

UNITED STATES DISTRICT COURT

DISTRICT OF CONNECTICUT

<p>Arturo Tominez Tolentino, Plaintiff v. Department of Homeland Security; U.S. Customs and Border Protection; U.S. Citizenship and Immigration Services Defendants</p>

No.

January 10, 2007

EXHIBITS IN SUPPORT OF COMPLAINT

USCBP FOIA request..... **A**

Cover Letter, 10/28/05 1

Form G-639 2

Letter from Alaska USCBP Office, 11/7/05 4

Letter to USCBP in San Francisco, 1/12/06..... 5

Updated Form G-639 6

Response of USCBP to FOIA request, 1/26/06..... 8

Letter to USCBP, re: appeal of 1/26/06 FOIA response, 2/13/06 16

Letter from USCBP acknowledging receipt of appeal on 2/27/06 dated 3/8/06..... 19

USCIS FOIA request **B**

Cover letter, 10/28/05 20

Form G-639 21

Letter from USCIS re: transfer of FOIA request to NRC, 11/16/05..... 23

Receipt from USCIS office at NRC, 11/16/05 24

Removal Proceedings..... **C**

Decision of Immigration Judge, 6/28/05..... 26

Decision of BIA, 1/5/07 29

Respectfully submitted for Arturo Tolentino, by

Justin Conlon
federal bar ct6187; juris 421914
Law Offices of Michael Boyle
250 State Street, Unit C2
P.O Box 335
North Haven, CT 06473
Phone (203) 239-2299
Fax (203) 985-8207
jconlon@immigrantcenter.com

Law Offices of Michael Boyle www.immigrantcenter.com

Attorneys	Legal Assistants	Mail address (both offices)	Phones (both offices)	North Haven	Danbury
Michael J. Boyle	Glaucia S. Lolli	P.O. Box 335	Phone 203 239-2299	250 State Street	4 Old Mill Plain Road
Justin T. Conlon	Whitney Pratt-Côté	North Haven, CT 06473	Fax 203 985-8207	North Haven, CT 06473	Danbury, CT 06811
Isabelle G. Barreira	Daucikelem S. Cruz				

author's email address jconlon@immigrantcenter.com

October 28, 2005


U.S. Customs and Border Protection
605 W. 4th Ave., Room 203
Anchorage, AK 99501

Re: Arturo Tominez Tolentino, A98 038 656, FOIA request

Dear Sir or Madam,

Enclosed you will find a FOIA request for the above named individual. I am requesting all documents relating to any entries or interactions with your office by the above named individual. Specifically, I am looking for any documentation regarding any contact with your office or entries between July 2000 and April 2001. If you have any questions or concerns regarding this request, feel free to call me at any time.

Sincerely,


Justin Conlon
Attorney at Law

Department of Homeland Security
U.S. Citizenship and Immigration Services

**G-639, Freedom of Information /
Privacy Act Request**

NOTE: The completion of this form is optional. Any written format for Freedom of Information or Privacy Act requests is acceptable.

START HERE - Please type or print in black ink. Read instructions before completing this form.

1. Type of Request: (Check appropriate box.)

- Freedom of Information Act (FOIA)(Complete all items except Number 6.)
 Privacy Act (PA). (Number 6 must be completed in addition to all other applicable items.)
 Amendment. (PA only. Number 5 must be completed in addition to all other applicable items.)

2. Requester Information.

Name of Requester: (Last, First and Middle Names) Justin Conlon		Date (mm/dd/yyyy)	Daytime Telephone: () 203 239-2299
Address (Street Number and Name): 250 State Street, Unit C-2 PO Box 335			Apt. Number:
City: North Haven	State: CT	Zip Code: 06473	

By my signature, I consent to the following:

Pay all costs incurred for search, duplication and review of materials up to \$25.00, when applicable. (See Instructions.)

Signature of requester: _____

- Deceased Subject - Proof of death must be attached. (Obituary, Death Certificate or other proof of death required.)

