



July 14, 2020

VIA EMAIL & ONLINE PORTAL

The Privacy Office
U.S. Department of Homeland Security
245 Murray Lane SW
STOP-0655
Washington, DC 20528-0655
foia@hq.dhs.gov

FOIA Officer
U.S. Customs and Border Protection
90 K Street NW, 9th Floor
FOIA Division
Washington, DC 20229-1181
Via FOIAOnline

Re: Freedom of Information Act Request

Dear FOIA Officer:

Pursuant to the Freedom of Information Act (FOIA), 5 U.S.C. § 552, and the implementing regulations of the Department of Homeland Security (DHS), 6 C.F.R. Part 5, American Oversight makes the following request for records.

The continued deaths of people held in the custody of DHS components remain an issue of significant public concern. The ongoing public health crisis caused by the coronavirus exacerbates existing concerns about the treatment of detainees and the conditions within DHS facilities, given the limited access to healthcare, lack of essential supplies, and close confinement.¹ Furthermore, as fuller accounts of past deaths in custody come to light, new information has repeatedly revealed

¹ Abigail Hauslohner, et al., *Coronavirus Could Pose Serious Concern in ICE Jails, Immigration Courts*, Wash. Post (Mar. 12, 2020, 6:38 PM), https://www.washingtonpost.com/immigration/coronavirus-immigration-jails/2020/03/12/44b5e56a-646a-11ea-845d-e35b0234b136_story.html.



discrepancies between statements made to the public and internal documentation.²

To the extent that the public has been informed of the context for deaths in DHS custody, there are few available internal reviews detailing whether responsible agency officials adhered to prescribed procedures in the events leading to each detainee's death. It is in the public interest, however, to understand how DHS has investigated deaths occurring in its custody.

American Oversight seeks records with the potential to shed light on the treatment of vulnerable detainees and whether or to what extent DHS officials are upholding the standards of care prescribed by federal law and agency guidance.

Requested Records

American Oversight requests that your agency produce the following within twenty business days:

Any Incident Reports completed by CBP's Office of Professional Responsibility as part of the investigative review process for each of the following individuals who died in CBP custody:

- a. The unnamed Mexican national who was apprehended on February 2, 2019 and died on February 3, 2019.³
- b. The unnamed Mexican national who was apprehended on March 17, 2019 and died on March 18, 2019.⁴
- c. Carlos Gregorio Hernandez Vasquez
- d. The unnamed Salvadoran national who was apprehended on June 2, 2019 and died the same day.⁵
- e. The unnamed Honduran national who was apprehended on June 3, 2019 and died the same day.⁶

² Ltr. from Rep. Bennie Thompson, Chair Comm. on Homeland Sec'y, to Joseph V. Cuffari, Inspector General, DHS, Mar. 26, 2020, <https://homeland.house.gov/imo/media/doc/2020-03-26%20DHS%20OIG.pdf>; Robert Moore et al., *Inside the Cell Where a Sick 16-Year-Old Boy Died in Border Patrol Care*, ProPublica (Dec. 5, 2019, 1:30 PM), <https://www.propublica.org/article/inside-the-cell-where-a-sick-16-year-old-boy-died-in-border-patrol-care>.

³ See, "CBP Statement on Death in Custody: 45-year-old Mexican Man Passes Away in McAllen, Texas," Feb. 18, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-45-year-old-mexican-man-passes-away>.

⁴ See, "CBP Statement on Death in Custody: 44-year-old Mexican Man Passes Away in El Paso, Texas," Mar. 19, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-44-year-old-mexican-man-passes-away-el>.

⁵ See, "CBP Statement on Death in Custody: 33-year-old Salvadoran Man Passes Away in RGV," June 2, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-33-year-old-salvadoran-man-passes-away>.

⁶ See, "CBP Statement on Death in Custody: 40-year-old Honduran Woman Passes Away in Eagle Pass, TX," June 3, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-40-year-old-honduran-woman-passes-away>.

- f. The unnamed Nicaraguan national who was apprehended on July 5, 2019 and died the same day.⁷
- g. The unnamed Salvadoran national who was apprehended on July 31, 2019 and died on August 1, 2019.⁸
- h. The unnamed Mexican national who was apprehended on October 20, 2019 and died on October 21, 2019.⁹
- i. The unnamed Mexican national who was apprehended on December 20, 2019 and died on December 21, 2019.¹⁰
- j. The unnamed Congolese national who died during processing on December 25, 2019.¹¹
- k. The unnamed pregnant Guatemalan national who was apprehended on March 7, 2020 and died on March 10, 2020.¹²

Please provide all responsive records from February 2, 2019, through the date of the search.

An example of an Incident Report is attached as Exhibit A to aid your search.

Fee Waiver Request

In accordance with 5 U.S.C. § 552(a) (4) (A) (iii) and your agency’s regulations, American Oversight requests a waiver of fees associated with processing this request for records. The subject of this request concerns the operations of the federal government, and the disclosures will likely contribute to a better understanding of relevant government procedures by the general public in a significant way. Moreover, the request is primarily and fundamentally for non-commercial purposes.

American Oversight requests a waiver of fees because disclosure of the requested information is “in the public interest because it is likely to contribute significantly to public understanding of operations or activities of the government.”¹³ This request relates directly to the work of DHS and

⁷ See, “CBP Statement on Death in Custody: 52-year-old Nicaraguan Man Passes Away in Tucson, AZ,” July 5, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-52-year-old-nicaraguan-man-passes-away>.

⁸ See, “CBP Statement on Death in Custody: 32-year-old Salvadoran Man Passes Away in Lordsburg, N.M.,” Aug. 1, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-32-year-old-salvadoran-man-passes-away>.

⁹ See, “CBP Statement on Death in Custody,” Oct. 22, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody>.

¹⁰ See, “CBP Statement on Death in Custody,” Dec. 22, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-death-custody-0>.

¹¹ See, “Statement on Death of Congolese National in Laredo,” Dec. 26, 2019, <https://www.cbp.gov/newsroom/speeches-and-statements/statement-death-congolese-national-laredo>.

¹² See, “CBP Statement Regarding The Death Of A Guatemalan Citizen,” Mar. 11, 2020, <https://www.cbp.gov/newsroom/speeches-and-statements/cbp-statement-regarding-death-guatemalan-citizen>.

¹³ 5 U.S.C. § 552(a) (4) (A) (iii).

its components, including some of the most important responsibilities of the Department—the safety and care of the individuals it has detained. This request seeks records that would shed light on how DHS is treating people it has detained, and how the Department responds when the life and safety of detainees is threatened. These are matters of significant public and congressional concern, and the requested records will provide the public with information necessary to hold DHS accountable for its actions and policies. American Oversight is committed to transparency and makes the responses agencies provide to FOIA requests publicly available, and the public’s understanding of the government’s activities would be enhanced through American Oversight’s analysis and publication of these records.

