The below information has been reviewed and is returned for whatever administrative action or inquiry you consider appropriate. Should any administrative or personnel action result from your response to this information, you are requested to report the final result of that action within 30 business days of its conclusion.

If your review of this matter discloses evidence of previously unreported criminal misconduct that is reportable under Management Directive 0810.1, you are required to notify this office of that information before any additional investigative steps are taken.

Summary of new complaint for your review:

On March 24, 2011, the Michigan Chapter of the Council on American-Islamic Relations (CAIR) wrote to CRCL that American Muslims crossing the border are subject to extensive questions about their religion and religious practices.

CAIR states on behalf of Mr. a U.S. Citizen who is a truck driver that frequently cross the US-Canada border with a FAST Express Card. alleges that repeated referrals to secondary inspection while driving a commercial vehicle forced him to drive less lucrative routes. He has filed a redress request (2104553).

Thank you.

Program Analyst
Compliance Branch
DEPARTMENT OF HOMELAND SECURITY  
OFFICE FOR CIVIL RIGHTS AND CIVIL LIBERTIES  
COMPLAINT SUMMARY FORM  
To be placed under the first left tab of the complaint folder  
Complaint Number: 11-06-CBP-0153  

Summary Prepared By: (b) (6)  
Date Prepared: April 1, 2011  

Identifying Information  

<table>
<thead>
<tr>
<th>Complainant/ Individual's FN:</th>
<th>(b) (6)</th>
<th>MN:</th>
<th>LN: (b) (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual's Alien number:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third Party's FN (Written By):</td>
<td>(b) (6)</td>
<td>Third Party's LN (Written By):</td>
<td>(b) (6)</td>
</tr>
<tr>
<td>Third Party's Organization:</td>
<td>Council on American-Islamic Relations (CAIR), Michigan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source Name/ Office/Agency (e.g., other DHS component, government agency, or NGO referring the complaint to CRCL, not representing the complainant)</td>
<td>Council on American-Islamic Relations (CAIR)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the Complaint file would be more appropriately labeled with a phrase other than an individual complainant's name, type that tagline/name here:

Special Category (check any that apply)  
- [ ] Sexual Abuse (PREA)  
- [ ] Language Issues  
- [ ] Recipients of Federal Financial Assistance  
- [ ] Medical Issues  
- [ ] Mental Health Issues  
- [ ] DHS Traveler Redress Inquiry Program (TRIP)  
- [ ] Deaths – Further Action  
- [ ] Deaths – No Further Action  
- [ ] ICE 287(g) Program  
- [ ] ICE Secure Communities Program  
- [ ] DHS OIG Referral to CRCL  
- [ ] CBP Referral to CRCL  
- [ ] ICE Referral to CRCL  
- [ ] FPS Referral to CRCL  
- [ ] Other (please specify)  

Allegation  

<table>
<thead>
<tr>
<th>Received by DHS:</th>
<th>March 24, 2011</th>
<th>Received by CRCL:</th>
<th>March 24, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allegation Type:</td>
<td>Civil Right/Civil Liberty</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Incident Date: November 28, 2009 to March 24, 2011

Summary of Allegation(s):
On March 24, 2011, the Michigan Chapter of the Council on American-Islamic Relations (CAIR) wrote to CRCL that American Muslims crossing the border are subject to extensive questions about their religion and religious practices.

CAIR states on behalf of Mr. [b] [6] a U.S. Citizen who is a truck driver that frequently cross the US-Canada border with a FAST Express Card. [b] [6] alleges that repeated referrals to secondary inspection while driving a commercial vehicle forced him to drive less lucrative routes. He has filed a redress request (2104553).

Compliance Director's Recommendation: COMMENTS: On [DATE], Jeffrey Blumberg, Director, Compliance Branch, directed that this matter be opened as a complaint, and recommended that it be handled as a [referred, retained, short form] Complaint assigned to [NAME].

## Allegation Details

<table>
<thead>
<tr>
<th>Primary Issue:</th>
<th>Discrimination/Profiling</th>
<th>Primary Basis:</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary Issue:</td>
<td>Treatment</td>
<td>Secondary Basis:</td>
<td></td>
</tr>
</tbody>
</table>

Select additional Secondary Issues and Secondary Bases if necessary. Add additional rows to the table above.

### Categories from which to Select Allegation Issues and Bases

#### Allegation Issue Categories:
- Abuse of Authority/Color of Law
- Conditions of Detention
- Discrimination
- Due Processing/Administrative Processing
- Profiling
- Treatment
- Unaccompanied Minors

#### Allegation Basis Categories:
- Age
- Citizenship (specify)
- Color (specify whether dark, medium or light complexion)
- Detainee
- Disability (mental)
- Disability (physical)
- Harassment
- Inappropriate touching
- Limited English Proficiency
- National Origin (specify)
- Non-Detainee
- Race (specify race)
- Racial Harassment
- Referral to secondary
- Religion (specify religion)
- Retaliation
- Rude, unprofessional conduct
- Sex (specify whether male or female)
- Sexual Harassment
- Ethnicity (specify ethnicity. "Hispanic/Latino" is a selection in this category.)
[If the complaint involves an Unaccompanied Minor as a complainant/victim, the Primary Issues is Unaccompanied Minors.]

**Involved Parties**
Component Selection List: DHS HQ, DHS, CBP, FEMA, FLETC, ICE, TSA, USCG, USCIS, USSS

<table>
<thead>
<tr>
<th>Component(s) Referenced (If complaint involves multiple components, list DHS):</th>
<th>CBP</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Component(s) Involved (list all that apply, based on the above checklist):</th>
<th>CBP</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Individual(s) (list name, title/position, and employment location. State if the individual is a subject of the complaint):</th>
<th>1.</th>
</tr>
</thead>
</table>

**Location(s) of Incident(s)**
Incident Location Type *(check all that apply)*:
- [ ] Airport
- [ ] Airplane
- [ ] BCIS Facility
- [X] Border and Fixed Checkpoint
- [ ] Government Building
- [ ] Seaport
- [ ] Ship
- [ ] Street Stop
- [ ] Place of Business
- [ ] Residence
- [ ] Detention IGSA
- [ ] Detention SPC
- [ ] Detention CDF
- [ ] Other (please specify)

<table>
<thead>
<tr>
<th>Incident Location (list name of airport or port of entry or other location):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
</tbody>
</table>

If this complaint involves more than one incident location, list each location separately. If the alleged incident occurred outside the U.S., identify the city and county where it occurred.

**Notes**
Notes: