



U.S. Department of Justice
Office of Information Policy
Suite 11050
1425 New York Avenue, NW
Washington, DC 20530-0001

Telephone: (202) 514-3642

July 11, 2017

Ms. Sharon Rondeau
The Post & Email
Post Office Box 195
Stafford Springs, CT 06076
editor@thepostemail.com

Re: DAG/15-02736 (F)
VRB:LAD:SBT

Dear Ms. Rondeau:

This responds to your Freedom of Information Act (FOIA) request dated March 27, 2015, and received March 30, 2015, for 1) documents pertaining to Raphael Edward "Ted" Cruz's application for the position of Associate Deputy U.S. Attorney General, 2) records pertaining to opinions or determinations he made during his tenure in this position, and 3) records pertaining to his performance while in this position. This response is made on behalf of the Office of the Deputy Attorney General.

Please be advised that a search has been conducted of the electronic database of the Departmental Executive Secretariat, which is the official records repository for the Office of the Deputy Attorney General. In addition, a search was conducted by the Department's Justice Management Division of Mr. Cruz's personnel records. As a result of these searches, fourteen pages were located that contain records responsive to your request. I have determined that these fourteen pages are appropriate for release with excisions made pursuant to Exemption 6 of the FOIA, 5 U.S.C. § 552(b)(6), which pertains to information the release of which would constitute a clearly unwarranted invasion of the personal privacy of a third party.

For your information, we did not locate any opinions or determinations issued by Mr. Cruz, nor did we find any performance-related records, although we note that Mr. Cruz' tenure at the Department lasted less than six months. Furthermore, please be advised that performance-related records would typically be protected pursuant to Exemption 6, lacking authorization from the subject himself. Finally, regarding your request for Mr. Cruz's Standard Form 171, please be advised that this form became obsolete on July 1, 1994, well prior to Mr. Cruz's employment with the Department.

We apologize for the quality of certain pages; however, no better copies could be obtained.

For your information, Congress excluded three discrete categories of law enforcement and national security records from the requirements of the FOIA. *See* 5 U.S.C. § 552(c) (2015) (amended 2016). This response is limited to those records that are subject to the requirements

of the FOIA. This is a standard notification that is given to all our requesters and should not be taken as an indication that excluded records do, or do not, exist.

You may contact our FOIA Public Liaison at the telephone number listed above for any further assistance and to discuss any aspect of your request. Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, Room 2510, 8601 Adelphi Road, College Park, Maryland 20740-6001; e-mail at ogis@nara.gov; telephone at 202-741-5770; toll free at 1-877-684-6448; or facsimile at 202-741-5769.

If you are not satisfied with my response to this request, you may administratively appeal by writing to the Director, Office of Information Policy, United States Department of Justice, Suite 11050, 1425 New York Avenue, NW, Washington, DC 20530-0001, or you may submit an appeal through OIP's FOIAonline portal at <https://foiaonline.regulations.gov/foia/action/public/home>. Your appeal must be postmarked or electronically submitted within ninety days of the date of my response to your request. If you submit your appeal by mail, both the letter and the envelope should be clearly marked "Freedom of Information Act Appeal."

Sincerely,



for

Vanessa R. Brinkmann
Senior Counsel

Enclosures

NOTIFICATION OF PERSONNEL ACTION

| | | | | |
|--|--|---|------------------------------------|--------------------------------------|
| 1. Name (Last, First, Middle) CRUZ, RAFAEL E | | 2. Social Security Number (b) (6) | 3. Date of Birth (b) (6) | 4. Effective Date 01/22/01 |
| FIRST ACTION | | SECOND ACTION | | |
| 5-A. Code 170 | 5-B. Nature of Action EXC APPT | 5-A. Code | 5-B. Nature of Action | |
| 5-C. Code ZLM | 5-D. Legal Authority 28 USC Sect 515 | 5-C. Code | 5-D. Legal Authority | |
| 5-E. Code | 5-F. Legal Authority | 5-E. Code | 5-F. Legal Authority | |

| | | | | | | | | | | | |
|--|----------------------------|----------------------------------|----------------------------|-----------------------------------|----------------------------|---|-----------------------------|---------------------------------|----------------------------|---|----------------------------|
| 7. FROM: Position Title and Number | | | | | | 15. TO: Position Title and Number Counselor to the Attorney General 00110975 AG034Z | | | | | |
| 8. Pay Plan AD | 9. Occ Code 0905 | 10. Grade/Level 00 | 11. Step/Rate 00 | 12. Total Salary 418.20 | 13. Pay Basis PD | 16. Pay Plan AD | 17. Occ Code 0905 | 18. Grade/Level 00 | 19. Step/Rate 00 | 20. Total Salary/Award 418.20 | 21. Pay Basis PD |
| 12A. Basic Pay .00 | | 12B. Locality Adj. .00 | | 12C. Adj. Basic Pay .00 | | 12D. Other Pay .00 | | 20A. Basic Pay 418.20 | | 20B. Locality Adj. .00 | |
| 14. Name and Location of Position's Organization | | | | | | 22. Name and Location of Position's Organization OFFICE OF THE ATTORNEY GENERAL IMMED OFC OF THE ATTN Y GENERAL DJ HC0101000000000000 PP 01 2001 | | | | | |