This request is primarily and fundamentally for non-commercial purposes.¹⁴ As a 501(c)(3) nonprofit, American Oversight does not have a commercial purpose and the release of the information requested is not in American Oversight’s financial interest. American Oversight’s mission is to promote transparency in government, to educate the public about government activities, and to ensure the accountability of government officials. American Oversight uses the information gathered, and its analysis of it, to educate the public through reports, press releases, or other media. American Oversight also makes materials it gathers available on its public website and promotes their availability on social media platforms, such as Facebook and Twitter.¹⁵

American Oversight has also demonstrated its commitment to the public disclosure of documents and creation of editorial content through numerous substantive analyses posted to its website.¹⁶ Examples reflecting this commitment to the public disclosure of documents and the creation of editorial content include the posting of records related to an ethics waiver received by a senior Department of Justice attorney and an analysis of what those records demonstrated regarding the Department’s process for issuing such waivers;¹⁷ posting records received as part of American Oversight’s “Audit the Wall” project to gather and analyze information related to the administration’s proposed construction of a barrier along the U.S.-Mexico border, and analyses of what those records reveal;¹⁸ posting records regarding potential self-dealing at the Department of

¹⁴ See 5 U.S.C. § 552(a)(4)(A)(iii).

¹⁵ American Oversight currently has approximately 15,400 page likes on Facebook and 102,100 followers on Twitter. American Oversight, FACEBOOK, <https://www.facebook.com/weareoversight/> (last visited June 1, 2020); American Oversight (@weareoversight), TWITTER, <https://twitter.com/weareoversight> (last visited June 1, 2020).

¹⁶ News, AMERICAN OVERSIGHT, <https://www.americanoversight.org/blog>.

¹⁷ DOJ Records Relating to Solicitor General Noel Francisco’s Recusal, AMERICAN OVERSIGHT, <https://www.americanoversight.org/document/doj-civil-division-response-noel-francisco-compliance>; *Francisco & the Travel Ban: What We Learned from the DOJ Documents*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/francisco-the-travel-ban-what-we-learned-from-the-doj-documents>.

¹⁸ See generally *Audit the Wall*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/investigation/audit-the-wall>; see, e.g., *Border Wall Investigation Report: No Plans, No Funding, No Timeline, No Wall*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/border-wall-investigation-report-no-plans-no-funding-no-timeline-no-wall>.

Housing & Urban Development and related analysis;¹⁹ posting records and analysis relating to the federal government's efforts to sell nuclear technology to Saudi Arabia;²⁰ and posting records and analysis regarding the Department of Justice's decision in response to demands from Congress to direct a U.S. Attorney to undertake a wide-ranging review and make recommendations regarding criminal investigations relating to the President's political opponents and allegations of misconduct by the Department of Justice itself and the Federal Bureau of Investigation.²¹

Accordingly, American Oversight qualifies for a fee waiver.

Guidance Regarding the Search & Processing of Requested Records

In connection with its request for records, American Oversight provides the following guidance regarding the scope of the records sought and the search and processing of records:

- Please search all locations and systems likely to have responsive records, regardless of format, medium, or physical characteristics.
- Our request for records includes any attachments to those records or other materials enclosed with those records when they were previously transmitted. To the extent that an email is responsive to our request, our request includes all prior messages sent or received in that email chain, as well as any attachments to the email.
- Please search all relevant records or systems containing records regarding agency business. Do not exclude records regarding agency business contained in files, email accounts, or devices in the personal custody of your officials, such as personal email accounts or text messages. Records of official business conducted using unofficial systems or stored outside of official files are subject to the Federal Records Act and FOIA.²² It is not adequate to rely on policies and procedures that require officials to move such information to official systems within a certain period of time; American Oversight has a right to records contained in those files even if material has not yet been moved to official systems or if officials have, by intent or through negligence, failed to meet their obligations.²³
- Please use all tools available to your agency to conduct a complete and efficient search for potentially responsive records. Agencies are subject to government-wide requirements to

¹⁹ *Documents Reveal Ben Carson Jr.'s Attempts to Use His Influence at HUD to Help His Business*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/documents-reveal-ben-carson-jr-s-attempts-to-use-his-influence-at-hud-to-help-his-business>.

²⁰ *Investigating the Trump Administration's Efforts to Sell Nuclear Technology to Saudi Arabia*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/investigating-the-trump-administrations-efforts-to-sell-nuclear-technology-to-saudi-arabia>.

²¹ *Sessions' Letter Shows DOJ Acted on Trump's Authoritarian Demand to Investigate Clinton*, AMERICAN OVERSIGHT, <https://www.americanoversight.org/sessions-letter>.

²² See *Competitive Enter. Inst. v. Office of Sci. & Tech. Policy*, 827 F.3d 145, 149–50 (D.C. Cir. 2016); cf. *Judicial Watch, Inc. v. Kerry*, 844 F.3d 952, 955–56 (D.C. Cir. 2016).

²³ See *Competitive Enter. Inst. v. Office of Sci. & Tech. Policy*, No. 14-cv-765, slip op. at 8 (D.D.C. Dec. 12, 2016).

manage agency information electronically,²⁴ and many agencies have adopted the National Archives and Records Administration (NARA) Capstone program, or similar policies. These systems provide options for searching emails and other electronic records in a manner that is reasonably likely to be more complete than just searching individual custodian files. For example, a custodian may have deleted a responsive email from his or her email program, but your agency's archiving tools may capture that email under Capstone. At the same time, custodian searches are still necessary; agencies may not have direct access to files stored in .PST files, outside of network drives, in paper format, or in personal email accounts.

- In the event some portions of the requested records are properly exempt from disclosure, please disclose any reasonably segregable non-exempt portions of the requested records. If a request is denied in whole, please state specifically why it is not reasonable to segregate portions of the record for release.
- Please take appropriate steps to ensure that records responsive to this request are not deleted by the agency before the completion of processing for this request. If records potentially responsive to this request are likely to be located on systems where they are subject to potential deletion, including on a scheduled basis, please take steps to prevent that deletion, including, as appropriate, by instituting a litigation hold on those records.

Conclusion

If you have any questions regarding how to construe this request for records or believe that further discussions regarding search and processing would facilitate a more efficient production of records of interest to American Oversight, please do not hesitate to contact American Oversight to discuss this request. American Oversight welcomes an opportunity to discuss its request with you before you undertake your search or incur search or duplication costs. By working together at the outset, American Oversight and your agency can decrease the likelihood of costly and time-consuming litigation in the future.

