TABLE OF CHANGES – FORM

Form I-829, Petition by alien Entrepreneur to Remove Conditions on Permanent Resident Status

OMB Number: 1615-0026 Submission Date 12/12/2014

Reason for Revision: Operational, USCIS standard formatting, and plain language updates

Current Section and Page Number	Current Text	Proposed Text
For USCIS Use Only	Received Resubmitted Relocated Received Sent	Received (mm/dd/yyyy) Resubmitted (mm/dd/yyyy) Relocated (mm/dd/yyyy) Received (mm/dd/yyyy) Sent (mm/dd/yyyy)
m 1 1 1 1	Applicant Interviewed	Petitioner Interviewed (mm/dd/yyyy)
To be completed by attorney or accredited representative (if any)		[Page 1] To be completed by an attorney or accredited representative (if any).
	Fill in box if G-28 is attached to represent the applicant.	Select this box if Form G-28 is attached to represent the petitioner.
	Attorney State License Number:	Attorney State Bar Number (if applicable)
		Attorney or Accredited Representative USCIS ELIS Account Number (if any)
New		[Page 1]
		Part 1. Information About Regional Center
		1. Was the investment by the entrepreneur associated with an approved regional center?
		If you answered "Yes" to Item Number 1. , please complete Item Numbers 2.a 2.c.
		2.a. Name of Regional Center
		2.b. Regional Center Identification Number
		2.c. Receipt number for the approved Form I-924, Application For Regional Center Under the Immigrant Investor Program, upon which the related Form I-526, Immigrant Petition by Alien Entrepreneur, was based
Page 1, Part 2. Basis		[Page 1]
for Petition (Check one)		Part 2. Basis for Petition
		Select only one box.

	 a. My conditional permanent residence is based on an investment in a commercial enterprise. b. Reserved. c. Reserved. d. I am a conditional permanent resident spouse or child of an entrepreneur, and I am unable to be included in a Petition by Entrepreneur to Remove Conditions (Form I-829) filed by my conditional resident spouse or parent. e. I am a conditional permanent resident spouse or child of an entrepreneur who is deceased. 	 I am a conditional permanent resident based on my investment in a commercial enterprise. [Deleted] I am a conditional permanent resident who is the spouse, former spouse, or child of an entrepreneur, and I am filing separately from the entrepreneur's Form I-829. I am a conditional permanent resident spouse or child of an entrepreneur who has died.
Page 1, Part 1. Information About You	Family Name Given Name Middle Name	[Page 1] Part 3. Information About You 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name
	[At beginning and end of this part] A-Number (if any) U.S. Social Security No (if any)] Form I-526 Receipt Number	2. Alien Registration Number (A-Number) (if any) 3. USCIS ELIS Account Number (if any) 4. U.S. Social Security Number (if any) 5. Form I-526 Receipt Number on which this petition is based Other Names You Have Used (including maiden name, nicknames, and aliases, if any) 6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name 7.a. Family Name (Last Name) 7.b. Given Name (First Name) 7.c. Middle Name
	Address: In Care Of Street Number and Name Apt. No City State or Province Country Zip/Postal Code	[Page 2] Your U.S. Mailing Address 8.a. In Care Of Name (if any) 8.b. Street Number and Name 8.c. Apt. Ste. Flr. [Number] 8.d. City or Town 8.e. State 8.f. ZIP Code 9. Is your mailing address the same as your physical address? If your mailing address and the address where you currently live (physical address) are not the same, you MUST provide your current physical