| | | | | | | | | | | | |
|---|--|--|--|--|--|--------------------------|--|--|--|---|--|
| EMPLOYEE DATA | | | | 24. Tenure | | | | 25. Agency Use | | 26. Veterans Preference for RIF | |
| 23. Veterans Preference 1 1-None 2-5 Point 3-10 Point/Disability 4-10 Point/Compensable 5-10 Point/Other 6-10 Point/Compensable/30% | | | | 1 0-None 1-Permanent 2-Conditional 3-Indefinite | | | | <input type="checkbox"/> | | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | |
| 27. FEGLI (b) (6) (b) (6) | | | | 28. Annuitant Indicator (b) (6) (b) (6) | | | | 29. Pay Rate Determinant 0 | | | |
| 30. Retirement Plan (b) (6) | | | | 31. Service Comp Date (Leave) 01/22/01 | | | | 32. Work Schedule F FULL TIME | | 33. Part-Time Hours Per Biweekly Pay Period | |
| POSITION DATA | | | | 35. FLSA Category | | | | 38. Appropriation Code | | 37. Bargaining Unit Status | |
| 2 1-Competitive Service 2-Excepted Service 3-SES General 4-SES Career Reserved | | | | E E-Exempt N-Nonexempt | | | | 8888 | | 8888 | |
| 34. Position Occupied | | | | 36. Duty Station Code 11-0010-001 | | | | 38. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | | |
| 40. AGENCY DATA | | | | 41. SEX: M | | 42. CITZ: (b) (6) | | 43. VET STAT: X | | 44. ED LV: 15 YR: (b) (6) INST PRG: 220101 | |

45. Remarks
 CREDITABLE MILITARY SERVICE: 0000.
 PREVIOUS RETIREMENT COVERAGE: NONE.
 EMPLOYEE IS AUTOMATICALLY COVERED UNDER FERS.

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|--|--|--------------------------------------|--|--|--|
| 46. Employing Department or Agency U.S. DEPARTMENT OF JUSTICE/HC | | | 50. Signature/Authentication and Title of Approving Official PERSONNEL STAFF | | |
| 47. Agency Code DJ HC | 48. Personnel Office ID 1831 | 49. Approval Date 01/23/01 | | | |

NOTIFICATION OF PERSONNEL ACTION

| | | | |
|--|---|------------------------------------|--------------------------------------|
| 1. Name (Last, First, Middle) CRUZ, RAFAEL E | 2. Social Security Number (b) (6) | 3. Date of Birth (b) (6) | 4. Effective Date 01/22/01 |
|--|---|------------------------------------|--------------------------------------|

| | | | |
|-------------------------|--|-------------------------|---|
| FIRST ACTION | | SECOND ACTION | |
| 5-A. Code 002 | 5-B. Nature of Action CORRECTION | 6-A. Code 190 | 6-B. Nature of Action PROVISIONAL APPT NTE 05/19/01 |
| 5-C. Code | 5-D. Legal Authority | 6-C. Code V4M | 6-D. Legal Authority 28 USC Sect 515 |
| 5-E. Code | 5-F. Legal Authority | 6-E. Code | 6-F. Legal Authority |

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|--|---|
| 7. FROM: Position Title and Number Counselor to the Attorney General 00110975 AG034Z | 15. TO: Position Title and Number Associate Deputy Attorney General 00111173 DG043Z |
|--|---|

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|---------------------------------|----------------------------------|--------------------------------------|------------------------------|-------------------------------------|--|--|------------------------------|------------------------------|----------------------------|---|----------------------------|--|
| 8. Pay Plan AD | 9. Occ Code | 10. Grade/Level 00 | 11. Step/Rate 00 | 12. Total Salary 418.20 | 13. Pay Basis PD | 16. Pay Plan ES | 17. Occ Code 0905 | 18. Grade/Level 00 | 19. Step/Rate 01 | 20. Total Salary/Award 120,261.00 | 21. Pay Basis PA | |
| 12A. Basic Pay 418.20 | 12B. Locality Adj. .00 | 12C. Adj. Basic Pay 418.20 | 12D. Other Pay .00 | 20A. Basic Pay 109,100.00 | 20B. Locality Adj. 11,161.00 | 20C. Adj. Basic Pay 120,261.00 | 20D. Other Pay .00 | | | | | |

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|---|--|
| 14. Name and Location of Position's Organization OFFICE OF THE ATTORNEY GENERAL IMMED OFC OF THE ATTN Y GENERAL | 22. Name and Location of Position's Organization OFC OF THE DEPTY ATTN Y GENERAL IMMED OFC OF THE DEP ATTN Y GEN |
|---|--|

