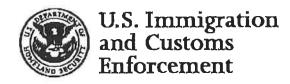
## DHS FACSIMILE

Department of Homeland Security
U.S Immigration & Customs Enforcement
Enforcement and Removal Operations
630 Sansome Street, 5<sup>th</sup> floor
San Francisco, California 94111



TO:

Ms. Giselle Sotelo, Esq.

August 15, 2017

TELEPHONE:

(213) 623-4592

FAX:

(213) 623-3720

PAGES INC.COVER:

3

FROM:

Deportation Officer Hagedom

TELEPHONE:

(415) 844-5534

FAX:

(415) 844-5562

RE:

Maria Guadalupe MENDOZA SANCHEZ (A#095 592 618)

Eusebio SANCHEZ MEJIA (A#095 592 617) Request for a Stay of Removal Decision.

Please see attached copies of the I-246 decision for your clients. Your requests for stays have been denied.

Best Regards,

Officer Hagedorn.

#### DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

OMB No. 1653-0021 Expires: 07/31/2017

# APPLICATION FOR A STAY OF DEPORTATION OR REMOVAL.

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Deciding Official Signature	) lan.	Salar Salar	Office: _San F	rancisco			
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Oakland	C)A	994603	Arrested by police or other law enforcement agency (other than for immigration researce)				
Telephone Mumber:	Call Yelephone						
510- 593-5699	510- 502-	0958	1				
bill in this case when	Congress	is back in :	session in Septemb	er 2017. See	attached		
EVIDENCE SUBMITTED (attache			1				
Letter from Semator Fe	instein's	office					
contity under penalty of perjury that t	he information pri	wided and contains	ed herein is true and correct to	the best of my know	indge and bellef:		
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INFORMATION IF FORM PREPA	RED BY OTHE	R TH <b>AN APPLI</b> C	ANT:				
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Giselle Sot	elo		Giselle S	sotell			
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213-623-4592	600 Wilsh	ire Bl. #15		,, ,	CA 90017		
(Telephone Number)		neel Address)			(Zip Code)		

#### DEPARTMENT OF HOMELAND SECURITY U.S. Immigration and Customs Enforcement

OMB No. 1653-0021 Expires: 07/31/2017

### APPLICATION FOR A STAY OF DEPORTATION OR REMOVAL

GRANTED One Year Skx Mo DENIED Denial letter attached.  REJECTED Incorrect Fee Apr Additional information attached.  Dete: 08/15/2017 Decision made by:  Deciding Official Signature (Sign in ink):	onths []	os not submitted to	Other:	Ameuni Pa	DECMONCY Order	
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Deciding Official Signature (Sign in ink):	Jan	~~	Primed Name/Title)	TC'F. depusi	d by:	
(Sign in ink):	)   m	~			tickel #	
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	nie:	lf yo	ou are currently detained by ICE	provide the n	ame of the detention facility:	
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Land Name:		First Name:		Middle Name		
MENDOZA SANCHEZ		Maria Gua			I Of Justine Octor	
Address (Number and Street):			Country of Citizenship:	Passport No:	Expiration Date:	
9532 Plymouth Street			Mexico			
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510- 593-5699   510-	- 502-0	958				
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