		address in the Item Numbers 10.a 10.h.
		Your Physical Address 10.a. Street Number and Name 10.b. Apt. Ste. Flr. [Number] 10.c. City or Town 10.d. State 10.e. ZIP Code 10.f. Postal Code 10.g. Province 10.h. Country
	Daytime Phone No	[Moved to Part 8.]
	Date of Birth Country of Birth	Other Information About You 11. Date of Birth (mm/dd/yyyy) 12. Gender Male/Female 13. Country of Birth 14. Country of Citizenship or Nationality
	Since Becoming a conditional permanent resident, have you ever been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance (excluding traffic regulations), or committed any crime for which you were not arrested?	Criminal History 15. Since becoming a conditional permanent resident, have you EVER been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)?
		16. Since becoming a conditional permanent resident, have you EVER committed any crime for which you were not arrested?
	(If yes, explain on a separate sheet(s) of paper, including disposition, if any.)	If you answered "Yes" to Item Number 15., you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to Item Number 16., provide the date and location (town or city/state or province/country) of the events and provide an explanation in Part 11. Additional Information
Page 1, Part 3.		[Page 2]
Information About Your Husband or Wife		Part 4. Information About Your Current Spouse or Your Former Conditional Permanent Resident Spouse
	Family Name Given Name Middle Name	1.a. Family Name (Last Name)1.b. Given Name (First Name)1.c. Middle Name
	Gender Male/Female A-Number (if any) Date of Birth (mm/dd/yyyy)	 Gender Male/Female A-Number (if any) USCIS ELIS Account Number (if any) Date of Birth (mm/dd/yyyy)
	Other names used (including maiden name or aliases	Other Names Used (if applicable) 6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name
	3	

	T	
		7.a. Family Name (Last Name)7.b. Given Name (First Name)7.c. Middle Name
		[Page 3]
		Mailing Address
		8.a. Street Number
		and Name
		8.b. Apt. Ste. Flr.
		8.c. City or Town
		8.d. State
		8.e. ZIP Code 8.f. Postal Code
		8.g. Province
		8.h. Country
		, and the second
		Other Information
		9. Current Spouse/Former Conditional
	Date of Marriage (mm/dd/yyyy)	Permanent Resident Spouse 10. Date of Marriage (mm/dd/yyyy)
	Date of Marriage (min/dd/yyyy)	11. Date Marriage (mm/dd/yyyy)
		12. Is this spouse currently living with you?
		13. Is this spouse applying with you?
	Current Immigration Status	14. Current Immigration Status (for example,
		conditional resident, tourist/visitor, entered
	To account the second of the s	without inspection)
	Is your current status based on the petitioner's current status	15. Is the current immigration status of your
	Current status	spouse or former spouse based on your current immigration status?
		NOTE: If you have both a current spouse and a
		former conditional permanent resident spouse, use Part 11. Additional Information to provide this same information about your current spouse
		or former conditional permanent resident spouse
		who you did not already include in Part 4. above.
Page 2, Part 4.		[Page 3]
Children (List all of your children. Attach		Part 5. Information About Your Children
another sheet(s) or paper, if necessary.)		Provide the following information about your children.
		Child 1
		1.a. Family Name (Last Name)
	Family Name	1.b. Given Name (First Name)
	Given Name	1.c. Middle Name
	Middle Name	2. Gender Male/Female
	A-Number (if any)	3. A-Number (if any)
	, ,,	4. USCIS ELIS Account Number (if any)
	Date of Birth (mm/dd/yyyy)	5. Date of Birth (mm/dd/yyyy)
		Other Names Used (if applicable)
		6.a. Family Name (Last Name)
		6.b. Given Name (First Name)

	6.c. Middle Name
	Mailing Address
	 7.a. Street Number and Name 7.b. Apt. Ste. Flr. 7.c. City or Town 7.d. State 7.e. ZIP Code 7.f. Province 7.g. Postal Code 7.h. Country
	[Page 4]
Living with you? Current Immigration Status	 Child 1 (continued) 8. Is this child currently living with you? 9. Is this child applying with you? 10. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)
Family Name Given Name Middle Name	Child 2 11.a. Family Name (Last Name) 11.b. Given Name (First Name) 11.c. Middle Name
A-Number (if any) Date of Birth (mm/dd/yyyy)	 12. Gender Male/Female 13. A-Number (if any) 14. USCIS ELIS Account Number (if any) 15. Date of Birth (mm/dd/yyyy)
	Other Names Used (if applicable) 16.a. Family Name (Last Name) 16.b. Given Name (First Name) 16.c. Middle Name
	Mailing Address 17.a. Street Number and Name 17.b. Apt. Ste. Flr. 17.c. City or Town 17.d. State 17.e. ZIP Code 17.f. Province 17.g. Postal Code 17.h. Country
Living with you? Current Immigration Status	18. Is this child currently living with you?19. Is this child applying with you?20. Current Immigration Status (for example, conditional resident, tourist/visitor, entered
Family Name Given Name Middle Name	without inspection) Child 3 21.a. Family Name (Last Name) 21.b. Given Name (First Name) 21.c. Middle Name
 5	22. Gender Male/Female