3. Consent to Release Information. (Complete if name is different from Requester). Numbers 7 and 8 must be completed.)

Print Name of Person Giving Consent: Arturo Tominez Tolentino	Signature of Person Giving Consent (Original signature required.)
--	---

By my signature, I consent to the following: (Check applicable boxes.)

- Allow the Requester named in Number 2 above: All of my records, or A portion of my records. (If a portion, specify what part, i.e. copy of application.)

(Consent is required for records of U. S. citizens (USC) and Lawful Permanent Residents (LPR).)

4. Information needed to search for record(s).

Specific information, document(s) or record(s) desired. Identify by name, date, subject matter and location of information.
All USCBP records requested related to all entries including those relating to any entries in Alaska between July 2000 and April 2001.

Purpose: (Optional: You are not required to state the purpose of your request. However, doing so may assist USCIS to locate the records needed to respond to your request.)

5. Data Needed on Subject of Record. (If data marked with an asterisk (*) is not provided, records may not be located.)

* Family Name: Tolentino	Given Name: Arturo	Middle Name: Tominez	
* Other names used, if any: None	* Name at time of entry into the U.S.:		I-94 Admissions #: None
* Alien Registration Number: 98 038 656	* Petition or Claim Receipt #:	* Country of Birth: Philippines	* Date of Birth (mm/dd/yyyy) 12/24/1964
Names of other family members that may appear on requested record (i.e., Spouse, Daughter, Son):			
Father's Name First Middle Last Rene Tolentino			
Mother's Name First Middle Last (Include Maiden Name) Mary Tominez			

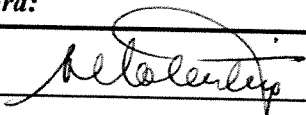
<i>Country of Origin: (Place of Departure)</i>	<i>Port-of-Entry Into the U.S.:</i>	<i>Date of Entry:</i> 4/08/01
<i>Manner of Entry: (Air, Sea, Land)</i>	<i>Mode of Travel: (Name of Carrier)</i>	<i>U.S. Social Security Number:</i> none
<i>Name on Naturalization Certificate:</i>	<i>Certificate #:</i>	<i>Naturalization Date:</i>
<i>Address on Date of Naturalization:</i>	<i>Court and Location:</i>	

6. Verification of Subject's Identity: (See Instructions for explanation. Check one box.)

In-Person With ID *Notarized Affidavit of Identity* *Other (Specify)* _____

7. Signature of Subject of Record:

(Original signature required)



Date: 10-25-05

Telephone No.: (860) 276-8392

8. Notary: (Normally needed from persons who are the subject of the record sought for a sworn declaration under penalty of perjury. See below.)

Subscribed and sworn to before me this _____ *Day of* _____ *in the Year* _____

Signature of Notary _____ *My Commission Expires on* _____

OR

NOTE: If a declaration is provided in lieu of a notarized signature, it must state at a minimum the following: (Include Notary Seal Stamp in the appropriate space below.)

Executed outside U.S.

If executed outside the United States: "I declare (certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Signature: _____

Executed in U.S.

If executed within the United States, its territories, possessions or commonwealths: "I declare (certify, verify or state) under penalty of perjury that the foregoing is true and correct.

Signature: _____

(Seal/Stamp)

(Seal/Stamp)



**U.S. Customs and
Border Protection**

NOV 07 2005

Mr. Justin Conlon
Law Offices of Michael Boyle
P.O. Box 335
North Haven, CT 06473

Re: Freedom of Information Act Request
Arturo Tominez Tolentino

Dear Conlon:

This is in reference to your Freedom of Information Act (FOIA) request dated October 28, 2005, in which you ask for records pertaining to Mr. Arturo Tominez Tolentino.

We have determined that the Customs and Border Protection Field Office in San Francisco, California has responsibility for responding to your request and have forwarded your request to that office. Should you have any questions, please contact the undersigned at 907-271-2687 or via fax at 907-271-4806.

Sincerely,

A handwritten signature in black ink, appearing to read "Patrick McGownd", written over a horizontal line.