DJ HC020100000000000000 PP 03 2001

EMPLOYEE DATA

| | | | | | | | | | | |
|--|--|--|--|---|--|--|---|--|---|--|
| 23. Veterans Preference 1 1-None 3-10 Point/Disability 5-10 Point/Other 2-5 Point 4-10 Point/Compensable 6-10 Point/Compensable/30% | | | | 24. Tenure 0 0-None 2-Conditional 1-Permanent 3-Indefinite | | | 25. Agency Use | | 26. Veterans Preference for RIF NO YES NO | |
| 27. FEGLI (b) (6) | | | | 28. Annuitant Indicator (b) (6) | | | 29. Pay Rate Determinant 0 | | 33. Part-Time Hours Per Biweekly Pay Period | |
| 30. Retirement Plan (b) (6) | | | | 31. Service Comp Date (Leave) 01/22/01 | | | 32. Work Schedule F FULL TIME | | | |

POSITION DATA

| | | | | | | | | | |
|---|--|-------------------|--|------------------------|---------------------------------------|------------------------|----------------------------|--|--|
| 34. Position Occupied 3 1-Competitive Service 3-SES General 2-Excepted Service 4-SES Career Reserved | | | 35. FLSA Category E E-Exempt N-Nonexempt | | 36. Appropriation Code 8888 | | 37. Bargaining Unit Status | | |
| 38. Duty Station Code 11-0010-001 | | | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | | | | | |
| 40. AGENCY DATA | | 41. SEX: M | 42. CITIZ: (b) (6) | 43. VET STAT: X | 44. ED LV: 15 | 45. YR: (b) (6) | INST PRG: 220101 | | |

45. Remarks

| | | | | | |
|--|--|--------------------------------------|--|--|--|
| 46. Employing Department or Agency U.S. DEPARTMENT OF JUSTICE/HC | | | 50. Signature/Authentication and Title of Approving Official PERSONNEL STAFF | | |
| 47. Agency Code DJ HC | 48. Personnel Office ID 1831 | 49. Approval Date 02/22/01 | | | |

NOTIFICATION OF PERSONNEL ACTION

| | | | | |
|--|--|---|------------------------------------|--------------------------------------|
| 1. Name (Last, First, Middle) CRUZ, RAFAEL E | | 2. Social Security Number (b) (6) | 3. Date of Birth (b) (6) | 4. Effective Date 02/23/01 |
| FIRST ACTION | | SECOND ACTION | | |
| 5-A. Code 881 | 5-B. Nature of Action FEGLI CHG | 6-A. Code | 6-B. Nature of Action | |
| 5-C. Code DPM | 5-D. Legal Authority 5 U.S.C. CHAPTER 87 | 6-C. Code | 6-D. Legal Authority | |
| 5-E. Code | 5-F. Legal Authority | 6-E. Code | 6-F. Legal Authority | |

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|------------------------------------|-------------|--------------------|---------------|---------------------|---|----------------|--------------|-------------------|---------------|------------------------|---------------|
| 7. FROM: Position Title and Number | | | | | 15. TO: Position Title and Number Associate Deputy Attorney General 00111173 DG043Z | | | | | | |
| 8. Pay Plan | 9. Occ Code | 10. Grade/Level | 11. Step/Rate | 12. Total Salary | 13. Pay Basis | 16. Pay Plan | 17. Occ Code | 18. Grade/Level | 19. Step/Rate | 20. Total Salary/Award | 21. Pay Basis |
| | | | | | | ES | 0905 | 00 | 01 | 120,261.00 | PA |
| 12A. Basic Pay | | 12B. Locality Adj. | | 12C. Adj. Basic Pay | | 12D. Other Pay | | 20A. Basic Pay | | 20B. Locality Adj. | |
| | | .00 | | | | .00 | | 109,100.00 | | 11,161.00 | |
| | | | | | | | | 120,261.00 | | .00 | |

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| 14. Name and Location of Position's Organization | | | | | 22. Name and Location of Position's Organization OFC OF THE DEPT ATTNY GENERAL IMMED OFC OF THE DEP ATTNY GEN | | | | |
| | | | | | DJ HC0201000000000000 PP 04 2001 | | | | |

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|--|--|--|--|---|
| EMPLOYEE DATA | | | | |
| 23. Veterans Preference 1 1-None 3-10 Point/Disability 5-10 Point/Other 2-5 Point 4-10 Point/Compensable 6-10 Point/Compensable/30% | | | | |
| 24. Tenure 0 0-None 2-Conditional 1-Permanent 3-Indefinite | | 25. Agency Use | | 26. Veterans Preference for RIF NO YES NO |
| 27. FEGLI (b) (6) | | 28. Annuitant Indicator (b) (6) | | 29. Pay Rate Determinant 0 |
| 30. Retirement Plan (b) (6) | | 31. Service Comp Date (Leave) 01/22/01 | | 32. Work Schedule F FULL TIME |
| 33. Part-Time Hours Per Biweekly Pay Period | | | | |

| | | | | |
|---|--|--|---------------------------------|---------------------------------------|
| POSITION DATA | | | | |
| 34. Position Occupied 3 1-Competitive Service 3-SES General 2-Excepted Service 4-SES Career Reserved | | 35. FLSA Category E E-Exempt N-Nonexempt | | 36. Appropriation Code 8888 |
| 38. Duty Station Code 11-0010-001 | | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | |
| 40. AGENCY DATA | | 41. SEX: M | 42. CITIZENSHIP: (b) (6) | 43. VET STAT: X |
| | | 44. ED LV: 15 YR: (b) (6) | | INST PRG: 220101 |