A-Number (if any)	23. A-Number (if any)
	[Page 5]
	Child 3 (continued)24. USCIS ELIS Account Number (if any)
Date of Birth (mm/dd/yyyy)	25. Date of Birth (mm/dd/yyyy)
	Other Names Used (if applicable)
	26.a. Family Name (Last Name)
	26.b. Given Name (First Name)
	26.c. Middle Name
	Mailing Address
	27.a. Street Number and Name
	27.b. Apt. Ste. Flr.
	27.c. City or Town 27.d. State
	27.e. ZIP Code
	27.f. Province
	27.g. Postal
	27.h. Country
Living with you?	28. Is this child currently living with you?
	29. Is this child applying with you?
Current Immigration Status	30. Current Immigration Status (for example, conditional resident, tourist/visitor, entered
	without inspection)
	"Amout inspection)
	Child 4
Family Name	31.a. Family Name (Last Name)
Given Name	31.b. Given Name (First Name)
Middle Name	31.c. Middle Name
	32. Gender Male/Female
A-Number (if any)	33. A-Number (if any)
Date of Birth (mm/dd/yyyy)	34. USCIS ELIS Account Number (if any) 35. Date of Birth (mm/dd/yyyy)
Date of Dirti (illin/de yyyy)	So. Date of Ditti (initiadayyyy)
	Other Names Used (if applicable)
	36.a. Family Name (Last Name)
	36.b. Given Name (First Name) 36.c. Middle Name
	Mailing Address
	37.a. Street Number and Name 37.b. Apt. Ste. Flr.
	37.c. City or Town
	37d. State
	37.e. ZIP Code
	37.f. Province 37.g. Postal Code
	37.h. Country
Lining a risk area?	
Living with you?	38. Is this child currently living with you?39. Is this child applying with you?
Current Immigration Status	40. Current Immigration Status (for example,
	conditional resident, tourist/visitor, entered
	without inspection)

		If you need extra space to list additional children, use the space provided in Part 11. Additional Information or attach a separate sheet of paper; type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.
New		[Page 6]
		Part 6. Your Biographic Information
		1. Ethnicity (Select only one box)
		Hispanic or Latino Not Hispanic or Latino
		Not rispanic of Latino
		2. Race (Select all applicable boxes)
		White Asian
		Black or African American
		American Indian or Alaska Native
		Native Hawaiian or Other Pacific Islander
		3. Height Feet Inches
		4. Weight Pounds
		5. Eye Color (Select only one box)
		Black
		Blue
		Brown Gray
		Green
		Hazel
		Maroon
		Pink
		Unknown/Other
		6. Hair Color (Select only one box)
		Bald (No hair)
		Black
		Blond Brown
		Gray
		Red
		Sandy
		White Unknown/Other
Page 2 - 3, Part 5.	[Page 2]	[Page 6]
Information About		
Your Commercial		Part 7. Information About the New
Enterprise		Commercial Enterprise (NCE)
F	Type of Enterprise (Check one):	Type of Enterprise
	New commercial enterprise resulting from the creation of a new business.	1. NCE formed after November 29, 1990.
	New commercial enterprise resulting from the reorganization of an existing business.	2. NCE resulting from the purchase of a business, formed on or before November 29, 1990, that has

been restructured or reorganized. **3.** NCE resulting from a capital investment in, New commercial enterprise resulting from a capital investment in an existing business. and substantial expansion of, a business formed on or before November 29, 1990. Kind of Business (Be as specific as possible): **Additional Information About the NCE 4.** Name of the NCE **Physical Address** 5.a. Street Number and Name **5.b.** Apt. Ste. Flr. 5.c. City or Town **5.d.** State 5.e. ZIP Code **6.** Telephone Number **7.** Internet Web site Address (if established) **8.** Type of Business Organization (for example, corporation, limited liability company, partnership) **9.** Nature of Business (for example, furniture manufacturer) **10.** Included Industries (select North American Industry Classification System (NAICS) code or codes) 11. IRS Tax Identification Number [Page 7] Date Business Established (mm/dd/yyyy) **12.** Date Business Established (mm/dd/yyyy) **Amount of Initial Investment 13.** Amount of the Entrepreneur's **Initial** Investment in the NCE **Date of Initial Investment** (mm/dd/yyyy) **14.** Date of the Entrepreneur's **Initial** Investment (mm/dd/yyyy) **15.** What percentage of the NCE does the % of Enterprise You Own entrepreneur own? **16.** Is this petition based on investment in a troubled business? [Page 3] **Subsequent Investment in the Enterprise: Subsequent Investments in the NCE** Provide the following information about how much the entrepreneur has invested in the NCE since the entrepreneur's **initial** investment. **Date of Investment 17.a.** Date of Subsequent Investment (mm/dd/yyyy) **Amount of Investment 17.b.** Amount of Subsequent Investment **Type of Investment 17.c.** Type of Subsequent Investment (for example, cash, equipment, inventory, other tangible property, cash equivalents, or qualifying indebtedness as described in

