ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

UNITED STATES DISTRICT COURT

FOR THE

MIDDLE DISTRICT OF FLORIDA

UNITED STATES OF AMERICA

Case No. 2:23-CR-9-TPB-KCD
(write the number of your criminal case)

v.

Denis Casseus
Write your full name here.

PROPOSED RELEASE PLAN
In Support of Motion for Sentence Reduction Under 18 U.S.C. § 3582(c)(1)(A)

NOTICE

The public can access electronic court files. Federal Rule of Criminal Procedure 49.1 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

If you provide information in this document that you believe should not be publicly available, you may request permission from the court to file the document under seal. If the request is granted, the document will be placed in the electronic court files but will not be available to the public.

Do you request that this document be filed under seal?

☐ Yes
☑ No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

B. Medical needs

Will you require ongoing medical care if you are released from prison?

☑ Yes (Mental Health Treatment)

☐ No

Will you have access to health insurance if released?

☐ Yes

☑ No

If yes, provide the name of your insurance company and the last four digits of the policy number. If no, how do you plan to pay for your medical care?

Yes, I am planning to pay for medical Care, but will also apply for government Assistance

If no, are you willing to apply for government medical services (Medicaid/Medicare)?

☑ Yes

☐ No

Do you have copies of your medical records documenting the condition(s) for which you are seeking release?

☐ Yes

☑ No

If yes, please include them with your motion. If no, where are the records located?

_____

_____

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

Are you currently prescribed medication in the facility where you are incarcerated?

☐ Yes

☑ No

If yes, list all prescribed medication, dosage, and frequency:

_____

_____

Do you require durable medical equipment (e.g., wheelchair, walker, oxygen, prosthetic limbs, hospital bed)?

☐ Yes

☑ No

If yes, list equipment:

_____

_____

Do you require assistance with self-care such as bathing, walking, toileting?

☐ Yes

☑ No

If yes, please list the required assistance and how it will be provided:

_____

_____

Do you require assisted living?

☐ Yes

☑ No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

PROPOSED RELEASE PLAN

To the extent the following information is available to you, please include the information requested below. This information will assist the U.S. Probation and Pretrial Services Office to prepare for your release if your motion is granted.

A. Housing and Employment

Provide the full address where you intend to reside if you are released from prison:

3218 SW Barbara Pl
Cape Coral, Fl 33914

Provide the name and phone number of the property owner or renter of the address where you will reside if you are released from prison:

Ismaelle Manuel, (Renter)
954-470-1259

Provide the names (if under the age of 18, please use their initials only), ages, and relationship to you of any other residents living at the above listed address:

J.C., 16 | D.R.J.C, 6 | D.I.J.C, 4 | D.J.C., 7month | Roodenaicka Cassens, 19, (Our Children).

If you have employment secured, provide the name and address of your employer and describe your job duties:

Cleveland Wellness | 3509 Fowler st. Fort Myers, FL 33901 | Managing Director

List any additional housing or employment resources available to you:

Employment: Addition Multi-Service, Inc
Owner

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

If yes, please provide address of the anticipated home or facility and the source of funding to pay for it.

Are the people you are proposing to reside with aware of your medical needs?

- ☑ Yes
- ☐ No

Do you have other community support that can assist with your medical needs?

- ☐ Yes
- ☑ No

Provide their names, ages, and relationship to you. If the person is under the age of 18, please use their initials only:

Will you have transportation to and from your medical appointments?

- ☑ Yes
- ☐ No

Describe method of transportation:

My wife & 19 year old daughter will assist me with transportation to appointments & work

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

SIGNATURE

I declare under penalty of perjury that the facts stated in this attachment are true and correct.

1/22/2024
Date

Denis Casseus
Signature

DENIS CASSEUS
Name

42013-510
Bureau of Prisons Register #

110 Raby Ave, pensacola, FL. 32509
Bureau of Prisons Facility

FRC pensacola
Institution's Address

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

UNITED STATES DISTRICT COURT

FOR THE

MIDDLE DISTRICT OF FLORIDA

UNITED STATES OF AMERICA

v.

