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 22 *Alexander Roque Campos, Sokhean Keo, Gustavo Guevara Alarcon, Alejandro Mendiola Escutia*
 23 *and all others similarly situated*

24 UNITED STATES DISTRICT COURT

25 NORTHERN DISTRICT OF CALIFORNIA

26 FERNANDO GOMEZ RUIZ; FERNANDO
 27 VIERA REYES; JOSE RUIZ CANIZALES;
 28 YURI ALEXANDER ROQUE CAMPOS;
 29 SOKHEAN KEO; GUSTAVO GUEVARA
 30 ALARCON; and ALEJANDRO MENDIOLA
 31 ESCUTIA, on behalf of themselves and all
 32 others similarly situated,

Plaintiffs,

v.

U.S. IMMIGRATION AND CUSTOMS
 ENFORCEMENT; TODD M. LYONS,

Case No. 3:25-cv-09757-MMC

**PLAINTIFFS' NOTICE OF MOTION
 AND MOTION FOR TEMPORARY
 RESTRAINING ORDER**

Date: To be set by the Court
 Time: To be set by the Court
 Dept.: Ctrm 7 – 19th Floor
 Judge: Hon. Maxine M. Chesney

Date Filed: November 12, 2025

1 Acting Director, U.S. Immigration and
2 Customs Enforcement; SERGIO
3 ALBARRAN, Acting Director of San
4 Francisco Field Office, Enforcement and
5 Removal Operations, U.S. Immigration and
6 Customs Enforcement; U.S. DEPARTMENT
7 OF HOMELAND SECURITY; KRISTI
8 NOEM, Secretary, U.S. Department of
9 Homeland Security,

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Defendants.

NOTICE OF MOTION AND MOTION**TO ALL PARTIES AND THEIR COUNSEL OF RECORD:**

PLEASE TAKE NOTICE as soon as it may be heard before the Honorable Maxine M. Chesney in Courtroom 7 of the United States District Court for the Northern District of California, 450 Golden Gate Avenue, San Francisco, CA 94102, that Plaintiffs Yuri Alexander Roque Campos and Fernando Viera Reyes (collectively, “Plaintiffs”) hereby move this Court pursuant to Federal Rule of Civil Procedure 65(b) and Civil Local Rule 65-1 for a temporary restraining order against Defendants: the United States Immigration and Customs Enforcement (“ICE”); Todd M. Lyons in his official capacity as Acting Director of ICE; Sergio Albarran in his official capacity as Acting Director of the San Francisco Field Office, Enforcement and Removal Operations, of ICE; the United States Department of Homeland Security; and Kristi Noem in her official capacity as Secretary of the Department of Homeland Security; and their officers, agents, servants, employees, and attorneys, and any other persons who are in active concert or participation with them.

Plaintiffs respectfully move the Court to enter a temporary restraining order to remedy ongoing violations of Plaintiffs’ Fifth Amendment right to adequate medical care. A [Proposed] Temporary Restraining Order and Order to Show Cause is attached to this Motion.

This motion is based on this Notice of Motion and Motion; the accompanying Memorandum of Points and Authorities; the accompanying supporting Declarations of Cody S. Harris, Todd Randall Wilcox, Fernando Viera Reyes, Yuri Alexander Roque Campos, and Patrick Booth and exhibits thereto; the [Proposed] Temporary Restraining Order and order to Show Cause; the papers, evidence, and records on file in this action; and any other written or oral evidence or argument as may be presented at or before the time this motion is heard by the Court.

1 Dated: December 16, 2025

2 Respectfully submitted,

3 /s/ Cody S. Harris

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5 STEVEN P. RAGLAND
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/s/ Margot Mendelson

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MEMORANDUM OF POINTS AND AUTHORITIES

I. INTRODUCTION¹

The stakes for this motion, and the need for a temporary restraining order, could not be higher. Plaintiffs Yuri Alexander Roque Campos and Fernando Viera Reyes are experiencing acute medical distress and need immediate specialized medical attention. Their risk of severe illness—and in Mr. Roque Campos’s case, imminent death—is real and rising by the day. Plaintiffs’ counsel presented the urgent facts regarding Messrs. Roque Campos and Viera Reyes in the Motion for Preliminary Injunction they filed on December 1, 2025. *See* Dkt. No. 22. Undersigned counsel has pleaded for help for these two men from their very first call with Defendants’ counsel on December 2, 2025. They tried again on December 15, alerting Defendants that these Plaintiffs’ conditions had deteriorated and that the life-or-death consequences of Defendants’ delays required Plaintiffs to seek immediate intervention from this Court. Despite all of this, Defendants have done *nothing*—apparently content to see these two men suffer and die on their watch. We plead the Court for help.

As Plaintiffs explained in their preliminary injunction motion, many putative class members detained at California City Detention Facility (“California City”) need urgent medical care that medical staff at the facility are unable or unwilling to provide. Two of those individuals are Messrs. Roque Campos and Viera Reyes, both of whom are suffering from severe, life-threatening diseases that require immediate medical intervention. Based on a review of medical records and sworn declarations, Plaintiffs’ expert, Dr. Todd Wilcox, concluded that Mr. Roque Campos has a serious heart condition and is at “significant risk for sudden cardiac death.” Dkt. No. 22-03, Decl. of Dr. Todd Wilcox (“Wilcox Decl.”) ¶ 89.² Mr. Viera Reyes has been exhibiting clear symptoms of advancing prostate cancer and “needs aggressive treatment quickly to minimize his risk of having widespread disease and a much higher mortality rate.” *Id.* ¶ 116.

