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**Non-detained**

**UNITED STATES DEPARTMENT OF JUSTICE  
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW  
IMMIGRATION COURT  
1855 Gateway Blvd., Suite 850  
Concord, CA 94520**

\_\_\_\_\_  
**In the Matter of** )

**Claudia Isabel Tamayo Bravo** )

**Alberto Rodrigues Castillo** )

**Josefina Navarro Tamayo** )

**In Removal Proceedings** )  
\_\_\_\_\_)

**File No. A. 249-307-474**

**File No. A. 249-307-473**

**File No. A. 249-307-475**

**Immigration Judge:** Wang, Eric

**Next Hearing Date:** July 8, 2026 at 10:30 AM.

**RESPONDENTS' AMENDED APPLICATION FOR ASYLUM AND  
WITHHOLDING OF REMOVAL**



# Application for Asylum and for Withholding of Removal

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-589  
OMB No. 1615-0067  
Expires 09/30/2027

**START HERE - Type or print in black ink. See the instructions for information about eligibility and how to complete and file this application. There is no filing fee for this application.**

NOTE:  Check this box if you also want to apply for withholding of removal under the Convention Against Torture.

## Part A.I. Information About You

1. Alien Registration Number(s) (A-Number) (if any) <b>249307474</b>		2. U.S. Social Security Number (if any) <b>296-83-0539</b>		3. USCIS Online Account Number (if any) <b>N/A</b>	
4. Complete Last Name <b>TAMAYO BRAVO</b>		5. First Name <b>CLAUDIA ISABEL</b>		6. Middle Name <b>N/A</b>	
7. What other names have you used (include maiden name and aliases)? <b>N/A</b>					
8. Residence in the U.S. (where you physically reside)					
Street Number and Name <b>1427 Lincoln Ave</b>				Apt. Number <b>N/A</b>	
City <b>Richmond</b>		State <b>California</b>	Zip Code <b>94801</b>	Telephone Number <b>( 510 ) 8606763</b>	
(NOTE: You must be residing in the United States to submit this form.)					
9. Mailing Address in the U.S. (if different than the address in Item Number 8)					
In Care Of (if applicable): <b>Santanna Law Offices PC</b>				Telephone Number <b>( 510 ) 9220154</b>	
Street Number and Name <b>PO Box 7528</b>				Apt. Number <b>N/A</b>	
City <b>Okland</b>		State <b>CA</b>		Zip Code <b>94601</b>	
10. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		11. Marital Status: <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed			
12. Date of Birth (mm/dd/yyyy) <b>06/14/1984</b>		13. City and Country of Birth <b>Ixtlan de Los Hervores, Mexico</b>			
14. Present Nationality (Citizenship) <b>Mexican</b>		15. Nationality at Birth <b>Mexican</b>	16. Race, Ethnic, or Tribal Group <b>Latina</b>	17. Religion <b>Catholic</b>	
18. Check the box, a through c, that applies: a. <input type="checkbox"/> I have never been in Immigration Court proceedings. b. <input checked="" type="checkbox"/> I am now in Immigration Court proceedings. c. <input type="checkbox"/> I am not now in Immigration Court proceedings, but I have been in the past.					
19. Complete 19 a through c.					
a. When did you last leave your country? (mm/dd/yyyy) <u>12/16/2023</u> b. What is your current I-94 Number, if any? <u>677935978A3</u>					
c. List each entry into the U.S. beginning with your most recent entry. List date (mm/dd/yyyy), place, and your status for each entry. (Attach additional sheets as needed.)					
Date <u>12/16/2023</u>		Place <u>San Luiz AZ</u>	Status <u>Paroled</u>	Date Status Expires <u>12/13/2024</u>	
Date <u>06/2006</u>		Place <u>Unknown, CA</u>	Status <u>EWI</u>		
Date _____		Place _____	Status _____		
20. What country issued your last passport or travel document? <b>Mexico</b>		21. Passport Number <b>N10919997</b>		22. Expiration Date (mm/dd/yyyy) <b>03/12/2030</b>	
		Travel Document Number <b>N10919997</b>			
23. What is your native language (include dialect, if applicable)? <b>Spanish</b>		24. Are you fluent in English? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	25. What other languages do you speak fluently? <b>N/A</b>		



## Part A.II. Information About Your Spouse and Children

<b>For EOIR use only.</b>	<b>For USCIS use only.</b>	<b>Action:</b> Interview Date: _____ Asylum Officer ID No.: _____	<b>Decision:</b> Approval Date: _____ Denial Date: _____ Referral Date: _____
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**Your spouse**  I am not married. (Skip to **Your Children** below.)