Case No. 2:23-CR-9-TPB-KCD
(write the number of your criminal case)

DENIS CASSEUS
Write your full name here.

MEDICAL RECORDS AND ADDITIONAL MEDICAL INFORMATION
In Support of Motion for Sentence Reduction Under 18 U.S.C. § 3582(c)(1)(A)

NOTICE

The public can access electronic court files. Federal Rule of Criminal Procedure 49.1 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

If you attach documents to this form that you believe should not be publicly available, you may request permission from the court to file those documents under seal. If the request is granted, the documents will be placed in the electronic court files but will not be available to the public.

Do you request that the attachments to this document be filed under seal?

☐ Yes

☑ No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

MEDICAL RECORDS AND ADDITIONAL MEDICAL INFORMATION

To the extent you have medical records or additional medical information that support your motion for compassionate release, please attach those records or that information to this document.

SIGNATURE

I declare under penalty of perjury that the facts stated in this attachment are true and correct.

1/22/2024
Date

Signature

DEWIS CASSEUS
Name

42013-510
Bureau of Prisons Register #

FPC pensacola
Bureau of Prisons Facility

110 Raby Ave. pensacola FL 32509
Institution's Address

Appointment Details

Your Provider's Notes

Progress Notes

Lee D Coghill at 1/17/2024 4:00 PM

Florida State University College of Medicine
Family Medicine Residency Program at Lee Health
Family Medicine Center

Subjective
Patient ID: Ismaelle Manuel is a 32 y.o. female.

The patient's past medical, surgical, family and social history has been updated in the EHR during today's encounter by clinical staff. I have reviewed and updated as appropriate in the EHR during the patient's visit today, and all information is available in the encounter report.

Chief Complaint: Back Pain (Going on for about a year but gets worse at night)

History of Presenting Illness:
Ismaelle Manuel is a 32 y.o. female presenting for back pain follow up

Back pain

- History of chronic back pain previously has done PT, tylenol, lidocaine, avoids NSAIDS due to history of bariatric surgery. Back pain now is higher than it was previously in thoracic region. Feels right over the bone and has been worsening over the past few months
- Hasn't been seen in over a year here due to pregnancy, not currently breastfeeding
- Denies any fevers, progressive motor/sensory loss, saddle anesthesias, urinary retention, urinary/fecal incontinence or weight loss. Patient has no history of malignancy, osteoporosis, immunocompromising condition, IV drug use, recent invasive spinal procedure, or significant trauma relative to age.
- Takes calcium and vitamin D supplement.

Review of Systems

Objective

BP 105/65 (BP Site: Left Arm, Patient Position: Sitting, Cuff Size: Regular) | Pulse 60 | Temp 98.3 °F (36.8 °C) (Tympanic) | Ht 5' 6" (1.676 m) | Wt 133 lb (60.3 kg) | LMP 01/08/2024 (Exact Date) | SpO2 100% | BMI 21.47 kg/m²

Wt Readings from Last 3 Encounters:

01/17/24 133 lb (60.3 kg)
07/19/23 140 lb 11.2 oz (63.8 kg)
06/07/23 145 lb 4.8 oz (65.9 kg)

Pain Score: 9-Severe pain, Pain Loc: Middle back

Physical Exam

Vitals and nursing note reviewed.

Constitutional:
General: She is not in acute distress.

Cardiovascular:
Rate and Rhythm: Normal rate and regular rhythm.

Pulmonary:
Effort: Pulmonary effort is normal.
Breath sounds: Normal breath sounds. No wheezing.

Musculoskeletal:
Right lower leg: No edema.
Left lower leg: No edema.
Comments: **Bony tenderness over thoracic spine, no paraspinal tenderness, ROM within normal limits.**

Psychiatric:
Mood and Affect: Mood normal.