> Date of Investment Amount of Investment Type of Investment

[Delete]
[Delete]

8 CFR 204.6(e))

Date of Investment [Delete] **Amount of Investment** [Delete] Type of Investment [Delete] **NOTE:** If multiple investments have been made since the entrepreneur's initial investment in the commercial enterprise, use Part 11. Additional **Information** to list the dates, amounts, and types of investments. Number of full-time employees in enterprise in **Full-time Positions and Qualifying Employees** Provide the number of full-time positions for United States (excluding you, your spouse, sons, and daughters): direct and qualifying employees in the NCE in the United States (excluding you, your spouse, and your children): **18.a.** At the time of the Entrepreneur's **Initial** At time of your initial investment: Investment Presently: [Delete] Difference: [Delete] **18.b.** Currently Employed in the NCE How many of these new jobs were created by **Job Creation** vour investment? **19.a.** How many new direct jobs did the entrepreneur's investment create? 19.b. How many new direct jobs will the entrepreneur's investment create within a reasonable amount of time after filing this petition? **20.a.** If the NCE is associated with an approved regional center, how many indirect jobs were created? **20.b.** If the NCE is associated with an approved regional center, how many indirect jobs will the NCE create within a reasonable amount of time after filing this petition? [new] **21.** If the investment was made into a troubled business, how many jobs were maintained as a result of the investment? **Gross and Net Incomes** Provide the gross and net incomes generated Provide the gross and net incomes generated annually by the commercial enterprises since your annually by the commercial enterprise since the initial investment. Include all income generated entrepreneur's initial investment. Include all up to date the present year. income generated in the present year to date. Year **22.a.** Year (vvvv) **Gross Income 22.b.** Gross Income

Net Income

Year **Gross Income Net Income**

22.c. Net Income

23.a. Year (yyyy)

23.b. Gross Income

23.c. Net Income

		,
	Year	24.a. Year (yyyy)
	Gross Income	24.b. Gross Income
	Net Income	24.c. Net Income
	Has your commercial enterprise filed for bankruptcy, ceased business operations, or have any changes in its business organization or	25. Has the commercial enterprise filed for bankruptcy, ceased business operations, materially changed the nature of the business, or
	ownership occurred since the date of your initial	made any changes in its organization or
	investment?	ownership since the date of the entrepreneur's
	Yes (Explain on separate sheet) No	initial investment? Yes/No
	Has your commercial enterprise sold any corporate assets, shares, property, or had any capital withdrawn since the date of your initial	26. Has the commercial enterprise sold any corporate assets, shares, or property, or had any capital withdrawn since the date of the
	investment? Yes (Explain on separate sheet) No	entrepreneur's initial investment? Yes/No
		NOTE: If you answered "Yes" to Item Number 25. or 26., provide an explanation in Part 11. Additional Information.
		[new]
		27. Provide the total number of EB-5 investors associated with the NCE.
		28. Provide the total amount of EB-5 capital invested into the NCE.
		If you need extra space to provide additional information for any item in Part 7. , use the space provided in Part 11. Additional Information or attach a separate sheet of paper; type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.
Page 3, Part 6.		[Page 8]
Signature (Read the information on penalties in the instructions before completing this section)		Part 8. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature NOTE: Read the information on penalties in the
		Penalties section of the Form I-829 Instructions before completing this part.
		Petitioner's Statement
		NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.
		1.a. I can read and understand English, and have read and understand every question and instruction on this petition, as well as my answer to every question. I have read the Acknowledgement of Appointment at USCIS Application Support Center.