1. Alien Registration Number (A-Number) (if any) <b>249307473</b>	2. Passport/ID Card Number (if any) <b>N20570690</b>	3. Date of Birth (mm/dd/yyyy) <b>07/03/1987</b>	4. U.S. Social Security Number (if any) <b>356-23-0025</b>
5. Complete Last Name <b>RODRIGUEZ CASTILLO</b>	6. First Name <b>ALBERTO</b>	7. Middle Name <b>N/A</b>	8. Other names used (include maiden name and aliases) <b>N/A</b>
9. Date of Marriage (mm/dd/yyyy) <b>12/04/2023</b>	10. Place of Marriage <b>San Luis Rio Colorado, Mexico</b>		11. City and Country of Birth <b>Yurecuaro, Mexico</b>
12. Nationality (Citizenship) <b>Mexican</b>		13. Race, Ethnic, or Tribal Group <b>Latino</b>	14. Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
15. Is this person in the U.S.? <input checked="" type="checkbox"/> Yes (Complete Blocks 16 to 24.) <input type="checkbox"/> No (Specify location): _____			
16. Place of last entry into the U.S. <b>San Luiz AZ</b>	17. Date of last entry into the U.S. (mm/dd/yyyy) <b>12/16/2023</b>	18. I-94 Number (if any) <b>677941101A3</b>	19. Status when last admitted (Visa type, if any) <b>Paroled</b>
20. What is your spouse's current status? <b>No status</b>	21. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	22. Is your spouse in Immigration Court proceedings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	23. If previously in the U.S., date of previous arrival (mm/dd/yyyy) <b>04/26/2007</b>
24. If in the U.S., is your spouse to be included in this application? (Check the appropriate box.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

**Your Children.** List all of your children, regardless of age, location, or marital status.

I do not have any children. (Skip to Part A.III., Information about your background.)

I have children. Total number of children: **4**

(NOTE: Use Form I-589 Supplement A or attach additional sheets of paper and documentation if you have more than four children.)

1. Alien Registration Number (A-Number) (if any) <b>249307475</b>	2. Passport/ID Card Number (if any) <b>N/A</b>	3. Marital Status (Married, Single, Divorced, Widowed) <b>Single</b>	4. U.S. Social Security Number (if any) <b>N/A</b>
5. Complete Last Name <b>NAVARRO TAMAYO</b>	6. First Name <b>JOSEFINA</b>	7. Middle Name <b>N/A</b>	8. Date of Birth (mm/dd/yyyy) <b>02/17/2016</b>
9. City and Country of Birth <b>San Luiz Rio Colorado, Mexico</b>	10. Nationality (Citizenship) <b>Mexican</b>	11. Race, Ethnic, or Tribal Group <b>Latina</b>	12. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female
13. Is this child in the U.S. ? <input checked="" type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location): _____			
14. Place of last entry into the U.S. <b>San Luiz AZ</b>	15. Date of last entry into the U.S. (mm/dd/yyyy) <b>12/16/2023</b>	16. I-94 Number (If any) <b>677943402A3</b>	17. Status when last admitted (Visa type, if any) <b>Paroled</b>
18. What is your child's current status? <b>No status</b>	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			



**Part A.II. Information About Your Spouse and Children (continued)**

<b>1.</b> Alien Registration Number (A-Number) (if any) <b>N/A</b>	<b>2.</b> Passport/ID Card Number (if any) <b>A45922949</b>	<b>3.</b> Marital Status (Married, Single, Divorced, Widowed) <b>Single</b>	<b>4.</b> U.S. Social Security Number (if any) <b>604-63-2704</b>
<b>5.</b> Complete Last Name <b>NAVARRO TAMAYO</b>	<b>6.</b> First Name <b>IZAYANA</b>	<b>7.</b> Middle Name <b>GUADALUPE</b>	<b>8.</b> Date of Birth (mm/dd/yyyy) <b>03/09/2007</b>
<b>9.</b> City and Country of Birth <b>Long Beach, United States</b>	<b>10.</b> Nationality (Citizenship) <b>American</b>	<b>11.</b> Race, Ethnic, or Tribal Group <b>Latina</b>	<b>12.</b> Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female