¹ In all quotations, all internal quotation marks, citations, and alterations have been removed, and all emphases added, unless otherwise noted.

² Dr. Wilcox has submitted a supplemental declaration, filed concurrently with this motion, that focuses on Messrs. Roque Campos’s and Viera Reyes’s medical conditions and required treatment plans. *See* Suppl. Decl. of Dr. Todd Wilcox (“Suppl. Wilcox Decl.”) ¶¶ 11–42.

1 Because Messrs. Roque Campos and Viera Reyes cannot wait for briefing to be complete on
 2 Plaintiffs' preliminary injunction motion—and because the classwide relief requested through
 3 that motion is not specific to these two men's particular, urgent medical needs in any event—
 4 these two Named Plaintiffs respectfully seek the emergency relief set forth herein.

5 As set forth below and in the accompanying supplemental declarations, both men's
 6 medical conditions have only deteriorated since Plaintiffs filed their preliminary injunction
 7 motion, and neither man has seen a specialist or begun an appropriate course of treatment. Mr.
 8 Roque Campos's diagnosed heart condition requires prompt and consistent treatment from a
 9 cardiologist, but he has yet to see one. He must therefore live every day in fear that it may be his
 10 last, even though his condition could be managed with appropriate care. Mr. Viera Reyes likely
 11 has prostate cancer. He previously reported blood in his urine and stool and is now experiencing
 12 such intense pain that he cannot sit for extended periods of time. Yet he still has not seen a
 13 urologist or received the prostate biopsy that was previously recommended on an urgent basis.
 14 And recent medical tests reveal a likely malignancy that is already spreading.

15 Defendants have both a legal and moral obligation to provide adequate medical care for
 16 the individuals under their custody and control. By failing to provide timely emergency medical
 17 care to individuals with acute, documented, and urgent medical needs—a heart condition that
 18 could prove fatal on the one hand, and a cancer that is likely metastasizing on the other—
 19 Defendants are violating the Fifth Amendment. Both men are suffering, and will continue to
 20 suffer, irreparable harm absent relief. Accordingly, Plaintiffs respectfully ask the Court to order
 21 Defendants to immediately ensure that Mr. Roque Campos sees a cardiologist and Mr. Viera
 22 Reyes sees a urologist, and that both men receive appropriate medical treatment and follow-up.

23 **II. FACTS**

24 Messrs. Roque Campos and Viera Reyes are currently detained at California City. Dkt.
 25 No. 22-06, Decl. of Yuri Alexander Roque Campos ("Roque Campos Decl.") ¶ 1; Dkt. No. 22-24,
 26 Decl. of Fernando Viera Reyes ("Viera Reyes Decl.") ¶ 1. Defendants have contracted the
 27 operation of that facility to a private contractor but remain responsible for its compliance with the
 28 law and the humane treatment of those held there. *See West v. Atkins*, 487 U.S. 42, 56 (1988)

1 (“Contracting out prison medical care does not relieve the State of its constitutional duty to
 2 provide adequate medical treatment to those in its custody, and it does not deprive the State’s
 3 prisoners of the means to vindicate their Eighth Amendment rights.”). Messrs. Roque Campos
 4 and Viera Reyes each arrived at California City with serious preexisting medical conditions. The
 5 catastrophic health care gaps outlined in Plaintiffs’ Motion for Preliminary Injunction exacerbated
 6 the men’s conditions. *See generally* Pls.’ Mot. For Prelim. Inj. at 5–8. Both men’s health
 7 conditions have significantly deteriorated since Plaintiffs filed that Motion. *See* Suppl. Decl. of
 8 Yuri Alexander Roque Campos (“Suppl. Roque Campos Decl.”) ¶ 6; Suppl. Decl. of Fernando
 9 Viera Reyes (“Suppl. Viera Reyes Decl.”) ¶¶ 6–8. Dr. Wilcox, the medical director of a large
 10 county jail with 31 years of experience in correctional medicine, is no stranger to the realities of
 11 providing medical care behind bars. *See* Suppl. Wilcox Decl. ¶ 4. He opines that these two men
 12 “are receiving grossly inadequate medical care at California City Detention Facility.” *Id.* ¶ 11.
 13 Having reviewed their declarations and medical records, Dr. Wilcox has concluded that “it is
 14 critical that each of these patients be urgently seen by a specialist, that that specialist develop a
 15 comprehensive treatment plan, and that California City Detention Facility follow that treatment
 16 plan, which may include subsequent specialist visits, to avoid the risk of immediate death or other
 17 irreversible medical harm.” *Id.* ¶ 12.