45. Remarks

| | | | | |
|--|--|--------------------------------------|--|--|
| 46. Employing Department or Agency U.S. DEPARTMENT OF JUSTICE/HC | | | 50. Signature/Authentication and Title of Approving Official PERSONNEL STAFF | |
| 47. Agency Code DJ HC | 48. Personnel Office ID 1831 | 49. Approval Date 02/24/01 | | |

NOTIFICATION OF PERSONNEL ACTION

| | | | |
|---|---|------------------------------------|--------------------------------------|
| 1. Name (Last, First, Middle) CRUZ, RAFAEL E FIRST ACTION | 2. Social Security Number (b) (6) | 3. Date of Birth (b) (6) | 4. Effective Date 05/20/01 |
|---|---|------------------------------------|--------------------------------------|

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|-------------------------|--|
| 5-A. Code 590 | 5-B. Nature of Action CONV TO PROVISIONAL APPT NTE |
| 5-C. Code V4M | 5-D. Legal Authority 5USC3394(A) LTD TERM |
| 5-E. Code | 5-F. Legal Authority |

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|---|--|
| 7. FROM: Position Title and Number | 15. TO: Position Title and Number Associate Deputy Attorney General 00111173 DGO43Z |
|---|--|

| | | | | | | | | | | | | | | | |
|-----------------------|--------------------|---------------------------|----------------------|----------------------------|----------------------|-----------------------|---------------------|------------------------|----------------------|-------------------------------|----------------------|----------------------------|--|-----------------------|--|
| 8. Pay Plan | 9. Occ Code | 10. Grade/Level | 11. Step/Rate | 12. Total Salary | 13. Pay Basis | 16. Pay Plan | 17. Occ Code | 18. Grade/Level | 19. Step/Rate | 20. Total Salary/Award | 21. Pay Basis | | | | |
| ES | 0905 | 00 | 01 | 120,261.00 | PA | ES | 0905 | 00 | 01 | 120,261.00 | PA | | | | |
| 12A. Basic Pay | | 12B. Locality Adj. | | 12C. Adj. Basic Pay | | 12D. Other Pay | | 20A. Basic Pay | | 20B. Locality Adj. | | 20C. Adj. Basic Pay | | 20D. Other Pay | |
| | | .00 | | | | .00 | | 109,100.00 | | 11,161.00 | | 120,261.00 | | .00 | |

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|---|--|
| 14. Name and Location of Position's Organization | 22. Name and Location of Position's Organization OFC OF THE DEPTY ATTNY GENERAL IMMED OFC OF THE DEP ATTNY GEN DJ HCO20100000000000000000 PP 10 2001 |
|---|--|

EMPLOYEE DATA

| | | | |
|--|---|---|---|
| 23. Veterans Preference 1 - None 2 - 5 Point 3 - 10 Point/Disability 4 - 10 Point/Compensable 5 - 10 Point/Other 6 - 10 Point/Compensable/30% | 24. Tenure 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite | 25. Agency Use | 26. Veterans Preference for RIF YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 27. FEGLI (b) (6) | 28. Annuitant Indicator (b) (6) | 29. Pay Rate Determinant 0 | |
| 30. Retirement Plan (b) (6) | 31. Service Comp Date (Leave) 01/22/01 | 32. Work Schedule F FULL TIME | |

POSITION DATA

| | | | |
|---|--|---------------------------------------|-----------------------------------|
| 34. Position Occupied 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved | 35. FLSA Category E - Exempt N - Nonexempt | 36. Appropriation Code 8888 | 37. Bargaining Unit Status |
| 38. Duty Station Code 11-0010-001 | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | | |
| 40. AGENCY DATA | 41. SEX: M | 42. CITZ: (b) (6) | 43. VET STAT: X |
| 44. ED LV: 15 YR: (b) (6) INST PRG: 220101 | | | |

45. Remarks
 CREDITABLE MILITARY SERVICE: 0000.
 PREVIOUS RETIREMENT COVERAGE: PREVIOUSLY COVERED.

| | |
|--|--|
| 46. Employing Department or Agency U.S. DEPARTMENT OF JUSTICE/HC | 50. Signature/Authentication and Title of Approving Official PERSONNEL STAFF |
| 47. Agency Code DJ HC | 48. Personnel Office ID 1831 |
| 49. Approval Date 05/21/01 | |

NOTIFICATION OF PERSONNEL ACTION

| | | | |
|--|---|------------------------------------|--------------------------------------|
| 1. Name (Last, First, Middle) CRUZ, RAFAEL E | 2. Social Security Number (b) (6) | 3. Date of Birth (b) (6) | 4. Effective Date 06/12/01 |
|--|---|------------------------------------|--------------------------------------|

| FIRST ACTION | | SECOND ACTION | |
|-------------------------|--|---------------|-----------------------|
| 5-A. Code 352 | 5-B. Nature of Action TERMINATION-APPT IN FT | 6-A. Code | 6-B. Nature of Action |
| 5-C. Code DBM | 5-D. Legal Authority 5 CFR PART 715 | 6-C. Code | 6-D. Legal Authority |
| 5-E. Code | 5-F. Legal Authority | 6-E. Code | 6-F. Legal Authority |