**13.** Is this child in the U.S. ?  Yes (Complete Blocks 14 to 21.)  No (Specify location): \_\_\_\_\_

<b>14.</b> Place of last entry into the U.S. <b>N/A</b>	<b>15.</b> Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	<b>16.</b> I-94 Number (If any) <b>N/A</b>	<b>17.</b> Status when last admitted (Visa type, if any) <b>N/A</b>
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<b>18.</b> What is your child's current status? <b>U.S. Citizen</b>	<b>19.</b> What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	<b>20.</b> Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**21.** If in the U.S., is this child to be included in this application? (Check the appropriate box.)  
 Yes  
 No

<b>1.</b> Alien Registration Number (A-Number) (if any) <b>N/A</b>	<b>2.</b> Passport/ID Card Number (if any) <b>A53732097</b>	<b>3.</b> Marital Status (Married, Single, Divorced, Widowed) <b>Single</b>	<b>4.</b> U.S. Social Security Number (if any) <b>606-75-8467</b>
<b>5.</b> Complete Last Name <b>NAVARRO TAMAYO</b>	<b>6.</b> First Name <b>YAZMIN</b>	<b>7.</b> Middle Name <b>LIZBETH</b>	<b>8.</b> Date of Birth (mm/dd/yyyy) <b>02/19/2009</b>
<b>9.</b> City and Country of Birth <b>Long Beach, United States</b>	<b>10.</b> Nationality (Citizenship) <b>American</b>	<b>11.</b> Race, Ethnic, or Tribal Group <b>Latina</b>	<b>12.</b> Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female

**13.** Is this child in the U.S. ?  Yes (Complete Blocks 14 to 21.)  No (Specify location): \_\_\_\_\_

<b>14.</b> Place of last entry into the U.S. <b>N/A</b>	<b>15.</b> Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	<b>16.</b> I-94 Number (If any) <b>N/A</b>	<b>17.</b> Status when last admitted (Visa type, if any) <b>N/A</b>
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<b>18.</b> What is your child's current status? <b>U.S. Citizen</b>	<b>19.</b> What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	<b>20.</b> Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**21.** If in the U.S., is this child to be included in this application? (Check the appropriate box.)  
 Yes  
 No

<b>1.</b> Alien Registration Number (A-Number) (if any) <b>N/A</b>	<b>2.</b> Passport/ID Card Number (if any) <b>N06260299</b>	<b>3.</b> Marital Status (Married, Single, Divorced, Widowed) <b>Single</b>	<b>4.</b> U.S. Social Security Number (if any) <b>N/A</b>
<b>5.</b> Complete Last Name <b>NAVARRO TAMAYO</b>	<b>6.</b> First Name <b>KARLA ELIZABETH</b>	<b>7.</b> Middle Name <b>N/A</b>	<b>8.</b> Date of Birth (mm/dd/yyyy) <b>05/14/2001</b>
<b>9.</b> City and Country of Birth <b>Zamora, Mexico</b>	<b>10.</b> Nationality (Citizenship) <b>Mexican</b>	<b>11.</b> Race, Ethnic, or Tribal Group <b>Latina</b>	<b>12.</b> Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female

**13.** Is this child in the U.S. ?  Yes (Complete Blocks 14 to 21.)  No (Specify location): **San Luis Rio Colorado, Mexico**

<b>14.</b> Place of last entry into the U.S. <b>N/A</b>	<b>15.</b> Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	<b>16.</b> I-94 Number (If any) <b>N/A</b>	<b>17.</b> Status when last admitted (Visa type, if any) <b>N/A</b>
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<b>18.</b> What is your child's current status? <b>N/A</b>	<b>19.</b> What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	<b>20.</b> Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**21.** If in the U.S., is this child to be included in this application? (Check the appropriate box.)  
 Yes  
 No



### Part A.III. Information About Your Background

1. List your last address where you lived before coming to the United States. If this is not the country where you fear persecution, also list the last address in the country where you fear persecution. (List Address, City/Town, Department, Province, or State and Country.)  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street (Provide if available)	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)
Calle Los Alisos 132	San Luis Rio Colorado	Sonora	Mexico	09/2013	12/2023