Patrick McGownd
FOIA Processor

Law Offices of Michael Boyle www.immigrantcenter.com

Attorneys	Legal Assistants	Mail address (both offices)	Phones (both offices)	North Haven	Danbury
Michael J. Boyle	Glaucia S. Lolli	P.O. Box 335	Phone 203 239-2299	250 State Street	4 Old Mill Plain Road
Justin T. Conlon	Whitney Pratt-Côté	North Haven, CT 06473	Fax 203 985-8207	North Haven, CT 06473	Danbury, CT 06811
Isabelle G. Barreira					

author's email address jconlon@immigrantcenter.com

January 12, 2006

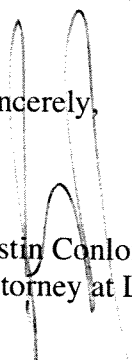
Chief Richards
US CBP
555 Battery Street
San Francisco, CA 94111

Re: Arturo Tolentino, A98 038 656, FOIA request

Dear Chief Richards,

Per your request over the phone, enclosed you will find a completed G-639 FOIA request form with a signature as a sworn declaration. I am sorry for not sending a fully completed form earlier.

Sincerely,


Justin Conlon
Attorney at Law

Department of Homeland Security
U.S. Citizenship and Immigration Services

**G-6, Freedom of Information/
Privacy Act Request**

NOTE: The completion of this form is optional. Any written format for Freedom of Information or Privacy Act requests is acceptable.

START HERE - Please type or print in black ink. Read instructions before completing this form.

1. Type of Request: (Check appropriate box.)

- Freedom of Information Act (FOIA). (Complete all items except Number 6.)
- Privacy Act (PA). (Number 6 must be completed in addition to all other applicable items.)
- Amendment. (PA only. Number 5 must be completed in addition to all other applicable items.)

2. Requester Information.

Name of Requester: (Last, First and Middle Names) Justin Conlon		Date (mm/dd/yyyy)	Daytime Telephone: () 203 239-2299
Address (Street Number and Name): 250 State Street, Unit C-2 PO Box 335			Apt. Number:
City: North Haven	State: CT	Zip Code: 06473	

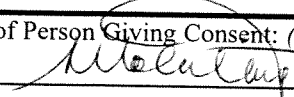
By my signature, I consent to the following:

Pay all costs incurred for search, duplication and review of materials up to **\$25.00**, when applicable. (See Instructions.)

Signature of requester: _____

- Deceased Subject - Proof of death must be attached. (Obituary, Death Certificate or other proof of death required.)

3. Consent to Release Information. (Complete if name is different from Requester). (Numbers 7 and 8 must be completed.)

Print Name of Person Giving Consent: Arturo Tominez Tolentino	Signature of Person Giving Consent: (Original signature required.) 
--	--

By my signature, I consent to the following: (Check applicable boxes.)

- Allow the Requester named in Number 2 above: All of my records, or A portion of my records. (If a portion, specify what part, i.e. copy of application.)

(Consent is required for records of U. S. citizens (USC) and Lawful Permanent Residents (LPR).)

4. Information needed to search for record(s).

Specific information, document(s) or record(s) desired: (Identify by name, date, subject matter and location of information.)

All USCBP records requested related to all entries including those relating to any entries in Alaska between July 2000 and April 2001.

Purpose: (Optional: You are not required to state the purpose of your request. However, doing so may assist USCIS to locate the records needed to respond to your request.)

5. Data Needed on Subject of Record. (If data marked with an asterisk (*) is not provided, records may not be located.)

* Family Name: Tolentino	Given Name: Arturo	Middle Name: Tomez	
* Other names used, if any: None	* Name at time of entry into the U.S.:	I-94 Admissions #: None	
* Alien Registration Number: 98 038 656	* Petition or Claim Receipt #:	* Country of Birth: Philippines	* Date of Birth (mm/dd/yyyy) 12/24/1964
Names of other family members that may appear on requested record(s) (i.e., Spouse, Daughter, Son):			
Father's Name	First	Middle	Last
Rene Tolentino			
Mother's Name	First	Middle	Last (Include Maiden Name)
Mary Tomez			