Where possible, please provide responsive material in an electronic format by email. Alternatively, please provide responsive material in native format or in PDF format on a USB drive. Please send any responsive material being sent by mail to American Oversight, 1030 15th Street NW, Suite B255, Washington, DC 20005. If it will accelerate release of responsive records to American Oversight, please also provide responsive material on a rolling basis.

We share a common mission to promote transparency in government. American Oversight looks forward to working with your agency on this request. If you do not understand any part of this request, have any questions, or foresee any problems in fully releasing the requested records, please contact Hart Wood at foia@americanoversight.org or 202.873.1743. Also, if American Oversight's

²⁴ Presidential Memorandum—Managing Government Records, 76 Fed. Reg. 75,423 (Nov. 28, 2011), <https://obamawhitehouse.archives.gov/the-press-office/2011/11/28/presidential-memorandum-managing-government-records>; Office of Mgmt. & Budget, Exec. Office of the President, Memorandum for the Heads of Executive Departments & Independent Agencies, "Managing Government Records Directive," M-12-18 (Aug. 24, 2012), <https://www.archives.gov/files/records-mgmt/m-12-18.pdf>.

request for a fee waiver is not granted in full, please contact us immediately upon making such a determination.

Sincerely,

A handwritten signature in blue ink, reading "Austin R. Evers". The signature is fluid and cursive, with a long horizontal line extending to the left of the first letter.

Austin R. Evers
Executive Director
American Oversight

EXHIBIT A



**U.S. Customs and Border Protection
Office of Professional Responsibility**



**Incident Report
SAC El Paso**

DEATH IN CUSTODY

Incident Date: December 24, 2018

Report Date: March 6, 2019

**Incident Location: Gerald Champion Regional Medical Center
2669 North Scenic Drive, Alamogordo, New Mexico**

INCIDENT SUMMARY

On December 18, 2018, a Guatemalan father and child made entry into the United States near El Paso, TX, and were subsequently apprehended by the U.S. Border Patrol (USBP). Between December 20, 2018 and December 23, 2018 the father and child were transferred to the El Paso BPS, Alamogordo BPS, and the Highway 70 USBP Checkpoint (HWY 70 CP).

On December 24, 2018, while at the HWY 70 CP, the child showed signs of illness and was taken to the hospital, accompanied by his father. The hospital released the child and he was taken back to the HWY 70 CP. Several hours later, the child began to feel ill again, and the decision was made to take the child back to the hospital. In route to the hospital, the child's health deteriorated rapidly and he lost consciousness. Upon arrival at the hospital, medical staff were unable to revive the child. At approximately 11:48 p.m., the child was pronounced deceased.

Background

On December 18, 2018, Felipe GOMEZ-Alonzo (8 years-old) and his father, (b)(6) & (b)(7)(C) entered the United States illegally approximately 3.29 miles west of the Paso Del Norte Port of Entry (PDN) in El Paso by crossing the Rio Grande River. At that time, they were placed under arrest by Border Patrol Agents (BPA) and taken to the USBP Paso Del Norte Processing Center (PDT) located at the PDN for intake processing.

On December 20, 2018, at approximately 12:00 p.m., GOMEZ-Alonzo and his father were transferred to the El Paso Border Patrol Station (BPS).

On December 22, 2018, at approximately 11:17 p.m. GOMEZ-Alonzo and his father were transferred to the Alamogordo BPS to complete their processing.

On December 23, 2018, at approximately 1:08 a.m., GOMEZ-Alonzo and his father arrived at the Alamogordo BPS.

At approximately 5:57 a.m. GOMEZ-Alonzo and his father completed their processing.

At approximately 2:50 p.m., GOMEZ-Alonzo and his father were transferred to the HWY 70 Border Patrol Checkpoint (CP) to await their appointments with ICE, Enforcement and Removal Operations (ERO).

On December 24, 2018, at approximately 9:00 a.m., a BPA noticed GOMEZ-Alonzo coughing, with a fever, and glossy eyes. After being interviewed by the BPA, the father requested medical attention for his son.

At approximately 9:56 a.m., the BPA notified the on-duty supervisor and transported GOMEZ-Alonzo and father, via a USBP vehicle, to the Gerald Champion Regional Medical Center (GCRMC) in Alamogordo, New Mexico.

At the hospital, GOMEZ-Alonzo was tested for strep throat, which returned negative results. Doctors provided GOMEZ-Alonzo a diagnosis of the common cold. Prior to being released, medical staff at the GCRMC determined GOMEZ-Alonzo's temperature to be at 103 degrees. Due to his high temperature, the medical staff delayed releasing him and opted to monitor his condition. The GCRMC conducted a flu test, which returned with positive results for Influenza B.

At approximately 1:50 p.m., GOMEZ-Alonzo was cleared for release with a prescription of amoxicillin and ibuprofen. GOMEZ-Alonzo and his father were transported back to the HWY 70 CP and arrived there at approximately 2:50 p.m.

At approximately 5:00 p.m., GOMEZ-Alonzo was provided the prescribed dosage of his medication. In addition, GOMEZ-Alonzo was provided several welfare checks and meals were given.

At approximately 7:00 p.m., BPAs reported GOMEZ-Alonzo became ill and vomited. A welfare check of GOMEZ-Alonzo showed him feeling well after he vomited.

At approximately 9:45 p.m., GOMEZ-Alonzo began to feel nauseous again and the father notified the BPA's of this.

At approximately 10:30 p.m., GOMEZ-Alonzo's condition had not improved and the decision was made to take him to the hospital again. A decision was made to transport GOMEZ-Alonzo in a USBP vehicle rather than wait for a medical transport in order to avoid a loss of time. According to USBP records, the BPA began transport of GOMEZ-Alonzo and his father at approximately 10:57 p.m. A few minutes into the transport, the BPA could hear the father crying and stating that GOMEZ-Alonzo had died. The BPA accelerated his vehicle while activating his emergency equipment. The BPA called ahead to the Emergency Room (ER) to make them aware of the situation.

GOMEZ-Alonzo arrived at the GCRMC at approximately 11:10 p.m. (*Per hospital video, arrival was at 11:08 p.m.*) Upon his arrival, he was unresponsive, had no vital signs, and had vomited a large amount of blood. At the ER, the GCRMC staff met the BPA and brought GOMEZ-Alonzo in for treatment, but the medical staff was unable to revive him.

At approximately 11:48 p.m., GOMEZ-Alonzo was pronounced deceased. The attending ER doctor was unable to provide the on-scene Supervisory BPA with a cause of death. The local Field Deputy Medical Examiner arrived and conducted a brief investigation. The body of GOMEZ-Alonzo was transported to the Alamogordo Funeral Home to await transfer to the Medical Examiner's Office (MEO) in Albuquerque, New Mexico where an autopsy would be performed.