2. Provide the following information about your residences during the past 5 years. List your present address first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Number and Street	City/Town	Department, Province, or State	Country	Dates	
				From (Mo/Yr)	To (Mo/Yr)
1427 Lincoln Ave.	Richmond	California	United States	12/2023	PRESENT
Calle Los Alisos, 132	San Luis Rio Colorado	Sonora	Mexico	09/2013	12/2023

3. Provide the following information about your education, beginning with the most recent school that you attended.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name of School	Type of School	Location (Address)	Attended	
			From (Mo/Yr)	To (Mo/Yr)
Jose Maria Morelos	Elementary school	Ixtlan de Los Hervores, Michoacan, Mexico	06/1991	06/1998

4. Provide the following information about your employment during the past 5 years. List your present employment first.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Name and Address of Employer	Your Occupation	Dates	
		From (Mo/Yr)	To (Mo/Yr)
Alta Mira Baking - 2810 San Pablo Ave, Berkeley, CA	Bakery packer	01/2016	PRESENT
Fletronic's - Miguel de la Madrid SN, San Luis Rio Colorado, Sonora, Mexico	Production Operator	02/2015	12/2023

5. Provide the following information about your parents and siblings (brothers and sisters). Check the box if the person is deceased.  
(NOTE: Use Form I-589 Supplement B, or additional sheets of paper, if necessary.)

Full Name	City/Town and Country of Birth	Current Location	
Mother Sara Bravo Castro	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	Ixtlan de los Hervores, Mexico
Father Salvador Tamayo Torres	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	Ixtlan de los Hervores, Mexico
Sibling Refugio Tamayo Bravo	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	Ixtlan de los Hervores, Mexico
Sibling Juana Tamayo Bravo	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	Ixtlan de los Hervores, Mexico
Sibling Rosario Tamayo Bravo	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	San Luis, AZ, United States
Sibling Lourdes Tamayo Bravo	Ixtlan de los Hervores, Mexico	<input type="checkbox"/> Deceased	Ixtlan de los Hervores, Mexico



## Part B. Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part B.)

When answering the following questions about your asylum or other protection claim (withholding of removal under 241(b)(3) of the INA or withholding of removal under the Convention Against Torture), you must provide a detailed and specific account of the basis of your claim to asylum or other protection. To the best of your ability, provide specific dates, places, and descriptions about each event or action described. You must attach documents evidencing the general conditions in the country from which you are seeking asylum or other protection and the specific facts on which you are relying to support your claim. If this documentation is unavailable or you are not providing this documentation with your application, explain why in your responses to the following questions.

Refer to Instructions, Part I: Filing Instructions, Section II, "Basis of Eligibility," Parts A - D, Section V, "Completing the Form," Part B, and Section VII, "Additional Evidence That You Should Submit," for more information on completing this section of the form.

1. Why are you applying for asylum or withholding of removal under section 241(b)(3) of the INA, or for withholding of removal under the Convention Against Torture? Check the appropriate box(es) below and then provide detailed answers to questions A and B below.

I am seeking asylum or withholding of removal based on:

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Race        | <input checked="" type="checkbox"/> Political opinion                       |
| <input type="checkbox"/> Religion    | <input checked="" type="checkbox"/> Membership in a particular social group |
| <input type="checkbox"/> Nationality | <input checked="" type="checkbox"/> Torture Convention                      |

- A. Have you, your family, or close friends or colleagues ever experienced harm or mistreatment or threats in the past by anyone?

- No  Yes

If "Yes," explain in detail:

1. What happened;
2. When the harm or mistreatment or threats occurred;
3. Who caused the harm or mistreatment or threats; and
4. Why you believe the harm or mistreatment or threats occurred.

On November 21, 2023, three hooded and possibly armed men whom I believed to be members of the Cartel "Los Salazar" forced their way into my home in San Luis Río Colorado, Sonora, Mexico, while I was alone. They were chasing my nephew, Alberto Lopez Tamayo, Lourdes' son, who had run to my house seeking refuge. The men grabbed me, kicked me, and threw me to the ground, pressing a foot on my head and ordering me not to look or speak. They also threatened me and demanded to know where my husband was. While I was held down on the ground, they brutally beat my nephew and forcibly took him away, as he remains missing to this day. I sustained visible bruises on my feet and hands from the assault. The attackers targeted me because my nephew, who was being pursued by the cartel, sought refuge in my home in that moment, and my family connection to him made me a direct victim of their violence. Before leaving, they explicitly threatened me that if I reported the incident to the police, my entire family would suffer the consequences. This event left me completely traumatized, emotional scars I carry to this day. Further details are include in my declaration.

