

October 27, 2016

U.S. Department of Homeland Security
Office of the General Counsel
245 Murray Lane, SW
Mail Stop 0485
Washington, D.C. 20528-0485

Office of the Principal Legal Advisor
U.S. Immigration and Customs Enforcement
500 12th St., SW, Floor 9
Washington, D.C. 20536-5098

Atlanta Enforcement and Removal Operations Field Office
U.S. Immigration and Customs Enforcement
180 Ted Turner Dr. SW Suite 522
Atlanta, GA, 30303

VIA FEDERAL EXPRESS

**Re: Claim under the Federal Tort Claims Act Due to Injury Resulting from
Immigration Raids, January 2, 2016**

Dear Officers:

We write on behalf of our clients, all victims of immigration enforcement operations (“immigration raids”) that took place in the metropolitan Atlanta, Georgia area on January 2, 2016. Our clients bring claims under the Federal Tort Claims Act (“FTCA”), 28 U.S.C. § 1346, 28 U.S.C. § 2671, *et seq.*, for damages suffered during these immigration raids.

On January 2, 2016, Department of Homeland Security (“DHS”) Immigration and Customs Enforcement (“ICE”) agents targeted immigrant women and children in their homes to remove them into custody.¹ ICE officers unlawfully entered our clients’ homes without voluntary consent, exigent circumstances, or a warrant during the course of these immigration raids. Our clients suffered humiliation, discrimination, emotional distress, loss of enjoyment of life, and damages from their seizure, false imprisonment, and restrictions on liberty as a result.

¹ Statement by Secretary Jeh C. Johnson, Southwest Border Security, Jan. 4, 2016, *available at* <https://www.dhs.gov/news/2016/01/04/statement-secretary-jeh-c-johnson-southwest-border-security> (“As part of these operations, 121 individuals were taken into custody, primarily from Georgia, Texas, and North Carolina. . . .”).

We enclose Standard Form 95 ("SF-95") and claim authorization forms for the following individuals:

Family of Rosa Vargas Morales

1. Rosa Vargas Morales
2. Rosa Vargas Morales, on behalf of minor [REDACTED] ("D.M.V.")
3. Carlos Rene Morales
4. Juan Mijangos Vargas
5. Juneidy Mijangos Vargas
6. Juneidy Mijangos Vargas, on behalf of minor [REDACTED] ("J.A.M.")

Family of Lesly Padilla Padilla

7. Lesly Padilla Padilla
8. Lesly Padilla Padilla, on behalf of minors [REDACTED] ("E.D.N.P.")
and [REDACTED] ("E.I.N.P.")

Family of Salvador Alfaro and Johana Gutierrez

9. Salvador Alfaro
10. Johana Gutierrez
11. Johana Gutierrez, on behalf of minors [REDACTED] ("Y.S.G.R.") and
[REDACTED] ("J.I.G.R.")

Thank you for your attention to these matters. Please contact Eunice Cho and Daniel Werner, attorneys with the Southern Poverty Law Center, at (404) 521-6700, eunice.cho@splcenter.org and daniel.werner@splcenter.org, with any questions.

Sincerely,



Eunice Cho
Daniel Werner
Laura Rivera
SOUTHERN POVERTY LAW CENTER
1989 College Ave. NE
Atlanta, GA 30317

Lisa Graybill
SOUTHERN POVERTY LAW CENTER
1055 St. Charles Ave. Suite 505
New Orleans, LA 70130

COUNSEL FOR CLAIMANTS

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency: See attached			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code. Rosa Vargas Morales [REDACTED] See attached for legal representatives		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN	4. DATE OF BIRTH see attached	5. MARITAL STATUS see attached	6. DATE AND DAY OF ACCIDENT See attached	7. TIME (A.M. OR P.M.) see attached	
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary). see attached					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code). see attached					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side). see attached					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. see attached					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
see attached		see attached			
12. (See instructions on reverse). AMOUNT OF CLAIM (in dollars)					
12a. PROPERTY DAMAGE	12b. PERSONAL INJURY 250,000.00	12c. WRONGFUL DEATH	12d. TOTAL (Failure to specify may cause forfeiture of your rights). 250,000.00		
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side). [REDACTED]			13b. PHONE NUMBER OF PERSON SIGNING FORM c/o 404-521-6700		14. DATE OF SIGNATURE 12 de octubre 2016
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☐ No

n/a

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☐ No 17. If deductible, state amount.

