

A Maroon & Black car
2 men
parked the car in close
to Apt 16 - walked
across across lawn towards
office stopped behind office
ran back across lawn
got in car and took off
fast - A few minutes later
saw some small flames & smoke
They were the guys that
lived in Apt 10 before
him and his brother
the man by the name
of Rafael Sanchez his
real name is Jaime Espinoza
is wanted in Texas for
murder and a lot more
He had said that Lein
would kick him out of
the Labor Camp but
to mind burn down office

DATA BASE SYSTEM

COLLECTION OF DATA

STORAGE OF DATA

PROCESSING OF DATA

DISPLAY OF DATA

MANAGEMENT OF DATA

To many in Apartment
LEASE PROKE & KAGE APR 10
On this 25 day of February, 1986, in consideration
of the lease to me by the HOUSING AUTHORITY OF THE CITY OF CALDWELL,
hereinafter referred to as Lessor, for use as a residence (unit)
(apartment) House No. APK 10, of the Caldwell Labor Camp,
located on the real property described in Exhibit "A" attached
hereto and by this reference made a part hereof, for tenancy from
month to month, commencing on the 15th day of February, 1986. I,
RAMON SANCHEZ, hereinafter referred to as
Tenant, agree to the following terms and conditions:

1. To pay as rental for said premises the sum of \$ 43.00
per ~~week~~ (week), payable in advance.

(2) FOR USE IF RECEIVING RENTAL ASSISTANCE:

I understand and agree that as long as I receive rental
assistance, my total monthly payment for rent and utilities
will be \$ 8, (25% of my adjusted monthly income).
If I pay any or all utilities directly (not including
telephone or cable t.v.), a utility allowance of \$
will be deducted from my monthly payment for rental and
utilities. If the utility allowance is in excess of 25% of
my adjusted monthly income, the Lessor will pay me this
excess.

I further agree to notify the Lessor of any permanent
increase in adjusted monthly income or change in the number
of family members living in the household. I understand
that should I receive rental assistance benefits to which I
am not entitled, I may be required to make restitution and
I agree to pay any amount of benefits received to which I
was not entitled.

I also understand and agree that monthly payment for rent
under this lease may be raised or lowered, based on changes
in household income and changes in the number and age of
members living in my household and based on the escalation
clause in the lease. Should I no longer receive rental
assistance as a result of these changes, I understand and
agree that my monthly payment for rent may be adjusted.

2. I understand that the project is operated and main-
tained for the purpose of providing housing for domestic farm
laborers and their families. I do hereby certify that a sub-
stantial portion of my family income is and will be derived from
farm labor. I further understand that domestic farm labor means
persons who receive a substantial portion of their income as
laborers on farms in the United States and either (1) are citizens
of the United States, or (2) reside in the United States, Puerto
Rico, or the Virgin Islands, after being legally admitted for
permanent residence therein, and may include laborers engaged in
handling agricultural commodities while in the unprocessed stage,
provided the place of employment, such as a packing shed, is on or
near the farm where the commodity is produced. It also includes
labor for the production of aquatic organisms under a controlled or
selected environment.

3. I agree that if my household income ceases to be sub-
stantially from farm labor for reasons other than disablement or
retirement, I will promptly vacate my dwelling after proper
notification by the Lessor.

CONTRATO

En este dia de _____, 19_____, en consideracion de el contrato para mi por la Autoridad de Viviendas de la Ciudad de Caldwell en adelante referido como arrendador, para uso como una residencia (unidad) (apartamento) casa) No. _____, del Campo de Labor de Caldwell, ubicado en la propiedad de bienes raices describida en "Exhibit A" adjunto a esta y por esta referencia se hace parte de esta, para tenencia de mes a mes comenzando en el dia de _____, 19_____, yo, _____, referido como inquilino, estoy de acuerdo a los siguientes terminos y condiciones.