- B. Do you fear harm or mistreatment if you return to your home country?

- No  Yes

If "Yes," explain in detail:

1. What harm or mistreatment you fear;
2. Who you believe would harm or mistreat you; and
3. Why you believe you would or could be harmed or mistreated.

If I return to Mexico, I fear being threatened, kidnapped, physically harmed or killed by members of the Cartel that kidnapped my nephew. I believe they would target me because I am the aunt of Alberto Lopez Tamayo and because I was a direct witness to a cartel operation - I saw their members invade my home, beat my nephew and abduct him. Thus, I am perceived as a threat to their authority. Before leaving, they explicitly threatened me that if I ever spoke about what happened, my entire family would suffer the consequences. That threat has never been withdrawn, and my nephew has never been found. I cannot seek protection from the Mexican authorities, as law enforcement is widely infiltrated by organized crime and has consistently failed to protect witnesses or investigate cartel crimes. Reporting would only put me at greater risk. I cannot relocate to another part of Mexico either, because the Cartel operates at a national level and has the reach and resources to find people who have witnessed their operations, regardless of where they go. Further details are included in my declaration.



**Part B. Information About Your Application (continued)**

2. Have you or your family members ever been accused, charged, arrested, detained, interrogated, convicted and sentenced, or imprisoned in any country other than the United States (including for an immigration law violation)?

No                       Yes

If "Yes," explain the circumstances and reasons for the action.

3.A. Have you or your family members ever belonged to or been associated with any organizations or groups in your home country, such as, but not limited to, a political party, student group, labor union, religious organization, military or paramilitary group, civil patrol, guerrilla organization, ethnic group, human rights group, or the press or media?

No                       Yes

If "Yes," describe for each person the level of participation, any leadership or other positions held, and the length of time you or your family members were involved in each organization or activity.

3.B. Do you or your family members continue to participate in any way in these organizations or groups?

No                       Yes

If "Yes," describe for each person your or your family members' current level of participation, any leadership or other positions currently held, and the length of time you or your family members have been involved in each organization or group.

4. Are you afraid of being subjected to torture in your home country or any other country to which you may be returned?

No                       Yes

If "Yes," explain why you are afraid and describe the nature of torture you fear, by whom, and why it would be inflicted.

**Yes. I am afraid of being subjected to torture if I return to Mexico. Based on what I witnessed and experienced on November 21, 2023, I have every reason to believe that members of the Cartel that invaded my home would subject me to torture if they were to find me. I fear that I would be located by cartel members and subjected to severe physical violence or killed, because of my family connection to my nephew, whom they targeted, and because I protected him, which made me a direct witness to their criminal operation and therefore a threat to their impunity. Furthermore, my having fled Mexico could be interpreted by them as an act of defiance, further increasing the risk of retaliation against me. Further details are included in my declaration.**



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## Part C. Additional Information About Your Application

(NOTE: Use Form I-589 Supplement B, or attach additional sheets of paper as needed to complete your responses to the questions contained in Part C.)

1. Have you, your spouse, your child(ren), your parents or your siblings ever applied to the U.S. Government for refugee status, asylum, or withholding of removal?

No  Yes

If "Yes," explain the decision and what happened to any status you, your spouse, your child(ren), your parents, or your siblings received as a result of that decision. Indicate whether or not you were included in a parent or spouse's application. If so, include your parent or spouse's A-number in your response. If you have been denied asylum by an immigration judge or the Board of Immigration Appeals, describe any change(s) in conditions in your country or your own personal circumstances since the date of the denial that may affect your eligibility for asylum.

My husband, Alberto Rodriguez Castillo (A-Number 249-307-473), and my daughter, Josefina Navarro Tamayo (A-Number 249-307-475), are concurrently applying for asylum and withholding of removal in consolidated proceedings before this Immigration Court. I am included in my wife's application. None of the aforementioned applications have received a final decision and all remain pending before the Concord Immigration Court.

