





September 15, 2025

VIA CERTIFIED MAIL AND E-MAIL Office of the General Counsel U.S. Department of Homeland Security 2707 Martin Luther King. Jr. Ave. SE Washington, DC 20528-0485 ogc@hq.dhs.gov

Office of the Principal Legal Advisor Immigration and Customs Enforcement U.S. Department of Homeland Security 500 12th Street SW Mail Stop 5900 Washington, DC 20536-5900 OPLAServiceIntake@ice.dhs.gov

Notice of Claim for Damages under the Federal Tort Claims Act Re: **A**# Dear Sir or Madam: Enclosed, please find an administrative claim under the Federal Tort Claims Act ("FTCA") against the United States government for the extreme suffering, severe pain and distress, and other harms inflicted upon Ms. as a result of severe medical neglect, physical abuse, sexual abuse, verbal abuse, retaliation, and inhumane use of solitary confinement by Immigration and Customs Enforcement ("ICE") at the South Louisiana ICE Processing Center ("SLIPC") in Basile, Louisiana. The U.S. government is responsible for the actions of its employees, including those employed by ICE, under the FTCA. Sarah Decker, Staff Attorney with Robert F. Kennedy Human Rights, and the undersigned seeks an award of damages to and serve this complaint on her behalf. represent compensate for the harms she sustained in connection with the medical negligence and events related to inhumane use of solitary confinement and other forms of sexual, physical, and verbal abuse.

sexually assaulted by the Assistant Warden of the facility and denied adequate medical care by ICE, including medication and treatment for her seizure condition, resulting in the deterioration of her physical and mental health. As punishment for the multiple complaints and grievances she

was repeatedly

As described in detail in the enclosure, while detained under ICE's control,

filed reporting this sexual abuse, ICE subjected to retaliatory and inhumane solitary confinement. This abuse caused significant physical and psychological harm.

ICE, ICE employees, ICE contractors, and other individuals and entities acting on behalf of the U.S. government knew or should have known that their acts, omissions, and conduct constituted mistreatment, inadequate care, and gross medical negligence. Accordingly, ICE is responsible for the egregious treatment of

submits this claim without the benefit of formal discovery and reserves the right to amend or supplement her claim. Please confirm receipt of this administrative claim and the contact information of the attorney who will be handling this matter.

Sincerely,

Sarah Decker

Sarah Gillman

Robert F. Kennedy Human Rights 1300 19th Street NW, Suite 750

Washington, DC 20036

T: (908) 967-3245

E: <u>decker@rfkhumanrights.org;</u> gillman@rfkhumanrights.org

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INJURY, OR DEATH				information requested on both sides of this set(s) if necessary. See reverse side for		OMB NO. 1105-0008	
Submit to Appropriate Federal Agence U.S. Department of Homela Immigration and Customs E Enforcement and Removal	•		2. Name, address of claimant, an (See instructions on reverse). c/o Sarah Decker, Rob 1300 19th Street NW, Washington, DC 20036	Number, Street, City pert F. Kennedy Suite #750	State and Zip code.		
3. TYPE OF EMPLOYMENT	4. DATE OF BIRTH	5. MARITAL STATU	JS	6. DATE AND DAY OF ACCIDE	NT	7. TIME (A.M. OR P.M.)	
MILITARY CIVILIAN				See attachment		See Attachment	
BASIS OF CLAIM (State in detail the the cause thereof. Use additional pages See Attachment		ances attending the da	amage, ir	njury, or death, identifying persons	s and property involve	d, the place of occurrence and	
9.		PROPE	RTY DA	MAGE			
NAME AND ADDRESS OF OWNER, IF	OTHER THAN CLAIMAN						
Not Applicable							
BRIEFLY DESCRIBE THE PROPERTY (See instructions on reverse side).	, NATURE AND EXTENT	OF THE DAMAGE AN	ND THE	LOCATION OF WHERE THE PRO	OPERTY MAY BE IN:	SPECTED.	
Not Applicable							
10.		PERSONAL INJU	IRY/WR	ONGFUL DEATH			
STATE THE NATURE AND EXTENT OF THE INJURED PERSON OR DECE See Attachment		SE OF DEATH, WHIC	JA FOKI	NO THE BASIS OF THE CLAIM.	IF OTHER THAN CL	AIMANT, STATE THE NAME	
11.		WI	TNESSE	 :S			
NAME			ADDRESS (Number, Street, City, State, and Zip Code)				
See Attachment			See Attachment				
12. (See instructions on reverse).		AMOUNT OF	CLAIM	(in dollars)			
12a. PROPERTY DAMAGE	12b. PERSONAL INJURY	,	12c. WF	RONGFUL DEATH	12d. TOTAL (Failure forfeiture of you	e to specify may cause ur rights).	
5,000,000					5,000,000		
I CERTIFY THAT THE AMOUNT OF C			ES CAU	SED BY THE INCIDENT ABOVE	AND AGREE TO AG	CCEPT SAID AMOUNT IN	
OF CLAIMANT (See instructions on reverse side).			13b. PHONE NUMBER OF PERSON SIGNING FORM 14. DA		14. DATE OF SIGNATURE		
						09/14/2025	
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.)				

