



**U.S. Citizenship
and Immigration
Services**

F-104 Mockup

**Applicant Creates Immigrant
Fee Case(s) for Additional**

People
Backlog Liquidators

March 14, 2013

Applicant Enters Immigrant Fee Case Details

Immigrant Visa DHS Domestic Processing Fee

About You
Information About You (Applicant)

* Indicates Required Field

Name

Last Name (Family Name)* Cash	First Name (Given Name)* Johnny <input type="checkbox"/> No First Name Check No First Name if you do not have a first name	Middle Name* NMN <input checked="" type="checkbox"/> No Middle Name Check No Middle Name if you do not have a middle name
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Immigrant Fee Information

A-Number*	A999999999	A123456789
DOS Case ID*	ABC9999999999	ABC1234567890

Date and Place of Birth

Date of Birth*	Month January	Day 1	Year 1980
Country of Birth*	Afghanistan		

Would you like to pay for additional people as part of this transaction? Yes: No:

< Back Exit Save Next >

Notes:

Applicant is asked if they want to pay for additional people?

IV Details for Additional Applicant

Immigrant Visa DHS Domestic Processing Fee ?

About Additional Applicant(s)

Information About Additional Applicant(s)

** Indicates Required Field*

Name

Last Name (Family Name)* Cash	First Name (Given Name)* Mary <input type="checkbox"/> No First Name <small>Check No First Name if you do not have a first name</small>	Middle Name* Jane <input type="checkbox"/> No Middle Name <small>Check No Middle Name if you do not have a middle name</small>
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Immigrant Fee Information

A-Number*	A888888888	A123456789
DOS Case ID*	ABC8888888888	ABC1234567890

Date and Place of Birth

Date of Birth*	Month February	Day 28	Year 1981
Country of Birth*	Belgium		

Notes:

Form screen to collect the additional applicants IV information

Cancel

Save

Summary View of Additional Applicants Added

Immigrant Visa DHS Domestic Processing Fee
?

About You

Information About You (Applicant)

* Indicates Required Field

Name

Last Name (Family Name)*

First Name (Given Name)*

No First Name
Check No First Name if you do not have a first name

Middle Name*

No Middle Name
Check No Middle Name if you do not have a middle name

Immigrant Fee Information

A-Number* A123456789

DOS Case ID* ABC1234567890

Date and Place of Birth

Date of Birth*

Month	Day	Year
<input type="text" value="January"/> ▼	<input type="text" value="1"/> ▼	<input type="text" value="1980"/> ▼
Month	Day	Year

Country of Birth* ▼

Notes:

Tabulated view of each additional applicant included within the same transaction.

Additional Applicants:

Applicant Name	A-Number	DOS Case ID	Date of Birth	Country of Birth	
Cash, Mary Jane	A888888888	ABC8888888888	2/28/1981	Belgium	Remove
Cash, Daniel NMN	A777777777	ABC7777777777	3/15/1990	Belgium	Remove

Fee Review for Multiple Applicants

FORMS NEWS RESOURCES LAWS OUTREACH

About You
Fee Review
Application Review
Payment

Immigrant Visa DHS Domestic Processing
?

Fee Review

* Indicates Required Field

i Your draft application has been saved.

Fee Review

Please review the fees associated with your application.

If you need to modify any part of your application, use the left navigation to return to that section.

Application	Fee
Immigrant Visa DHS Domestic Processing (Cash, Johnny)	\$165.00
Immigrant Visa DHS Domestic Processing (Cash, Mary Jane)	\$165.00
Immigrant Visa DHS Domestic Processing (Cash, Daniel)	\$165.00
Total Fee:	\$495.00

< Back
Exit
Save
Next >

Notes:

Each applicant is shown as a line-item along with the total fee of \$495.00

Intake Snapshot Review

- About You
- Fee Review
- Application Review ←
- Payment

Immigrant Visa DHS Domestic Processing

Application Review

* Indicates Required Field

Standard and has been opened read-only to prevent modification.