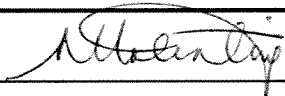
Country of Origin: <i>(Place of Departure)</i>	Port-of-Entry Into the U.S.:	Date of Entry: 4/08/01
Manner of Entry: <i>(Air, Sea, Land)</i>	Mode of Travel: <i>(Name of Carrier)</i>	U.S. Social Security Number: none
Name on Naturalization Certificate:	Certificate #:	Naturalization Date:
Address on Date of Naturalization:	Court and Location:	

6. Verification of Subject's Identity: *(See Instructions for explanation. Check one box.)*

In-Person With ID Notarized Affidavit of Identity Other *(Specify)* _____

7. Signature of Subject of Record:

(Original signature required)



Date: 1/9/06

Telephone No.: () _____

8. Notary: *(Normally needed from persons who are the subject of the record sought or for a sworn declaration under penalty of perjury. See below.)*

Subscribed and sworn to before me this _____ Day of _____ in the Year _____

Signature of Notary _____ My Commission Expires on _____

OR

NOTE: *If a declaration is provided in lieu of a notarized signature, it must state at a minimum the following: (Include Notary Seal or Stamp in the appropriate space below.)*

Executed outside U.S.

If executed outside the United States: "I declare (certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Signature: _____

Executed in U.S.

If executed within the United States, its territories, possessions or commonwealths: "I declare (certify, verify or state) under penalty of perjury that the foregoing is true and correct.

Signature:  _____

(Seal/Stamp)

(Seal/Stamp)

U. S. Customs and Border Protection
U.S. Department of Homeland Security
Port Director
555 Battery Street
San Francisco, CA 94111-2316



U.S. Customs and
Border Protection

January 26, 2006

DIS 2: SF0B(SR)

Mr. Justin Conlon
P. O. Box 335
New Haven, CT 06473

Re: Freedom of Information Act Request Dated: October 28, 2005 (Arturo Tominez Tolentino)

Dear Mr. Conlon:

Enclosed are the Customs and Border Protection records relating to Arturo Tomine Tolentino, which you requested in your Freedom of Information Act request dated October 28, 2005. All records of admission and departure have been located for your client. These records are attached. These records reflect a search of the CIS, NIIS, Claims and SQ94 databases pertaining to this individual. This information is being released to you as the attorney representing Mr. Tolentino in this matter, based on his written authorization.

If you are dissatisfied with our response to your FOIA request, you are advised that you have the right to appeal any denial or partial denial of your request in writing within thirty-five (35) days after the date of this notification. This appeal should be submitted to the FOIA Appeals Officer, U. S. Customs and Border Protection, 1300 Pennsylvania Avenue, N. W. Washington D. C. 20229, and have the words "Freedom of Information Act Appeal" printed conspicuously on the face of the envelope. See appendix C, 3 (c) to 31 C.F.R. Part 1.

In the event that the FOIA Appeals Officer should (1) fail to issue a determination of your appeal within twenty (20) working days of its receipt (plus 10 additional working days if you are notified in writing that an extension of time is required and applicable), or (2) deny your appeal, you may obtain judicial review pursuant to 5 U.S.C. 552 (a) (4) (B) in the United States District Court in the district (1) in which you reside, (2) in which your principal place of business is located, (3) in which the agency's records are situated, or (4) in the District of Columbia.

Sincerely,

A handwritten signature in black ink, appearing to read "John P. Leyden".

John P. Leyden
Port Director
San Francisco

Enclosure

U.S. Department of Justice
Immigration and Naturalization Service

OMB 1115-0077

I-94 Arrival Record

Admission Number
50462046303

SAVI Indicator
None

1. Family Name TOLENTINO			
2. First (Given) Name ARTURO T		3. Birth Date (Day/Mo/Yr) 12/24/1964	
4. Country of Citizenship PHILIPPINES (260)		5. Sex (Male or Female) Male	
6. Passport Number H764140	7a. Airline and Flight Number AA05706	7b. Arrival Date (Mo/Day/Yr) 08/26/1993	7c. Arrival Port MIA
8. Country Where You Live PHILIPPINES (260)		9. Country Where you Boarded	
10a. City Where Visa Was Issued CURACAO (CUR)	10b. Visa Class ALIEN IN TRANSIT (C1)	11a. Date Issued (Mo/Day/Yr) 05/17/1993	11b. Date Admission Expires (Mo/Day/Yr)
12. Address While in the United States (Number and Street) IN TRANSIT			
13. City and State 99			