Lab Review:
- no new lab studies available for review at time of visit

Assessment and Plan:

Ismaelle was seen today for back pain.

Diagnoses and all orders for this visit:

Chronic midline thoracic back pain (Primary)

Assessment & Plan:

Can use tylenol, flexeril, lidocaine patches, cannot use NSAIDS due to bariatric surgery
Will obtain XR due to pain > 30 days, bony tenderness, risk of osteoporosis with bariatric surgery.
If xr within normal limits recommend PT.

Orders:

- XR SPINE THORACIC 3 VIEWS; Future

Nausea and vomiting, unspecified vomiting type

- ondansetron ODT (ZOFRAN-ODT) 4 MG disintegrating tablet; Take 1 tablet by mouth every 8 hours as needed for Nausea.

Other orders

- cyclobenzaprine (FLEXERIL) 5 MG tablet; Take 1 tablet by mouth every 8 hours as needed for Muscle Spasms.

All questions/concerns regarding today's visit have been addressed and patient/family has verbalized understanding.

Return for Physical with Dr. Coghill in 2-3 months.

Lee D Coghill, M.D.
The Florida State University
COM Family Medicine Residency Program
At Lee Health

MA Brittani G at 1/17/2024 4:00 PM

Ismaelle Manuel is a 32 y.o. female who presents and complains of
Chief Complaint
Patient presents with
- Back Pain
  Going on for about a year but gets worse at night

Ismaelle does need her medication(s) refilled.

Brittani G., MA

LPN Shawn V at 1/17/2024 4:00 PM

Pre-Visit Planning

Confirm Visit Type: Office Visit

Review last office visit: 8/24/2022 Wong, Hailon T, M.D.

Outstanding Orders Reviewed:
No orders placed

Overdue Health Maintenance Topics:
Health Maintenance Due

Topic	Date Due
• COVID-19 Vaccine (1)	Never done
• YEARLY PHYSICAL ADULT 18+	04/05/2023
• INFLUENZA (1)	08/01/2023

Is the patient on the diabetes registry? No

Are there any outstanding in-basket messages that need to be addressed?
No

Reconciliation Completion:
Medication: No
Records: No
Immunizations: No
Maintenance medications reviewed for necessary refills: No

Have all the Pre-Visit Planning tasks been completed? Yes

Appointment Details

After Visit Summary®

AFTER VISIT SUMMARY

Ismaelle Manuel MRN: 40326891

1/17/2024 4:00 PM Family Medicine at Lee Memorial 239-343-3831

Instructions from Lee D Coghill, M.D.

Today's medication changes

START taking:
cyclobenzaprine (FLEXERIL)

Accurate as of January 17, 2024 11:59 PM.
Review your updated medication list below.

Pick up these medications at CVS/pharmacy #4224 - CAPE CORAL, FL - 1003 SANTA BARBARA BLVD AT CORNER OF NICHOLAS PARKWAY

- cyclobenzaprine
Your estimated payment per fill: $0
- ondansetron ODT
Your estimated payment per fill: $0

Address: 1003 SANTA BARBARA BLVD, CAPE CORAL FL 33991
Phone: 239-772-4000

Return for Physical with Dr. Coghill in 2-3 months.

Today's Visit

You saw Lee D Coghill, M.D. on Wednesday January 17, 2024. The following issues were addressed: Chronic midline thoracic back pain and Nausea and vomiting, unspecified vomiting type.

Blood Pressure	BMI	Weight	Height
105/65	21.47	133 lb	5' 6"

Temperature (Tympanic)	Pulse	Oxygen Saturation
98.3 °F	60	100%

What's Next

You currently have no upcoming appointments scheduled.

