

Supplement B, Delaration of Law Enforcement Officer for Victim of Trafficking in Persons

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-914 OMB No. 1615-0099 Expires 04/30/2021

For USCIS Use Only

START HERE - **Type or print in blank ink.** This form should be completed by Federal, State, or local law enforcement authorities for victims under the Victims of Trafficking and Violence Protection Act, Public Law 106-386, as amended.

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Family Name (Last Name) Given Name (First Name) Middle Name (if any) Orloff Leslye Other Names Used (include maiden name/nickname) Date Reloc Sent Date Date Date Date Date Reloc Rec'd Date Date Date Date Reloc Rec'd Date Date Date Date Date Reloc Rec'd Date Date Date Date Date Reloc Rec'd Date Date	Trafficking and Violence Protection Act, Public Law 106-386, as amended.					Receipt
Orloff Leslye E	PART A. Victim Informat	Date				
Other Names Used (include maiden name/nickname) Date Date Date Date Date Date Date Date Reloc Sent Date Date Part B. Agency Information Name of Certifying Agency Washington DC Name of Certifying Official Lora Livingston Agency Address - Street Number and Name 555 Indiana Avenue NW City State/Province Washington Date Superior Court Judge Agency Address - Street Number and Name Suite Number 555 Indiana Avenue NW City State/Province Washington Doc Date Remarks Remarks Part C. Statement of Claim Prosecutor Other Fax # (with area code) Certifying Agency Category X Judge Law Enforcement Prosecutor Other FBI or SID Number (if applicable) Part C. Statement of Claim	Family Name (Last Name)	Given Name (First Name)	Middle Na	ne (if any)	Date	
Date of Birth (mm/dd/yyyy) Gender 08/28/1956 A # (if/known) Social Security # (if/known) Date Date Part B. Agency Information Name of Certifying Agency Washington DC Name of Certifying Official Lora Livingston Superior Court Judge Agency Address - Street Number and Name 555 Indiana Avenue NW City State/Province Zip/Postal Code Washington DC Daytime Phone # (area code and/or extension) Pax # (with area code) Case Status On-going			E		Resubmitted	
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Reloc Rec'd Date	A # (ij known)	Social Secu	urity # (ij known)	Date	
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Name of Certifying Official Lora Livingston Agency Address - Street Number and Name Suite Number 555 Indiana Avenue NW City State/Province Washington Do Daytime Phone # (area code and/or extension) Fax # (with area code) 2025555555 Agency Type Federal State On-going Completed Local Case Status On-going Judge Law Enforcement Prosecutor Other Case Number FBI or SID Number (if applicable) H-62632-11 Part C. Statement of Claim	Name of Certifying Agency				Date	
Superior Court Judge Agency Address - Street Number and Name Suite Number	Washington DC				Date	
Agency Address - Street Number and Name Suite Number State/Province City State/Province Washington DC Daytime Phone # (area code and/or extension) Fax # (with area code) 2025555555 Agency Type Federal State Case Status On-going On-going Local Certifying Agency Category Judge Judge Law Enforcement Prosecutor Other Case Number FBI or SID Number (if applicable) H-62632-11 Part C. Statement of Claim	Name of Certifying Official	Title and Division	on/Office of Ce	rtifying Official	R	lemarks
State Province Zip Postal Code			urt Judge			
City State/Province Zip/Postal Code Washington DC 20005 Daytime Phone # (area code and/or extension) Fax # (with area code) 2025555555 202555556 Agency Type Federal State X Local Case Status On-going Completed Local Certifying Agency Category X Judge Law Enforcement Prosecutor Other Case Number FBI or SID Number (if applicable) H=62632-11 Part C. Statement of Claim	Agency Address - Street Nur	mber and Name		Suite Number		
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H-62632-11 Part C. Statement of Claim			Other			
Part C. Statement of Claim	Case Number	FBI or SID	Number (if app	olicable)		
	н-62632-11					
	Part C. Statement of Cla	aim				
1. The applicant is or has been a victim of a severe form of trafficking in persons. Specifically, he or she is a victim of: (Check all that apply. Base your analysis on the practices to which the victim was subjected rather than on the specific violations charged the counts on which convictions were obtained, or whether any prosecution resulted in convictions. Note that the definitions the control this analysis are not the elements of criminal offenses, but are those set forth at 8 CFR 214.11(a).)	that apply. Base your ana the counts on which convic control this analysis are no	lysis on the practices to whic ctions were obtained, or whet ot the elements of criminal of	ch the victim was ther any prosect ffenses, but are t	subjected rather attion resulted in co those set forth at 8	than on the specific privictions. Note the CFR 214.11(a).)	c violations charged, nat the definitions that
Sex trafficking in which a commercial sex act was induced by force, fraud, or coercion. Sex trafficking means the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act. Sex trafficking and the victim is under the age of 18.	recruitment, harboring	g, transportation, provision, o	or obtaining of a			

