

**Form I-690 Table of Changes – FORM**  
**OMB No. 1615-0032**  
**November 4, 2011**

<b>LOCATION</b>	<b>CURRENT VERSION</b>	<b>PROPOSED VERSION</b>
<b>Page 1,</b> <b>5.</b>	<b>U.S. Social Security Number</b>	<b>U.S. Social Security Number (NOTE:</b> Social Security Number is optional)