n/a

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

n/a

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☐ No

n/a

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filled by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

- (a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.
- (b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.
- (c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.
- (d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

- A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

- B. **Principal Purpose:** The information requested is to be used in evaluating claims.
- C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.
- D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Tort Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

Attachment to SF 95
CLAIM FOR DAMAGE, INJURY, OR DEATH
Re: Rosa Vargas Morales

Answer 1


U.S. Department of Homeland Security
Office of the General Counsel
245 Murray Lane, SW
Mail Stop 0485
Washington, D.C. 20528-0485

Office of the Principal Legal Advisor
U.S. Immigration and Customs Enforcement
500 12th St., SW, Floor 9
Washington, D.C. 20536-5098

Atlanta Enforcement and Removal Operations Field Office
U.S. Immigration and Customs Enforcement
180 Ted Turner Dr. SW Suite 522
Atlanta, GA 30303

Answer 2

Claimants


Rosa Vargas Morales


Legal Representatives

Eunice Cho
Daniel Werner
Laura Rivera
Southern Poverty Law Center
1989 College Ave. NE
Atlanta, GA 30317

Lisa Graybill
Southern Poverty Law Center
1055 St. Charles Ave. Suite 505
New Orleans, LA 70130

Answer 4

Date of Birth: 

Answer 5:
Single

Answer 6:
January 2, 2016

Answer 7:
Starting at approximately 4:30 a.m.

Answer 8

Claimant Rosa Vargas Morales brings this claim regarding her unlawful arrest and imprisonment at her home on January 2, 2016 by officers of the Department of Homeland Security's Immigration and Customs Enforcement ("ICE") and their ensuing emotional distress. At no time did ICE officers have lawful permission to enter Claimant's home or a warrant authorizing entry, and at no time were there any exigent circumstances.

Claimant lives together with her brother, Carlos Rene Moran Morales, her son, Juan Mijangos Vargas, her daughters D.M.V. and Juneidy Mijangos Vargas, and her infant grandchild, J.A.M.,¹ at [REDACTED] Georgia. On January 2, 2016, around 4:30 a.m., the family was awoken by loud banging on the door to their apartment. Several ICE officers were at the door. Out of fear, the family decided not to answer the door.

Around 10:30 a.m., Mr. Morales left his home to go to the store. As he was returning home, two cars surrounded his car and stopped him near his home. Two male officers, with jackets labeled "ICE," exited their cars, and asked to see his driver's license. In Spanish, Mr. Morales asked the officers why they had pulled him over. The officers told him in Spanish that they were looking for someone named "Miguel Soto" in his home. He told the officers that no one named "Miguel Soto" lived at his house. Mr. Morales asked if they had a warrant for "Miguel Soto." The officers said that a judge had issued a warrant but that they did not have it with them. Mr. Morales provided the officers with the names of the people who lived in his home, including his sister, Rosa Vargas Morales, and her children, Juneidy Mijangos Vargas, Juan Mijangos Vargas, and D.M.V.

The officers insisted to Mr. Morales that they needed to enter the house. They repeatedly threatened that he would be arrested for obstructing a criminal investigation if he did not let them in the house. When Mr. Morales repeatedly tried to explain that no one named "Miguel Soto" lived in his home, the officers was accused him of lying. Both of the officers had guns. Mr. Morales was afraid that they would arrest him if he did not prove that someone named "Miguel Soto" did not live in the house. Mr. Morales told the

¹ Mr. Morales, Juan Mijangos Vargas, Juneidy Mijangos Vargas, D.M.V., and J.A.M. are simultaneously filing an FTCA claim.

officers that he would show them his family's identification cards to show that no one named "Miguel Soto" lived in the house. He told the officers to wait outside, and that he would bring the cards to them.

As soon as Mr. Morales opened the door to his home, the officers used force to push past him and enter the house. The officers did not ask for permission or consent before entering the home. Mr. Morales did not give ICE agents consent to enter, nor did any other resident there.