1. Pagar renta por dichos locales la suma de \$_____ por (mes) (semana), pagado por adelantado.

2. PARA USO SI RECIBE ASISTENCIA PARA LA RENTA:

Yo entiendo y estoy de acuerdo que mientras yo reciba asistencia para la renta, mi pago mensual en total para la renta y utilidades sera de \$_____, (25% de mis ingresos mensuales ajustados). Si yo pago alguno o todas las utilidades directamente (no incluyendo telefono o T.V. de Cable), una asignacion para utilidad de \$_____ sera descontado de mi pago mensual para renta y utilidades. Si la asignacion de utilidad es en exceso del 25% de mis ingresos mensuales ajustados, el arrendador me pagara este exceso.

Yo ademas, estoy de acuerdo avisarle al arrendador de cualquier aumento permanente en ingresos mensuales ajustados o cambio en el numero de miembros de familia que viven en mi casa. Yo entiendo que si yo recibo beneficios de la asistencia de la renta a los que yo no tenga derecho, yo puedo ser requerido o obligado a hacer restitucion. Yo estoy de acuerdo a pagar cualquier cantidad de beneficios recibidos a los que yo no tenga derecho.

Yo tambien entiendo y convengo que el pago mensual de renta bajo este contrato puede ser aumentado o bajado, basado en los ingresos de casa y cambios en el numero y edad de miembros que estan viviendo en mi casa y basado en la clausula de escalacion en el contrato. Si yo no recibo mas asistencia para la renta como resultado de estos cambios, yo entiendo y estoy de acuerdo que mi pago mensual para la renta puede ser ajustado.

2. Yo entiendo que el proyecto es operado y mantenido con el proposito de proporcionar viviendas para trabajadores campesinos domesticos y sus familias. Yo por esto certifico que una considerable o porcion sustancial de ingresos de mi familia es y sera derivado de trabajo del campo. Yo entiendo que trabajo domestico del campo significa personas que reciben una porcion considerable de sus ingresos como trabajadores del campo, en los Estados Unidos, Puerto Rico, o Las Islas Virgenes, despues de ser legalmente admitidos para residencia permanente en ello, y pueden incluir trabajadores ocupados en manejar productos agriculturales mientras en el transcurso de la etapa, proporciona el lugar de el empleo, como una bodega empacadora, que este en o cerca de el rancho donde el producto es producido. Tambien incluye trabajo para la produccion de organismos aquaticos bajo un ambiente selecto o controlado. Tambien tiene que ser ciudadanos de Estados Unidos.

(3) Estoy de acuerdo que si los ingresos de mi casa desisten de ser sustancialmente de trabajo agricola por razones otras que no sean de impedimento o jubilacion, yo pronto desocupo mi vivienda despues de dar notificacion apropiada al arrendador.

4. I agree that the premises shall be occupied only by my family, consisting of the following individuals and no others:

NAME
RAFael Sanchez

Posie 11

AGE

32

12

5. I understand that the Lessor shall only furnish water, sewer and garbage services, and that all other utilities must be furnished by myself.

6. I understand that the process by which eligibility shall be determined and redetermined are as follows:

a. Rental and eligibility determination shall be made annually by the Lessor unless information is received by the Lessor which would affect such rental and eligibility.

b. I agree to supply to the Lessor, to permit such determinations, the information required by Form FMHA 444-8, Tenant Certification.

c. The standards by which rental eligibility and appropriate dwelling unit size shall be judged are contained in the regulations and instructions issued by the Farmers Home Administration.

d. At any time my circumstances change, I may request a redetermination of rent.

e. I understand that if I misrepresent any of the facts upon which rent or eligibility determinations are based, I will be subject to eviction from the premises and possible prosecution for perjury.

f. I understand that I will be given thirty (30) days notice of any rent changes or of my ineligibility.

7. I agree that my right to the use and occupancy of the premises is as a residence only and will not use the premises for business purposes.

8. I agree to keep and maintain the premises in a clean and sanitary condition at all times and upon the expiration or sooner termination of this lease, to surrender the premises to the Lessor in as good a condition as when received.