Immunization History Administered as of 1/17/2024

Never Reviewed

Name	Date
HPV	8/26/2011
HepA	10/1/2009
HepB	8/26/2011 , 10/1/2009 , 3/19/2009
IPV	3/19/2009
Influenza (Flu Shot)	12/14/2020 , 11/16/2016
MCV4 (Menactra)	3/19/2009
MMR	7/18/2022 , 10/1/2009 , 3/19/2009
Tdap	5/10/2023 , 3/19/2009
Varicella	10/1/2009 , 3/19/2009

Your Medication List as of January 17, 2024 11:59 PM

ⓘ If you have any questions, ask your nurse or doctor.

START	**cyclobenzaprine** 5 MG tablet Commonly known as: FLEXERIL Started by: Lee D Coghill, M.D.	Take 1 tablet by mouth every 8 hours as needed for Muscle Spasms.
	ketoconazole 2 % shampoo Commonly known as: NIZORAL	Apply topically daily. APPLY TOPICALLY TO AFFECTED AREA EVERY DAY
	ondansetron ODT 4 MG disintegrating tablet Commonly known as: ZOFRAN-ODT	Take 1 tablet by mouth every 8 hours as needed for Nausea.

Note From Your Admission on 12/16/21

Progress Notes by Irene A Greivell at 12/18/2021 10:53 AM

Attestation signed by Peter M. Denk at 12/18/2021 11:27 AM

The patient was seen and examined, plan formulated in conjunction with my PA.

Doing reasonably well today. The patient seems somewhat timid with liquids and pills. She is having a slight bit of regurgitation but does not seem to actually have nausea or true vomiting of gastric contents.

I encouraged her that if she can keep down 30 mL of fluid per hour she should be fine in terms of hydration and nutrition. She seems stable for discharge home today. We will give her some Reglan for nausea and a promotility agent that will likely help with her symptoms temporarily. She can wean off this if it is not needed.

Discharge home today. Full liquid diet with a goal of 70 g of protein per day at home. She should follow-up with me in the office in the next 1 to 2 weeks.

LMHS Surgery Daily Progress Note

Ismaelle Manuel	**Admit Date:** 12/16/2021	**Hospital day**: 2

Problem Assessment/Plan:

*** Morbid obesity (HCC)**

Assessment & Plan

Postop day 2 laparoscopic sleeve gastrectomy, hiatal hernia repair, cholecystectomy with indocyanine green.

Labs look fine today. She is tolerating bariatric clear liquids without nausea or emesis. She did note some dysphagia with pills and had some regurgitation.

Stable for discharge home today. She may shower and bathe. No heavy lifting more than 25 pounds for 1 month. Liquid diet including protein shakes at home. Prescription for Percocet and Reglan sent into her pharmacy. She should call our office to schedule an appointment for follow-up in 1 to 2 weeks.

GI Surgical Specialists

Progress Note

Problem Assessment/Plan:

Patient Active Problem List

Diagnosis	Date Noted
• Chronic cholecystitis	12/16/2021
• Frequency of micturition	12/15/2021
• Dyspareunia, female	12/15/2021
• Cystitis	12/15/2021
• Pelvic pain	12/15/2021
• Preop cardiovascular exam	10/26/2021
• High blood pressure	10/26/2021
• Burning chest pain	10/26/2021
• Chronic bilateral low back pain without sciatica	08/24/2021
• Hiatal hernia	06/21/2021
• Mild depression (HCC)	05/03/2021
• Intermittent headache	05/03/2021
• Nexplanon in place	02/10/2021
• Morbid obesity (HCC)	07/22/2019

Chief complaint: No chief complaint on file.

No chief complaint on file.

History:
L2: EPF (HPI 1-3 element, ROS 1 system) L3: D (HPI >=4 element, ROS>=2 system) (loc,severity,duration,modifier,assoc symptom)
Ismaelle Manuel is a 30 y.o. Black female who was initially admitted to the hospital with the chief complaint of No chief complaint on file.