- 2.A. After leaving the country from which you are claiming asylum, did you or your spouse or child(ren) who are now in the United States travel through or reside in any other country before entering the United States?

No  Yes

- 2.B. Have you, your spouse, your child(ren), or other family members, such as your parents or siblings, ever applied for or received any lawful status in any country other than the one from which you are now claiming asylum?

No  Yes

If "Yes" to either or both questions (2A and/or 2B), provide for each person the following: the name of each country and the length of stay, the person's status while there, the reasons for leaving, whether or not the person is entitled to return for lawful residence purposes, and whether the person applied for refugee status or for asylum while there, and if not, why he or she did not do so.

3. Have you, your spouse or your child(ren) ever ordered, incited, assisted or otherwise participated in causing harm or suffering to any person because of his or her race, religion, nationality, membership in a particular social group or belief in a particular political opinion?

No  Yes

If "Yes," describe in detail each such incident and your own, your spouse's, or your child(ren)'s involvement.



**Part C. Additional Information About Your Application (continued)**

4. After you left the country where you were harmed or fear harm, did you return to that country?

No  Yes

If "Yes," describe in detail the circumstances of your visit(s) (for example, the date(s) of the trip(s), the purpose(s) of the trip(s), and the length of time you remained in that country for the visit(s).)

5. Are you filing this application more than 1 year after your last arrival in the United States?

No  Yes

If "Yes," explain why you did not file within the first year after you arrived. You must be prepared to explain at your interview or hearing why you did not file your asylum application within the first year after you arrived. For guidance in answering this question, see Instructions, Part 1: Filing Instructions, Section V. "Completing the Form," Part C.

**My initial asylum application was filed within one year of my arrival in the United States. This current filing is an amendment and supplement to provide additional details and supporting information with the assistance of legal counsel.**

6. Have you or any member of your family included in the application ever committed any crime and/or been arrested, charged, convicted, or sentenced for any crimes in the United States (including for an immigration law violation)?

No  Yes

If "Yes," for each instance, specify in your response: what occurred and the circumstances, dates, length of sentence received, location, the duration of the detention or imprisonment, reason(s) for the detention or conviction, any formal charges that were lodged against you or your relatives included in your application, and the reason(s) for release. Attach documents referring to these incidents, if they are available, or an explanation of why documents are not available.

**Me, my husband Alberto and my daughter Josefina were detained when we entered the United States through San Luis, Arizona, on December 16, 2023, and were charged under INA § 212(a) (7) (A) (i) (I). We were held for approximately 5 to 6 hours, being released that same day on parole and allowed to continue our asylum process. My husband Alberto also attempted to enter the United States on approximately four to five occasions in 2007, seeking better work opportunities. On each attempt, he was apprehended by U.S. Border Patrol, placed in a holding room with other detainees for approximately 4 to 5 hours, and then sent back to Mexico. Each time he was sent back, agents dispatched him to a different city along the border, which is why the attempts occurred at different locations. He was never formally charged or processed in connection with any of those detentions. These arrests occurred solely as part of the immigration process. Neither I nor my husband or daughter has ever committed a crime in the United States or been charged with any criminal offense. Further details are included in my declaration.**



**Part D. Your Signature**

I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it are all true and correct. Title 18, United States Code, Section 1546(a), provides in part: Whoever knowingly makes under oath, or as permitted under penalty of perjury under Section 1746 of Title 28, United States Code, knowingly subscribes as true, any false statement with respect to a material fact in any application, affidavit, or other document required by the immigration laws or regulations prescribed thereunder, or knowingly presents any such application, affidavit, or other document containing any such false statement or which fails to contain any reasonable basis in law or fact - shall be fined in accordance with this title or imprisoned for up to 25 years. I certify that I am physically present in the United States or seeking admission at a Port of Entry when I execute this application. I authorize the release of any information from my immigration record that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

**WARNING:** Applicants who are in the United States unlawfully are subject to removal if their asylum or withholding claims are not granted by an asylum officer or an immigration judge. Any information provided in completing this application may be used as a basis for the institution of, or as evidence in, removal proceedings even if the application is later withdrawn. Applicants determined to have knowingly made a frivolous application for asylum will be permanently ineligible for any benefits under the Immigration and Nationality Act. You may not avoid a frivolous finding simply because someone advised you to provide false information in your asylum application. If filing with USCIS, unexcused failure to appear for an appointment to provide biometrics (such as fingerprints) and your biographical information within the time allowed may result in an asylum officer dismissing your asylum application or referring it to an immigration judge. Failure without good cause to provide DHS with biometrics or other biographical information while in removal proceedings may result in your application being found abandoned by the immigration judge. See sections 208(d)(5)(A) and 208(d)(6) of the INA and 8 CFR sections 208.10, 1208.10, 208.20, 1003.47(d) and 1208.20.