4. Yo estoy de acuerdo que el local sera ocupado nada mas por mi familia que se compone de los siguientes individuales y nadie mas:

5. Yo entiendo que el arrendador debe proporcionar agua, servicios de basura y sumidero nada mas, y que todas otras utilidades deben ser proporcionadas por mi.

6. Yo entiendo que el proceso por cual la elegibilidad sera determinada y redeterminada son las siguientes:

a. Determinacion rental y elegibilidad seran hechas anualmente por el arrendador a menos que informacion sea recibida por el arrendador la cual pueda afectar tal elegibilidad y renta.

b. Estoy de acuerdo a darle al arrendador para permitir tales determinaciones, la informacion requerida por la forma FmHA 444-8, Certificado de Inquilino.

c. Las normas por la cual elegibilidad rental y tamaño apropiado de la unidad o vivienda sera juzgado, se encuentran en los reglamentos y instrucciones emitidos por la Administracion de Casas de Ranchores.

d. Si en algun tiempo mi posicion cambia, yo puedo pedir una redeterminacion de renta.

e. Yo entiendo que si yo represento en falso algun hecho sobre el cual renta o determinaciones de elegibilidad son basadas, yo sera expuesto a ser expulsado de los locales y posible procesion por perjurio.

f. Yo entiendo que me daran aviso de treinta (30) dias de cualquier cambio de renta o mi inellegibilidad.

7. Estoy de acuerdo que el uso y ocupancia del local es como residencia nada mas y no usare el local para ningun proposito de negocios.

8. Estoy de acuerdo a cuidar y mantener el local en una condicion limpia y sanitaria todo el tiempo y al cumplirse o pronta terminacion de este contrato, entregar el local al arrendador en tan buena condicion como cuando la fui recibida.

9. On execution of this lease, I have deposited with the Lessor the sum of \$ 750, as security of my full and faithful performance of this lease.

10. In the event any action is brought or suit is brought to enforce the terms and conditions of this lease, I agree that the losing party in any court action shall pay attorney's fees or other legal costs.

11. I understand that it is the responsibility of Lessor to maintain the buildings and any unassigned community areas in a decent, safe, and sanitary condition in accordance with local housing codes and Farmers Home Administration regulations.

12. I acknowledge the receipt of a written statement of the condition of the dwelling unit and will receive a written statement of the condition of the dwelling unit when vacating the same, and that I am entitled to participate in the inspection of the premises which is the basis for such statements.

13. I understand that the Lessor reserves the right to enter the premises at all reasonable hours for the purpose of inspection and whenever necessary to make repairs and alterations.

14. Any notices required by the terms of this lease shall be in writing and shall be delivered to the dwelling unit and left with myself or someone over the age of eighteen years, or may be posted on the front door.

15. Any notices required to be given by me under the terms of this lease shall be delivered and left at the office of the Manager.

16. I understand that I can terminate this lease at any time upon written notice to the Lessor.

17. I further agree that the Lessor may terminate this lease for non-payment of rent upon giving me three (3) days written notice to pay the rent or quit the premises.

18. I further agree that the Lessor may terminate this lease for good cause, upon giving me thirty (30) days written notice.

19. I agree that, except for non-payment of rent, that any grievances or appeals from Lessor's decision shall be resolved in accordance with procedures consistent with Farmers Home Administration regulations covering such procedures, which are posted in the rental office.

20. I agree not to assign this lease or to sub-let all or any portion of the premises without the written consent from the Lessor.

21. I agree that the rules and regulations of the Lessor, concerning the use of the premises, which are posted in the office of the Lessor and on the leased premises, are by this reference made a part hereof and any violation of such rules and regulations shall constitute a default under the terms of this lease.

9. Al llevar acabo este contrato, yo he depositado con el arrendador la suma de \$ _____, como seguridad de mi entero y fiel desempeño de este contrato.