PHYSICAL EXAM:
(L2 : EPF >6 element; L3 : (2 bullet x 6 system)

VITAL SIGNS: BP 122/72 | Pulse 83 | Temp 98.3 °F | Resp 17 | Ht 1.702 m (5' 7") | Wt 110.2 kg (242 lb 15.2 oz) | LMP (LMP Unknown) | SpO2 100% | Breastfeeding No | BMI 38.05 kg/m²

GENERAL APPEARANCE: In no acute distress
HEAD: Normocephalic. No masses, lesions, tenderness or abnormalities
NOSE: Nares normal. Septum midline. Mucosa normal. No drainage or sinus tenderness.
THROAT: Lips, mucosa, and tongue normal. Oropharynx moist
NECK: Neck supple. No adenopathy. Thyroid symmetric, normal size, and without nodularity
LUNGS: Clear bilaterally
CARDIOVASCULAR: S1, S2 normal
ABDOMEN: Incisions clean, dry, intact with Dermabond present. Appropriate incisional tenderness to palpation.
EXTREMITIES: Extremities normal, no deformities, edema, or skin discoloration
SKIN: Skin color, texture, turgor normal. No rashes or lesions.

Intake / Output

Intake/Output Summary (Last 24 hours) at 12/18/2021 1052
Last data filed at 12/18/2021 0402

	Gross per 24 hour
Intake	0 ml
Output	0 ml
Net	**0 ml**

LABS:
CBC
Lab Results

Component	Value	Date/Time
WBC	14.5 (H)	12/18/2021 0312
RBC	3.63 (L)	12/18/2021 0312
Hemoglobin	10.8 (L)	12/18/2021 0312
Hematocrit	32.7 (L)	12/18/2021 0312
MCV	90.1	12/18/2021 0312
MCH	29.8	12/18/2021 0312
RDW	13.0	12/18/2021 0312
Platelet Count	215	12/18/2021 0312
MPV	12.3	12/18/2021 0312

, CMP
Lab Results

Component	Value	Date/Time
Glucose	105 (H)	12/18/2021 0312
BUN	12	12/18/2021 0312
Creatinine	0.66	12/18/2021 0312
BUN/Crea Ratio	18.2	12/18/2021 0312
Sodium	138	12/18/2021 0312
Potassium	4.1	12/18/2021 0312
Chloride	104	12/18/2021 0312
CO2	27	12/18/2021 0312
Anion Gap	7	12/18/2021 0312

Calcium	9.1	12/18/2021 0312
Protein, Total	6.7	12/18/2021 0312
Albumin	3.9	12/18/2021 0312
A/G Ratio	1.4	12/18/2021 0312
Alkaline Phosphatase	71	12/18/2021 0312
AST (SGOT)	60 (H)	12/18/2021 0312
Bilirubin, Total	0.6	12/18/2021 0312

, Magnesium No results found for: MAGNESIUMLVL

WEIGHTS:

Most Recent 5 Weights

	12/14/2021 1306	12/16/2021 1007
Weight:	106.1 kg (234 lb)	110.2 kg (242 lb 15.2 oz)
Drug Calc (Dosing) Weight:	—	110.2 kg (242 lb 15.2 oz)

Continuous Medications

• enoxaparin (LOVENOX) SUBCUTANEOUS-PROPHYLAXIS	40 mg	Subcutaneous	Q24H SCH 1800
• pantoprazole	40 mg	Intravenous	Q24H SCH

Current Code status: Full Code

DVT Prophylaxis: Currently on

Hematological Agents

	Sig
enoxaparin (LOVENOX) injection 40 mg	40 mg, Subcutaneous, EVERY 24 HOURS SCHEDULED 1800, Administer while patient is LYING down. Give SubQ ONLY. DO NOT administer in the midline (navel/belly button) area. Midline administration can cause hematomas.Administer laterally: Left or Right abdominal wall ("love handles").Do NOT rub injection site.Alternate injection sites between the left and right anterolateral and left and right posterolateral abdominal wall.