18 **A. Mr. Roque Campos is at risk of sudden cardiac death and needs urgent and**
 19 **specialized medical attention.**

20 Mr. Roque Campos has been “diagnosed with pulmonary hypertension and congestive
 21 heart failure, conditions that are life-threatening and need close monitoring and appropriate
 22 management.” Wilcox Decl. ¶ 48; *see also* Suppl. Wilcox Decl. ¶ 13 (describing Mr. Roque
 23 Campos’s condition as “pulmonary hypertension, congestive heart failure, right atrial
 24 enlargement, and a right bundle branch block”). When Mr. Roque Campos arrived at California
 25 City on September 5, 2025, he was immediately sent to the emergency room. Suppl. Wilcox Decl.
 26 ¶ 14. In an “unusual” move, the ER doctor who saw Mr. Roque Campos sent him back to
 27 California City with a lengthy note, which stated that it was “imperative that Mr. Campos follow
 28 up within 72 hours with a specialist in right heart failure or pulmonary hypertension.” *Id.* ¶ 14 &

1 App'x D. The ER doctor believed it was safe to send Mr. Roque Campos back to California City,
 2 but only "provided that he receives daily check-ins with health officials and that arrangements are
 3 made for close follow-up with appropriate cardiology and/or pulmonology specialists." *Id.*

4 The next day, Mr. Roque Campos was again sent to the Emergency Room for evaluation
 5 for chest pain. *Id.* ¶ 18. Upon his return he was placed under "medical observation," but did not
 6 see a doctor at California City until September 9, 2025. *Id.* Defendants failed to follow the ER
 7 doctor's recommendation that Mr. Roque Campos see a cardiac specialist within 72 hours. *Id.* ¶
 8 17. Indeed, a review of Mr. Roque Campos's medical records reveal that he has *never* seen a
 9 cardiologist since arriving at California City. *Id.*

10 This lack of critical care poses a dire risk to Mr. Roque Campos. His "complicated heart
 11 condition . . . makes him a medically very high risk patient." Wilcox Decl. ¶ 62. According to his
 12 medical records, Mr. Roque Campos had an EKG completed on September 24, 2025 that showed
 13 "concerning abnormalities." *Id.* ¶ 93. One doctor who saw Mr. Roque Campos in October 2025
 14 determined that he "has a right bundle branch block and right atrial enlargement and referred him
 15 to a cardiologist on a routine basis." *Id.* ¶ 88. By then, roughly six weeks had passed since he had
 16 arrived at California City, and he "should already have been seen" by a specialist. *Id.*

17 Since Mr. Roque Campos's initial declaration, he still has not seen a cardiologist, despite
 18 multiple sick call requests. Suppl. Roque Campos Decl. ¶¶ 6, 8; Suppl. Wilcox Decl. ¶ 17. A
 19 subsequent December EKG again showed he had heart irregularities, but the nurse said she could
 20 not send him to a specialist. Suppl. Roque Campos Decl. ¶ 9. His symptoms have since worsened.
 21 He experiences frequent chest pain and pain around his lungs. *Id.* ¶ 6. This pain is exacerbated by
 22 stress and so severe it prevents him from walking for more than twenty minutes. *Id.* ¶¶ 6-7.

23 Mr. Roque Campos's condition requires "extremely complicated medicine involving
 24 multiple medications, some of which can only be obtained through a cardiology office because of
 25 their unique attributes and limited availability." Wilcox Decl. ¶ 89. Failure to "do the appropriate
 26 workup" and prescribe the correct medication regimen—"a regimen that far exceeds the simple
 27 baby aspirin that the facility has agreed to"—places Mr. Roque Campos "*at significant risk for*
 28 *sudden cardiac death.*" *Id.* Moreover, medical staff at California City have failed to even

consistently provide Mr. Roque Campos with a “simple” blood thinning medication that he needs to help manage his heart condition. Suppl. Wilcox Decl. ¶ 24. Since his detention, Mr. Roque Campos has experienced multiple lapses of weeks and even an entire month in receiving his medication. *Id.* Missing a single dose significantly increases his risk of a heart attack, stroke, or death; due to these inexplicable lapses, he has missed several dosages. *Id.*

Defendants know that Mr. Roque Campos is at serious risk of a major cardiac event or death. Records show a “due date” of January 16, 2026, for a cardiology referral, “pending financial authorization.” *Id.* ¶ 20. Nothing else in the records shows that any appointment has been scheduled with a cardiac specialist or that the “financial authorization” has been approved. *Id.* In any event, Mr. Roque Campos “must be seen immediately.” *Id.* Without immediate assessment and care by a cardiologist, Mr. Roque Campos faces a heightened and unnecessary risk of sudden death. *Id.* ¶ 25.

B. Mr. Viera Reyes likely has prostate cancer and needs urgent and specialized medical treatment.

Before Defendants transferred Mr. Viera Reyes to California City, he was detained at Golden State Annex Detention Facility. Viera Reyes Decl. ¶ 6. While at Golden State Annex, he began experiencing difficulty and pain while urinating. *Id.* ¶ 10. His subsequent blood work showed elevated prostate-specific antigen (“PSA”) levels. As Dr. Wilcox explains, “PSA is a blood test which measures prostate-specific antigen and could be indicative of various conditions, including prostate cancer.” Wilcox Decl. ¶ 115. When Mr. Viera Reyes’ PSA levels continued to rise, Golden State Annex referred him to a urologist to undergo various tests to determine whether he had prostate cancer. Viera Reyes Decl. ¶¶ 6–7. Based on that testing, Mr. Viera Reyes’ urologist ordered a prostate biopsy to be done “right away.” Suppl. Viera Reyes Decl. ¶ 5.d. But Defendants transferred Mr. Viera Reyes to California City before the prostate biopsy could be conducted. *Id.*³

Mr. Viera Reyes arrived at California City in August 2025. *Id.* ¶ 2. To date, Defendants

³ Mr. Viera Reyes’s medical records reveal that he had been scheduled for a rapid biopsy on March 19, 2025, but that biopsy appears to have never taken place. *See* Suppl. Wilcox Decl. ¶ 28.