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|--|-----------------------------------|
| 7. FROM: Position Title and Number Associate Deputy Attorney General 00111173 DG043Z | 15. TO: Position Title and Number |
|--|-----------------------------------|

| | | | | | | | | | | | |
|-------------------------------------|--|--|------------------------------|---------------------------------------|----------------------------------|---------------------|------------------------------|-----------------|---------------|------------------------|---------------|
| 8. Pay Plan ES | 9. Occ Code 0905 | 10. Grade/Level 00 | 11. Step/Rate 01 | 12. Total Salary 120,261.00 | 13. Pay Basis PA | 16. Pay Plan | 17. Occ Code | 18. Grade/Level | 19. Step/Rate | 20. Total Salary/Award | 21. Pay Basis |
| 12A. Basic Pay 109,100.00 | 12B. Locality Adj. 11,161.00 | 12C. Adj. Basic Pay 120,261.00 | 12D. Other Pay .00 | 20A. Basic Pay | 20B. Locality Adj. .00 | 20C. Adj. Basic Pay | 20D. Other Pay .00 | | | | |

| | |
|--|--|
| 14. Name and Location of Position's Organization OFC OF THE DEPTY ATTNY GENERAL IMMED OFC OF THE DEP ATTNY GEN | 22. Name and Location of Position's Organization FT DJ HC0201000000000000 PP 12 2001 |
|--|--|

| EMPLOYEE DATA | | | |
|---|---|--|--|
| 23. Veterans Preference 1 1-None 2-5 Point. | 3-10 Point/Disability 4-10 Point/Compensable | 5-10 Point/Other 6-10 Point/Compensable/30% | 24. Tenure 0 0-None 1-Permanent 2-Conditional 3-Indefinite |
| 27. FEGLI (b) (6) (b) (6) | 28. Annuitant indicator (b) (6) (b) (6) | 25. Agency Use | 26. Veterans Preference for RIF <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| 30. Retirement Plan (b) (6) | 31. Service Comp Date (Leavel) 01/22/01 | 32. Work Schedule F FULL TIME | 29. Pay Rate Determinant 0 |

| POSITION DATA | | |
|--|--|---------------------------------------|
| 34. Position Occupied 3 1-Competitive Service 2-Excepted Service | 35. FLSA Category E E-Exempt N-Nonexempt | 36. Appropriation Code 8888 |
| 38. Duty Station Code 11-0010-001 | 39. Duty Station (City - County - State or Overseas Location) WASHINGTON DIST OF COLUMBIA DC | |

| 40. AGENCY DATA | | | |
|-------------------|--------------------------|------------------------|---|
| 41. SEX: M | 42. CITZ: (b) (6) | 43. VET STAT: X | 44. ED LV: 15 YR (b) (6) INST PRG: 220101 |

45. Remarks

| | |
|--|--|
| 46. Employing Department or Agency U.S. DEPARTMENT OF JUSTICE/HC | 50. Signature/Authentication and Title of Approving Official PERSONNEL STAFF |
| 47. Agency Code DJ HC | 48. Personnel Office ID 1831 |
| 49. Approval Date 06/13/01 | |

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. ANTI-DISCRIMINATION NOTICE. It is illegal to discriminate against work eligible individuals. Employers CANNOT specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Verification. To be completed and signed by employee at the time employment begins.

| | | | |
|--|-------------------------|-----------------------------|--|
| Print Name: Last CRUZ | First RAFAEL | Middle Initial E. | Maiden Name |
| Address (Street Name and Number) (b) (6) | | Appt # (b) (6) | Date of Birth (month/day/year) (b) (6) |
| City (b) (6) | State (b) (6) | Zip Code (b) (6) | Social Security # (b) (6) |

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following):

- A citizen or national of the United States
- A Lawful Permanent Resident (Alien # A _____)
- An alien authorized to work until _____
- Alien # or Admission # _____

| | |
|--|---|
| Employee's Signature Rafael E Cruz | Date (month/day/year) 1/22/01 |
|--|---|

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

| | |
|---|------------|
| Preparer's/Translator's Signature | Print Name |
| Address (Street Name and Number, City, State, Zip Code) | |
| Date (month/day/year) | |

Section 2. Employer Review and Verification. To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s).

| | List A | OR | List B | AND | List C |
|---------------------------|----------------|----|--------|-----|--------|
| Document title | (b) (6) | | _____ | | _____ |
| Issuing authority | (b) (6) | | _____ | | _____ |
| Document #: | (b) (6) | | _____ | | _____ |
| Expiration Date (if any): | (b) (6) | | _____ | | _____ |
| Document #: | | | _____ | | _____ |
| Expiration Date (if any): | | | _____ | | _____ |

CERTIFICATION - I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) **1/22/01** and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment).

| | | |
|---|---------------------------------------|---|
| Signature of Employer or Authorized Representative Valerie M Willis | Print Name VALERIE M WILLIS | Title ASSISTANT DIRECTOR, EOC |
| Business or Organization Name | | Date (month/day/year) |

Dept of Justice 1331 PA Ave., NW., WASH., DC 20530 1/22/01

Section 3. Updating and Reverification. To be completed and signed by employer.

| | |
|-----------------------------|--|
| A. New Name (if applicable) | B. Date of rehire (month/day/year) (if applicable) |
|-----------------------------|--|

If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.