Anti-Embolism Devices: Bilateral;Sequential compression devices, below knee (12/18/21 0823)

12/18/2021

Total Time: 25 mins was spent with the patient 12/18/2021, with examining the patient, reviewing relevant EMR labs, orders, consultant plans when pertinent, creating the record (20 mins on the average). Additional time was spent on counseling and coordination of care with other physicians, radiologist, case managers and pharmacists as deemed pertinent (10 mins on the average).

Medical Decision Making:

This case supports HIGH complexity medical decision making as evidenced by the number and potential severity of the differential diagnoses given above. Although these diagnoses were considered, the most likely diagnoses are included under the assessment. Some diagnoses were excluded from the assessment category by review of the history, physical, labs, radiology and review of other providers documentation within the EPIC medical record.

- Patient presented with more than 2 chronic problems
- New acute problem identified on admission and required significant work up
- Extensive number of diagnosis or management options are considered above.
- Extensive amount of complex data reviewed.
- High risk of complication and/or morbidity or mortality are associated with differential diagnostic considerations above.
- There may be Uncertain outcome and increased probability of prolonged functional impairment or high probability of severe prolonged functional impairment associated with some of these differential diagnosis.

Medical Data Reviewed:

1.Data reviewed on 12/18/2021 include relevant clinical labs listed above, Medications listed above, radiology, Medical Tests;
2.Tests results discussed w/performing or interpreting physician;
3.Obtaining/reviewing relevant old medical records;
4.Obtaining case history from another source;
5.Independent review of image, tracing or specimen.
Patient education was provided including the following: review of diagnostics including any radiologic diagnostics, electrodiagnostic, or laboratory evaluation; and review of possible working diagnosis and differential diagnosis, and review of possible therapeutic options. The patient was ready to learn and there were no barriers to learning identified.

Patient education was provided including the following: review of diagnostics including any radiologic diagnostics, electrodiagnostic, or laboratory evaluation; and review of possible working diagnosis and differential diagnosis, and review of possible therapeutic options.
All questions were answered

Irene A Julian, P.A.

Dear,

Honorable Judge Thomas P. Barber,

I hope this letter finds you in the compassion and understanding that you have for the people and the court of this great nation. My name is Ismaelle Manuel, Denis Casseus's wife. I am writing with a heavy heart to request an early release for my husband and great-father to our kids, Denis Casseus, Docket No. 2:23-cr-9-TPB-KCD. Who was given permission on December 21st, 2023, to escort himself to PEN with registration no. 42013-510 Or if possible, give him house arrest, that way he will at least have a chance to work short hours and help me with assisting our children's needs since I am not able to work long hours due to medical issues.

I recently visited the doctor because of the severe back pain I have been having due to having 3 major surgeries done at once, gastric sleeve, hiatal hernia repair, and cholecystitis. I was sent to do an x-ray and I will have to attend therapy during the week too. I will attach my medical record with this letter for review. I will also attach my mental health paper with this letter.

Honorable please tempered justice with mercy. I know what we did was wrong, but we have received a lot of punishment for it. I am pleading on behalf of my husband to please allow him to come to his family because we desperately need his help at home. I will not be able to take care of 5 children alone plus my sick mother due to my health issues. It pains me to see my 19-year-old intelligent and smart daughter pose her college classes to assist me with her young siblings on top of that working a night shift job at Health Park Hospital to assist with the family's financial situation.

Your Honor, we have learned from our mistake, and we are remorseful. My husband is a hard-working father and husband who cares for the wellbeing of his family and without him, we have been feeling a huge void upon us. I am worried that my 16-year-old daughter who has been having a hard time each time she thinks about her dad not going to be here to see her walking on the stage of her high graduation with all her accomplishments over the years. He made a lot of mistakes in his life, but I watch him grow from them day by day. I believe he learned from his mistake and that he will not trust people which will lead him to bad behavior.