I-94 Departure Record

14. Port LOS ANGELES, CA (LOS)		15. Length of Stay 1
16. Airline and Flight Number/Ship Name		17. Departure Date (Mo/Day/Yr) 08/27/1993
16a. Scheduled Airline and Flight Number		17a. Scheduled Departure Date (Mo/Day/Yr) None
File Group EAST ASIA/ORIENT (OR)		

18. Occupation	19. Waivers
20. INS File	21. INS FCO
22. Petition Number	23. Program Number
24. Bond	25. Prospective Student
26. Itinerary/Comments	
27. TWOV Ticket Number	

U.S. Department of Justice
Immigration and Naturalization Service

OMB 1115-0077

I-94 Arrival Record

Admission Number
15540058503

SAVI Indicator
None

1. Family Name TOLENTINO			
2. First (Given) Name ARTURO		3. Birth Date (Day/Mo/Yr) 12/24/1964	
4. Country of Citizenship PHILIPPINES (260)		5. Sex (Male or Female) Male	
6. Passport Number H764140	7a. Airline and Flight Number PR00102	7b. Arrival Date (Mo/Day/Yr) 02/16/1994	7c. Arrival Port LOS
8. Country Where You Live PHILIPPINES (260)		9. Country Where you Boarded	
10a. City Where Visa Was Issued CURACAO (CUR)	10b. Visa Class ALIEN IN TRANSIT (C1)	11a. Date Issued (Mo/Day/Yr) 05/17/1993	11b. Date Admission Expires (Mo/Day/Yr)
12. Address While in the United States (Number and Street) % M/V FRONT HAWK			
13. City and State NEW YORK NY			

I-94 Departure Record

14. Port NEW YORK CITY, NY (NYC)		15. Length of Stay 5
16. Airline and Flight Number/Ship Name		17. Departure Date (Mo/Day/Yr) 02/21/1994
16a. Scheduled Airline and Flight Number		17a. Scheduled Departure Date (Mo/Day/Yr) None
File Group EAST ASIA/ORIENT (OR)		

18. Occupation	19. Waivers
20. INS File	21. INS FCO
22. Petition Number	23. Program Number
24. Bond	25. Prospective Student
26. Itinerary/Comments	
27. TWOV Ticket Number	

b2

Close

U.S. Department of Justice
 Immigration and Naturalization Service

OMB 1115-0077

I-94 Arrival Record

Admission Number
97218056006

SAVI Indicator
None

1. Family Name TOLENTINO			
2. First (Given) Name ARTURO		3. Birth Date (Day/Mo/Yr) 12/24/1964	
4. Country of Citizenship PHILIPPINES (260)		5. Sex (Male or Female)	
6. Passport Number	7a. Airline and Flight Number	7b. Arrival Date (Mo/Day/Yr) //	7c. Arrival Port
8. Country Where You Live Unknown (000)		9. Country Where you Boarded	
10a. City Where Visa Was Issued	10b. Visa Class ALIEN IN TRANSIT (C1)	11a. Date Issued (Mo/Day/Yr) 00/00/0000	11b. Date Admission Expires (Mo/Day/Yr) 00/00/0000
12. Address While in the United States (Number and Street)			
13. City and State			

I-94 Departure Record

14. Port BALTIMORE, MD (BAL)		15. Length of Stay	
16. Airline and Flight Number/Ship Name		17. Departure Date (Mo/Day/Yr) 12/17/1998	
16a. Scheduled Airline and Flight Number		17a. Scheduled Departure Date (Mo/Day/Yr) None	
File Group EAST ASIA/ORIENT (OR)			