1 have still not completed his urgently needed prostate biopsy. *Id.* ¶ 4. Indeed, as Dr. Wilcox notes,
 2 “in the three and a half months that Mr. Viera Reyes has been housed at the facility, medical staff
 3 have not taken the necessary steps to diagnose his condition in order to timely treat him, leaving
 4 him at risk of progressive, metastatic cancer.” Suppl. Wilcox Decl. ¶ 28. The situation is dire.
 5 According to Dr. Wilcox: “The rate by which [Mr. Viera Reyes’s] PSA is increasing, in
 6 combination with the actual PSA level, points to a high likelihood that he has cancer.” *Id.* ¶ 29.
 7 Dr. Wilcox notes that Mr. Viera Reyes’s PSA levels increased “from 6.3 in January 2025 at his
 8 prior facility to 74 on October 1, 2025, a month after his arrival to California City, at a rate vastly
 9 above the cutoff for concern.” *Id.* Once a patient’s PSA levels pass 10, “their risk for cancer
 10 increases dramatically so the standard medical practice is to bypass other workups once the level
 11 exceeds 10 and go straight to a prostate biopsy by a urologist for diagnosis.” *Id.* ¶ 30.

12 Mr. Viera Reyes’s symptoms are worsening at an alarming rate. He is suffering from
 13 urinary bleeding, nocturia, and extreme pain. Viera Reyes Decl. ¶ 16. In more recent days, Mr.
 14 Viera Reyes also suffers from a “constant, pulsing pain,” requiring him to spend most of his time
 15 sitting or lying down. Suppl. Viera Reyes Decl. ¶ 6. He feels himself “getting weaker every day”:
 16 he has a hard time catching his breath and continues losing weight. *Id.* ¶¶ 6–8. His urinary
 17 bleeding continues to get worse, and he is now bleeding into his catheter bag. *Id.* ¶¶ 9–13.

18 During an emergency room visit on November 27, 2025, an MRI showed a lesion on his
 19 spine that the doctor said “could be cancer.” *Id.* ¶ 10. Specifically, the MRI showed “prostate
 20 malignancy with sclerosis of the nearby Thoracic 12th vertebra, which is suspicious for metastatic
 21 prostate cancer.” Suppl. Wilcox Decl. ¶ 28. Dr. Wilcox’s review confirms that likely prognosis.
 22 See *id.* ¶ 34 (“Recent hospital records from November 27 through November 28, 2025 raise
 23 concerns about a lesion on his spine that may indicate cancer has already metastasized.”). The ER
 24 physician’s notes likewise show concern “for possible new onset malignancy.” *Id.*

25 Medical staff at California City has failed to treat this situation with the urgency it
 26 requires. Mr. Viera Reyes cannot wait any longer for his first meeting with a urologist and the
 27 simple biopsy that was ordered months ago. As Dr. Wilcox explains: “this type of delay is
 28 unacceptable and, if his condition is in fact cancer, ***increases the risk of metastatic cancer.***”

1 Wilcox Decl. ¶ 116. If Mr. Viera Reyes does have cancer, “he needs *aggressive treatment*
 2 *quickly to minimize his risk of having widespread disease and a much higher mortality rate.*”
 3 Suppl. Wilcox Decl. ¶ 34. In short, “[e]very day that [Mr. Viera Reyes] fails to receive a biopsy
 4 despite his rapidly increasing PSA level increases,” his “risk for metastatic disease increases.” *Id.*
 5 ¶ 36. The risks of delay are significant and measurable. When timely diagnosed and treated,
 6 prostate cancer is survivable. *Id.* ¶ 35. But when it remains untreated, the 5-year survival rate
 7 plummets from 99 percent to 30 percent, the cancer spreads to other locations in the body, and
 8 treatment options become much more invasive. *Id.*

9 III. LEGAL STANDARD

10 The standard for issuing a temporary restraining order is “substantially identical” to that
 11 governing the issuance of a preliminary injunction. *Washington v. Trump*, 847 F.3d 1151, 1159
 12 n.3 (9th Cir. 2017). Thus, Plaintiffs are entitled to a temporary restraining order if they show that
 13 (1) they are “likely to succeed on the merits”; (2) they are “likely to suffer irreparable harm in the
 14 absence of preliminary relief”; (3) the “balance of equities tips in [their] favor”; and (4) “an
 15 injunction is in the public interest.” *Winter v. Nat. Res. Def. Council, Inc.*, 555 U.S. 7, 20 (2008).
 16 Under the Ninth Circuit’s sliding-scale approach, Plaintiffs are also entitled to a temporary
 17 restraining order if they have raised “serious questions going to the merits,” the “balance of
 18 hardships tips sharply in [their] favor,” and the other two *Winter* factors are satisfied. *All. for the*
 19 *Wild Rockies v. Cottrell*, 632 F.3d 1127, 1131, 1135 (9th Cir. 2011).