The two ICE officers then ordered the family members to gather in the living room and provide their identification. Mr. Morales, Ms. Vargas Morales, her three children, and grandchild waited for approximately 30 minutes, until a female officer arrived. A male officer then told Ms. Vargas Morales that they were there to take her and her children, and instructed her to gather their basic belongings. Ms. Morales Vargas told the agent that she had work authorization, but the officer told her that it did not mean anything. The same officer also checked the documents of Ms. Vargas Morales's daughter, Juneidy Mijangos Vargas, and Juneidy's baby, J.A.M., and declined to take them into custody.

The officers then put Ms. Vargas Morales, and her children Juan Mijangos Vargas and D.M.V. in a car, and drove them to an immigration detention center in Atlanta. Ms. Vargas Morales told the agents that she had a painful headache, but the officers did not give her any water or medication. Later that evening, ICE officers loaded Ms. Vargas Morales and her children, Juan and D.M.V., onto a plane bound for Texas, en route to the South Texas Family Residential Center in Dilley, Texas. Ms. Vargas Morales fainted on the flight.

A few days later, the Board of Immigration Appeals granted Ms. Vargas Morales and her two minor children a stay of deportation. However, ICE continued to detain Ms. Vargas Morales and her minor children until their release a few weeks later.

Answer 9

N/A

Answer 10

As a result of ICE's actions between at or about 4:30 am and at or about 1:00 p.m. on January 2, 2016, Claimant suffered humiliation, discrimination, emotional distress, and damages from her seizure, false imprisonment, and restrictions on liberty.

Answer 11

- Christopher Cronen, Acting Field Office Director, Immigration and Customs Enforcement, Atlanta, Georgia

- Unknown ICE officers who banged on door at 4:30 AM on January 2, 2016
- Unknown ICE officers who entered the house without consent
- Unknown ICE officer who came to the house after prior ICE officers had unlawfully gained consent
- Carlos Rene Moran Morales
- Juneidy Mijangos Vargas
- Juan Mijangos Vargas
- D.M.V.

Answer 12

- (a): N/A
- (b): \$ 250,000
- (c): N/A
- (d): \$ 250,000

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency: See attached			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code. Carlos Rene Moran Morales [REDACTED] See attached for legal representatives		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN		4. DATE OF BIRTH See attached	5. MARITAL STATUS See attached	6. DATE AND DAY OF ACCIDENT See attached	
7. TIME (A.M. OR P.M.) see attached					
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary). See attached					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code). See attached					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side). See attached					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. See attached					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
See attached		See attached			
12. (See instructions on reverse). AMOUNT OF CLAIM (in dollars)					
12a. PROPERTY DAMAGE		12b. PERSONAL INJURY		12c. WRONGFUL DEATH	
		250,000.00		12d. TOTAL (Failure to specify may cause forfeiture of your rights). 250,000.00	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side). [REDACTED]			13b. PHONE NUMBER OF PERSON SIGNING FORM c/o 404-521-6700		14. DATE OF SIGNATURE 10/05/2016
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM			CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS		
The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident Insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☐ No

n/a

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☐ No 17. If deductible, state amount.

n/a

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

n/a

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☐ No

n/a

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

- (a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.
- (b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.
- (c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.
- (d) **Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.**

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- A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

- B. **Principal Purpose:** The information requested is to be used in evaluating claims.
- C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.
- D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

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Attachment to SF 95
CLAIM FOR DAMAGE, INJURY, OR DEATH
Re: Carlos Rene Moran Morales

Answer 1

U.S. Department of Homeland Security
Office of the General Counsel
245 Murray Lane, SW
Mail Stop 0485
Washington, D.C. 20528-0485

Office of the Principal Legal Advisor
U.S. Immigration and Customs Enforcement
500 12th St., SW, Floor 9
Washington, D.C. 20536-5098

Atlanta Enforcement and Removal Operations Field Office
U.S. Immigration and Customs Enforcement
180 Ted Turner Dr. SW Suite 522
Atlanta, GA 30303

Answer 2

Claimant
Carlos Rene Moran Morales

[REDACTED]

Legal Representatives
Eunice Cho
Daniel Werner
Laura Rivera
Southern Poverty Law Center
1989 College Ave. NE
Atlanta, GA 30317

Lisa Graybill
Southern Poverty Law Center
1055 St. Charles Ave. Suite 505
New Orleans, LA 70130

Answer 4

Date of Birth: [REDACTED]

Answer 5:

Single

Answer 6:

January 2, 2016

Answer 7:

Starting at approximately 4:30 a.m.