10. En el resultado que alguna accion sea causada o una demanda sea causada para ejecutar los terminos y condiciones de este contrato, yo estoy de acuerdo que el partido perdedor en cualquier accion de tribunal pagara los honorarios del abogado y otros costos legales.

11. Yo entiendo que es la responsabilidad del arrendador mantener los edificios y cualquier otras areas de la comunidad sin asignar en una condicion decente, segura y sanitaria en conformidad con los codigos de viviendas y regulaciones de la Administracion de Casas de Rancheros.

12. Yo acepto el recibo de una declaracion por escrito de la condicion de la vivienda y recibire una declaracion por escrito de la condicion de la vivienda cuando desocupe la misma, y que yo tengo derecho de participar en la inspeccion de el local cual es la base de estas declaraciones.

13. Yo entiendo que el arrendador reserva el derecho para entrar al local a todas horas razonables con el proposito de inspeccionar y cuando sea necesario para hacer reparaciones y arreglos.

14. Cualquier avisos requerido por los terminos de este contrato, seran por escrito y seran llevados a la vivienda y dejados conmigo o con una persona pasado de la edad de diezochos años o puestos en la puerta de entrada.

15. Cualquier aviso requerido por mi bajo los terminos de este contrato, sera llevado y dejado en la oficina del administrador.

16. Yo entiendo que yo puedo dar termino a este contrato a cualquier tiempo despues de dar un aviso por escrito al arrendador.

17. Yo, ademas estoy de acuerdo que el arrendador puede dar por terminado este contrato por falta de pago de la renta despues que el me entregue un aviso de treinta (30) dias por escrito.

18. Yo, ademas estoy de acuerdo que el arrendador puede dar por terminado este contrato por una buena causa, despues de darme un aviso de treinta (30) dias por escrito.

19. Yo estoy de acuerdo que menos por falta de pago de renta, cualquier quejas o apelaciones de la decision del arrendador seran resueltas en acuerdo conforme con los procedimientos con los reglamentos de la Administracion de Casas de Rancheros cubriendo tales procedimientos que son puestos en la oficina de las rentas.

20. Estoy de acuerdo a no asignar este contrato o sub-dejar todo o cualquier porcion de los locales sin el consentimiento por escrito del arrendador.

21. Estoy de acuerdo que las reglas y regulaciones del arrendador tocante a el uso del local, las cuales estan anunciados en la oficina del arrendador en el local rentado, son por esta referencia hechas parte de esto y cualquier violacion de dichas reglas y regulaciones, seran constituyente a falta de cumplimiento bajo los terminos de este contrato.

IN WITNESS WHEREOF, The parties hereto have executed this
agreement at Caldwell, Idaho, this 25th day of February,
1980

HOUSING AUTHORITY OF THE
CITY OF CALDWELL

By Robert Meyer
Lessor

Ronald Sanchez
Tenant

EN PRECENCIA DE LO CUAL, los partidos han formalizado este
acuerdo en Caldwell, Idaho este _____ dia de _____, 19 ____.

AUTORIDAD DE VIVIENDAS DE LA
CJUDAD DE CALDWELL

POR

Arrendador

Inquilino

EXHIBIT "A"

BEGINNING at a point on the Section line between Sections 4 and 9 which point is 25 feet East of the Section corner common to Sections 4, 5, 8, and 9, Township 4 North, Range 3 West of the Boise Meridian; thence South 00 degrees 32 minutes 30 seconds West 2014 feet to a point on the North bank of the Farmers Cooperative Canal; thence along the North bank of said Canal, South 62 degrees 29 minutes 00 seconds East 467 feet; thence South 69 degrees 52 minutes 00 seconds East 306.4 feet; thence South 77 degrees 38 minutes 00 seconds East 348.3 feet; thence South 67 degrees 18 minutes 00 seconds East 363.8 feet; thence South 58 degrees 30 seconds East 114.3 feet to a point on the North bank of said Canal, which point is 20 feet North of the East and West Quarter Section line of Section 9, said Township and Range; thence North 89 degrees 50 minutes 30 seconds East 177.6 feet to a point 20 feet North of said Quarter Section line; thence North 00 degrees 18 minutes 00 seconds East 1299.8 feet to a point on the North one-sixteenth Section line of said Section 9; thence along the North one-sixteenth line of said Section 9, South 89 degrees 43 minutes West 349.7 feet to the Northwest one-sixteenth corner of said Section 9; thence North 00 degrees 24 minutes 30 seconds East 1318.9 feet to the West one-sixteenth corner between Sections 4 and 9, said Township and Range; thence South 89 degrees 38 minutes 00 seconds West 1300.6 feet along the North line of said Section 9, to THE POINT OF BEGINNING.