INSTRUCTIONS: Please read carefully the instructions on the

CLAIM FOR DAMAGE,

FORM APPROVED

	COVERAGE				
In order that subrogation claims may be adjudicated, it is essential that the claimant provide					
15. Do you carry accident Insurance? Yes If yes, give name and address of insur	ance company (Number, Street, City, State, and Zip Code) and policy number. X				
16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full cov	erage or deductible? X No 17. If deductible, state amount.				
18. If a claim has been filed with your carrier, what action has your insurer taken or propose	ed to take with reference to your claim? (It is necessary that you ascertain these facts).				
19. Do you carry public liability and property damage insurance? Yes If yes, give no	ame and address of insurance carrier (Number, Street, City, State, and Zip Code).				
INSTRI	ICTIONS				
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 <u>SUM CERTAIN</u> 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 <u>TWO YEARS</u> 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. 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 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				
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	(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.				
each must be shown in item number 12 of this form.	(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 <u>solely</u> 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.

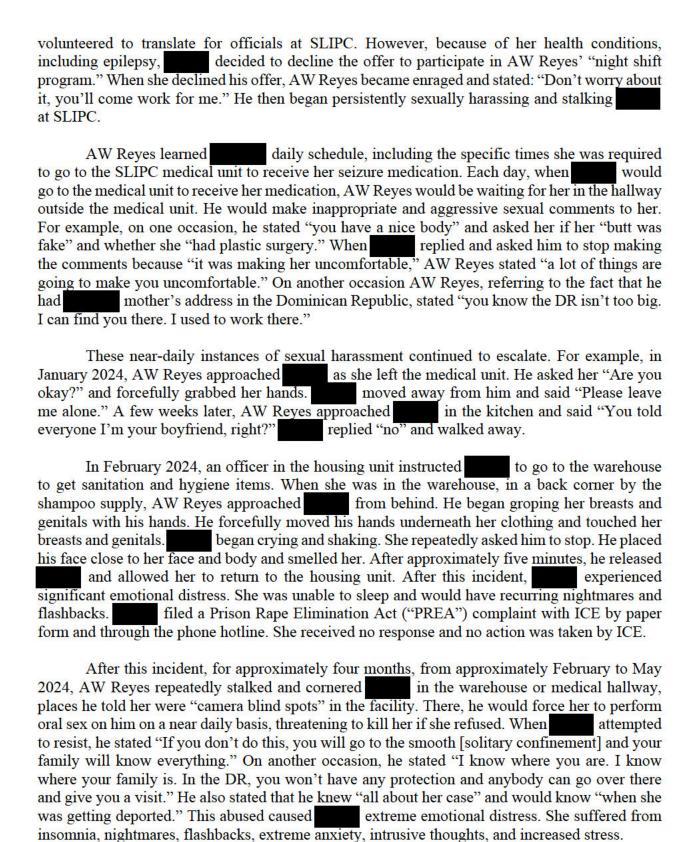
Claim Authorization Form

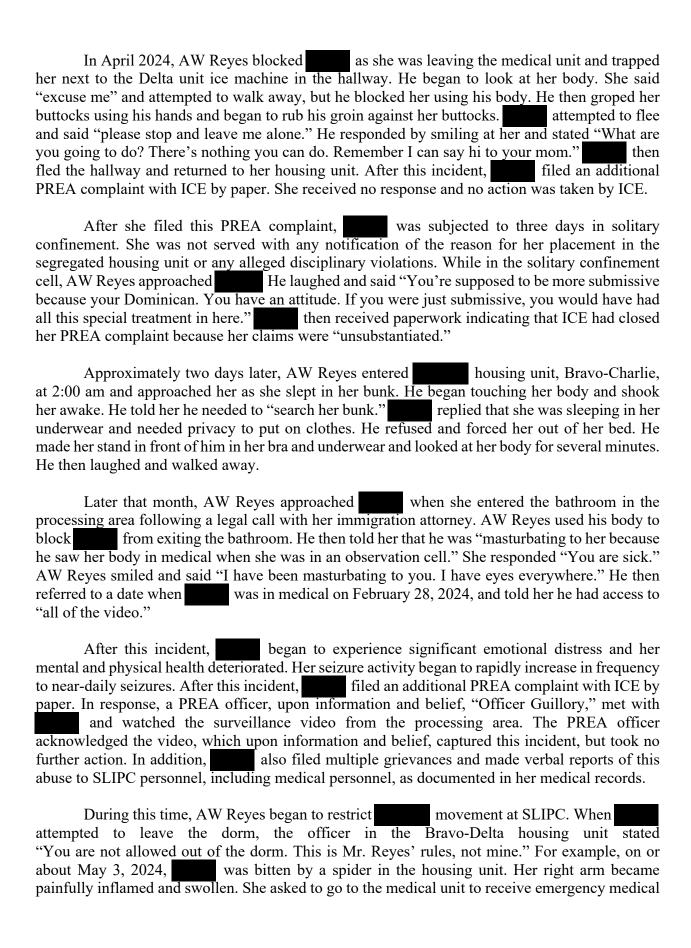
I, hereby authorize Sarah Decker at Robert F. Kennedy Human Rights to submit a claim under the Federal Tort Claims Act on behalf of myself to the U.S. Department of Homeland Security, including U.S. Immigration and Customs Enforcement, and any other government agency, seeking compensation for the unlawful actions of their employees or against me.

DATED: September 15, 2025



FTCA Standard Form 95 – Attachment Claimant:				
1. Date and Day of Accident/Incident				
November 2023- January 2025				
2. <u>Time (A.M. or P.M.)</u>				
N/A, Multiple Incidents				
3. Basis of Claim				
Factual Basis of FTCA Claim				