Document Title: _____ Document #: _____ Expiration Date (if any): _____

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

| | |
|--|-----------------------|
| Signature of Employer or Authorized Representative | Date (month/day/year) |
|--|-----------------------|

Declaration for Federal Employment

GENERAL INFORMATION

1 FULL NAME

▶ RAFAEL EDWARD CRUZ

2 SOCIAL SECURITY NUMBER

▶ (b) (6)

3 PLACE OF BIRTH (Include City and State or Country)

▶ (b) (6)

4 DATE OF BIRTH (MM/DD/YY)

▶ (b) (6)

5 OTHER NAMES EVER USED (For example, maiden name, nickname, etc.)

▶ TED CRUZ

▶

6 PHONE NUMBERS (Include Area Codes)

DAY ▶

NIGHT ▶

MILITARY SERVICE

7 Have you served in the United States Military Service? *If your only active duty was training in the Reserves or National Guard, answer "NO".*

| | |
|-----|----|
| Yes | No |
| | X |

If you answered "YES", list the branch, dates (MM/DD/YY), and type of discharge for all active duty military service.

| BRANCH | FROM | TO | TYPE OF DISCHARGE |
|--------|------|----|-------------------|
| | | | |

BACKGROUND INFORMATION

For all questions, provide all additional requested information under item 15 or on attached sheets. The circumstances of each event you list will be considered. However, in most cases you can still be considered for Federal jobs.

For questions 8, 9, and 10, your answers should include convictions resulting from a plea of nolo contendere (*no contest*), but omit (1) traffic fines of \$300 or less, (2) any violation of law committed before your 16th birthday, (3) any violation of law committed before your 18th birthday if finally decided in juvenile court or under a Youth Offender law, (4) any conviction set aside under the Federal Youth Corrections Act or similar State law, and (5) any conviction whose record was expunged under Federal or State law.

8 During the last 10 years, have you been convicted, been imprisoned, been on probation, or been on parole? (Includes felonies, firearms or explosives violations, misdemeanors, and all other offenses.) *If "Yes", use item 15 to provide the date, explanation of the violation, place of occurrence, and the name and address of the police department or court involved.*

| | |
|-----|----|
| Yes | No |
| | X |

(b) (6)

9 Have you been convicted by a military court-martial in the past 10 years? (If no military service, answer "NO".) *If "Yes", use item 15 to provide the date, explanation of the violation, place of occurrence, and the name and address of the military authority or court involved.*

10 Are you now under charges for any violation of law? *If "Yes", use item 15 to provide the date, explanation of the violation, place of occurrence, and the name and address of the police department or court involved.*

11 During the last 5 years, were you fired from any job for any reason, did you quit after being told that you would be fired, did you leave any job by mutual agreement because of specific problems, or were you debarred from Federal employment by the Office of Personnel Management? *If "Yes", use item 15 to provide the date, an explanation of the problem and reason for leaving, and the employer's name and address.*

12 Are you delinquent on any Federal debt? (Includes delinquencies arising from Federal taxes, loans, overpayment of benefits, and other debts to the U.S. Government, plus defaults of Federally guaranteed or insured loans such as student and home mortgage loans.) *If "Yes", use item 15 to provide the type, length, and amount of the delinquency or default, and steps that you are taking to correct the error or repay the debt.*

ADDITIONAL QUESTIONS

13 Do any of your relatives work for the agency or organization to which you are submitting this form? (Includes father, mother, husband, wife, son, daughter, brother, sister, uncle, aunt, first cousin, nephew, niece, father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepfather, stepmother, stepson, stepdaughter, stepbrother, stepsister, half brother, and half sister.) *If "Yes", use item 15 to provide the name, relationship, and the Department, Agency, or Branch of the Armed Forces for which your relative works.*

| | |
|-----|----|
| Yes | No |
| | X |

(b) (6)

14 Do you receive, or have you ever applied for, retirement pay, pension, or other pay based on military, Federal civilian, or District of Columbia Government service?

CONTINUATION SPACE / AGENCY OPTIONAL QUESTIONS

15 Provide details requested in items 8 through 13 and 17c in the continuation space below or on attached sheets. Be sure to identify attached sheets with your name, Social Security Number, and item number, and to include ZIP Codes in all addresses. If any questions are printed below, please answer as instructed (these questions are specific to your position, and your agency is authorized to ask them).

CERTIFICATIONS / ADDITIONAL QUESTION

APPLICANT: If you are applying for a position and have not yet been selected. Carefully review your answers on this form and any attached sheets. When this form and all attached materials are accurate, complete item 16/16a.