Exhibit "A"

HOUSING AUTHORITY OF THE CITY OF CALDWELL
CALDWELL FARM LABOR HOUSING
P.O. BOX 70
CALDWELL, ID 83606 Tel. (208) 459-2232

DATE: 2-25-86

RENTAL APPLICATION

(Please Print)

NAME Rafael Sanchez SOC. SEC. NO. 518-80-0972

PRESENT ADDRESS 2708 Hwy. McAlley TX. HOW LONG With wife

LANDLORD'S NAME Lucile Aquilar ADDRESS Same PHONE

REASON FOR MOVING for work HAVE YOU EVER LIVED AT CALDWELL FARM LABOR HOUSING NO

WINTER ADDRESS (for migrant families) Same

CARS 1 MAKE YEAR LICENSE & STATE

I, the above named applicant, on behalf of myself and those named below hereby make application to occupy a housing unit of the type indicated below, in the Housing Authority of the City of Caldwell, Idaho.

2-Bedroom House, rental/month---\$170.00

2-Bedroom Apartments, rental/week---\$43.00 ✓

I understand that to qualify for such occupancy, a substantial portion of the family income must come from agricultural employment and that I, as head of the household, must be employed or available for employment in agriculture. I certify that my employment status is as listed below.

U/I/1 Pe
Employed in agriculture _____ Name of Employer _____

Those who will occupy the unit are as follows:

NAME	AGE	NAME	AGE
<u>Rafael Sanchez</u>	<u>32</u>		
<u>Rosie</u>	<u>17</u>		

NOTE: The applicant is advised that the Federal Minimum Housing Standards for agricultural workers limits the number of persons who may occupy a housing unit of any given size. It is the intention of the Housing Authority of Caldwell to operate the housing facility in accordance with those standards. Therefore, it is understood that no one, other than those listed above, will be allowed to occupy the assigned unit on a permanent or semi-permanent basis.

In submitting this application, the rental charge MUST BE KEPT PAID AT LEAST ONE WEEK IN ADVANCE for Apartments and ONE MONTH IN ADVANCE for Houses, that I will be required to post a cleaning/breakage deposit with the Housing Authority and that Idaho Power Co. may require a deposit for electrical service.

The responsibility of keeping an application current is up to the applicant. Therefore, failure of applicant to contact this office weekly in regards to vacancies for two consecutive weeks will void application.

ANY MISREPRESENTATION OF INFORMATION WILL VOID THIS APPLICATION!

I certify that the foregoing information is true and complete to the best of my knowledge. I authorize inquiries to be made to verify the statements above.

Signature of Applicant Rafael Sanchez
Application accepted Yes Application Denied