20 IV. ARGUMENT

21 A. Plaintiffs are likely to succeed on the merits of their Fifth Amendment claim.

22 To establish a likelihood of success on the merits, Plaintiffs “must demonstrate a fair
 23 chance of success on the merits, or questions serious enough to require litigation.” *Pimentel v.*
 24 *Dreyfus*, 670 F.3d 1096, 1106 (9th Cir. 2012). Because both Plaintiffs are civil detainees, their
 25 claims arise under the Fifth Amendment. *See Roman v. Wolf*, 977 F.3d 935, 943 (9th Cir. 2020)
 26 (“The Fifth Amendment requires the government to provide conditions of reasonable health and
 27 safety to people in its custody.”). Plaintiffs are likely to establish that Defendants’ failure to
 28 provide them with timely medical care for their serious, life-threatening medical conditions (i.e.,

1 cardiac care for Mr. Roque Campos and a biopsy and cancer treatment for Mr. Viera Reyes)
 2 violate their Fifth Amendment rights because that failure poses an unreasonable risk to their
 3 health and safety, and Defendants have failed to take reasonable measures to abate that risk.

4 As explained in Plaintiffs’ Motion for Preliminary Injunction, “[t]here is no question that
 5 [ICE] detainees are entitled to adequate medical care.” *Doe v. Kelly*, 878 F.3d 710, 722 (9th Cir.
 6 2017); *see also DeShaney v. Winnebago Cnty. Dep’t of Soc. Servs.*, 489 U.S. 189, 199–200
 7 (1989) (holding that when the government “takes a person into its custody” it must provide for
 8 “his safety and general well-being,” including by providing reasonable “medical care”). To
 9 evaluate a civil detainee’s Fifth Amendment claim, the Ninth Circuit applies an “objective
 10 deliberate indifference standard.” *Gordon v. Cnty. of Orange*, 888 F.3d 1118, 1125 (9th Cir.
 11 2018). Detained individuals’ constitutional protections extend to “future harm,” including a
 12 “condition of confinement that is sure or very likely to cause serious illness and needless
 13 suffering in the next week, month, or year.” *Helling v. McKinney*, 509 U.S. 25, 33 (1993).

14 The Fifth Amendment standard, which applies to Plaintiffs’ claims, is less stringent than
 15 the Eighth Amendment test, which in addition to the objective inquiry also requires the prison
 16 official to “*subjectively* have a sufficiently culpable state of mind.” *Gordon*, 888 F.3d at 1125 n.4
 17 (emphasis in original). Consequently, deprivations of medical care that violate the rights of
 18 people in prison *a fortiori* violate the rights of people in civil detention. *See Castro v. Cnty. of*
 19 *L.A.*, 833 F.3d 1060, 1067 (9th Cir. 2016).

20 Under the Fifth Amendment’s objective test, Plaintiffs must show that:

21 (1) [the government] made an intentional decision with respect to the conditions under
 22 which the plaintiff was confined; (2) those conditions put the plaintiff at substantial risk of
 23 suffering serious harm; (3) the [government] did not take reasonable available measures to
 24 abate that risk, even though a reasonable officer in the circumstances would have
 25 appreciated the high degree of risk involved—making the consequences of the
 26 [government’s] conduct obvious; and (4) by not taking such measures, the [government]
 27 caused the plaintiff’s injuries.

28 *Castro*, 833 F.3d at 1071; *see also Roman*, 977 F.3d at 943. Plaintiffs satisfy every element.

First, Defendants have intentionally chosen not to allow these two men to see medical
 specialists and receive care, despite knowing that each man is facing a potentially life-threatening

1 medical condition. A failure to act with respect to a known condition “may constitute an
 2 intentional decision.” *Guel v. Cnty. of San Bernardino*, 2024 WL 5185331, at *3 (C.D. Cal. Oct.
 3 23, 2024); *see also Castro*, 833 F.3d at 1071 n.4 (first element could be met “where a defendant
 4 actually knew of a substantial risk of serious harm and consciously took no action”). The
 5 evidence shows that Defendants have known for months that Messrs. Roque Campos and Viera
 6 Reyes need, but are not receiving, adequate care for their serious conditions. Defendants know
 7 that Mr. Roque Campos’s life-threatening heart condition requires a cardiologist, as they received
 8 a recommendation from his emergency room doctor to send him to a cardiologist within 72 hours.
 9 Wilcox Decl. ¶ 62. Yet they intentionally failed to act on that recommendation. *Id.*

10 Meanwhile, Defendants were on notice that Mr. Viera Reyes had received a
 11 recommendation by a urologist in March 2025 that a prostate biopsy be completed on an urgent
 12 basis. Suppl. Wilcox Decl. ¶ 31. In the weeks since, Defendants have known about his worsening
 13 condition from his numerous sick-call slips reporting bloody urine and stool. *Id.* ¶¶ 11, 15–16;
 14 Suppl. Viera Reyes Decl. ¶¶ 9, 20 (submitted at least ten sick-call slips since early November
 15 2025). And Defendants were certainly put on notice when Plaintiffs filed their preliminary
 16 injunction notice on December 1, 2025, highlighting these specific and urgent medical needs. But
 17 Defendants have ignored or otherwise not meaningfully respond to this medical emergency.
 18 Instead, Defendants have repeatedly made the intentional decision to not provide either man with
 19 the necessary and urgently needed specialists. *See, e.g., Ward v. Cnty. of San Diego*, 2025 WL
 20 319250, at *8 (S.D. Cal. Jan. 28, 2025) (failure to screen for and treat medical and mental health
 21 care needs on arrival to jail constitute intentional decisions); *Tater v. City of Huntington Beach*,
 22 2023 WL 4291656, at *13 (C.D. Cal. May 8, 2023) (similar).

