Chelsea Zuzindlak

From: FOIA, USCIS <USCIS.FOIA@uscis.dhs.gov>
Sent: Wednesday, August 29, 2018 3:01 PM

To: Chelsea Zuzindlak

Subject: Automatic reply: FOIA REQUEST for AN NGOC HO

The USCIS mailbox facilitates the submission of Freedom of Information Act (FOIA) and/or Privacy Act (PA) requests for access to USCIS records.

For instructions and requirements on how to fill out a FOIA/PA request or to check the status of a previously submitted request, please visit our FOIA Webpage by clicking the following link: <u>FOIA webpage</u> (http://www.uscis.gov/about-us/freedom-information-and-privacy-act-foia/uscis-freedom-information-act-and-privacy-act)

If you are submitting a FOIA request, this courtesy reply does not replace the Acknowledgement Letter which will be sent to you once your request has been scanned into our FOIA processing system.

Please note that if you filed a FOIA request using the DHS online form and are requesting access to records about an individual, additional information may be required in order to properly process your request. We will advise you if any additional information is required.

If you have questions about your pending FOIA/PA request, please send them to FOIAPAQuestions@uscis.dhs.gov. You may also contact the National Customer Service Center at 1-800-375-5283. Please reference your control number with your inquiry.

As this reply is automatically generated, do not respond to this notification.

Chelsea Zuzindlak

From: Chelsea Zuzindlak

Sent: Wednesday, August 29, 2018 3:00 PM

To: FOIA, USCIS

Subject: FOIA REQUEST for AN NGOC HO

Attachments: An Ngoc Ho USCIS FOIA Request w G639.pdf

The attached letter and G-639 form constitute Mr. An Ngoc Ho's Freedom of Information Act (FOIA) request. Please treat it accordingly.

Best regards,

Chelsea Zuzindlak
Managing Partner
Boxwala Zuizndlak PLLC
248.677.4777
czuzindlak@bzlawusa.com
www.bzlawusa.com



Notice: If you are not a U.S. citizen, you must change your address with USCIS within 10 days of moving or face severe penalties.

Chelsea Zuzindlak

MANAGING PARTNER DETROIT, MI

Boxwala Zuzindlak

YOUR IMMIGRATION COUNSEL

Zainab Boxwala

MANAGING PARTNER HOUSTON, TX

Via Email

August 29, 2018

U.S. Citizenship and Immigration Services National Records Center, FOIA/PA Office P.O. Box 648010 Lee's Summit, MO 64064-8010 uscis.foia@uscis.dhs.gov

RE:

FREEDOM OF INFORMATION ACT REQUEST

Subject: An Ngoc HO (A 615)

Dear FOIA Officer:

This letter and enclosure constitute Mr. An Ngoc Ho's Freedom of Information Act (FOIA) request pursuant to 5 USC § 552/552a. Enclosed is Mr. Ho's signed Form G-639 requesting the release of any and all records related to himself, i.e., the full contents of his Alien File, and authorizing the release of this information to my office.

Please take notice that Mr. Ho was the named beneficiary of two or more I-130 petitions filed on his behalf. The names of relevant family member petitioners are listed in the Form G-639. We also have reason to believe that Mr. Ho filed two or more sets of I-485, I-765, and I-131 applications. As the nature of our request is exhaustive, we expect to receive full copies of all petitions and applications previously filed with any and all attachments, receipt notices, decisions, post-decision motions, briefs, and letters or correspondence.

Please do not hesitate to contact me should you have any questions or require additional information.

Respectfully submitted,

Chelsea Zuzindlak

Enclosure Form G-639

1625 E. Fourth St. Royal Oak, MI 48067 www.bzlawusa.com czuzindlak@bzlawusa.com +1 855.428.3762 248.677.4777

EXHIBIT A



Freedom of Information/Privacy Act Request

USCIS Form G-639 OMB No. 1615-0102 Expires 04/30/2020

A PARTY CONTRACTOR AND ASSESSMENT OF THE

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

NOTE: Use of this form is optional. USCIS accepts any written request, regardless of format, provided that the request complies with the applicable requirements under the FOIA and the Privacy Act.

► START HERE - Type or print in black ink. Part 1. Type of Request Requestor's Contact Information Requestor's Daytime Telephone Number Select only one box. (248) 677-4777 NOTE: If you are filing this request on behalf of another individual, respond as it would apply to that individual. Requestor's Mobile Telephone Number (if any) 1.a. X Freedom of Information Act (FOIA)/Privacy Act (PA) (586) 215-2218 Amendment of Record (PA only) Requestor's Email Address (if any) 6. czuzindlak@bzlawusa.com Part 2. Requestor Information Requestor's Certification Are you the Subject of Record for this request? X No By my signature, I consent to pay all costs incurred for search, duplication, and review of documents up to \$25. (See Form If you answered "No" to Item Number 1., provide the G-639 Instructions for more information.) information requested in Part 2. If you answered "Yes" to Item Number L. skip to Part 3. Requestor's Signature BindlaB Requestor's Full Name 7.b. Date of Signature (mm/dd/yyyy) 08/28/2018 Family Name | Zuzindlak (Last Name) 2.b. Given Name Chelsea Part 3. Description of Records Requested (First Name) NOTE: While you are not required to respond to every item in 2.c. Middle Name Allise Part 3., failure to provide complete and specific information may delay processing of your request or create an inability for Requestor's Mailing Address U.S. Citizenship and Immigration Services (USCIS) to locate the records or information requested. In Care Of Name (if any) Purpose (Optional: You are not required to state the Boxwala Zuzindlak PLLC purpose of your request. However, providing this Street Number information may assist USCIS in locating the records 1625 E. 4th Street and Name needed to respond to your request.) Apt. Ste. Flr. Requesting immigration records for personal City or Town Royal Oak State MI 3.f. ZIP Code 48067 Province Full Name of the Subject of Record 3.h. Postal Code Family Name 2.a. (Last Name) Country 2.b. Given Name United States An Ngoc (First Name) 2.c. Middle Name