Print your complete name. <b>Claudia Isabel Tamayo Bravo</b>	Write your name in your native alphabet. <b>N/A</b>
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Did your spouse, parent, or child(ren) assist you in completing this application?  No  Yes (If "Yes," list the name and relationship.)

<b>N/A</b> (Name)	<b>N/A</b> (Relationship)	<b>N/A</b> (Name)	<b>N/A</b> (Relationship)
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Did someone other than your spouse, parent, or child(ren) prepare this application?  No  Yes (If "Yes," complete Part E.)

Asylum applicants may be represented by counsel. Have you been provided with a list of persons who may be available to assist you, at little or no cost, with your asylum claim?  No  Yes

Signature of Applicant (The person in Part. A.I.)

→ [  ] 07/02/2026  
 Sign your name so it all appears within the brackets Date (mm/dd/yyyy)

**Part E. Declaration of Person Preparing Form, if Other Than Applicant, Spouse, Parent, or Child**

I declare that I have prepared this application at the request of the person named in Part D, that the responses provided are based on all information of which I have knowledge, or which was provided to me by the applicant, and that the completed application was read to the applicant in his or her native language or a language he or she understands for verification before he or she signed the application in my presence. I am aware that the knowing placement of false information on the Form I-589 may also subject me to civil penalties under 8 U.S.C. 1324c and/or criminal penalties under 18 U.S.C. 1546(a).

Signature of Preparer		Print Complete Name of Preparer <b>Natalia Vieira Santanna</b>	
Daytime Telephone Number ( 510 ) 9220154		Address of Preparer: Street Number and Name <b>PO Box 7528</b>	
Apt. Number	City <b>Oakland</b>	State <b>CA</b>	Zip Code <b>94601</b>

To be completed by an attorney or accredited representative (if any).	<input type="checkbox"/> Select this box if Form G-28 is attached.	Attorney State Bar Number (if applicable) <b>337502</b>	Attorney or Accredited Representative USCIS Online Account Number (if any) <b>0 6 3 4 6 0 3 2 7 9 7 4</b>



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**Part F. To Be Completed at Asylum Interview, if Applicable**

**NOTE:** *You will be asked to complete this part when you appear for examination before an asylum officer of the Department of Homeland Security, U.S. Citizenship and Immigration Services (USCIS).*

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are  all true or  not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_ to \_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Asylum Officer

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**Part G. To Be Completed at Removal Hearing, if Applicable**

**NOTE:** *You will be asked to complete this Part when you appear before an immigration judge of the U.S. Department of Justice, Executive Office for Immigration Review (EOIR), for a hearing.*

I swear (affirm) that I know the contents of this application that I am signing, including the attached documents and supplements, that they are  all true or  not all true to the best of my knowledge and that correction(s) numbered \_\_\_\_ to \_\_\_\_ were made by me or at my request. Furthermore, I am aware that if I am determined to have knowingly made a frivolous application for asylum I will be permanently ineligible for any benefits under the Immigration and Nationality Act, and that I may not avoid a frivolous finding simply because someone advised me to provide false information in my asylum application.