Answer 8

Claimant Carlos Rene Moran Morales brings this claim regarding his unlawful arrest and imprisonment at his home on January 2, 2016 by officers of the Department of Homeland Security's Immigration and Customs Enforcement ("ICE") and their ensuing emotional distress. At no time did ICE officers have lawful permission to enter Claimants' home or a warrant authorizing entry, and at no time were exigent circumstances present.

Claimant lives with his sister, Rosa Vargas Morales, her children, Juan Mijangos Vargas, D.M.V., Juneidy Mijangos Vargas, and her infant grandchild, J.A.M., at [REDACTED] Georgia.¹ On January 2, 2016, around 4:30 a.m., the family was awoken by loud banging on the door to their house. Several ICE officers were at the door. Out of fear, the family decided not to answer the door.

Around 10:30 a.m., Mr. Morales left his home to go to the store. As he was returning home, two cars surrounded his car and stopped him near his home. Two male officers, with jackets labeled "ICE," exited their cars, and asked to see his driver's license. In Spanish, Mr. Morales asked the officers why they had pulled him over. The officers told him in Spanish that they were looking for someone named "Miguel Soto" in his home. He told the officers that no one named "Miguel Soto" lived at his house. Mr. Morales asked if they had a warrant for "Miguel Soto." The officers said that a judge had issued a warrant but that they did not have it with them. Mr. Morales provided the officers with the names of the people who lived in his home, including his sister, Rosa Vargas Morales, and her children, Juneidy Mijangos Vargas, Juan Mijangos Vargas, and D.M.V.

The officers insisted to Mr. Morales that they needed to enter the house. They repeatedly threatened that he would be arrested for obstructing a criminal investigation if he did not let them in the house. When Mr. Morales repeatedly tried to explain that no one named "Miguel Soto" lived in his home, the officers was accused him of lying. Both of the officers had guns. Mr. Morales was afraid that they would arrest him if he did not prove that someone named "Miguel Soto" did not live in the house. Mr. Morales told the officers that he would show them his family's identification cards to show that no one

¹ Ms. Vargas Morales, Juan Mijangos Vargas, D.M.V., Juneidy Mijangos Vargas, and J.A.M. are simultaneously filing an FTCA claim.

named “Miguel Soto” lived in the house. He told the officers to wait outside, and that he would bring the cards to them.

As soon as Mr. Morales opened the door to his home, the officers used force to push past him and enter the house. The officers did not ask for permission or consent before entering the home. Mr. Morales did not give ICE agents consent to enter, nor did any other resident there.

The two ICE officers then ordered the family members to gather in the living room and provide their identification. Mr. Morales, Ms. Morales Vargas, her three children, and grandchild waited for approximately 30 minutes, until a female officer arrived. A male officer then told Ms. Vargas Morales that they were there to take her and her children, and instructed her to gather their basic belongings. Ms. Morales Vargas told the agent that she had work authorization, but the officer told her that it did not mean anything. The same officer also checked the documents of Ms. Vargas Morales’s daughter, Juneidy Mijangos Vargas, and Juneidy’s baby, J.A.M., and declined to take them into custody.

The officers then put Ms. Vargas Morales and her children, Juan Mijangos Vargas and D.M.V., in a car, and drove them to an immigration detention center in Atlanta. Ms. Vargas Morales told the agents that she had a painful headache, but the officers did not give her any water or medication. Later that evening, ICE officers loaded Ms. Vargas Morales and her children, Juan and D.M.V., onto a plane bound for Texas en route to the South Texas Family Residential Center in Dilley, Texas. Ms. Vargas Morales fainted on the flight.

A few days later, the Board of Immigration Appeals granted Ms. Vargas Morales and her two minor children a stay of deportation. However, ICE continued to detain Ms. Vargas Morales and her minor children until their release a few weeks later.

Answer 9

N/A

Answer 10

As a result of ICE’s actions between at or about 4:30 am and at or about 1:00 p.m. on January 2, 2016, Claimant suffered humiliation, discrimination, emotional distress, and damages from his seizure, false imprisonment, and restrictions on liberty.

