P. O. BOX 3789 • GILBERT, ARIZONA 85299-3789 • (480) 345-9565 • FAX: (480) 820-1040

page 3

For your information, enclosed are a copy of a Power of Attorney signed by Mr. Ramos-Villareal's father, Jose Ramos-Gonzales; a Freedom of Information/Privacy Act Request signed by myself on behalf of Mr. Ramos-Villareal's family; a copy of Mr. Ramos-Villareal's death certificate - State of Arizona; a copy of the State of Arizona Disposal-Transmit Permit; a copy of the Certificado de Defuncion regarding the transfer of Mr. Ramos-Villareal's body to Mexico; a copy of Mr. Ramos-Villareal's Acta de Nacimiento or Birth Certificate (two pages).

Please understand that we are in need of your help with regard to obtaining this information and evidence. We ask that you empathize with the grievous situation the family of Mr. Ramos-Villareal now lives under. We look forward to hearing from your office with what we hope is an abundance of evidence which will illuminate what truly did happen to Mr. Ramos-Villareal, forcing him to an untimely and unwarranted death. If there is anything at all that we can assist you with in furtherance of this matter, please do not hesitate to contact either myself or Cynthia Edlow, CLA at our office, telephone number 480-345-9565.

Very truly yours,

Scott E. Richardson Attorney-at-Law

Enclosures

## Freedom of Information/Privacy Act Request

Any written forma			1 : 11111	
C3 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The completion of this form is optional.  It for Freedom of Information or Privacy Act re	quests is acceptable.		
*	nd read instructions on the reverse before c	the state of the s		
1. Type of Request: (Check appropriate				
Freedom of Information Act (FO	IA) (Complete all items except 7)			
	e completed in addition to all other applicable			
Amendment (PA only, Item 7 mu	ist be completed in addition to all other applica	able items)		
. Requester Information:				
Name of Requester:	- Diameral Eco	Daytime Telephone:		0 - 1 -
Address (Street Number and Name):	= NICHARDSON, LSG.	Apt. No		9565
P. Addiess (Sireet Namber and Name).	O. Box 3789			
City: ailbert	State: ARIZONA	Zip Code: 8529		3789
By my signature, I consent to the follo				
1,2	cation, and review of materials up to \$25.00, w	hen applicable. (See In	struci	tions)
Signature of requester:				
. Deceased Subject - Proof of deat	h must be attached. (Obituary, Death Certifi	cate or other proof of	leath	required)
Consent to Release Information. (Comp	lete if name is different from Requester)(Item !	niusi he completed)		
Print Name of Person Giving Consent:	Signature of Person	Giving Consent:		
By my signature I consent to the follow	wing: (chack applicable boxes)		1 100	
By my signature, I consent to the follow  Allow the Requester named in item	n 2 to see all of my records or a portion	n of my record If a m		cnacifi
what part (i.e. copy of application)	)	in or my record. If a p		, specify
(Consent is required for records for	Third States Citizana (TISC) and I and I De	D 11		
(Consent is required for records jo	or United States Citizens (USC) and Lawful Per	maneni Residents (LF	R)	
Antino Danielica in a service		,		
		n-Person Review		
Information needed to search for records  Specific information, document(s), or records  FBI VEDORTS AND P  VILLAREAL WITH RES	cord(s) desired: Adentify by name, date, subject to the ADD FILE OF PECTOTO A BOKDER PATROL	ct matter, and location EDGAR OW SHOOTING	VA K	RAMOS THE ABO
Information needed to search for records Specific information, document(s), or records FBI VEDORTS AND P VILLAREAL WITH RES Purpose: (Optional: you are not required)	cord(s) desired: (Identify by name, date, subject to the RAPMS AND FILE OF PECTODA BOKDER PATROLE to state the purpose for your request; however	ct matter, and location EDGAR OW SHOOTING	VA K	RAMOS THE ABO
Information needed to search for records Specific information, document(s), or records FBI VEDORTS AND PORTS AND POR	cord(s) desired: (Identify by name, date, subject to the RAPMS AND FILE OF PECT TO A BOKDER PATROL to state the purpose for your request; however o your request.)	EDGAR OW SHOOTING r, doing so may assist	Ae IN	THE ABO
Information needed to search for records Specific information, document(s), or records FBI VEDORTS AND PORTS AND POR	cord(s) desired: (Identify by name, date, subject to the RAPMS AND FILE OF PECTODA BOKDER PATROLE to state the purpose for your request; however	ct matter, and location EDGAR OW STING:  r, doing so may assist and records may not be	Ae IN	THE ABO
