/or make a	ich the allen was trans	ferred to your custody, C		to reaume
IT IS THEREFORE REQU	JESTED THAT YOU:	`			
DHS by calling	the allen for a period NOT TO EXCEED our custody to allow DHS to assume out. This detainer arises from DHS author! release, diversion, oustody classification any other law enforcement agency to whice event of the alien's death, hospitalization	nent (ICE) or U.S. uber(s) provided, pleas 148 HOURS beyond to brody. The allen must ties and should not import, quarter assign on or transfer to anoth	i. Customs and Border File contact the Law Enforms time when he/she wo be served with a copy paot decisions about the ments, or other matters of the alien.	rotection (Comment Supuld otherwise of this formallen's ball	OBP) at opport se have n for the
ii If checked: please	cancel the detainer related to this alien	previously, submitted t	o you on	(date):	**
(Name and	title of Immigration Officer)	(Signe	ture of Immigration Officer)	(Sign in ink)	
Notice: If the alien may I notify the ICE Law Enfor- concerns about this matt	be the victim of a crime or you want the cement Support Center at (802) 872-802 let,	alien to remain in the l	United States for a law e this number if you have	nforcement any other q	purpose, uestions or
TO BE COMPLETED BY T	THE LAW ENFORCEMENT AGENCY CL	JRRENTLY HOLDING	THE ALIEN WHO IS TH	e sabjec,	OF THIS
Please provide the informa	allon below, sign, and return to DHS by	mailing, emalling or fa	king a copy to _		•
Local Booking/Inmate #: _	Estimated release date/time:		Samonamu-		^
Date of latest criminal cha	rge/oonviction: Last of	fense charged/convict	on:		***************************************
This form was served upon	n the alien on, in the	o following manner:			
☐ In person ☐ by I	nmate mall delivery other (please	specify);		······································	
(Name ar	nd title of Officer)		(Signature of Officer) (S	Sign In ink)	***************************************

DHS Form I-247A (3/17)

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FBI/ 982L37LN9 SID/ CT1396202

DEPARTMENT OF HOMELAND SECURITY IMMIGRATION DETAINER - NOTICE OF ACTION

847

Subject ID:	7		File No:				
Eveni #:			Date. Hovenber	11, 2018			
TO: (Name and Title of Institution - OR Any Subse Enforcement Agency) BRIDGEFORT FOLICE 300 CONGRESS ST. BRIDGEFORT, CT 66	DEPT.	FROM: (Department of Homeland Security Office Address) ERO - Westminster, CA Sub Office ICE ERO PERC LAGUMA NIGUEL 24000 AVILA RD RMS 1552 LAGUMA NIGUEL, CA 92677					
Name of Alien:		_	,				
Date of Birth:	Cilizenship:	NICARA	GUA	Sex:	M .		
1. DHS HAS DETERMINED THAT PROBA DETERMINATION IS BASED ON (comp	BLE CAUSE EXISTS plete box 1 or 2).	ELBUS HT TAHT	CT IS A REMOVAB	ILE ALIEN. THIS			
A final order of removal against the ali The pendency of ongoing removal pro Blometric confirmation of the alien's id or in addition to other reliable informal removable under U.S. immigration lav Statements made by the alien to an in	oceedings against the dentity and a records tion, that the alien eit v; and/or nmigration officer and	check of federal date her lacks immigratior d/or other reliable evi	dence that affirmativ	anding auch statu	19		
lacks immigration status or notwithsta	nding such slalus is	removable under U.S	i, immigration law.				
2. DHS TRANSFERRED THE ALIEN TO Y				*			
Upon completion of the proceeding of custody of the alien to complete proceeding.	essing and/or make a	ich the elien was fran In admissibility deten	sferred to your custo minution.	ody, DHS intenda	i (o resume		
IT IS THEREFORE REQUESTED THAT YO							
Notify DHS as early as practicable (at least the DHS by calling U.S. Immigration at the DHS by calling U.S. Immigration at the Immigration at the Immigration at the Immigration at the Immigration of the Alien for a periode at the Immigration of the Immigratio	nd Customs Enforcer an official at the nun od <u>NOT TO EXCEET</u> w DHS to assume cu ses from DHS authori	ment (ICE) or Unber(s) provided, plea 0 48 HOURS beyond slody. The allen mus- ilies and should not in	.S. Customs and Bo ase conject the Law the time when he/si at be served with a mpact decisions abo	rder Protection (Enforcement Su he would otherwi copy of this for out the allen's bel	CBP) at pport se have m for the		
 Relay this detainer to any other taw enforce Notify this office in the event of the alien 	cement agency to whi	ch you transfer custod	dy of the alien.				
·				(dale)			
If checked: please cancel the detained	it teiafed <i>to (tri</i> e siiéu	previously submitted		(OAIC)	•		
(Nams and Illie of Immigration C	Officer)	(Sig	nature of Immigration (Officer) (Sign in Ink)		
Notice: If the allen may be the victim of a conclined the ICE Law Enforcement Support Concerns about this matter.	rime or you want the enter at (802) 872-60	e alien to remain in the 120. You may also c	e United States for a	a law enforcement have any other	nt purpose, questions o		
TO BE COMPLETED BY THE LAW ENFORM	CEMENT AGENCY C	CURRENTLY HOLDIN	IG THE ALIEN WHO	IS THE SUBJEC	T OF THIS		
Please provide the information below, sign,	and return to DHS by	, mailing, emailing or	faxing a copy to				
Local Booking/Inmate # Estimate					_		
Date of letest criminal charge/conviction:							
This form was served upon the alien on	, in 0	he following manner:					
in person by inmate mail delive							
			(Cines) we of O	officer) (Sign in Ink)			
(Name and little of Officer)			(aldustnis at o	unem i (chille in nec)	Page 1 o		
DHS Form I-247A (3/17)							