On December 25, 2018, at approximately 6:50 a.m., OPR El Paso notified DHS OIG Special Agent in (b)(6) & (b)(7)(C) the situation.

At approximately 1:30 p.m., OPR El Paso and OIG El Paso interviewed G (b)(6) & (b)(7)(C) Alamogordo BPS. The father stated he and his son traveled through Mexico alone. They traveled via commercial bus for approximately five to eight days and no smugglers were involved in his crossing. Upon reaching Ciudad Juarez, Chihuahua, Mexico, the father and son joined a group as they crossed the Rio Grande River into the United States.

(b)(6) & (b)(7)(C) stated his son was not ill at any point since they departed Guatemala, but that his son was a finicky eater who ate a lot of eggs. The only out-of-the-ordinary dinner they had was the night before arriving in Ciudad Juarez (he could not recall the name of the town) where both of them ate chicken tacos on the street. The father added that neither he nor his son became sick as a result of consuming the chicken tacos, and stated they were very good. He added his son did not begin to display any symptoms of being sick until December 24, 2018, at approximately 9:30 a.m.

(b)(6) & (b)(7)(C) stated he and his son were treated very well while in USBP custody. While there, he and his son were separated from families who had sick children. The father was aware the other families were sick because they were taking medication.

(b)(6) & (b)(7)(C) chose El Paso as his crossing point as word on the street was it was very easy to cross into the United States. He added he was told he would be allowed to remain in the United States if he had a child with him.

(b)(6) & (b)(7)(C) stated he had already called and notified his wife in Guatemala of the passing of their son. The father signed a medical release form allowing OPR El Paso to obtain medical records regarding his son.

OPR El Paso traveled to the HWY 70 CP in order to retrieve any pertinent video and documentation regarding GOMEZ-Alonzo.

OPR El Paso responded to the GCRMC to obtain any additional information available. While there, OPR El Paso agents interviewed Lil (b)(6);(b)(7)(C) Public Information Officer (PIO) for the hospital. (b)(6);(b)(7)(C) stated that when the child returned to the hospital the evening of December 24, he was vomiting, or had vomited in the vehicle, a large amount of blood. She added that GOMEZ-Alonzo had tested positive for the Influenza B virus and was uncertain whether he had been given any amoxicillin during his initial visit. According to PIO (b)(6);(b)(7)(C) GOMEZ-Alonzo arrived at the hospital the second time, he was unresponsive and devoid of any vital signs. As such, the hospital staff was unable to resuscitate him.

After the interview of the father. OIG El Paso stated they would open a case on the matter and request assistance from OPR El Paso.

OPR El Paso generated JI (b)(7)(e) number 2019 (b)(7)(E) s incident.

On December 26, 2018, the body of GOMEZ-Alonzo was transferred to the MEO.

On December 26, 2018, OPR El Paso deployed personnel to the Alamogordo BPS to re-interview the father. The father stated that after the child vomited, BPAs checked on them and cleaned up the vomit. The father conversed with the BPAs and commented the child was feeling better after vomiting. The father added that after his son vomited, they were moved to another cell where BPAs had a direct line of vision to better monitor them.

OPR El Paso deployed personnel to the HWY 70 CP and to the Alamogordo BPS to obtain video.

OPR El Paso ordered service radio transmissions and transcripts of those transmissions. At approximately 6:46 p.m., OPR El Paso was notified the service radio transmissions had been copied and were ready for pickup by OPR.

OPR El Paso deployed personnel to the hospital to obtain additional medical documentation, but PIO (b)(6);(b)(7)(C) departed for the day. When contacted via email regarding the medical release form signed by the father, the PIO stated she forwarded the form to their legal counsel.

On December 26, 2018, OPR El Paso contacted the funeral home, who confirmed the child's body had been transported to Albuquerque for an autopsy. OPR El Paso contact the MEO in Albuquerque who stated there was no additional information available regarding when the autopsy report was scheduled for release, or what the cause of death was determined to be.

OPR El Paso contacted the USBP in order to fully identify the original UDA El Paso group in which the father and son were a part. According to the USBP, the boy and his father were alone when they were apprehended. As per the event number in E3, (b)(7)(e) the only two in that event; therefore, no other individuals were identified.

On December 27, 2018, OIG El Paso officially accepted the case for investigation and began working it jointly with OPR El Paso. OPR El Paso began identifying personnel to be interviewed.

OPR El Paso obtained I (b)(7)(e) dispatch reports for December 24 through December 25, 2018, from 00:00-23:07. OPR El Paso was able to verify the time BPA Noe (b)(6) & (b)(7)(C) reported GOME (b)(6) & (b)(7)(C) (b)(6) & (b)(7)(C) and his father to the hospital the second time.

(b)(7)(e)

OPR El Paso contacted PIO (b)(6);(b)(7)(C) regarding the Medical Release Forms. She advised she had forwarded the Medical Release Form signed by GO (b)(7)(E) GCRM legal department, who approved the request. PIO Le (b)(6);(b)(7)(C) provided OPR El Paso with medical records and hospital video feeds, which were uploaded to (b)(7)(e) shared drive.

OPR El Paso confirmed via service radio transmissions and E3 documentation that GOME (b)(6) & (b)(7)(C) and GOMEZ-Alonzo were not apprehended with any other individuals. OPR El Paso confirmed (b)(6) & (b)(7)(C) and GOMEZ-Alonzo were apprehended on December 18, 2018, at approximately

3:12 p.m. (b)(6) & (b)(7)(C) d GOMEZ-Alonzo were apprehended by BPA Gerard (b)(6) & (b)(7)(C) was also the BPA that transported them to the PDT.

OPR El Paso confirmed G (b)(6) & (b)(7)(C) s released on his own recognizance on December 27, 2018, at approximately 8:00 a.m. A Guatemalan consular official transported (b)(6) & (b)(7)(C) o Albuquerque to await the release of his son's body.

On December 28, 2018, OPR El Paso met with the OIG El Paso to discuss the case and to review all documentation and video footage. All collected evidence were provided to the OIG El Paso.

(b)(7)(e)

(b)(7)(E)

On December 30, 2018, OPR El Paso reviewed the R (b)(7)(e) ich confirmed the father and son were in fact alone and not within a group. The RV (b)(7)(E) eo captures the father and son walking up to a BPA, which resulted in their apprehension.

OPR El Paso obtained I (b)(7)(e) spatch reports for the El Paso BPS for December 18, 2018, through December 26, 2018.

OPR El Paso contacted the MEO in Albuquerque, who provided an update on the autopsy and other results. The MEO stated the official report would take an undetermined amount of weeks to be completed and the child was confirmed positive for Influenza B. The MEO's office stated a specialist would be utilized to conduct a thorough examination of the child's brain.