Signed and sworn to before me by the above named applicant on:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Write Your Name in Your Native Alphabet

\_\_\_\_\_  
Signature of Immigration Judge





## Application for Asylum and for Withholding of Removal Supplement A

Department of Homeland Security  
U.S. Citizenship and Immigration Services

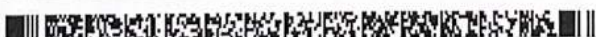
**USCIS**  
**Form I-589**  
OMB No. 1615-0069  
Expires 09/30/2027

A-Number (If available) <b>249307474</b>	Date <b>07/02/2026</b>
Applicant's Name <b>CLAUDIA ISABEL TAMAYO BRAVO</b>	Applicant's Signature 

### List All of Your Children, Regardless of Age or Marital Status

(NOTE: Use this form and attach additional pages and documentation as needed, if you have more than four children)

1. Alien Registration Number (A-Number) (if any) <b>N/A</b>	2. Passport/ID Card Number (if any) <b>N/A</b>	3. Marital Status (Married, Single, Divorced, Widowed) <b>N/A</b>	4. U.S. Social Security Number (if any) <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth (mm/dd/yyyy) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality (Citizenship) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S. ? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location): <b>N/A</b>			
14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	16. I-94 Number (If any) <b>N/A</b>	17. Status when last admitted (Visa type, if any) <b>N/A</b>
18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			
1. Alien Registration Number (A-Number) (if any) <b>N/A</b>	2. Passport/ID Card Number (if any) <b>N/A</b>	3. Marital Status (Married, Single, Divorced, Widowed) <b>N/A</b>	4. U.S. Social Security Number (if any) <b>N/A</b>
5. Complete Last Name <b>N/A</b>	6. First Name <b>N/A</b>	7. Middle Name <b>N/A</b>	8. Date of Birth (mm/dd/yyyy) <b>N/A</b>
9. City and Country of Birth <b>N/A</b>	10. Nationality (Citizenship) <b>N/A</b>	11. Race, Ethnic, or Tribal Group <b>N/A</b>	12. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
13. Is this child in the U.S. ? <input type="checkbox"/> Yes (Complete Blocks 14 to 21.) <input type="checkbox"/> No (Specify location): <b>N/A</b>			
14. Place of last entry into the U.S. <b>N/A</b>	15. Date of last entry into the U.S. (mm/dd/yyyy) <b>N/A</b>	16. I-94 Number (If any) <b>N/A</b>	17. Status when last admitted (Visa type, if any) <b>N/A</b>
18. What is your child's current status? <b>N/A</b>	19. What is the expiration date of his/her authorized stay, if any? (mm/dd/yyyy) <b>N/A</b>	20. Is your child in Immigration Court proceedings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
21. If in the U.S., is this child to be included in this application? (Check the appropriate box.) <input type="checkbox"/> Yes <input type="checkbox"/> No			






# Application for Asylum and for Withholding of Removal Supplement B

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-589  
OMB No. 1615-0069  
Expires 09/30/2027

## Additional Information About Your Claim to Asylum

A-Number (if available) 249307474	Date 07/02/2026
Applicant's Name CLAUDIA ISABEL TAMAYO BRAVO	Applicant's Signature 

NOTE: Use this as a continuation page for any additional information requested. Copy and complete as needed.

Part A.III.

Question 5

### SIBLINGS:

Maria de Jesus Tamayo Bravo - Ixtlan de Los Hervores, Mexico - Ixtlan de los Hervores, Mexico  
Salvador Tamayo Bravo - Ixtlan de Los Hervores, Mexico - Ixtlan de los Hervores, Mexico  
Rosa Virginia Tamayo Bravo - Ixtlan de Los Hervores, Mexico - Ixtlan de los Hervores, Mexico



**Claudia Isabel Tamayo Bravo**  
**Alberto Rodriguez Castillo**  
**Josefina Navarro Tamayo**

**File No. A. 249-307-474**  
**File No. A. 249-307-473**  
**File No. A. 249-307-475**

**Proof of Service**

On this day, I, Natalia Vieira Santanna, served a copy of the following documents:

**RESPONDENTS' AMENDED APPLICATION FOR ASYLUM AND WITHHOLDING OF  
REMOVAL**

To the following:

<b>Office Location:</b>	<b>Mailing Address:</b>
Office of the Principal Legal Advisor Department of Homeland Security 100 Montgomery Street, Suite 200 San Francisco, CA 94104	US Immigration and Customs Enforcement US Department of Homeland Security Office of the Principal Legal Advisor P.O. Box 26449 San Francisco, CA 94126-644

by:

Through the EOIR Courts and Appeals System (ECAS), which will automatically send service notification to both parties that a new document has been filed.

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**Natalia Vieira Santanna (Bar N. 337502)**  
**Attorney at Law**  
**P.O. Box 7528**  
**Oakland, CA 94601**  
*Counsel for Respondents*