18. Occupation		19. Waivers	
20. INS File		21. INS FCO	
22. Petition Number		23. Program Number	
24. Bond		25. Prospective Student	
26. Itinerary/Comments			
27. TWOV Ticket Number			

General

Links

Rule Findings

62

Close

TECS I94 Record : ARTURO TOLENTINO (12/24/1964) on 07/27/2000

U.S. Department of Justice
Immigration and Naturalization Service

OMB 1115-0077

I-94 Arrival Record

Admission Number
24443654708

1. Family Name TOLENTINO			
2. First (Given) Name ARTURO		3. Birth Date (Day/Mo/Yr) 12/24/1964	
4. Country of Citizenship PH		5. Sex (Male or Female) M	
6. Passport Number EE872827	7a. Airline and Flight Number PR 00104	7b. Arrival Date (Mo/Day/Yr) 07/27/2000	7c. Arrival Port SFR
8. Country Where You Live PH		9. City Where you Boarded	
10a. City Where Visa Was Issued MANILA	10b. Visa Class C1	11a. Date Issued (Mo/Day/Yr) 09/23/1999	11b. Date Expires (Mo/Day/Yr) 08/05/2000
12. Address While in the United States (Number and Street) IN TRANSIT			
13. City and State 99			

I-94 Departure Record

14. Port POO		15. Length of Stay	
16. Airline and Flight Number/Ship Name		17. Departure Date (Mo/Day/Yr) 07/29/2000	
26. Itinerary/Comments TO LIEFDE PORTLAND			

Close

62

11/30/2005 12

INS Secondary Referrals (IO95) - Detail

Person Information

Lastname TOLENTINO		Firstname ARTURO	DOB 12/24/1964
Gender	Race		
Document Country PH	Document Number EE872827		Document Type P

Location Information

Airline Carrier PHILIPPINE AIRLINES, INC. (PR)		Flight Number 104
Crossing Date 7/27/2000	Site Code SAN FRANCISCO, INTL AP TERM G PO BOX 251867 INTL TERM SECOND LVL (A281)	

Inspection Result

Disposition C1	Exclusion	Lookout Match
-------------------	-----------	---------------

Referral Information

Referral Date/Time 7/27/2000 11:59:29 PM	Referring Officer 551903843	Agency Referral Code	FIN Number 571948939R
Reason for Referral LETTER SAYS PORTLAND, BUT I BELIEVE HE'S SUPPOSE TO MEET HIS SHIP HERE? NEED TO CALL THE AGENT? [REDACTED] <i>b2</i>			
Remarks AGENT HAS TICKET, C1 10 DAYS			

b2

Print

Close

U.S. Department of Justice
Immigration and Naturalization Service

OMB 1115-0077



I-94 Arrival Record

Admission Number
97218056006

SAVI Indicator
None

1. Family Name TOLENTINO			
2. First (Given) Name ARTURO		3. Birth Date (Day/Mo/Yr) 12/24/1964	
4. Country of Citizenship PHILIPPINES (260)		5. Sex (Male or Female)	
6. Passport Number	7a. Airline and Flight Number	7b. Arrival Date (Mo/Day/Yr) //	7c. Arrival Port
8. Country Where You Live Unknown (000)		9. Country Where you Boarded	
10a. City Where Visa Was Issued	10b. Visa Class ALIEN IN TRANSIT (C1)	11a. Date Issued (Mo/Day/Yr) 00/00/0000	11b. Date Admission Expires (Mo/Day/Yr) 00/00/0000
12. Address While in the United States (Number and Street)			
13. City and State			

I-94 Departure Record

14. Port BALTIMORE, MD (BAL)		15. Length of Stay	
16. Airline and Flight Number/Ship Name		17. Departure Date (Mo/Day/Yr) 12/17/1998	
16a. Scheduled Airline and Flight Number		17a. Scheduled Departure Date (Mo/Day/Yr) None	
File Group EAST ASIA/ORIENT (OR)			

18. Occupation		19. Waivers	
20. INS File		21. INS FCO	
22. Petition Number		23. Program Number	
24. Bond		25. Prospective Student	
26. Itinerary/Comments			
27. TWOV Ticket Number			

b2