On January 2, 2019, OPR El Paso assisted OIG El Paso with the interviews of the two BPAs who transported C (b)(6) & (b)(7)(C) nd his father to the hospital on December 24, 2018:

(Morning Transport)

On December 24, 2018, BPA Jo (b)(6);(b)(7)(c) ssigned to the HWY 70 CP. Upon arrival, he heard a hoarse cough coming from a cell. Thinking it was an adult male (G (b)(6) & (b)(7)(C) A (b)(6) & (b)(7)(C) pened the cell door and asked him if it was him coughing. (b)(6) & (b)(7)(C) tated it was his son. BPA (b)(6) & (b)(7)(C) oticed GOMEZ-Alonzo had glossy eyes. BPA Gonz (b)(6) & (b)(7)(C) ed the child looked sick as he was holding his stomach. GOMEZ-Alonzo said his stomach and throat hurt, and that he had a fever.

Upon obtaining permission from a supervisor, BPA (b)(6) & (b)(7)(C) ansported G (b)(6) & (b)(7)(C) his son the hospital. GOMEZ-Alonzo's vital signs were taken, and his ears and throat were examined. The child was swabbed for strep throat, which returned with negative results. GOMEZ-Alonzo was

prescribed Tylenol for pain; the medical staff stated the child would feel better in a couple of weeks as he was only diagnosed with common cold.

Before departing the hospital, BPA Gd (b)(6) & (b)(7)(C) ied a nurse that the sound of the child's cough was troubling. The nurse left and returned with a thermometer and took his temperature, which was determined to be 103 degrees. A nurse stated, "Let me give him some Tylenol before he leaves." Later, the nurse stated they would keep GOMEZ-Alonzo for a while longer to monitor his temperature. GOMEZ-Alonzo was also swabbed for Influenza. When GOMEZ-Alonzo was discharged from the hospital, BPA Gd (b)(6) & (b)(7)(C) t to the pharmacy to pick up the child's medication.

On the way to the pharmacy, BPA Gd (b)(6) & (b)(7)(C) informed by SBPA Travis (b)(6) & (b)(7)(C) hospital had called and indicated they would send a prescription for Amoxicillin (along with the Tylenol) to pharmacy. The prescriptions were not ready at the pharmacy and would be picked up by the oncoming shift.

BPA (b)(6) & (b)(7)(C) returned to station and placed GO (b)(6) & (b)(7)(C) s son in a separate cell so no one else would get sick.

(Evening Transport)

On December 24, 2018, BPA (b)(6) & (b)(7)(C) hift was 10:00 p.m.-6:00 a.m. During the 10:00 p.m. muster, he was instructed to take a family unit from the HWY 70 CP to the hospital.

Once at HWY 70 CP, BPA Pa (b)(6) & (b)(7)(C) ked by the transport dock to expedite the process, at which time he was briefed by BPA Fa (b)(6) & (b)(7)(C) GO (b)(6) & (b)(7)(C) ndition. BPA F (b)(6) & (b)(7)(C) as informed the child was taking medication and had been vomiting.

(b)(6) & (b)(7)(C) arried his child to USBP unit; BPA Pala (b)(6) & (b)(7)(C) ucted him to place GOMEZ-Alonzo inside the vehicle and to secure him with seat belt. BPA Palac (b)(6) & (b)(7)(C) he father for his son's condition, to which he replied that his son was in pain; BPA Palac (b)(6) & (b)(7)(C) ed that the child did appear to be in pain. BPA Pa (b)(6);(b)(7)(C) bserved that GOMEZ-Alonzo was not responding to his father's voice during the trip to the hospital.

BPA (b)(6) & (b)(7)(C) rove with his units' overhead emergency lights on to hospital, and called the hospital while en route prior to calling out his mileage and time to USBP communications. BPA P (b)(6) & (b)(7)(C) It calling 911 would have delayed urgent care needed for the child, so he decided to transport the father and child himself. BPA P (b)(6) & (b)(7)(C) ade it to hospital in approximately 15 minutes.

During the drive to hospital, the father began to cry, saying his son had passed. Once at hospital, BPA (b)(6) & (b)(7)(C) arked in the ER area where ambulances normally park, as previously instructed by the hospital staff. BPA (b)(6) & (b)(7)(C) an into the ER. Approximately six to eight individuals ran outside to get the child from the USBP unit. BPA (b)(6) & (b)(7)(C) nd G (b)(6) & (b)(7)(C) e placed in the waiting area.

SBPA (b)(6) & (b)(7)(C) ived approximately 10 minutes later. Hospital staff notified everyone of the child's passing approximately one hour after that. (b)(6) & (b)(7)(C) ld BPA P (b)(6);(b)(7)(C) he wanted to notify his family of his son's passing. BPA P (b)(6);(b)(7)(C) he father his cellular telephone and he called his brother.

The doctor informed BPA Pa ^{(b)(6) & (b)(7)(C)} and GC ^{(b)(6) & (b)(7)(C)} a Medical Examiner from Albuquerque would have to perform an autopsy on the child.

On January 4, 2019, OPR El Paso reported the following updates:

OIG El Paso SAC consulted with the USAO and obtained approval for continuing with interviews of USBP personnel.

Photographs of the HWY 70 CP holding areas were forwarded to the OIG El Paso and uploaded to the IOD HQ shared drive.

On January 7, 2019, OPR El Paso assisted the OIG, with the interview of BPA A ^{(b)(6) & (b)(7)(C)} BPA ^{(b)(6) & (b)(7)(C)} stated he and another BPA (whose name he could not recall) were the processing agents for detainees at the Alamogordo Station (ALA) on December 23, 2018 and processed GOMEZ-Alonzo and his father. BPA ^{(b)(6) & (b)(7)(C)} stated that the child and dad were processed around 12:00 a.m. or 1:00 a.m.

(b)(6);(b)(7)(c);(b)(7)(e)

muster, the on-duty supervisor mentioned that GOMEZ-Alonzo needed to be transported to the hospital and that BPA ^{(b)(6) & (b)(7)(C)} was tasked with transporting the child.

BPA ^{(b)(6) & (b)(7)(C)} arrived at the checkpoint at approximately 10:30 p.m. and was told the sick child had vomited and that he was taking medication. BPA ^{(b)(6) & (b)(7)(C)} took a look inside the cell and observed the dad standing over the bathroom stall looking over the child.

At about 10:35 p.m., BPA ^{(b)(6) & (b)(7)(C)} was called to the checkpoint. Shortly after the call, BPA ^{(b)(6) & (b)(7)(C)} arrived at the checkpoint and took custody of the child and dad for transport to the hospital.