Answer 11

- Christopher Cronen, Acting Field Office Director, Immigration and Customs Enforcement, Atlanta, Georgia
- Unknown ICE officers who banged on door at 4:30 AM on January 2, 2016

- Unknown ICE officers who entered the house without consent
- Unknown ICE officer who came to the house after prior ICE officers had unlawfully gained consent
- Rosa Vargas Morales
- Juan Mijangos Vargas
- D.M.V.
- Juneidy Mijangos Vargas

Answer 12

- (a): N/A
- (b): \$ 250,000
- (c): N/A
- (d): \$ 250,000

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency: See attached			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code. Lesly Padilla Padilla [REDACTED] See attached for legal representatives		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN		4. DATE OF BIRTH See attached	5. MARITAL STATUS See attached	6. DATE AND DAY OF ACCIDENT See attached See attached	7. TIME (A.M. OR P.M.) See attached
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary). See attached					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code). 					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side). See attached					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. See attached					
11. WITNESSES					
NAME See attached		ADDRESS (Number, Street, City, State, and Zip Code) 			
12. (See instructions on reverse). AMOUNT OF CLAIM (In dollars)					
12a. PROPERTY DAMAGE 3,000.00		12b. PERSONAL INJURY 250,000.00		12c. WRONGFUL DEATH 	
				12d. TOTAL (Failure to specify may cause forfeiture of your rights). 253,000.00	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side). [REDACTED]			13b. PHONE NUMBER OF PERSON SIGNING FORM 		14. DATE OF SIGNATURE 10/25/16
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident Insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☒ No

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☐ No 17. If deductible, state amount.

n/a

0.00

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

n/a

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☒ No

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filled by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.

C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.

D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Tort Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

Attachment to SF 95
CLAIM FOR DAMAGE, INJURY, OR DEATH
Re: Lesly Padilla Padilla

Answer 1

U.S. Department of Homeland Security
Office of the General Counsel
245 Murray Lane, SW
Mail Stop 0485
Washington, D.C. 20528-0485

Office of the Principal Legal Advisor
U.S. Immigration and Customs Enforcement
500 12th St., SW, Floor 9
Washington, D.C. 20536-5098

Atlanta Enforcement and Removal Operations Field Office
U.S. Immigration and Customs Enforcement
180 Ted Turner Dr. SW Suite 522
Atlanta, GA 30303

Answer 2

Claimant


Lesly Padilla Padilla


Legal Representatives

Eunice Cho
Daniel Werner
Laura Rivera
Southern Poverty Law Center
1989 College Ave. NE
Atlanta, GA 30317

Lisa Graybill
Southern Poverty Law Center
1055 St. Charles Ave. Suite 505
New Orleans, LA 70130

Answer 4

Date of Birth: 

Answer 5:

Single

Answer 6:
January 2, 2016

Answer 7:
Starting at approximately 8:00 a.m.

Answer 8

On January 2, 2016, Department of Homeland Security Immigration and Customs Enforcement ("ICE") officers unlawfully entered the home of Lesly Padilla Padilla ("Claimant,") and her two sons, E.D.N.P. and E.I.N.P, without voluntary consent, exigent circumstances, or a warrant.

At the time of the illegal intrusion, Ms. Padilla and her two sons lived at [REDACTED] GA with another tenant in her apartment, [REDACTED]. At around 8:00 a.m. on January 2, 2016, Ms. Padilla was awoken by loud knocking on her door. When she went to the door, she saw five (two female and three male) officers who had the words "POLICE" on their jackets. One of the female officers told her in Spanish that they were looking for a criminal suspect named "David," showed her a photo of an African American man, and indicated that he was the criminal suspect. The officers told Ms. Padilla that they were told that "David" lived at her address. Ms. Padilla told the officers that no one named David lived in her home. The officers stated that they needed to check the apartment to see if the criminal suspect was in her home. Convinced that the officers were trying to investigate a criminal case, she opened the door. After the officers entered the home, they ordered her, her children, and Mr. [REDACTED] to gather in the living room.