23 **Second**, Defendants’ failure to provide the required specialists have put both men at
 24 “substantial risk of serious harm.” *Gordon*, 888 F.3d at 1125. After reviewing developments since
 25 November 2025, Dr. Wilcox has expressly opined that “[w]ithout immediate medical
 26 intervention, either or both of these patients could suffer serious adverse health effects any day.”
 27 Suppl. Wilcox Decl. ¶ 11. Immediate specialist intervention is necessary “to avoid the risk of
 28 immediate death or other irreversible medical harm” to both of these men. *Id.* ¶ 12.

1 **Third**, Defendants’ failure to provide access to necessary care is “objectively
 2 unreasonable” based “on the facts and circumstances” present here. *Gordon*, 888 F.3d at 1125 &
 3 n.4. Indeed, a “reasonable official in the[se] circumstances would have appreciated the high
 4 degree of risk involved—making the consequences of the defendant’s conduct obvious.” *Id.* at
 5 1125. A decision to ignore “medical needs, even for less than 24 hours, despite repeated warnings
 6 of the severity of [the person’s] injury,” is sufficient to show objective unreasonableness. *Guel*,
 7 2024 WL 5185331, at *4. Here, Defendants have ignored the men’s urgent medical needs for
 8 much longer than 24 hours: both men alerted Defendants to their serious conditions in late August
 9 or early September. Roque Campos Decl. ¶¶ 3, 17–19; Viera Reyes Decl. ¶¶ 2, 11. Mr. Roque
 10 Campos arrived at California City and was immediately sent to the emergency room. Roque
 11 Campos Decl. ¶¶ 16–17. He exhibited chest pains and had to be hospitalized again. *Id.* ¶ 19. He
 12 has repeatedly told staff members that he is in dire need of medical care and is now living in daily
 13 fear for his life. *Id.* ¶¶ 16, 25–26, 33. Mr. Viera Reyes has been experiencing blood in his urine
 14 and stool, is in terrible pain, and has been waiting for a routine biopsy for months. Viera Reyes
 15 Decl. ¶¶ 10–11, 14, 16–17. Defendants’ decision to ignore these cries for help in the face of life-
 16 threatening conditions—whether from incompetence, indifference, intentional cruelty, or some
 17 mixture of these—is objectively unreasonable. *See Ward*, 2025 WL 319250, at *9 (failure to
 18 order mental health medications and to take any action despite obvious signs of deterioration was
 19 objectively unreasonable); *Fromer v. Cnty. of Riverside*, 2025 WL 819719, at *4 (C.D. Cal. Feb.
 20 4, 2025) (year-long delay in care despite multiple grievances was objectively unreasonable). It
 21 hardly takes a medical expert to know that a serious heart condition that has already led to two
 22 hospitalizations needs specialized treatment from a cardiologist, or that a pre-diagnosis for
 23 prostate cancer requires a visit to a urologist. Any reasonable person facing these symptoms and
 24 diagnoses would seek out such care immediately. But in any event, Dr. Wilcox’s supplemental
 25 declaration makes the point clearly from a medical professional’s perspective. *See Supp. Wilcox*
 26 Decl. ¶¶ 13–27 (Roque Campos); *see id.* ¶¶ 28–42 (Viera Reyes).

27 **Fourth**, Plaintiffs have provided evidence showing “a sufficiently imminent danger”; they
 28 “need not await a tragic event.” *Roman*, 977 F.3d at 943; *Guel*, 2024 WL 5185331, at *5. Here,

1 based on a thorough and detailed analysis of developments since November 2025, Dr. Wilcox
2 concluded that Messrs. Roque Campos and Viera Reyes “have very serious medical conditions
3 that put them at significant risk of death and/or permanent harm,” and “[i]t is imperative that they
4 receive immediate medical interventions to prevent irreversible medical harm, or even risk of
5 death.” Suppl. Wilcox Decl. ¶ 11. The immediate risk of harm is clear and present.

6 Plaintiffs have not only proven a likelihood of prevailing under the Fifth Amendment, but
7 they would even satisfy the Eighth Amendment’s higher standard. Indeed, when a prison ignores
8 urgent medical needs, such as cancer, and fails to provide access to necessary specialized medical
9 care, a court may order the facility to take immediate steps to rectify the situation. *See Casey v.*
10 *Lewis*, 834 F. Supp. 1477, 1544 (D. Ariz. 1993) (holding that when prison staff cannot meet
11 certain medical needs, they must “refer prisoners to others who can” in “reasonably speedy”
12 fashion). For example, in *Beck v. Hurwitz*, a woman in BOP custody experienced repeated delays
13 in oncological care for breast cancer, including an 8-month delay in receiving a biopsy to confirm
14 cancer, a 3-month delay in seeing a medical oncologist, and a failure to schedule follow-up
15 appointments. 380 F. Supp. 3d 479, 482 (M.D.N.C. 2019). The court granted emergency relief,
16 holding that that the failure to timely treat cancer violated the Eighth Amendment; that the
17 balance of equities favored the plaintiff because there was no medical justification for delaying
18 care or any harm that the BOP would suffer by providing care; and that a temporary restraining
19 order would serve the public interest because it would further the goals of upholding incarcerated
20 people’s right to receive adequate, essential medical care in prison. *Id.* at 484–85. The court gave
21 the BOP 24 hours to schedule the first available oncology appointment for the plaintiff and
22 ordered that her appointments must occur as quickly as possible. *Id.* at 485.