Legal Residency

Ralph Michael
Executive Director & Manager

TEXAS DEPARTMENT OF HEALTH
BUREAU OF VITAL STATISTICS

CERTIFICATE OF BIRTH

STATE OF TEXAS

BIRTH NO. 142

1. PLACE OF BIRTH		BIRTH NO.	
a. COUNTY	b. CITY (If outside corporate limits, write NAME and give precinct no.)	12. USUAL RESIDENCE OF MOTHER (where does mother live?)	
Hidalgo	PHARR	a. STATE	b. COUNTY
c. FULL NAME OF HOSPITAL OR INSTITUTION	304 W St. Bell St.	c. CITY (If outside corporate limits, write RURAL and give precinct no.)	TOWN
d. STREET ADDRESS		d. CITY (If rural, give location)	Hidalgo
e. (First)	b. (Middle)	e. (Last)	c. (Last)
f. (Type of birth)	Rafael	SANCHEZ	SANCHEZ
4. SEX	5a. THIS BIRTH	5b. IF TWIN OR TRIPLET (Circle child born)	6. DATE OF BIRTH
Male	SINGLE <input checked="" type="checkbox"/>	TRIPLET <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/>	YES
10. AGE OF MOTHER (in years)	11. BIRTHPLACE (State or foreign country)	12a. USUAL OCCUPATION	17c. KIND OF BUSINESS OR INDUSTRY
36	Mexico	Mother	17d. M
13. FULL MAIDEN NAME a. (First)	b. (Middle)	14. COLOR OR RACE	17e. COLOR
VICTORIA		ESPINOZA	White
15. AGE (in years of this birth)	16. BIRTHPLACE (State or foreign country)	17. USUAL OCCUPATION	17f. KIND OF BUSINESS OR INDUSTRY
28	TEXAS	domestic	17g. M
18. CHILDREN PREVIOUSLY BORN TO THIS MOTHER (Do NOT include this child)	19a. INFORMATION	19b. ADDRESS	
a. How many OTHER children are now living? Date stated above at	b. How many OTHER children were born alive but are now dead?	19c. OTHER children were stillborn (Born dead after 20 weeks pregnancy)?	304 West Bell St. Pharr, Texas
4	0	19d. ADDRESS	19e. ATTENDANT AT BIRTH
20. I hereby certify that I attended the birth of this child who was born alive on the date stated above at 3:00 AM.	21a. ATTENDANT'S SIGNATURE	21b. ATTENDANT'S SIGNATURE	21c. D.O. <input type="checkbox"/> MIDWIFE <input type="checkbox"/> OTHER <i>W.H. LONG</i>
22a. REGISTRAR'S FILE NO.	22b. DATE RECD BY LOCAL REGISTRAR	22c. REGISTRAR'S SIGNATURE	22d. DATE SIGNED
105	June 8 1953	J.B. Phillips	6-6-53
FOR MEDICAL AND HEALTH USE ONLY (This section MUST be filled out)			
23. LENGTH OF PREGNANCY	24. WEIGHT AT BIRTH	25. WAS EYE PROPHYLAXIS USED?	26. WAS STANDARD SEROLOGIC TEST MADE?
WEEKS	LBS. OZS.	YES <input type="checkbox"/> NO <input type="checkbox"/>	LEG. <input type="checkbox"/> LUGG. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>

G. McFadden Deputy J. J. 31-1953
Local Registrar, L. B. Phillips

Refael Sanchez, as registered in Vol. 2, City of Pharr Vital Statistics

This is a true and certified copy of the birth certificate of

21

MILITARY SERVICE RECORD OF FATHER

- (a) Is the father reported to have been in such service?
 (b) Name of organization in which service was rendered
 (c) Serial Number of Discharge Papers or Adjusted Service Certificate

THIS INFORMATION FOR STATISTICAL PURPOSES ONLY			
(d) Describe congenital malformation or defects		Approximate date when first seen?	
(e) Describe any birth injury		How administered?	
(f) Was prenatal care given?		How	
(g) What anesthetic was used?		Pituitrin	
(h) What analgesic was used?		During labor?	
(i) Was forceps used?			
(j) Complications of pregnancy			
(k) Complications of labor			
(l) Did a Midwife precede you in this case?	Name Address		
(m) Was there an operation for delivery?			
(n) Describe fully all operations			

IF STILLBIRTH FILL OUT THE FOLLOWING:			
(o) Did child die before labor?	After labor?	(p) Did child die before operation?	During operation?

PLEASE ANSWER THESE QUESTIONS AS TO ALL BIRTHS

11-74

61-14