The officers then asked them all for their names and identification. The officers told Mr. [REDACTED] that he "was clean." The officers revealed to Ms. Padilla that they were ICE officers, not police officers, and that she had an order of deportation. She told them she was not aware of any deportation order in her case: she had an immigration attorney and an ankle monitor. The officers then told her that she and her children had to come with them. Her children began to cry. Ms. Padilla was made to gather some clothing, and then the officers loaded her and her two children into an unmarked car.

Ms. Padilla and her two children were later detained in Dilley, Texas, and in Berks, Pennsylvania. Several weeks later, she and her children were released. Ms. Padilla was required to wear an ankle monitor. The entire family has suffered from severe emotional distress as a result of the incident. Ms. Padilla also lost personal property and incurred additional expenses because she was not able to access her apartment or her belongings.

Answer 9

Ms. Padilla claims \$3,000 in property damages for clothing, furniture, household items, and other miscellaneous items that she could no longer access in her former apartment or her belongings at [REDACTED] GA.

The following is an itemized estimate of Ms. Padilla's property losses:

Item(s)	\$ estimated loss	Estimated replacement cost	TOTALS
Clothing (self and minor children)	To be determined	\$1,000	\$1,000
Washer & Dryer (second hand)	\$300		\$300
Dining room set	\$200		\$200
Television	\$150		\$150
Microwave	\$60		\$60
Living room furniture	To be determined	\$500	\$500
Approximate utilities paid at former apartment following incident	\$300		\$300
Non-refundable fees for new apartment rental.	\$500		\$500
TOTALS	\$1,510	\$1,500	\$3,010

Answer 10

As a result of the actions of the government and its agents, Claimant suffered humiliation, discrimination, emotional distress, loss of enjoyment of life, and damages from her seizure, false imprisonment, and restrictions on liberty on January 2, 2016.

Answer 11

- Christopher Cronen, Acting Field Office Director, Immigration and Customs Enforcement, Atlanta, Georgia
- Unknown male officers who entered the house through the use of a ruse
- Unknown female officers who entered the house through the use of a ruse
- Humberto Gomez
- E.I.N.P.
- E.D.N.P.

Answer 12

- (a): \$3,000
- (b): \$ 250,000
- (c): N/a
- (d): \$ 253,000

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency: See attached			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code. Johana Valeska Gutierrez Rosales <div style="background-color: black; width: 150px; height: 20px; margin-top: 5px;"></div>		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN		4. DATE OF BIRTH see attached	5. MARITAL STATUS see attached	6. DATE AND DAY OF ACCIDENT See attached	
7. TIME (A.M. OR P.M.) see attached					
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof. Use additional pages if necessary). see attached					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code). see attached					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side). see attached					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. see attached					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
see attached		see attached			
12. (See instructions on reverse). AMOUNT OF CLAIM (In dollars)					
12a. PROPERTY DAMAGE		12b. PERSONAL INJURY		12c. WRONGFUL DEATH	
250,000.00		250,000.00		12d. TOTAL (Failure to specify may cause forfeiture of your rights). 250,000.00	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side) <div style="background-color: black; width: 350px; height: 30px; margin-top: 5px;"></div>			13b. PHONE NUMBER OF PERSON SIGNING FORM Counsel: 404-521-6700		14. DATE OF SIGNATURE 10/05/2016
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).			CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)		

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☐ No

n/a

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☐ No 17. If deductible, state amount.

n/a

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

n/a

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☐ No

n/a

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

DAMAGES IN A **SUM CERTAIN** FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN **TWO YEARS** AFTER THE CLAIM ACCRUES.

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

The amount claimed should be substantiated by competent evidence as follows:

If instruction is needed in completing this form, the agency listed in item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.
C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.
D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Torts Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

Attachment to SF 95
CLAIM FOR DAMAGE, INJURY, OR DEATH
Re: Johana Gutierrez

Answer 1

U.S. Department of Homeland Security
Office of the General Counsel
245 Murray Lane, SW
Mail Stop 0485
Washington, D.C. 20528-0485

Office of the Principal Legal Advisor
U.S. Immigration and Customs Enforcement
500 12th St., SW, Floor 9
Washington, D.C. 20536-5098

Atlanta Enforcement and Removal Operations Field Office
U.S. Immigration and Customs Enforcement
180 Ted Turner Dr. SW Suite 522
Atlanta, GA 30303

Answer 2

Claimant

Johana Gutierrez


Legal Representatives

Eunice Cho
Daniel Werner
Laura Rivera
Southern Poverty Law Center
1989 College Ave. NE
Atlanta, GA 30317

Lisa Graybill
Southern Poverty Law Center
1055 St. Charles Ave. Suite 505
New Orleans, LA 70130

Answer 4

Date of Birth: [REDACTED]

Answer 5:

Married to Salvador Alfaro

Answer 6:

January 2, 2016

Answer 7:

Starting at approximately 5:00 or 6:00 a.m.