P	art C. Statement of Claim (Continued)
	☐ The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for subjection to involuntary servitude, peonage, debt bondage, or slavery.
	☐ Not applicable.
	Other, specify on attached additional sheets.
2.	Please describe the victimization upon which the applicant's claim is based and identify the relationship between that victimization and the crime under investigation/prosecution. Attach the results of any name or database inquiry performed in the investigation of the case, as well as any relevant reports and findings. Include relevant dates, etc. Attach additional sheets, if necessary.
	I have probable cause to believe Ms. Orloff was subjected to sex trafficking from December 2018 to May 2019. In December 2018, Ms. Orloff entered the United States for better work opportunities. She was introduced to a "beauty salon" to work as a massage therapist, but soon realized the job was actually to provide sex services. Unfamiliar with the country and threatened by her boss, Ms. Orloff was forced to stay until she called 911 in May 2019. Attached are court reports and findings.
3.	Has the applicant expressed any fear of retaliation or revenge if removed from the United States? If yes, explain. Attach additional sheets, if necessary.
	I have not inquired into whether Ms. Orloff fear retaliation or revenge if removed from the US.
1	Provide the date(s) on which the acts of trafficking occurred.
4.	Date (mm/dd/yyyy) Date (mm/dd/yyyy) Date (mm/dd/yyyy) Date (mm/dd/yyyy) Date (mm/dd/yyyy)
	12/18/2018
5.	List the statutory citation(s) for the acts of trafficking being investigated or prosecuted, or that were investigated or prosecuted.
	DC. Code § 22-1834
6.	Provide the date on which the investigation or prosecution was initiated. Date (mm/dd/yyyy) 05/09/2019
7.	Provide the date on which the investigation or prosecution was completed (if any).
	Date (mm/dd/yyyy)
	06/03/2020

Part D. Cooper	ration of Victim (Attach	additional sheets, if necessa	ry)							
The applicant:										
	ed with requests for assistan	nce in the investigation/prosecu	tion of t	he crime of trafficking. (Explain below.)						
Has failed t	to comply with requests to a	assist in the investigation/prosec	ution of	the crime of trafficking. (Explain below.)						
Has not been requested to assist in the investigation/prosecution of any crime of trafficking.										
Has not yet attained the age of 18.										
	Other, specify on attached additional sheets.									
Ms. Orlo	off called 911 for the police locate t	help and provided inf		ion about her trafficker, which stified in court (attached are						
court do	ocuments).									
Part E. Family	Members Implicated In	n Trafficking								
Yes X No	·									
Full Name Relationship Involv				ement						
Part F. Attesta										
severe form of traff my knowledge, and Citizenship and Im	gation of the facts, I certify ficking in persons as defined that I have made, and will migration Services, based up	d by the VTVPA. I certify that make, no promises regarding the	the above ne above certify t	e noted individual is or has been a victim of a we information is true and correct to the best of victim's ability to obtain a visa from U.S. hat if the victim unreasonably refuses to assist in will notify USCIS.						
Signature of Law	Enforcement Officer <i>(ider</i>	ntified in Part B) (sign in ink)		Data (mara/dd/nnn)						
Quedas	Lora Livingsto	Date (mm/dd/yyyy) 07/03/2020								
guige	U									
Signature of Supe	rvisor of Certifying Office	Date (mm/dd/yyyy)								
		07/03/2020								
Printed Name of S	Supervisor									