

U.S. Department of Justice

Immigration and Naturalization Service

Immigration Detainer - Notice of Action

File No. [REDACTED]
Date: February 18, 2009

To: (Name and title of institution) LAUCH COUNTY JAIL 351 W. MAIN ST. TAVARES, FL 327783126	From: (INS office address) ORLANDO, FL, DOCKET CONTROL OFFICE 9403 TRADEPORT DR. ORLANDO, FL 32827
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Name of alien: [REDACTED]

Date of birth: [REDACTED] Nationality: HONDURAS Sex: F

You are advised that the action noted below has been taken by the Immigration and Naturalization Service concerning the above-named inmate of your institution:

- Investigation has been initiated to determine whether this person is subject to removal from the United States.
- A Notice to Appear or other charging document initiating removal proceedings, a copy of which is attached, was served on _____ (Date)
- A warrant of arrest in removal proceedings, a copy of which is attached, was served on _____ (Date)
- Deportation or removal from the United States has been ordered.

It is requested that you:

Please accept this notice as a detainer. This is for notification purposes only and does not limit your discretion in any decision affecting the offender's classification, work, and quarters assignments, or other treatment which he or she would otherwise receive.

Federal regulations (8 CFR 287.7) require that you detain the alien for a period not to exceed 48 hours (excluding Saturdays, Sundays and Federal holidays) to provide adequate time for INS to assume custody of the alien. You may notify INS by calling 407-816-4670 during business hours or _____ after hours in an emergency.

Please complete and sign the bottom block of the duplicate of this form and return it to this office. A self-addressed stamped envelope is enclosed for your convenience. Please return a signed copy via facsimile to _____

Return fax to the attention of MARSHALL VILDT at 407 865-8651 (Name of INS officer handling case) (Area code and phone number)

- Notify this office of the time of release at least 30 days prior to release or as far in advance as possible.
- Notify this office in the event of the inmate's death or transfer to another institution.
- Please cancel the detainer previously placed by this Service on _____

MARCO NOVALES (Signature of INS official) Immigration Enforcement Agent (Title of INS official)

Receipt acknowledged:

Date of latest conviction: _____ Latest conviction charge: _____

Estimated release date: _____

Signature and title of official: _____

ORDER TO DETAIN OR RELEASE ALIEN

TO: (NAME and Title of Person in Charge of Facility)
Officer In Charge

(Name of Facility)
Palm Beach County Jail

Please Detain Release Date 11/25/07 Time

File Number
A [REDACTED]

AGE [REDACTED] Date of Birth (Mo./Day/Yr.) [REDACTED] Sex M Nationality Mexico Foreign Address

Nature of Proceedings Removal Signature of Officer Receiving Alien

REMARKS:

Booking# [REDACTED]

Signature of Officer Authorizing Action A. Korzen [Signature] Title DO Office MF(1)/WPB

UNITED STATES DEPARTMENT OF HOMELAND SECURITY
Immigration and Customs Enforcement