APPOINTEE: If you are being appointed. Carefully review your answers on this form and any attached sheets, including any other application materials that your agency has attached to this form. If any information requires correction to be accurate as of the date you are signing, make changes on this form or the attachments and/or provide updated information on additional sheets, initialing and dating all changes and additions. When this form and all attached materials are accurate, complete item 16/16b and answer item 17.

16 I certify that, to the best of my knowledge and belief, all of the information on and attached to this Declaration for Federal Employment, including any attached application materials, is true, correct, complete, and made in good faith. I understand that a false or fraudulent answer to any question on any part of this declaration or its attachments may be grounds for not hiring me, or for firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated for purposes of determining eligibility for Federal employment as allowed by law or Presidential order. I consent to the release of information about my ability and fitness for Federal employment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel specialists, and other authorized employees of the Federal Government. I understand that for financial or lending institutions, medical institutions, hospitals, health care professionals, and some other sources of information, a separate specific release may be needed, and I may be contacted for such a release at a later date.

16a Applicant's Signature ▶
(Sign in ink)

Rafael Edward S

Date ▶

1/22/01

16b Appointee's Signature ▶
(Sign in ink)

Rafael Edward S

Date ▶

1/22/01

APPOINTING OFFICER: Enter Date of Appointment or Conversion

17 Appointee Only (Respond only if you have been employed by the Federal Government before): Your elections of life insurance during previous Federal employment may affect your eligibility for life insurance during your new appointment. These questions are asked to help your personnel office make a correct determination.

17a When did you leave your last Federal job?

Date (MM/DD/YY)

8/97

Yes No Don't Know

17b When you worked for the Federal Government the last time, did you waive Basic Life Insurance or any type of optional life insurance?

(b) (6)

17c If you answered "Yes" to item 17b, did you later cancel the waiver(s)? If your answer to item 17c is "No," use item 15 to identify the type(s) of insurance for which waivers were not cancelled.

NAME RAFAEL EDWARD CRUZ

INFORMATION CONCERNING YOUR WORK EXPERIENCE IN THE FEDERAL GOVERNMENT

Please list below ALL of your work experience in the FEDERAL government. The Personnel Office must have this information to compute your "Service Computation Date" which will be used to indicate your total federal service in the computation of annual leave and for other purposes.

Include all ACTIVE military service. If you claim military service, you must provide the Personnel Office with a xerox copy of DD-214 reflecting all the active military service you claim.

| <u>Civilian</u> <u>Agency</u> (Be as specific as possible) | <u>or</u> | <u>Military</u> <u>Service</u> | <u>Location</u> (City/State) | <u>Approximate Dates</u> <u>of Employment</u> | |
|--|-----------|-----------------------------------|---------------------------------|--|-----------|
| | | | | <u>FROM</u> | <u>TO</u> |
| SUPREME COURT OF THE U.S. | | | WASHINGTON, DC | 7/96 | 8/97 |
| U.S. COURT OF APPEALS FOR THE FOURTH CIRCUIT | | | VIRGINIA | 6/95 | 6/96 |

PLEASE READ THIS BEFORE SIGNING

I understand that as a condition of my appointment to a position in the U.S. Department of Justice:

- (1) I must provide to the Drug-Free Workplace Program a urine specimen for the purpose of testing it for the presence of illegal substances; and
- (2) If my urine tests positive for illicit drug use, the positive test results may be used as grounds for my removal from the position to which I am being appointed.

Signature Rafael E Cruz Date 1/22/07

Type/Print Full Name RAFAEL EDWARD CRUZ

U.S. DEPARTMENT OF JUSTICE
OFFICES, BOARDS AND DIVISIONS
NEW EMPLOYMENT ORIENTATION

I acknowledge receipt of the following Department issuances:

- (1) A copy of The Executive Order on Conduct and The Standards of Conduct
- (2) A copy of Form DOJ-373, Department of Justice Standard Schedule of Disciplinary Offenses and Penalties.
- (3) Ethics Handbook
- (4) If a temporary employee, a letter documenting the temporary nature and conditions of my employment.
- (5) If a permanent employee, the memorandum titled, "Federal Employee Benefits."

1/22/01
(DATE)

Rafael E. Cruz
(SIGNATURE)

RAFAEL E. CRUZ
(PRINTED NAME)

Counselor the Atty. Gen.

Rafael Edward (Ted) Cruz

(b) (6)

WORK EXPERIENCE

BUSH-CHENEY TRANSITION TEAM, Washington, DC December 2000 – January 2001.
Department of Justice Coordinator.

BUSH-CHENEY RECOUNT TEAM, Tallahassee, FL November 2000 – December 2000.
Attorney.

- Helped coordinate legal effort, direct legal strategy, draft pleadings, and brief principal surrogates.

BUSH-CHENEY 2000, Austin, TX July 1999 – November 2000.
Domestic Policy Advisor.

- Briefed Governor Bush and Secretary Cheney on domestic policy. Helped prepare domestic policy agenda.
- Primary responsibility for Civil Justice, Criminal Justice, Constitutional Law & Civil Rights, Immigration, Campaign Finance Reform, Political Process, and Government Reform.

COOPER, CARVIN & ROSENTHAL, PLLC, Washington, DC September 1997 – June 1999.
Associate.