a native and citizen of the Dominican Republic, first entered the United States in 2006 and settled in Maryland. She lived in Maryland for ten years, where she raised her two United States citizen children. In 2010, was diagnosed with epilepsy. In 2013, had spinal surgery, a laminectomy with fusion in the lumbar region, after she was injured in an accident. She was also previously diagnosed with Post Traumatic Stress Disorder ("PTSD"), anxiety, and depression in or around 2015.				
was taken into custody by the Department of Homeland Security ("DHS"), Immigration and Customs Enforcement ("ICE") on or about November 1, 2023. She was detained continuously at the South Louisiana ICE Processing Center ("SLIPC") in Basile, Louisiana until on or about January 6, 2025, when she was removed to the Dominican Republic. SLIPC is an immigration detention facility in Basile, Louisiana that is operated through a contract between ICE and a private prison company, the GEO Group, Inc. ("GEO").				
Sexual Abuse by Assistant Warden Reves at SLIPC				
In November 2023, shortly after entering ICE custody at SLIPC, first encountered the Assistant Warden, Mr. Manuel Reyes ("AW Reyes"). Without introducing himself, he asked her name and country of origin. Believing him to be an ICE officer overseeing her custody, provided him with her name and told him that she is from the Dominican Republic. He also asked for her sponsor contact information and personal contact information. Again, believing him to be an ICE officer in charge of her custody, provided him with her cell phone number and the name, cell phone number, and address of her mother, who resides in the Dominican Republic. Later learned from other detained people that this individual was not an ICE officer but rather the Assistant Warden of SLIPC.				
At this time, also learned from other detained people that AW Reyes ran an unofficial "night shift program," unsanctioned by the facility, where detained people could perform tasks for AW Reyes between the hours of 8:00 pm and 6:00 am in exchange for money in their commissary accounts. In November 2023, AW Reyes and discussed whether she would like to participate in this program. As a bilingual English-Spanish speaker,				