Answer 8

Claimant Johana Gutierrez brings this claim to challenge her unlawful imprisonment and ensuing emotional distress at their home in [REDACTED] Georgia on January 2, 2016 by officers of the Department of Homeland Security's Immigration and Customs Enforcement ("ICE"). At no time did ICE officers have a warrant authorizing entry or have voluntary consent to enter her home, nor was there probable cause to arrest or detain them.

Claimant lives together with her husband and her children's father, Salvador Alfaro, her children, Y.S.G.R., age 12, and J.I.G.R., age 9, her niece, Ana Lizeth Mejia Gutierrez, and Mejia Gutierrez's son, W.G.M., age, 11. On Saturday, January 2, 2016, around 5:00 or 6:00 a.m., the family awoke to the sound of loud banging and ringing at the door. Johana got out of bed, and asked who was at the door in English. The response was "police," in English. Johana saw several officers outside the door and asked the officers why they were there. The officers held up a photo through the window, and shined their flashlights on the photo. It was a picture of an African American man. The officers told her that they were looking for a criminal suspect. The officers told her that they were told that the person in the photo was at her address. Johana was scared at the thought that there was a strange man in her home, because she previously had been a victim of assault. Johana and Salvador, her husband, opened the door, because they believed they should help the police find a criminal in their home.

After they had opened the door, a male officer indicated that he wanted to enter the house to see if the person in the photo was in the house because that was the address that they had. Johana and Salvador agreed, because they thought that they were police officers there to protect them from a criminal suspect who had come into the home. As soon as Johana let them in, approximately four or five officers rushed in the home. Johana felt terrified.

The officers who entered the house had guns on their hips and began to search their home. The officers woke up the entire family, including Ana Lizeth, W.G.M., Y.S.G.R., and J.I.G.R., and brought them into the living room. Everyone was still in their sleeping clothes, and were scared and confused. All of the children were crying.

When Johana realized that the officers were not police, but rather ICE officers, she tried to get her phone to make a call, but an officer told her not to move. The officers asked for Ana Lizeth and her son. Johana then asked the officers why they had lied to enter the house. They told her to be quiet. Johana asked the officers what her rights were. One officer, who served as an interpreter, told her in Spanish that she would get her rights once they had her niece, Ana. Johana told the officers that they were violating her rights. She told them they were traumatizing her children, that they should have a warrant, and they had lied. The interpreter heard her, but stopped interpreting what she said. Johana's nephew, W.G.M., was shaking. Johana wanted to go sit next to him to comfort him. The officers told her not to move, telling her, "don't do it, don't do it." Johana motioned to W.G.M. to come to her side, but the officers again told her no.

The officers instructed Ana Lizeth to get a change of clothes for herself and her son, W.G.M.. Ana Lizeth went with an officer to gather some clothes. The officers looked through all of their things, and then patted her down.

The officers took Ana Lizeth and W.G.M. to a jail cell in Atlanta, and then to an immigration detention center in Dilley, Texas. After several weeks in detention, Ana Lizeth and William were released from detention and have returned to live with their family in Norcross.

Answer 9

N/A

Answer 10

As a result of the actions of the government and its agents, Claimants suffered false imprisonment, humiliation, discrimination, emotional distress, loss of enjoyment of life, and damages from their seizure, detention, and restrictions on liberty.

Answer 11

- Christopher Cronen, Acting Field Office Director, Immigration and Customs Enforcement, Atlanta, Georgia
- Unknown male officers who entered the house through the use of a ruse
- Unknown female officers who entered the house through the use of a ruse
- Salvador Alfaro
- Y.S.G.R.
- J.I.G.R.
- Ana Lizeth Mejia Gutierre
- W.G.M.

Answer 12

(a): N/a

(b): \$250,000

(c): N/a

(d): \$250,000