Information needed to search for records Specific information, document(s), or records FB   VEDORTS AND P VILLARES Purpose: (Optional: you are not required locating the records needed to respond to P Ramily Name RAMOS - VILLAREAL	cord(s) desired: (Identify by name, date, subject to the RAPAS AND FILE OF PECT TO A BOKDER PATROL to state the purpose for your request; however o your request.)  (If data marked with asterisk (*) is not provide Given Name:  EDGAR	ed records may not be  Middle Initia	Ae IN	THE ABONING INDIVID
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records In the Polyton AND POLITH RESTRUCTION OF THE PURPOSE: (Optional: you are not required locating the records needed to respond to Polyton Name RAMOS - VILLAREAL *Other names used, if any:  N/A	Cord(s) desired: (Identify by name, date, subject to toge April AND FILE OF PECTOTO A BONDER PATROL of to state the purpose for your request; however o your request.)  (If data marked with asterisk (*) is not provided Given Name:  EDGAR  * Name at time of entry into the U.S.:	ct matter, and location EDGAR OV SHOOTING  r, doing so may assist  d records may not be  Middle Initia O.  1-94 Admissi	Ae IN	THE ABONING INDIVID
Information needed to search for records Specific information, document(s), or records FB   VEDORTS AND P VILLARES Purpose: (Optional: you are not required locating the records needed to respond to P Ramily Name RAMOS - VILLAREAL	cord(s) desired: (Identify by name, date, subject to the RAPAS AND FILE OF PECT TO A BOKDER PATROL to state the purpose for your request; however o your request.)  (If data marked with asterisk (*) is not provide Given Name:  EDGAR	ed matter, and location EDGAR OW SHOOTING:  r, doing so may assist  d records may not be  Middle Initia  O.  I-94 Admissi	Ae /N	THE ABONIA
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records FB  VeDORTS AND PULL AREAL WITH REST Purpose: (Optional: you are not required locating the records needed to respond to the Part of Record:  *Family Name RAMOS - VILLAREAL  *Other names used, if any: N/A  * Alien Registration #:	Cord(s) desired: (Identify by name, date, subject to the purpose for your request; however o your request.)  (If data marked with asterisk (*) is not provided to state time of entry into the U.S.:  EDGAR O RAMOS - VILLA * Petition or Claim Receipt #:   * Country of MEXIC	matter, and location EDSAR OW SHOOTING:  r, doing so may assist  Middle Initia  O.  I-94 Admissi  REAL  Birth: *Date of Birth	Ae /N	THE ABONIA
Information needed to search for records Specific information, document(s), or records Information Information, document(s), or records Information Information, document(s), or records Information Information, document(s), or records Information Information, document(s), or records Information Information, document(s), or records Information	Cord(s) desired: Adentify by name, date, subject to the RADIS AND FILE OF PECT TO A BORDER PATROL of to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to your request.)  * Name at time of entry into the U.S.:  EDGAR O RAMOS - VILLA TENTHER - TO YOUR PRINTER - TO YOUR PATHER - TO YOU	matter, and location EDGAR OW SHOOTING:  r, doing so may assist  Middle Initia  No.  I-94 Admissi  Birth: *Date of Birth  Output  The continuation of the second of the se	Ae /N	THE ABONIA  Sin INDIVI  DDX. Year  79
Information needed to search for records Specific information, document(s), or records Information Information Information, document(s), or records Information, document(s), or records Information Information, document(s), or records Information, document(s), document(s)	Cord(s) desired: Adentify by name, date, subject to the RADIS AND FILE OF PECT TO A BORDER PATROL of to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to your request.)  * Name at time of entry into the U.S.:  EDGAR O RAMOS - VILLA TENTHER - TO YOUR PRINTER - TO YOUR PATHER - TO YOU	matter, and location EDGAR OW SHOOTING:  r, doing so may assist  Middle Initia  No.  I-94 Admissi  Birth: *Date of Birth  Output  The continuation of the second of the se	Ae /N	THE ABONIA
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information Information, document(s), or records Information, document(s), document(s), or records I	Given Name:  EDGAR  * Name at time of entry into the U.S.:  EDGAR  * Petition or Claim Receipt #:   * Country or WEXIC  y appear on requested record(s) (i.e., Spouse, D. Port-of-Entry into the U.S.:  Port-of-Entry in	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry	Ae /N	THE ABONIA  Sin INDIVI  DDX. Year  79