On January 9, 2019, OPR El Paso and the OIG interviewed BPA Fabian ^{(b)(6) & (b)(7)(C)} following is a synopsis of the interview:

(b)(6);(b)(7)(c);(b)(7)(e)

^{(b)(7)(e)} BPA ^{(b)(6) & (b)(7)(C)} advised him he had taken the little boy (Felipe) to the hospital and he had the flu/cold; and they would be called when meds would be ready. Senior BPA J ^{(b)(6) & (b)(7)(C)} told him the little boy was sick and to move the father and child to the front ^{(b)(7)(e)} at approximately 5:00 pm, SBPA ^{(b)(6) & (b)(7)(C)} took the two medications and he (BPA Orte ^{(b)(6) & (b)(7)(C)}) them to the boy. BPA ^{(b)(6) & (b)(7)(C)} and SBPA I ^{(b)(6) & (b)(7)(C)} asked the father if he wanted to go to the hospital and he said no, they were fine. At approximately 7:00 p.m., the father was waiving at them because the child had vomited. BPA ^{(b)(6) & (b)(7)(C)} asked the father if he wanted to go to the hospital and he said no. They were moved back to a cell in order to clean that area. The child fell asleep. BPAs were going back and forth checking on them, when BPA O ^{(b)(6) & (b)(7)(C)} noticed the boy breathing heavily while he was asleep. Senior BPA ^{(b)(6) & (b)(7)(C)} also noticed child not looking good and told ^{(b)(6);(b)(7)(c)} to notify SBPA I ^{(b)(6) & (b)(7)(C)} At approximately 9:45 p.m., the call was placed. SBPA ^{(b)(6) & (b)(7)(C)} was going to make arrangements for transportation to hospital with midnight SBPA Ma ^{(b)(6) & (b)(7)(C)} When BPA ^{(b)(6) & (b)(7)(C)} arrived to transport, BPA ^{(b)(6) & (b)(7)(C)} was still there.

On January 9, 2019, OPR El Paso and the OIG interviewed SBPA Travis ^{(b)(6) & (b)(7)(C)} following is a synopsis of the interview:

(b) (7)(E)

The day-shift supervisor, SBPA (b)(6) & (b)(7)(C)riefed him regarding a child taken to the hospital. At approximately 2:00 p.m., they received a call from an ER nurse stating the Dr. had decided to add an antibiotic medication to what the fever reduction medication he had already prescribed. SBPA (b)(6) & (b)(7)(C) contacted BPA (b)(6) & (b)(7)(C) (b)(6);(b)(7)(C) advise him of this, and BPA Go (b)(6) & (b)(7)(C) him he was very dissatisfied with the hospital and was so angry he was thinking of filing a complaint. (Inm (b)(6) & (b)(7)(C)ot specify why BPA Gonza (b)(6) & (b)(7)(C) was upset with the hospital). Agent (b)(6) & (b)(7)(C) was unable to obtain the ibuprofen medication from the pharmacy because the insurance did not cover over-the-counter medication. At approximately 4:30 p.m., BPA (b)(6) & (b)(7)(C) rived at the checkpoint with the medications (both the ibuprofen and the amoxicillin) and gave it to BPA O (b)(6) & (b)(7)(C) Agent's note: SBPA (b)(6) & (b)(7)(C) urchased ibuprofen out of pocket.] At approximately 5:00 p.m., medication was given to the boy and SBPA Inm (b)(6) & (b)(7)(C) ed child having trouble breathing. He sat with the father and asked if he thought the boy needed to go to the hospital. The father asked his son if he wanted to go and the child said he did not want to go.

At approximately 7:30 p.m., SBPA (b)(6) & (b)(7)(C) returned to the checkpoint with a toy and an ice pack for Felipe. SBPA (b)(6) & (b)(7)(C) sked the father if he wanted to go to the hospital and he stated he did not want to go. Shortly after, SBPA I (b)(6) & (b)(7)(C) itnessed the child throwing up. The color was dark brown with a red tint to it, consistent with what he (Felipe) had eaten (animal crackers and juice).

At approximately 9:00 p.m., SBPA (b)(6) & (b)(7)(C) alled the checkpoint to check on the child and was told he felt better after throwing up. Approximately 30 minutes later, he was notified the child needed to go to the hospital. SBPA (b)(6) & (b)(7)(C) otified SBPA C (b)(6) & (b)(7)(C) and he assigned BPA Pa (b)(6) & (b)(7)(C) ransport.

On January 9, 2019, OPR El Paso and the OIG interviewed BPA Juan F (b)(6) & (b)(7)(C) owing is a synopsis of the interview:

(b) (7)(E)

(b) (7)(E) At approximately 2:45 p.m., he arrived at the BP checkpoint. BPA (b)(6) & (b)(7)(C) dvised them he had taken the child to the hospital, the child had been prescribed medication, but the medication was not covered. BPA (b)(6) & (b)(7)(C) oke to the father. The father said his son felt warm and was sick. BPA (b)(6) & (b)(7)(C) elt it was better to move them to the front fish (b) (7)(E) contacted SBPA I (b) (7)(E) check on status of medication. SBPA (b)(6);(b)(7)(C) ed he would pick them up. At approximately 5:00 p.m., SBPA (b)(6) & (b)(7)(C) rived with medication and BPA Ort (b)(6) & (b)(7)(C) nistered the amoxicillin and Tylenol. BPA (b)(6) & (b)(7)(C) as checking on them. After the child took the medication, BPA F (b)(6) & (b)(7)(C) ould see it helped the child. The child was smiling, moving around.

At approximately 7:00 p.m., the child threw up in the fi (b)(7)(e) they were moved to another cell to decontaminate. SBPA (b)(6) & (b)(7)(C) returned to checkpoint and he and BPA Orte (b)(6) & (b)(7)(C) the father if he wanted to go to hospital, but he refused and so did the child. BPA (b)(6) & (b)(7)(C) ould check on them and the father would give him a thumbs up; he told the father if you need anything, knock and we'll come over. At approximately 9:45 p.m., the father knocked on the door and told him his son wasn't feeling good. BPA (b)(6) & (b)(7)(C) sked if he wanted to go to hospital and the father said yes. BPA (b)(6) & (b)(7)(C) alled to request medical and was told the midnight shift would be transporting him to the hospital. BPA (b)(6) & (b)(7)(C) howed up and BPA Ort (b)(6) & (b)(7)(C) rted them out. [Agent's note: BPA (b)(6) & (b)(7)(C) was asked by OIG SA Ho (b)(6) & (b)(7)(C) ere was any sign of urgency. BPA (b)(6) & (b)(7)(C) added his head no, explaining the child had been to the hospital and felt better with meds and felt better after throwing up.]