care, but the officer refused, referring to "AW Reyes' orders." Finally, thirty minutes later, the officer escorted to the medical unit. When she went to exit the medical unit, AW Reyes blocked her path and stated in a threatening manner that ICE officer "knows all about" what is happening, implying that he has the ability to impact her immigration case. Ithen approached an ICE officer in her proximity, upon information and belief, "Officer Ruiz" and verbally reported that AW Reyes was sexually assaulting and harassing her. She then wrote a formal grievance to ICE detailing her sexual abuse by AW Reyes.			
The next day, AW Reyes approached and stated "No one is going to trust what you say about me because I have a lot of contacts higher up who will cover for me. You are going to be deported in the next two weeks and this will come back to your case. But if you prefer, you can reject a relationship with me." On May 15, 2024, filed another PREA complaint with ICE detailing the sexual abuse and harassment by AW Reyes.			
Upon information and belief, AW Reyes left his position at SLIPC in July 2024. After his departure, experienced ongoing abuse and retaliation by other officials at SLIPC. For example, in August 2024, officials targeted for searches and baseless disciplinary write ups. On one occasion, an officer wrongfully confiscated bath towel. When filed a grievance, the officer said "I wish I could slap your face." On or about August 6, 2024, agents from the Federal Bureau of Investigation ("FBI") interviewed and others at SLIPC. disclosed the sexual and physical abuse by AW Reyes to the FBI agents. On or about August 7, 2024, was subjected to five days of solitary confinement after a disciplinary writeup, resulting in at least four severe seizures that left her with face numbness.			
Medical Neglect at SLIPC			
Prior to her detention by ICE, had two or three seizures per year and her epilepsy was properly managed by a medical regimen developed by her neurologist, including two daily medications—Trileptal and Gabapentin. During her intake processing, ICE acknowledged epilepsy diagnosis and recorded it in her medical records. However, during her 14 months in ICE custody at SLIPC, officials repeatedly denied access to her seizure medications. ICE and SLIPC officials also denied access to a neurologist for the entirety of her 14 month detention. Seizures became more frequent and increased in intensity, beginning in February 2024, following the escalation of her sexual abuse by AW Reyes. frequent seizures severely aggravated her pre-existing spinal injury. However, ICE denied her access to x-ray scans of her spine or access to a neurologist to assess and treat her back pain.			
SLIPC officials routinely denied access to emergency medical care in response to her seizures in the housing unit. For example, in December 2023, had a severe seizure in the Delta-Alpha unit and lost consciousness. SLIPC provided no initial emergency medical response. Instead, they brought a stretcher near the housing unit in an external hallway and forced to get up and walk to the stretcher. On another occasion, officials placed into a wheelchair while she was unconscious, post-seizure. She fell out of the wheelchair and into a concrete wall, injuring herself. A separate occasion, post-seizure, medical personnel instructed to walk from the medical unit back to the general housing unit with no assistance, without			

socks or shoes. During the walk, she collapsed twice due to post-ictal weakness, injuring herself on the concrete floor.