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information, document(s), or records Information, document(s), or records Information, document(s), or records Information Information, document(s), or records Information, document(s), document(s), or records Information, document(s), document(s),	Cord(s) desired: (Identify by name, date, subject to the RAPAS AND FILE OF PECT TO A BORDER PATROL of to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to your request.)  * Name at time of entry into the U.S.:  EDGAR O. RAMOS - VILLA (*)  * Petition or Claim Receipt #:   * Country or MEXIC (*)  y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y appear on requested record(s) (i.e., Spouse, Date of the U.S.:  Y Appear of the U.S.	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry  SSN:  SSN:  LONAL OV  AND S-C  SSN:  LONAL OV  LONAL OV  SSN:  LONAL OV  LONA	Ae /N	THE ABONIA  Sin INDIVI  DDX. Year  79
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information, document(s), or records Information, document(s), or records Information, document(s), or records Information Information, document(s), or records Information, document(s), document(s), or records Information, document(s), document(s),	Given Name:  EDGAR  * Name at time of entry into the U.S.:  EDGAR  * Petition or Claim Receipt #: * Country or MEXIC  y appear on requested record(s) (i.e., Spouse, D. Port-of-Entry into the U.S.:  Port-of-Entry into	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry  Date of Entry  SSN:  SSN:  NA	Ae /N  ocore  in A  ons #	PDX. Year  ZALEZ  4
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information, document(s), or records Information (Specific information, document(s), or records Information Infor	Cord(s) desired: (Identify by name, date, subject of the transport of the transport of the state the purpose for your request; however of your request.)  (If data marked with asterisk (*) is not provided of the time of entry into the U.S.:  EDGAR  * Name at time of entry into the U.S.:  EDGAR  * Petition or Claim Receipt #: * Country of MEXIC of the time of the U.S.:  Port-of-Entry into the U.S.:  Port-of-Entry into the U.S.:  PORTAL: ARIZONA  Mode of Travel: (Name of Carrier)  AUDWOBILE  Certificate #	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry  Date of Entry  SSN:  Naturalization	Ae /N  ocore  in A  ons #	PDX. Year  ZALEZ  4
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information, document(s), or records Information and Partial Part Information Information Information, document(s), or records Information Informatio	Cord(s) desired: Adentify by name, date, subject to the RAPIS AND FILE OF PECT TO A BOKDER PATROL of to state the purpose for your request; however to your request.)  (If data marked with asterisk (*) is not provided to your request.)  (If data marked with asterisk (*) is not provided to your request.)  (If data marked with asterisk (*) is not provided to your request.)  * Name at time of entry into the U.S.:  EDGAR O RAMOS - VILLA (*)  * Petition or Claim Receipt #: * Country or MEXIC (*)  y appear on requested record(s) (i.e., Spouse, Defect of the U.S. FATHER - John Amode of Travel: (Name of Carrier)  AUDWOBLE	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry  Date of Entry  SSN:  Naturalization	Ae /N  ocore  in A  ons #	PDX. Year  ZALEZ  4
Information needed to search for records Specific information, document(s), or records Specific information, document(s), or records Information (specific information, document(s), or records Information (specific information (specific information), or reduced (specific information).  Purpose: (Optional: you are not required locating the records needed to respond to the specific information (specific information).  * Family Name  * Amos - VILLAREAL  *Other names used, if any:  * Alien Registration #:  Names of other family members that may money of Origin (Place of Departure):  * MEXICO  Manner of Entry: (Air, Sea, Land)  LAND  Name of Naturalization Certifications:  Address at the time of Naturalization:	Cord(s) desired: (Identify by name, date, subject of the transport of the transport of the state the purpose for your request; however of your request.)  (If data marked with asterisk (*) is not provided of the time of entry into the U.S.:  EDGAR  * Name at time of entry into the U.S.:  EDGAR  * Petition or Claim Receipt #: * Country of MEXIC of the time of the U.S.:  Port-of-Entry into the U.S.:  Port-of-Entry into the U.S.:  PORTAL: ARIZONA  Mode of Travel: (Name of Carrier)  AUDWOBILE  Certificate #	Middle Initia  Birth: *Date of Birth  aughter, Son):  Date of Entry  O SSN:  Naturalization  Cation:	Ae /N  ocore  in A  ons #	PDX. Year  ZALEZ  4