On January 15, 2019, OPR El Paso and the OIG interviewed BPA Ge (b)(6) & (b)(7)(C) following is a synopsis of the interview:

On December 18, 2018, BF (b)(6);(b)(7)(c);(b)(7)(e)
(b)(6);(b)(7)(c);(b)(7)(e)

got a bit hectic around noon time and BPAs were being pulled off the line. At approximately 3:15 p.m. - 3:20 p.m., BPA (b)(6) & (b)(7)(C) heard via radio (b)(7)(E) notification of two subjects coming in North, had crossed the river, and were headed westbound. BPA (b)(6) & (b)(7)(C) saw the man (b)(6) & (b)(7)(C) holding his little boy's (b)(6) & (b)(7)(C) hand, at which point they turned themselves in.

BPA (b)(6) & (b)(7)(C) identified himself as an immigration officer, asked for their citizenship and conducted an initial pat-down and they had nothing. BPA (b)(6) & (b)(7)(C) added that a second pat-down is conducted once they are taken to station for processing (in this case, they were taken to PDT- Paso Del Norte Processing Center for BP) [Agent's note: OIG SA (b)(6) & (b)(7)(C) asked BPA (b)(6) & (b)(7)(C) what BPAs do when they encounter medication or blister packs. BPA (b)(6) & (b)(7)(C) stated it is removed from them; sometimes it is thrown away, placed in their bag packs, or if medication is prescribed by a Dr. they place it in a bag and seal it, as they will be seen by medical if needed.] BPA (b)(6) & (b)(7)(C) recalled them both being calm, and at no time displayed any form of concern for his child. After they were apprehended, BPA (b)(6) & (b)(7)(C) placed them inside his BP unit and transported them to PDT for processing.

On January 16, 2019, OPR El Paso and the OIG interviewed SBPA Lance (b)(6) & (b)(7)(C) following is a synopsis of the interview:

(b)(7)(E)

At approximately 9:45 p.m., SBPA (b)(6) & (b)(7)(C) advised him that the child's father wanted to go to the hospital again because his son was still sick and had thrown up. SBPA (b)(6) & (b)(7)(C) would let SBPA (b)(6) & (b)(7)(C) now to assign a BPA (No (b)(6) & (b)(7)(C) Agent's note: SBPA (b)(6) & (b)(7)(C) was asked by OIG SA (b)(6) & (b)(7)(C) if there was any sense of urgency. SBPA (b)(6) & (b)(7)(C) explained that since SBPA (b)(6) & (b)(7)(C) had already told him he (SBPA In (b)(6) & (b)(7)(C) asked the father (Agusti (b)(6) & (b)(7)(C) wanted to go to Dr., and he had said no, he didn't think so. Also, because the child had already been given a dose of medication around 6:00 p.m. or 7:00 p.m. (b)(6) & (b)(7)(C)

Five minutes after muster, BPA Pa (b)(6) & (b)(7)(C) to the checkpoint. SBPA (b)(6) & (b)(7)(C) then received a call from BPA (b)(6) & (b)(7)(C) to advise he was at the hospital, stating the child had thrown up blood, was unresponsive, and the father made some statements while in route- "He's gone, he's gone."

SBPA (b)(6) & (b)(7)(C) advised Special Operations Supervisor (SOS) Lee W (b)(6) & (b)(7)(C) and left to the hospital. Once SBPA (b)(6) & (b)(7)(C) arrived to the hospital, the guard took him to where BPA (b)(6) & (b)(7)(C) was with the father. They were in the waiting area and the father was upset, crying. BPA (b)(6) & (b)(7)(C) told SBPA (b)(6) & (b)(7)(C) did not like what he saw (at the checkpoint), put them in the unit, with lights and sirens.

SBPA (b)(6) & (b)(7)(C) thought the child would be fine, but BPA P (b)(6) & (b)(7)(C) did he heard the Dr. saying "Clear, clear." The Dr. went out and told the father what had happened. The nurse translated and the Dr. said "I don't know what to tell the guy. I don't know what happened." They stayed at the hospital until the father saw his son (approximately 2:00 a.m. - 2:30 a.m.). The father was then transported back to the station.

On January 17, 2019, OPR El Paso and the OIG interviewed SBPA Ma (b)(6) & (b)(7)(C) following is a synopsis of the interview:

(b) (7)(E)

(b) (7)(E) however, on that day his wife suffered a foot injury which required a visit to the ER (same hospital which provided treatment for Fel (b)(6) & (b)(7)(C) BPA (b)(6) & (b)(7)(C) stated that due to his wife's injury, he was away from the A (b)(7)(e) and that he left work one hour earlier (2 p.m.).

SBPA (b)(6) & (b)(7)(C) stated that during their morning visit to the hospital with his wife, SBPA Alfo (b)(6) & (b)(7)(C) (b)(6) & (b)(7)(C) texted him to inform him that the Station was taking a family unit (Felipe (b)(6) & (b)(7)(C) hospital, and asked him on the location in the shared drive for the necessary forms that needed to be filled out. Upon SBPA (b)(6) & (b)(7)(C)'s return to the ALA, he completed the MEDPAR (necessary paperwork to pay the hospital bill for the family unit).

SBPA (b)(6) & (b)(7)(C) stated that the BPA who transported the family unit to the hospital, identified as BPA (b)(6) & (b)(7)(C) informed him that the hospital had diagnosed the child (Felipe) as having an upper respiratory infection. SBPA (b)(6) & (b)(7)(C) stated that BPA Go (b)(6) & (b)(7)(C) communicated that he was dissatisfied with the hospital's diagnosis, since they stated that whatever the child had "needed to run its course," and that they only wanted to prescribe children's Tylenol. SBPA (b)(6) & (b)(7)(C) stated that once the fever subsided, the child was released from the hospital and was brought back to the checkpoint.

SBPA (b)(6) & (b)(7)(C) stated that the detainees were brought in on December 23, 2018, and were processed by BPAs working at ALA. SBPA (b)(6) & (b)(7)(C) stated that he was not informed of any of the detainees having any health issues whatsoever. SBPA (b)(6) & (b)(7)(C) stated that upon return to work on December 25, he was shocked to hear that the child had passed.

January 23, 2019

On January 22, 2019, OPR El Paso and the OIG interviewed SBPA Alfons (b)(6) & (b)(7)(C) following is a synopsis of the interview:

(b) (7)(E)

SBPA (b) (7)(E) as the other supervisor assigned to the station that day, however, SBPA (b)(6) & (b)(7)(C) had to momentarily leave the station due to his wife suffering an ankle injury. SBPA (b)(6) & (b)(7)(C) stated that at approximately 9:30 a.m., BPA (b)(6) & (b)(7)(C) informed him that he needed to take a family unit to the hospital (due to a male child coughing a lot).