Your honor, as I mentioned before in my previous motion after the eviction, which has put a lot of pressure on our family. I appreciate the opportunity you gave me to be able to be home with my kids. I have used this opportunity to accomplish some good things for my children. After my sentencing hearing, I enrolled at Florida Academy to become a professional esthetician because I was having difficulty finding a job as a CAN due to my background check. I finally secured a job at the Winsor of Cape Coral as a Med Tech/CAN from 10 pm to 6 am so that I can drop my son at school and get myself ready to go to class. I am also enrolled back at Rasmussen University for Business Administration. I will be starting classes in March 2024.

Your Honor, we are not bad people, we came to this country as immigrants from Haiti. We earned our citizenship in the United of America and since we have resided in this country all we did was go to school to learn English and go to trade schools and college. We participate in the American economy by starting businesses and providing jobs to other individuals. But we let all that go to waste by following a friend's footsteps. I will not say that I nor my dear husband are perfect

individuals, we all make mistakes at some points in life, but some mistakes are hard to repair and all we can do is accept our fault, take responsibility, be remorseful, and ask for mercy as well as redemption.

Your Honor, I am submitting the Motion for Sentence Reduction Under 18 U.S.C18 U.S. § 3553 (c)(1)(A) (Compassionate Release) form with the attachment of Proposed Release Plan and the attachment of my Medical Records and additional Medical Information on behalf of my husband as he helps me with the completion of the form but since he is absent I will be the one sign it on his behalf. Please take this case into consideration if it is not for him or me his wife Ismaelle Manuel but for the future of our 5 beautiful, intelligent, and smart kids (Roodenaicka, 19 yrs. old, college student at FSW in Biology major) (Junie, 16 yrs. old, will be high school graduate this year) (Josiah, 6 yrs. old, doing amazing in kindergarten), (Jonah, 4 yrs. old, who is about to go to pre-school this year) and (Jaelle, our precious 7 months old baby girl who used to her father loves a lot). I know this motion is for inmates who are not a threat to society and for inmates who have never committed an offense before and have never committed any crime before. Today, I am using this form to plead for mercy on behalf of my husband. Please, your honor, grant him with early release or house arrest so that he can help me with the children with this economy I will not be able to do it alone with 5 children.

I am hopeful that you will temper justice with mercy as a well-known father, husband, and a great judge of this country who understands people and always works for the best of your nation.

Sincerely,

Ismaelle Manuel

Dear Honorable Judge Thomas P. Barber,

My name is Ismaelle Manuel, Denis Casseus's wife. Please I would like to submit this email that was sent to me by Denis Casseus, Docket No.2:23-cr-9-TPB-KCD, on his behalf.

From: Denis Casseus,

How are you doing today, How are the kids doing? I know you're not feeling good same here, I still cannot eat, and I cannot sleep well I keep thinking about our kid's life I am thinking how you guys will be homeless without me because I know how you are sick you cannot really work my life going through a lot of stress depress, I'm a not feeling well at all bb.

My love please send this later to Honorable Judge THOMAS BARBER for me and please correct any mistakes before you send it thank you.

Honorable Judge Thomas Barber,

As a responsible Father of five beautiful intelligent kids and a beautiful courageous sick wife, my family problems have been extremely complicated since I have been in prison my wife Ismaelle Manuel has been involved in three surgeries she cannot work a full-time job to take this big size family I would like to get your special attentions on my case a mistake I made by a friend influence that I paid 10% to do the loan and the calculation shows that I don't own more $ 5000 to the SBA, therefore, please my Honorable Judge Thomas P. Barber, don't let my daughter Roodenaicka losing her College opportunity, please my Honorable don't let my family become homeless because of my mistake I believe I learned enough now I never try to heat no body please thank my Honorable be understand and compassion thank you. Your honor, I am remorseful, and I am pleading for forgiveness as well as redemption for my children's sake. I am willing to work hard to pay the money back, all I am asking is to grant me early release or house arrest even with an anklet monitor under supervision will be enough for me to assist my wife and children. I am a hard-working person I can work to assist her financially as the economy is so high right now.