- Argued and won \$10 million case in the U. S. Court of Appeals for the Federal Circuit on behalf of Ford Motor Company.
- Represented Rep. John Boehner (R-OH) in his civil suit against Rep. Jim McDermott (D-WA) for McDermott's dissemination to the New York Times of an illegally-intercepted cell-phone conversation among the House Republican leadership – the first civil suit between sitting Congressmen in the history of the U. S.
- Represented David Wang before the grand jury and before the House Campaign Finance hearings concerning Wang's alleged illegal donation of \$10,000 to the Democratic National Committee.
- Represented Republic Savings Bank in breach of contract and Takings action against the federal government.

THE HONORABLE WILLIAM H. REHNQUIST, CHIEF JUSTICE OF THE UNITED STATES October Term 1996.
Law Clerk.

THE HONORABLE J. MICHAEL LUTTIG, U. S. COURT OF APPEALS FOR THE FOURTH CIRCUIT 1995-96 Term.
Law Clerk.

EDUCATION

HARVARD LAW SCHOOL, J.D., magna cum laude, 1995.

Journals: HARVARD LAW REVIEW, Primary Editor.
HARVARD JOURNAL OF LAW & PUBLIC POLICY, Executive Editor.
HARVARD LATINO LAW REVIEW, Editor.

Research: Professor Charles Fried, Research Assistant – Helped prepare *The Supreme Court, 1994 Term – Foreword: Revolutions?*, 109 HARV. L. REV. 13 (1995), and *Types*, 14 CONST. COMMENT. 55 (1997).
Professor David L. Shapiro, Research Assistant – Helped prepare *FEDERALISM: A DIALOGUE* (1995) and *HART & WECHSLER'S THE FEDERAL COURTS AND THE FEDERAL SYSTEM* (4th ed. 1996).
Professor Daniel Meltzer, Research Assistant – Helped prepare 4th edition of *HART & WECHSLER'S*.

Activities: The Federalist Society; Lincoln's Inn; Intramural basketball; Intramural volleyball; *La Alianza*.

Honors: John M. Olin Fellowship in Law and Economics.

(b) (6)

Rafael Edward (Ted) Cruz (cont.)

(b) (6)

PUBLICATIONS

- *Fair Play for Florida Voters – You Can't Change the Rules after Election Day: A Summary of the Supreme Court Brief Filed by Governor Bush*, CNN.com (December 1, 2000).
- *Not My Brother's Keeper: The Inability of an Informed Minority to Correct for Imperfect Information*, 47 HASTINGS L.J. 635 (1996) (with Jeffrey J. Hinck).
- Case Comment, *J.E.B. v. Alabama ex rel. T.B.*, 108 HARV. L. REV. 240 (1994).
- *Developments in the Law – Lawyers' Responsibilities and Responses: The 1993 Amendments to Federal Rule of Civil Procedure 11*, 107 HARV. L. REV. 1629 (1994).
- Recent Development, *Animal Sacrifice and Equal Protection Free Exercise: Church of the Lukumi Babalu Aye, Inc. v. City of Hialeah*, 17 HARV. J.L. & PUB. POL'Y 262 (1994).
- *Going Beneath the Surface on Law Clerk Diversity*, LEGAL TIMES, Oct. 26, 1998, at 27.
- Book Review of *Sexual McCarthyism* by Alan M. Dershowitz, N.Y. LAW JOURNAL, February 19, 1999, at 2.

(b) (6)

(b) (6)

APPOINTMENT AFFIDAVITS

Counselor to the Attorney General
(Position to which appointed) 01-22-2001
(Date of appointment)

U.S. Department of Justice Office of the Attorney General Washington, DC
(Department or agency) (Bureau or Division) (Place of employment)

I, Rafael Edward Cruz, do solemnly swear (or affirm) that---

A. OATH OF OFFICE

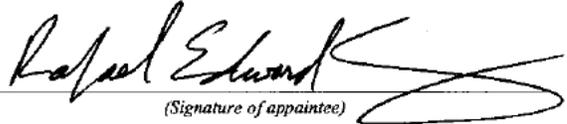
I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties of the office on which I am about to enter. So help me God.

B. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof.

C. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing this appointment.

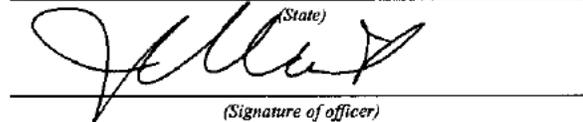

(Signature of appointee)

Subscribed and sworn (or affirmed) before me this 25 day of January, 2001,

at Washington
(City)

District of Columbia
(State)

[SEAL]


(Signature of officer)

Commission expires _____

Deputy Assistant Attorney General, JMD
(Title)

(If by a Notary Public, the date of expiration of his/her Commission should be shown)

NOTE.- The oath of office must be administered by a person specified in 5 U.S.C. 2903. The words "So help me God" in the oath and the word "swear" wherever it appears above should be stricken out when the appointee elects to affirm rather than swear to the affidavits; only these words may be stricken and only when the appointee elects to affirm the affidavits.