On multiple occasions throughout her 14-month detention, was denied access to her seizure medication because she was unable to walk to the medical unit due to dizziness and weakness post-seizure. These denials were documented by SLIPC medical personnels as "refusals of medical care." For example, from November 20, 2023 to December 3, 2023, had a series of severe near-daily seizures. Following these seizures, in a weakened postictal state, was unable to walk to the medical unit to receive her medication or the chow hall to receive her meals. She requested that the medical unit bring her meals and medications to her housing unit as an accommodation, but the officials denied this request. Instead, the officials at SLIPC instructed that she could be "voluntarily placed" in solitary confinement for "medical observation." Due to fear that solitary confinement would worsen her pre-existing mental health conditions, requested to remain in the general housing unit. In order to receive her daily seizure medication, was required to go to the medical unit at SLIPC three times per day. filed multiple grievances detailing this mistreatment and neglect.

On January 6, 2025, was deported to the Dominican Republic. Upon her deportation, ICE denied her a full 30-day supply of all medically necessary medications, only providing her with a 10-day supply of her seizure medications. She continues to suffer ongoing emotional distress from her mistreatment and abuse by AW Reyes.

Legal Basis of FTCA Claim

A. Sexual Assault, Assault, and Battery

ICE is responsible for intentional conduct involving the use of sexual and physical violence, which constitutes battery. Sexual assault is an intentional act of nonconsensual sexual contact involving the touching of an individual's body, directly or through clothing. Assault is an attempt to commit a battery, or the intentional placing of another in reasonable apprehension of receiving a battery.

B. Medical Negligence

ICE had a duty to ensure adequate medical care. As a direct and proximate result of the inadequate, substandard medical testing, treatment, and supervision provided by physicians and other health care providers employed by and/or agents of ICE, suffered extreme physical, mental, and emotional pain and distress.

C. Negligence, Gross Negligence and Recklessness

ICE had a duty to maintain safe conditions for ICE also had a duty to ensure that those detained received adequate medical care. ICE breached its duties by failing to ensure safe, and humane conditions. As a direct and proximate result of ICE's negligent, grossly negligent, and reckless acts, omissions, and conduct, was subjected to months of suffering without access to medical care or adequate supervision to ensure her safety and

wellbeing. ICE's negligence, gross negligence, and recklessness caused to suffer extreme and extended physical, mental, and emotional pain and distress.

D. Negligence Per Se

ICE had a duty to ensure that those detained received adequate care and supervision that adhered to standards. ICE breached its duty by failing to meet these standards. As a direct and proximate result, suffered extreme and extended physical, mental, and emotional pain and distress.

E. Negligent Supervision

ICE had a duty to prevent its employees or agents from causing physical harm to a third party. ICE breached its duty by failing to ensure safe, humane, and sanitary conditions when was in their custody. As a direct and proximate result of ICE's acts, omissions, and conduct, was subjected to sexual abuse, physical abuse, medical neglect, threats and retaliation, and the inhumane use of solitary confinement. ICE's negligence and gross negligence caused to suffer extreme physical, mental, and emotional pain and distress.

F. Intentional Infliction of Emotional Distress

ICE is responsible for intentional or reckless conduct that was extremely outrageous and caused severe emotional distress to

G. Intentional Infliction of Physical Harm

ICE is responsible for conduct that caused a physical impact on injury, and the injury caused mental suffering or emotional distress. ICE's acts, omissions, and conduct directly resulted in severe physical pain and suffering to

H. Other Causes of Action

This is not intended to be an exhaustive list of possible causes of action, including attorneys' fees, *Bivens* claims, violations of 42 U.S.C. §§ 1983 and 1985, violations of 18 U.S.C. § 242, violations of Section 504 of the Rehabilitation Act, violations of the Fifth Amendment Due Process Clause, and violations of the Convention Against Torture. reserves the right to assert these and other claims in an appropriate forum at an appropriate time, to the extent not already asserted.

11. Witnesses

Other individuals who were detained at SLIPC between November 2023 and January 2025 are witnesses to these incidents. Some individuals working at SLIPC between November 2023 and January 2025 are witnesses to these incidents. Upon information and belief, some of the incidents described above were captured by stationary security cameras at SLIPC and video footage exists to substantiate these claims of abuse.

13B. Phone Number of Person Signing the Form

Sarah Decker,	
Saran Decker,	