I know Ismaelle will never find anyone to help her with five children and I already know she cannot afford that by herself. Please Honorable you have a great Father with a great heart please save my children's lives and education by compassion to back doing business and work to support my family thank my Honorable God bless you.

Sincerely,

Denis Casseus

Dear Honorable Judge Thomas P. Barber,

I hope this letter finds you in good health. I am writing to you with a heavy heart to request the release of my father, Denis Casseus, Docket No. 2:23-cr-9-TPB-KCD, who has been incarcerated for his involvement in the COVID-19 relief situation.

First and foremost, I want to emphasize the impact my father's absence has had on our family. He is not only a loving and devoted father but also the backbone of our household. Without him, our family feels incomplete, like a puzzle missing its essential piece. His presence brings us comfort, stability, and a sense of unity that we sorely miss.

Moreover, as I approach my senior year, I cannot fathom the thought of spending such a significant milestone without my father by my side. His unwavering support and motivation have been instrumental in shaping the person I am today. His guidance and encouragement have pushed me to strive for excellence, and I fear that his absence will leave a void in my educational journey.

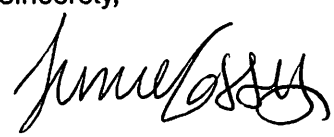
I want to highlight the selflessness my father has displayed throughout this challenging situation. He willingly shouldered the burden and hardships, protecting our family from the stress and financial strain that could have engulfed us. His sacrifice speaks volumes about his character and his commitment to our well-being.

I understand the gravity of the situation and the need for accountability. However, I firmly believe that my father has learned from his mistakes and is genuinely remorseful for his actions. He is determined to make amends, not only to our family but also to society as a whole.

I kindly request your compassionate consideration in granting my father early release. His presence at home is crucial for our emotional and financial stability. We are ready to support him in his journey towards redemption and reintegration into society.

Thank you for taking the time to read this letter and for your understanding. I trust in your wisdom and compassion to make a just decision.

Sincerely,



Junie Casseus

Dear Honorable Judge Barber,

I hope this letter finds you well, my name is Roodenaicka Casseus, I am the daughter of Denis Casseus. I am writing to you today to discuss my fathers case and to be the most humbling and request you mercy on the remaining time he serves in prison. My father Denis Casseus means the world to me and our family. As the head of our household His absence these last few weeks has tremendously affected our family. It is taking a huge toll on me as the eldest to sacrifice most of my day to help out with my siblings, weather is picking up my brother from school, running constant errands and having to work a night shift position at the Healthpark emergency room, whilst still trying to attend college to obtain my Bachelors in biology. Although at this time I have decided to pause my learning after this spring semester due to the inability to attend my classes regularly and not having my dads financial and physical help to continue on in school. I also acknowledge and understand the gravity of his actions and respect the court's efforts to uphold justice, However, I believe that the consequences that my family has and is facing such as being evicted from the house the state is taking back, trying to find a place to stay in this economy with four other siblings, our financial hardships, stress, and the ability to confidently say how we are going to live whilst both of my parents are repaying for the money they stole, have been a significant punishment in themselves.

Even before my father was sent to prison he was making many efforts to work more and give us some guidance prior to leaving us, although our time was cut short together he showed us that he came to an acceptance with your decision despite his effort to show that he is actually a good citizen who just got mixed up in the wrong ordeal. He believes in therapy and has amended from his mistakes. We as a family have committed to support my dad through a path of reformation and are certain that he will make positive changes. Your compassion at this juncture would not only impact my fathers life but will also provide our family the opportunity to heal and rebuild. Thank you very much for considering my plea to possibly lessening his sentence. We trust in your wisdom and outstanding kindness thus far and hope you see beyond this case and acknowledge the profound effects your decision will have on our lives.

Sincerely,

Roodenaicka Casseus