Part 3. Description of Records Requested	Family Member 2					
(continued)	11.a. Family Name (Last Name)					
Other Names Used by the Subject of Record (if any)	11.b. Given Name (First Name) Uyen Vy The					
Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to	11.c. Middle Name					
complete this section, use the space provided in Part 5. Additional Information.	12. Relationship					
	Former Spouse					
(Last Name)	Parents' Names for the Subject of Record.					
3.b. Given Name (First Name)	Father					
3.c. Middle Name	13.a. Family Name					
Full Name of the Subject of Record at Time of	(Last Name) 13.b. Given Name (First Name) Van Giao					
4.a. Family Name Ho Ngoc	13.c. Middle Name					
(Last Name)						
4.b. Given Name (First Name)	Mother 14.a. Family Name Tran					
4.c. Middle Name	(Last Name)					
Other Information About the Subject of Record	14.b. Given Name (First Name) Thi Linh					
5. Form I-94 Number Arrival-Departure Record	14.c. Middle Name					
Tomi 1-94 Number Anival-Departure Record	14.d. Maiden Name (if applicable)					
6. Alien Registration Number (A-Number) (if any)						
► A- 6 1 5	15. Description of Records Sought.					
7. USCIS Online Account Number (if any) ▶ N O N E	Provide a description of the records you are seeking. If you need additional space, use the space provided in Part 5. Additional Information.					
8. Application, Petition, or Request Receipt Number	Requesting copy of ALL files relating to An Ngoc					
► SEVERAL	Ho for personal review.					
Information About Family Members that May Appear on Requested Records						
For example, provide the requested information about a spouse or children. If you need extra space to complete this section, use the space provided in Part 5. Additional Information.	Part 4: Verification of Identity and Subject of Record Consent					
Family Member 1	NOTE: Complete all applicable Item Numbers. In addition, the Subject of Record MUST sign Part 4. of this request.					
9.a. Family Name Nguyen (Last Name)	Full Name of the Subject of Record					
9.b. Given Name (First Name) Bich Ngoc	the second secon					
9.c. Middle Name	(Last Name)					
10. Relationship	1.b. Given Name (First Name) An Ngoc					
Current Spouse	1.c. Middle Name					

Form G-639 04/17/17 N Page 2 of 4 EXHIBIT A

	et 4. Verification of Identity and Subject of cord Consent (continued)	Signature and Notarized Affidavit or Declaration of the Subject of Record						
Ma	iling Address for the Subject of Record	Select only one box.						
	In Care Of Name (if any) Lien Zimmerman	NOTE: The Subject of Record MUST provide a signature in Item Number 8.a. Notarized Affidavit of Identity OR Item Number 8.b. Declaration Under Penalty of Perjury. If the Subject of Record is deceased, read Item Number 8.c.						
2.b.	Street Number and Name 2197 E. 14 Mile Road	Deceased Subject of Record and attach proof of death.						
2.c.	Apt. Ste. Flr.	8.a.		Notarized Affidavit of Identity				
2.d.	City or Town Sterling Heights			(Do NOT sign and date below until the notary public provides instructions to you.)				
2.e.	State MI 2.f. ZIP Code 48310			By my signature, I consent to USCIS releasing the requested records to the requestor (if applicable)				
2.g.	Province			named in Part 2. I also consent to pay all costs incurred for search, duplication, and review of documents up to \$25 (if filing this request for myself).				
2.h.	Postal Code			documents up to 525 (if fining this request for mysen).				
2.i.	Country United States			Signature of Subject of Record				
Oth	er Information for the Subject of Record			Date of Signature (mm/dd/yyyy)				
3.	Date of Birth (mm/dd/yyyy) 1972			Subscribed and sworn to before me on this				
4.	Country of Birth Vietnam			day of in the year				
	The second state of the second state and second state of the secon			Daytime Telephone Number				
Cor	tact Information for the Subject of Record							
Prov	iding this information is optional.			Signature of Notary				
5.	Daytime Telephone Number							
		0.1	157	My Commission Expires on (mm/dd/yyyy)				
6.	Mobile Telephone Number (if any)	8.b.	$ \Delta $	Declaration Under Penalty of Perjury By my signature, I consent to USCIS releasing the				
7.	Email Address (if any)			requested records to the requestor (if applicable) named in Part 2. I also consent to pay all costs incurred for search, duplication, and review of documents up to \$25 (if filing this request for myself)				
				I certify, swear, or affirm, under penalty of perjury under the laws of the United States of America, that the information in this request is complete, true, and correct. Signature of Subject of Record				
				Date of Signature (mm/dd/yyyy)				
		8.c.		ensed Subject of Record OTE: You MUST attach an obituary, death certificate,				

or other proof of death.)

Econorie								and confiner			
Par	t 5. Additio	nal				5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
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	Family Name (Last Name)	Но									
1.b.	Given Name (First Name)	Anì	Ngoc								
1.c.	Middle Name										
2.	Alien Registra		umber (A-Nur A-	nber) (if	any) 6 1 5						
3.a.	Page Number	3.b.	Part Number	3.c.	Item Number 9 etc.						
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