SBPA (b)(6) & (b)(7)(C) contacted SBPA Go (b)(6) & (b)(7)(C) inquire on necessary medical paperwork directly related to the filling of prescriptions for detainees. Once he determined which paperwork was needed, SBPA J (b)(6) & (b)(7)(C) trusted BPA Gon (b)(6) & (b)(7)(C) the paperwork from him before he headed to the hospital.

In accordance to critical incident reporting, SBPA Jim (b)(6) & (b)(7)(C) created a report notifying his chain of command of the situation, and he updated it constantly as BPA Gonz (b)(6) & (b)(7)(C) from the hospital- which included the hospital testing for strep throat, which yielded negative results. BPA Gonzal (b)(6) & (b)(7)(C) some point informed SBPA J (b)(6) & (b)(7)(C) at the hospital was testing the boy for the Flu. SBPA (b)(6) & (b)(7)(C) assumed that the results were also negative since the hospital never really confirmed their findings, and ordered that the child be released from the hospital having only prescribed

children's Tylenol. SBPA (b)(6) & (b)(7)(C) stated that he was not aware of any health issues the child may have had prior to him developing symptoms which ultimately led to the initial hospital visit.

(b)(6) & (b)(7)(C)



Alamogordo Hwy 70 Checkpoint to GCRM

TIMELINE OF EVENTS

12/23/2018

0108 hours Father and child arrive at Alamogordo Station from El Paso Station One. (Verified by Subject Activity Log.)

0557 hours Processing completed. (Verified by USBP Subject Activity Log)

1451 hours Arrived at the Highway 70 checkpoint. (Verified by Subject Activity Log) (Video feed

depicts father and son entering their holding cell at 2:45 p.m.)

12/24/2018

0930 hours

Father and child transported to GCRMC *(Per the Subject Activity Log.)*

0956 hours

The child was transported to GCRMC due to cough and fever. *(The video obtained (b)(7)(e) e father and child departing their holding cell between 9:41 a.m. and 9:44 a.m.)*

1025 hours

The child was admitted to the ER. *(Per the hospital video feed, the BPA, father, and child entered the hospital at 10:22 a.m., and were admitted at 10:33 a.m.)*

1130 hours

The child was swabbed and checked for strep throat. *(Vetted by hospital medical records, Bacteriology Report, which stated swab was collected at 11:24 a.m.)*

1245 hours

Test results were negative for strep throat. *(Vetted by hospital medical records.)* The child was diagnosed with a common cold and given Children's Tylenol. *(Vetted via hospital medical records, which stated the child was given Acetaminophen [Tylenol] at 13:08;*

The hospital staff stated the child would be released. (Vetted by hospital medical records, which states the order to discharge was documented at 12:22 p.m.)

1320 hours

Medical staff administered Tylenol and were monitoring the child to ensure his temperature went down. He was also tested for the flu. *(The Influenza B information was confirmed by the hospital medical records,*

1350 hours

No change in current status. (Per the hospital video feed, the BPA, father, and child exited the hospital at 1:59 p.m.)

1450 hours

The child was released from ER and was back at the Alamogordo checkpoint with his father. *((b)(7)(e) d, the father and child enter their holding cell at 2:45 p.m.)*

1700 hours

Child is given medicine prescribed by medical staff and a welfare check is conducted. *(Per Subject Activity Log.)*

1900 hours

Child vomits. *(b)(7)(e) father and child leave their cell at 3:42 p.m. and return at 7:31 p.m. Information provided indicated they were moved to an area known as (b)(7)(e) so USBP personnel could maintain a closer watch over them. It was during their time in (b)(7)(e) that USBP personnel witnessed the child vomit. ((b)(7)(e) USBP personnel subsequently moved the father and child back to the cell they were previously in order to clean up the vomit.)*

Father declined treatment for his son as he was feeling better after vomiting. (In a subsequent interview with OPR El Paso, on December 26, 2018, the father stated that after the child vomited, BPAs checked on them and cleaned up the vomit. The father conversed with the BPAs and commented the child was feeling better after vomiting.

1925 hours

Child is given a hot meal and welfare check performed. *(Confirmed via the Subject Activity Log.)*

2032 hours

(b)(7)(e) child is seen being assisted by the father as the child is slumped over the toilet; it is unknown if the child was vomiting.

2145 hours

Child begins to feel nauseous and lethargic. *(Per the SIR.)*

2230 hours

Decision made transport child back to hospital. *(Per the SIR.)*

2231 hours

(b)(7)(e) child is seen being assisted by the father as the child is slumped over the toilet again; it is unknown if the child was vomiting. The father assisted his child on getting back to the cot.

2242 hours

(b)(7)(e) s is the last time the father and child are seen in their cell.

- 2257 hours Subject in route back to GCRMC (four minutes into transport, child vomits and loses consciousness). (Confirmed via the (b) (7)(E) dispatch report: The BPA transporting the child to the hospital reported his departure as 22:57 hours, with a starting mileage of 112638. The BPA reported his arrival at the hospital as 23:07 hours, with an ending mileage of 112652. The mileage reported indicated he only traveled 14 miles. The actual distance between the HWY 70 CP and the hospital is 22 miles. The eight mile difference indicates he probably reported his departure after traveling eight miles into his trip.)
- 2307 hours Transport arrives at GCRMC, child is unresponsive, no vital signs. (Per the hospital video feed, the child arrived at the hospital at 11:08 p.m.)
- 2348 hours Pronounced deceased at hospital. (The time of death was pronounced; confirmed via hospital medical records to be 11:48 p.m.)

EMPLOYEE(S)/SUBJECT(S) INVOLVED

- BPA (b)(6) & (b)(7)(C) Transported GOMEZ-Alonzo and his father from the Checkpoint to the hospital the first time.
- BPA (b)(6) & (b)(7)(C) Apprehended GOMEZ-Alonzo and his father on December 18, 2018.
- SBPA (b)(6) & (b)(7)(C) he supervisor on duty at the HWY 70 CP when the second transport was conducted.
- BPA (b)(6) & (b)(7)(C) Assigned to Alamogordo Station.
- BPA (b)(6) & (b)(7)(C) assigned to HWY 70 CP.
- BPA (b)(6) & (b)(7)(C) Transported father and child second time.
- BPA (b)(6) & (b)(7)(C) Assigned to the HWY 70 CP.
- BPA (b)(6) & (b)(7)(C) Assigned to the HWY 70 CP.
- BPA (b)(6) & (b)(7)(C) Assigned to the HWY 70 CP.
- SBPA (b)(6) & (b)(7)(C) : Supervisor at the Alamogordo Station.
- SBPA (b)(6) & (b)(7)(C) Supervisor at the HWY 70 CP.
- BPA (b)(6) & (b)(7)(C) Assigned to the HWY 70 CP.