23 The same sort of relief is needed here. Both Mr. Roque Campos and Mr. Viera Reyes have
24 severe, life-threatening medical conditions that require urgent care, treatment, and follow-up.
25 California City officials have long known about both men’s conditions and have failed to provide
26 timely and adequate medical care. Such systemic failures violate the Eighth Amendment. *See,*
27 *e.g., Madrid v. Gomez*, 889 F. Supp. 1146, 1205, 1256–57 (N.D. Cal. 1995); *Jensen v. Shinn*, 609
28 F. Supp. 3d 789, 864 (D. Ariz. 2022). Because Plaintiffs are subject only to civil detention,

1 Plaintiffs undoubtedly meet the Fifth Amendment’s less stringent standard. *See Castro*, 833 F.3d
 2 at 1067. Messrs. Roque Campos and Viera Reyes are likely to succeed on the merits of this claim.

3 **B. Without seeing medical specialists and receiving appropriate treatment,**
 4 **Plaintiffs are likely to suffer irreparable harm.**

5 Because Plaintiffs’ injuries flow from the deprivation of constitutional rights, the Court
 6 may presume irreparable harm. *See Hernandez v. Sessions*, 872 F.3d 976, 994 (9th Cir. 2017) (“It
 7 is well established that the deprivation of constitutional rights unquestionably constitutes
 8 irreparable injury.”); *Rodriguez v. Kaiser*, 2025 WL 2855193, at *7 (E.D. Cal. Oct. 8, 2025)
 9 (citing *Warsoldier v. Woodford*, 418 F.3d 989, 1001–02 (9th Cir. 2005)) (“When an alleged
 10 deprivation of a constitutional right is involved, most courts hold that no further showing of
 11 irreparable injury is necessary.”).

12 But even without this presumption, Plaintiffs have demonstrated irreparable harm
 13 sufficient to warrant emergency relief. Pain and suffering qualify as irreparable harm. *See Atwood*
 14 *v. Days*, 2021 WL 5811800, at *7–8 (D. Ariz. Dec. 7, 2021). And lack of care for even minimal
 15 periods of time, let alone the months Plaintiffs have gone without seeing specialists,
 16 “unquestionably constitutes irreparable injury.” *Pablo Sequen v. Albarran*, 2025 WL 3283283, at
 17 *27 (N.D. Cal. Nov. 25, 2025); *see also Hernandez*, 872 F.3d at 995 (finding “subpar medical and
 18 psychiatric care in ICE detention facilities” to constitute “irreparable harms imposed on anyone
 19 subject to immigration detention”). Here, both men are at imminent risk of serious illness or death
 20 due to Defendants’ failure to provide them with reasonable and adequate medical care.

21 Mr. Roque Campos has “complicated heart conditions [that] make him a medically very
 22 high risk and an extraordinarily fragile patient.” Suppl. Wilcox Decl. ¶ 13. If he does not see a
 23 cardiologist who can appropriately manage his condition, get him on the right medicine regimen,
 24 and provide proper follow-up, he will remain “at very high risk of sudden cardiac arrest and
 25 death.” *Id.* The known standard of care for Mr. Roque Campos’s heart condition is to perform a
 26 “trans-esophageal echocardiogram, which provides objective measurements of heart chamber
 27 size, wall thickness, blood flow velocities, [and] abnormal blood flow patterns,” among other
 28 things. *Id.* ¶ 21. Medical records show that this critical test has never been performed. *Id.* Without

1 the test, there is no way to develop an appropriate treatment plan. *Id.* In fact, a patient suffering
 2 from Mr. Roque Campos’s condition requires “day-to-day management” that is “overseen by a
 3 cardiologist on a regular basis.” *Id.* ¶ 22. None of this is happening.

4 The risks to Mr. Roque Campos are in no way hypothetical. According to Dr. Wilcox,
 5 “[f]urther delay in access to a full assessment by a cardiologist and compliance with a treatment
 6 plan directed by a cardiologist places Mr. Roque Campos at heightened and unnecessary risk of
 7 sudden death.” *Id.* ¶ 25. Without proper treatment, his risk of sudden cardiac death could be as
 8 high as one in ten, if his ejection fraction (i.e., the amount of blood pumped out with each
 9 heartbeat) is less than 35 percent—a figure that can only be discovered if Mr. Roque Campos sees
 10 a cardiologist. *Id.* But even if Mr. Roque Campos does not suffer a sudden cardiac event, his “risk
 11 of ongoing and increasing cardiac damage from untreated pulmonary hypertension and right heart
 12 failure is guaranteed.” *Id.* ¶ 26. Mr. Roque Campos is suffering ongoing harm to his heart muscle,
 13 lungs, and vascular system every day he goes without proper medical care. *Id.* He is experiencing
 14 near-daily chest pains and an inconsistent heartrate. Suppl. Roque Campos Decl. ¶ 6. He believes
 15 his symptoms are worsening and feels “pulsing pain” around his lungs. *Id.* He cannot run or
 16 exercise. *Id.* ¶ 7. He has a real and immediate fear of “dying in this detention center.” *Id.* ¶ 12.