Electronic Filing Only

Immigrant Visa DHS Domestic Processing

Department of Homeland Security
U.S. Citizenship and Immigration Services (USCIS)

Page 1 of 3

*This document is a printable version of your electronically submitted information as of Friday Feb 15 2013 11:12:16 AM EST
*All time stamps shown on this snapshot should be considered as representing the same time zone that appears in the stamp shown here**

Part 1. Immigrant Visa Information

Identification Information

1. DOS Case ID Jack1234567888

2. Alien Registration Number A-292-919-955

Name

3.a. Last Name (Family Name) Asafa

3.b. First Name (Given Name) Powel

3.c. Middle Name NMN

3.d. No First Name

3.e. No Middle Name

Date of Birth

4. Date of Birth (mm/dd/yyyy) 04/10/1962

Address

Mailing Address

5.a. In Care of Name

5.a.1. Street Number 2119

5.a.2. Street Name or P.O. Box About You Street

5.a.3. Apartment / Suite Number

5.a.4. City or Town London

5.a.5. State

5.a.6. ZIP Code

5.a.7. Province England

5.a.8. Postal Code 20115

< Back Exit Save Next >

Notes:

A continuous snapshot will be displayed with all the applicants on it.

User will be able to scroll down to view each applicants details

Payment Review for Multiple Applicants

Immigrant Visa DHS Domestic Processing

Payment

* Indicates Required Field

Payment

You can now submit payment at this time. USCIS will not process your case until payment is received in full.

Electronic payments are processed by Pay.gov, a secure United States government website.


Application	Fee
Immigrant Visa DHS Domestic Processing (Cash, Johnny)	\$165.00
Immigrant Visa DHS Domestic Processing (Cash, Mary Jane)	\$165.00
Immigrant Visa DHS Domestic Processing (Cash, Daniel)	\$165.00
Total Fee:	\$495.00

< Back Exit Save Next >

Notes:

Each applicant is shown as a line-item along with the total fee of \$495.00

PAY.gov Page

 U.S. Citizenship and Immigration Services

System Message

- The system has populated the Payment Date with the next available payment date.

Online Payment [Return to your originating application](#)

Step 1: Enter Payment Information 1 | 2

This item is payable by [Bank Account Debit \(ACH\)](#) or [Plastic Card \(ex: VISA, Mastercard, American Express, Discover\)](#)

Option 1: Pay Via Bank Account (ACH) [About ACH Debit](#)

Required fields are indicated with a red asterisk *

Account Holder Name: *

Payment Amount: \$495.00 ←

Account Type: *

Routing Number: *

Account Number: *

Confirm Account Number: *

Check Number:

Routing Number: 10 26 94 6 7 6 3
Account Number: 9 2 4 3 7 6 7 3 9 0
Check Number: 1 2 3 4

Payment Date: 02/20/2013

Select the "Continue with ACH Payment" button to continue to the next step in the ACH Debit Payment Process.

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.

Option 2: Pay Via Plastic Card (PC) (ex: VISA, Mastercard, American Express, Discover)

Required fields are indicated with a red asterisk *

Account Holder Name: *

Payment Amount: \$495.00 ←

Billing Address: *





Billing Address 2:

City:

State / Province:

Zip / Postal Code:

Country: United States

Card Type: *    

Card Number: * (Card number value should not contain spaces or dashes)

Security Code: * [Help finding your security code](#)

Expiration Date: * / *

Select the "Continue with Plastic Card Payment" button to continue to the next step in the Plastic Card Payment Process.

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.

Notes:

Total payment amount is displayed in pay.gov as \$495.00 (3 x \$165.00)

PAY.gov Page



U.S. Citizenship and Immigration Services

Online Payment [Return to your originating application](#)

Step 2: Authorize Payment 1 | 2

Payment Summary [Edit this information](#)

Address Information	Account Information	Payment Information
Account Holder Name: asd Billing Address: 123 sadfasd Billing Address 2: City: State / Province: Zip / Postal Code: Country: USA	Card Type: Visa Card Number: *****1111	Payment Amount \$495.00 Transaction Date 02/19/2013 14:40 and Time: EST

Email Confirmation Receipt
To have a confirmation sent to you upon completion of this transaction, provide an email address and confirmation below.

Email Address:

Confirm Email Address:

CC: Separate multiple email addresses with a comma

Authorization and Disclosure
Required fields are indicated with a red asterisk *

I authorize a charge to my card account for the above amount in accordance with my card issuer agreement. *

Press the "Submit Payment" Button only once. Pressing the button more than once could result in multiple transactions.

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.

Notes:

Total payment amount is displayed in pay.gov as \$495.00 (3 x \$165.00)