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U.S. Citizenship and Immigration Services

USCIS Fee Payment

**Required Field*

Please use this form to pay the fee for the USCIS benefit requested. If the Applicant is unable to make this payment, another person can make this payment on the Applicant's behalf. Enter the Applicant's information in the fields below. If you have any questions about your case status please visit the [USCIS](#) website or call 1-800-375-5283.

* Receipt Number: OR *A Number: A

*Last Name:

*First Name:

Middle Name:

*Country: * Date of Birth:

* USCIS Benefit: *Total Payment: \$

[Click here for Privacy Act Statement](#)

Submit Data

PDF Preview

It may take several minutes to process the form. Please be patient.

Note: Please avoid navigating the site using your browser's Back Button - this may lead to incomplete data being transmitted and pages being loaded incorrectly. Please use the links provided whenever possible.