

EXHIBIT G

Subject ID : 276859939

Event No: RDU0809000041

File No. [REDACTED]

Date: September 5, 2008

TO: (Name and title of institution) N.C. DEPT OF CORRECTIONS COMBINED RECORDS 831 W. MORGAN ST. RALEIGH, NC 27603	From: (Office address) RALEIGH/DURHAM, NC, SUB-OFFICE 140 CENTREWEST COURT SUITE 100 CARY, NC 27513
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LYTTLE, Mark Daniel AKA:
Name of alien: THOMAS, JOSE ... (CONTINUED ON I-831)
State Criminal Number : NCL286050A

DOC# [REDACTED]

Date of birth: [REDACTED] 1977 Nationality: MEXICO Sex: M

You are advised that the action noted below has been taken by the U.S. Department of Homeland Security concerning the above-named inmate of your institution:

- ☒ Investigation has been initiated to determine whether this person is subject to removal from the United States.
- ☐ A Notice to Appear or other charging document initiating removal proceedings, a copy of which is attached, was served on _____
(Date)
- ☐ A warrant of arrest in removal proceedings, a copy of which is attached, was served on _____
(Date)
- ☐ Deportation or removal from the United States has been ordered.

It is requested that you:

Please accept this notice as a detainer. This is for notification purposes only and does not limit your discretion in any decision affecting the offender's classification, work, and quarters assignments, or other treatment which he or she would otherwise receive.

- ☒ Federal regulations (8 CFR 287.7) require that you detain the alien for a period not to exceed 48 hours (excluding Saturdays, Sunday's and Federal holidays) to provide adequate time for DHS to assume custody of the alien. You may notify DHS by calling 919-678-8807 during business hours or 802-872-6020 after hours in an emergency.
- ☒ Please complete and sign the bottom block of the duplicate of this form and return it to this office. ☐ A self-addressed stamped envelope is enclosed for your convenience. ☒ Please return a signed copy via facsimile to _____
(Area code and facsimile number)

Return fax to the attention of ROBERT KENDALL, at _____
(Name of officer handling case) (Area code and phone number)

- ☒ Notify this office of the time of release at least 30 days prior to release or as far in advance as possible.
- ☒ Notify this office in the event of the inmate's death or transfer to another institution.
- ☐ Please cancel the detainer previously placed by this Office on _____

ROBERT KENDALL

(Signature of Immigration Officer)

IEA

(Title of Immigration Officer)

Receipt acknowledged:

Date of last conviction: _____ Latest conviction charge: _____

Estimated release date: _____

Signature and title of official: _____

Alien's Name LYTTLE, Mark Daniel	File Number [REDACTED] Event No: RDU0809000041	Date September 5, 2008
OTHER ALIASES KNOWN BY: ----- LITTLE, MARK DANIEL		
Signature <i>Robert Kendall</i> ROBERT KENDALL	Title IEA	