

ABUSE DOCUMENTATION FORM

I. DOCUMENTING ORGANIZATION

NAME: Consulmax SD STAFF NAME: [REDACTED]
ADDRESS: _____ TODAY'S DATE: 12/6/90
CITY: _____ STATE: _____ ZIP: _____ PHONE: (____) _____
SOURCE: V-Int AGENCY FILE #: _____ COMPUTER CASE#: [REDACTED]

II. BIOGRAPHICAL INFORMATION OF VICTIM

NAME: [REDACTED] HOME PHONE: (____) _____
ADDRESS: MINOR WORK PHONE: (____) _____
SEX: M MARITAL STATUS: 5
CITY: _____ STATE: _____ DATE OF BIRTH: _____ AGE: minor
COUNTRY: _____ ZIP: _____ CITIZENSHIP: mx
ETHNICITY: lx OCCUPATION: N/A INCOME/YEAR: _____
CURRENT IMMIGRATION STATUS (see codes): UN LAWFUL RELATIVE IN U.S.? _____
IMMIGRATION STATUS AT TIME OF INCIDENT: UN EDUCATION: _____
NAME OF RELATIVE OR FRIEND (preferred U.S.): _____
ADDRESS: _____ CITY: _____
STATE: _____ COUNTRY: _____ ZIP: _____ PHONE: (____) _____

III. FACTS REGARDING INCIDENT

Date: 12/6/90 Time: AM Location (give details): AGE

WITNESSES: Names, addresses, phone numbers or descriptions:

[REDACTED]

[REDACTED]

6 other minors, also victims [REDACTED]

NOTE For all codes, refer to last page.

Unknown = UK Not applicable = N/A

If additional space is needed, attach more pages!

Date entered: 4/17/91

By whom: [REDACTED]

022791

LIST ALL AGENCIES PRESENT (INS, USBP, Police, etc.): _____

If more than one agency was present, *separately* describe abuses committed by each agency:

AGENCY #1: USBP NUMBER OF OFFICIALS: 1

Abuses committed by agency #1 (List ALL codes): VEF

Injuries as a result of *these* abuses (List codes): ED

Other damages as a result of *these* abuses (List codes): _____

Total economic loss as a result of *these* abuses (Wages, medical, etc.): \$ _____

List weapons/part of body used to commit these abuses: Hand

List weapons/part of body used by victim, if any: _____

OFFICIALS:

NAME: _____ BADGE #: _____ DESCRIPTION: 1.75m, dark skin, thin, short black hair, 25-28 yo.

NAME: _____ BADGE #: _____ DESCRIPTION: _____

NAME: _____ BADGE #: _____ DESCRIPTION: _____

AGENCY #2: _____ NUMBER OF OFFICIALS: _____

Abuses committed by agency #2 (List ALL codes): _____

Injuries as a result of *these* abuses (List codes): _____

Other damages as a result of *these* abuses (List codes): _____

Total economic loss as a result of *these* abuses (Wages, medical, etc.): \$ _____

List weapons/part of body used to commit these abuses: _____

List weapons/part of body used by victim, if any: _____

OFFICIALS:

NAME: _____ BADGE #: _____ DESCRIPTION: _____

NAME: _____ BADGE #: _____ DESCRIPTION: _____

NAME: _____ BADGE #: _____ DESCRIPTION: _____

IF AN AGENCY WAS PRESENT BUT DID NOT COMMIT AN ABUSE, LIST HERE:

OTHER AGENCY: _____ NUMBER OF OFFICIALS: _____

OFFICIALS:

NAME: _____ BADGE #: _____ DESCRIPTION: _____

NAME: _____ BADGE #: _____ DESCRIPTION: _____

1. Did the victim made to feel he/she had to answer questions? Yes No N/A
2. Did victim refuse to answer questions and later answer them under coercion? Yes No N/A
3. Was the victim ordered to answer questions? Yes No N/A
4. Did the victim exercise his/her right to remain silent? Yes No N/A
5. Did officers say they had a warrant? Yes No N/A
6. Did officers show warrant to victim? Yes No N/A
7. Did warrant specifically state the person/thing to be seized or searched? Yes No N/A
8. Was consent given to conduct the search? Yes No N/A If so, by whom? _____
9. Did victim have any property seized? Yes No If so, what/value? _____
- _____
10. Did INS surround/seal exits and entrances of factory/work place/home? Yes No N/A
11. Did officers lead victim to believe he/she had no rights? Yes No N/A
12. Was victim given a list of legal services? Yes No N/A Describe: _____
13. Was victim given reasonable access to a telephone? Yes No N/A When? _____
14. Were all other people treated in a similar way? Yes No N/A
15. Was victim confined while agents confirmed immigration status? Yes No How long/where: _____
16. Did victim strike/attempt to strike any officers? Yes No
17. Did victim attempt to escape? Yes No
18. Does victim have any prior convictions? Yes No If so, how many/describe _____
- _____
19. Did victim use false documents? Yes No N/A
20. Did victim receive medical treatment from agency? Yes No N/A If so, where/when _____
- _____
21. Has victim filed any prior complaints against INS? Yes No If so, explain _____
- _____
22. Did a chase occur? Yes No Describe: _____
- _____
23. If officers were not in uniform, did they identify themselves? Yes No N/A



U.S. Department of Justice

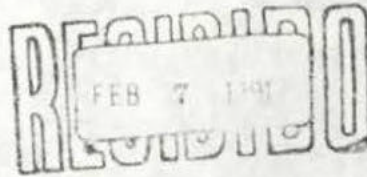
Immigration and Naturalization Service



Chief Patrol Agent

3752 Beyer Blvd.
P.O. Box 73022
San Ysidro, CA 92073-9022

January 31, 1991



SDC 1221/29.1

Honorable [REDACTED]
Consul General of Mexico



Dear Mr. [REDACTED]:

Reference is made to your letter of January 7, 1991, No. 00050, relating to a complaint of mistreatment of eight minors by Border Patrol Agents on December 6, 1990.

This allegation was investigated by a Supervisory Border Patrol Agent. On December 12, 1990, the investigator contacted the residence of [REDACTED], father of one of the complainants, in San Marcos, California, and set up an appointment to interview the juvenile on December 31, 1990. When the investigator arrived at the residence, at the prearranged time, he was met by an individual that stated that both father and son were out and did not know when they would be back. The investigator waited for two hours, to no avail, and then departed.

On three other occasions he attempted to contact the complainant; again to no avail (this was the only complainant available for questioning); therefore, the investigation cannot proceed and has been discontinued.

Sincerely,



Chief Patrol Agent
San Diego, California

Enclosures