

UNITED STATES GOVERNMENT MEMORANDUM  
RESIDENTIAL REENTRY MANAGEMENT OFFICE  
BROOKLYN, NEW YORK

Date: July 9, 2020  
To: U.S. MARSHALS SERVICE  
Southern District of New York  
*P. MCFARLAND*  
From: Patrick McFarland, Residential Reentry Manager  
Brooklyn, New York 11232

Subject: **RRC FAILURE**  
Name: **Michael Cohen**  
Reg. No: **86067-054**  
CMC: **YES** Release Date: **11/22/2021 GCT Release**

Location: US Probation  
500 Pearl Street  
New York, NY 10007

Contact: Patrick McFarland, RRM  
Tel. No: (718) 840-4218

CIRCUMSTANCES:

On July 9, 2020, inmate Cohen, Michael 86067-054 failed to agree to the terms of Federal Location Monitoring for SDNY US Probation. The BOP is requesting remand for failure to comply. We are therefore requesting his immediate transfer to a secure institution.

As inmate Cohen is a sentenced federal prisoner, I hereby authorize the United States Marshals Service, Southern District of New York, to remand her at the Metropolitan Detention Center, Brooklyn, New York pending further designation.

Your cooperation with this matter is greatly appreciated.

USM-SDNY FAX : (212) 637-6131

**FEDERAL LOCATION MONITORING PROGRAM PARTICIPANT AGREEMENT  
(BOP Inmates monitored by The U. S. Probation Office)**

**Inmate Name: COHEN, Michael D. Reg# 86067-054**

You have been designated by the Federal Bureau of Prisons (BOP) to participate in the Federal Location Monitoring Program (FLM). This program will allow for the completion of your custodial sentence **(scheduled to terminate on November 21, 2021)**. to occur at your home, under the monitoring and supervision of the United States Probation Office for the Southern District of New York.

Below is a list of additional guidelines you will be expected to comply with and honor during the entire term of FLM. Any violation of these rules will result in our notification to BOP officials which may result in your immediate termination from the FLM program.

**I, Michael D. Cohen, agree to reside [REDACTED], for the entire term of my FLM.** Said term will be monitored electronically with the use of Radio Frequency (RF) and Home Detention as described in Prob. 61 (RF) which has been reviewed and signed. In addition, the following terms will guide my participation in FLM.

- 1) No engagement of any kind with the media, including print, tv, film, books, or any other form of media/news. Prohibition from all social media platforms. No posting on social media and a requirement that you communicate with friends and family to exercise discretion in not posting on your behalf or posting any information about you. The purpose is to avoid glamorizing or bringing publicity to your status as a sentenced inmate serving a custodial term in the community.
- 2) Any employment must be approved in advance by the United States Bureau of Prisons and the United States Probation Office. As a guideline, any employment must be fully transparent, fully tax paying, and through a verifiable, independent third party. Hours of work must be documented. A full description of your duties must be submitted by the intended employer in advance of commencement of employment.
- 3) You shall not have contact with any convicted felons; or anyone currently under investigation by the U.S. Attorney's Office.
- 4) Prior approval for attendance to one weekly religious service, in addition to holidays. A letter from the place of worship may be required.
- 5) Food shopping and other regular household shopping errands must be conducted on your behalf by your family members, unless you are residing alone.
- 6) Approval will be granted for your medical treatment/appointments, with submission of location of said appointments in advance. Verification will be needed.
- 7) Any requests outside of the parameters listed above (work, medical, religious) will be considered "discretionary leave" and will be considered only if the request is of an extraordinary nature.

Such requests will be vetted by the Supervisor and/or designee of the Location Monitoring Program. All request will be based on compliance with the FLM program.

8) Approval will be granted for you to meet with your attorney, at the attorney's request in advance.

**If you fail to adhere to the Home Detention requirements and/or if you fail to adhere to the guidelines indicated above, the U.S. Probation Office will immediately notify the Bureau of Prisons and will request that your participation in the FLM program be terminated.**

Your signature below acknowledges your acceptance and agreement to the expectations of this document while you are on FLM.

Signed by:

PATRICK MCFARLAND

Patrick McFarland  
Residential Reentry Manager, BOP

Signed by:

\_\_\_\_\_  
Enid Febus  
Supervisory U.S. Probation Officer

Signed by:

\_\_\_\_\_  
Michael D. Cohen  
FLM Participant

Signed by:

\_\_\_\_\_  
Adam Pakula  
U.S. Probation Officer Specialist

Date: \_\_\_\_\_