17 Mr. Viera Reyes, too, is likely to suffer irreparable harm absent relief from this Court. He
 18 very likely has prostate cancer, and cancer spreads if left untreated. Mr. Viera Reyes has not been
 19 seen by a urologist or received a biopsy for a cancer diagnosis since his arrival at California City,
 20 despite being advised to do so “right away.” Suppl. Viera Reyes Decl. ¶¶ 4–5. In light of Mr.
 21 Viera Reyes’s elevated (and quickly rising) PSA count, it is “essential” that he “receive[] that
 22 prostate biopsy in order to understand the nature of his condition and determine a plan of care.”
 23 Suppl. Wilcox Decl. ¶ 30. Mr. Viera Reyes “has reported progressively worsening symptoms,
 24 including urinary bleeding, urinary retention, nocturia, and extreme pain.” *Id.* ¶ 31.

25 If Mr. Viera Reyes does in fact have prostate cancer, his condition may be treatable if it is
 26 timely detected and treated. Suppl. Wilcox Decl. ¶ 35. But the delay in medical attention Mr.
 27 Viera Reyes has already experienced and continues to experience may lead to irreversible—and
 28 entirely avoidable—medical harm. *Id.* ¶¶ 30, 33, 35, 42. As Dr. Wilcox puts it, Defendants’ delay

places Mr. Viera Reyes “at substantial risk of needless suffering or death.” *Id.* ¶ 42. All available signs point to Mr. Viera Reyes having prostate cancer, which “could have been identified and treated with appropriate intervention, resulting in a potential complete recovery.” *Id.* Instead, due to Defendants’ “failure even to diagnose his condition,” it is likely that Mr. Viera Reyes’s cancer “has metastasized and [] is no longer easily or successfully treatable,” subjecting him “to a risk of death that was entirely avoidable.” *Id.*

In the meantime, Mr. Viera Reyes’ condition continues to deteriorate. He now reports “constant, pulsing pain” and fatigue that leaves him barely able to move. Suppl. Viera Reyes Decl. ¶¶ 6–8.

Based on his review of the Plaintiffs’ sworn declarations and medical records, Dr. Wilcox concludes: “Without immediate medical intervention, either or both of these patients could suffer serious adverse health effects any day. It is imperative that they receive immediate medical interventions to prevent irreversible medical harm, or even risk of death.” Suppl. Wilcox Decl. ¶ 11. Numerous courts have recognized irreparable harm under similarly urgent circumstances. *See, e.g., Pablo Sequen*, 2025 WL 3283283, at *27 (finding irreparable harm where immigration detainees’ access to medical attention was denied or delayed); *F.R.P. v. Wamsley*, 2025 WL 3037858, at *7 (D. Or. Oct. 30, 2025) (finding same for immigration detainee who suffered serious injuries during detention that warranted hospitalization); *Bent v. Barr*, 445 F. Supp. 3d 408, 419 (N.D. Cal. 2020) (finding same for immigration detainee at heightened risk of severe illness from underlying health conditions). This case is no different.

C. The balance of hardships and the public interest weigh heavily in favor of a temporary restraining order.

The final two *Winter* factors—the balance of hardships and the public interest—merge when the government is the opposing party. *Nken v. Holder*, 556 U.S. 418, 435 (2009). Here, the balance of hardships and public interest tip sharply in Plaintiffs’ favor. “Because public interest concerns are implicated when a constitutional right has been violated, all citizens have a stake in upholding the Constitution, meaning it is always in the public interest to prevent the violation of a party’s constitutional rights.” *Baird v. Bonta*, 81 F.4th 1036, 1042 (9th Cir. 2023). Defendants

“cannot reasonably assert that [they are] harmed in any legally cognizable sense by being enjoined from constitutional violations.” *Zepeda v. U.S. I.N.S.*, 753 F.2d 719, 727 (9th Cir. 1983).

Nor would any interest in detention administration be hindered by providing Plaintiffs the urgent medical care they need. *See Mercado v. Noem*, 2025 WL 2658779, at *36 (S.D.N.Y. Sept. 17, 2025) (“The Court’s preliminary injunction will not prevent defendants from pursuing the policies they have set. It merely will require that they conform to the demands of the Constitution in doing so.”); *see also Pablo Sequen*, 2025 WL 3283283, at *27–28 (concluding the final two *Winter* factors favor an injunction in part because the government did not explain why depriving detainees of medical care furthers its interest in enforcing the immigration laws).

For these reasons, “any additional administrative costs to the government are far outweighed by the considerable harm to Plaintiffs’ constitutional rights in the absence of” a temporary restraining order. *Hernandez*, 872 F.3d at 995–96.

V. CONCLUSION

There is no need for either of these two men to suffer or die in the California City Detention Facility. But if Defendants continue along their current derelict course, they will continue to court the risk of that eminently predictable tragedy. Mr. Roque Campos must receive cardiac care. Mr. Viera Reyes must receive his cancer diagnosis and develop a treatment plan. Plaintiffs respectfully request that this Court grant this motion and enter the [Proposed] Temporary Restraining Order, filed herewith.

Dated: December 16, 2025

Respectfully submitted,

/s/ Cody S. Harris

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