1.b. The interpreter named in **Part 9.** has read every question and instruction on this petition, as well as my answer to every question, in , a language in which I am fluent. I understand every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in **Part 9.** has also read the **Acknowledgement of Appointment at USCIS Application Support Center** to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter.

2. I have requested the services of and consented to , who is is not an attorney or accredited representative, in preparing this petition for me. This person who assisted me in preparing my petition has reviewed the Acknowledgement of Appointment at USCIS Application Support Center with me and I understand the ASC Acknowledgement.

Petitioner's Contact Information

- 3. Petitioner's Daytime Telephone Number
- **4.** Petitioner's Mobile Phone Number (if any)
- **5.** Petitioner's Email Address (if any)

Acknowledgement of Appointment at USCIS Application Support Center

understand that the purpose of a USCIS ASC appointment is for me to provide fingerprints, photograph, and/or signature and to re-affrim that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photographs, and/or signature during my USCIS ASC appointment:

By signing here, I declare under penalty of perjury that I have reviewed and understand my petition, as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my petition that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in

		my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this Acknowledgement of Appointment at USCIS Application Support Center with me.
		Petitioner's Certification Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.
		I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.
	I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it is all true and correct. I further certify that the investment was made in accordance with the laws of the United States and was not for the purpose of evading United Stated immigration laws. I also authorize the release of any information from my records that the U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit being sought.	I certify, under penalty of perjury, that the information in my petition and any document submitted with my petition were provided by me and are complete, true and correct.
	Signature of Applicant Print Name Date	Petitioner's Signature 6.a. Petitioner's Signature [Delete]
	NOTE: If you do not completely fill out this	6.b. Date of Signature (mm/dd/yyyy)
	form or fail to submit any required documents listed in the instructions, you may not be found eligible for the requested benefit and this petition may be denied.	NOTE TO ALL PETITIONERS: If you do not completely fill out this petition or fail to submit required documents listed in the instructions, your petition may be denied.
NEW		[Page 9]
		Part 9. Interpreter's Certification, Contact Information, and Signature
		Provide the following information about the interpreter.
		 Interpreter's Full Name 1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any)
	12	

	Interpreter's Mailing Address
	3.a. Street Number and Name
	3.b. Apt. Ste. Flr.
	3.c. City or Town
	3.d. State
	3.e. ZIP Code
	3.f. Province
	3.g. Postal Code
	3.h. Country
	S.H. Country
	Interpreter's Contact Information
	4. Interpreter's Daytime Telephone Number
	5. Interpreter's Email Address (if any)
	5. Interpreter's Enfant Address (if diff)
	Interpreter's Certification
	I certify that:
	I am flyant in Paralish and
	I am fluent in English and,
	which is the same language provided in Part 8. ,
	Item Number 1.b.;
	I have read to this positioner exercises and
	I have read to this petitioner every question and instruction on this petition, as well as the answer
	to every question, in the language provided in
	Part 8., Item Number 1.b.; and
	Part 6., Item Number 1.0., and
	I have read the Acknowledgement of
	Appointment at USCIS Application Support
	Center to the petitioner in the same language
	provided in Part 8. , Item Number 1.b.
	provided in Fart o., Item Number 1.0.
	The petitioner has informed me that he or she
	understands every instruction and question on the
	petition, as well as the answer to every question,
	and the petitioner verified the accuracy of every
	answer; and
	The petitioner has also informed me that he or
	she understands the ASC Acknowledgement and
	that by appearing for a USCIS ASC biometric
	services appointment and providing his or her
	fingerprints, photograph, and/or signature, he or
	she is re-affirming that the contents of this
	petition and all supporting documentation are
	1
	complete, true, and correct.
	Interpreter's Signature
	6.a. Interpreter's Signature
	6.b. Date of Signature (mm/dd/yyyy)
Page 3, Part 7.	[Page 9]
Signature of Person	
Preparing Form, If	Part 10. Contact Information, Statement,
Other Than Above	Certification, and Signature of the Person
Guier Than Above	Preparing this Petition, If Other Than the
	Petitioner
	Provide the following information about the
	preparer.
	13

Print Name

Firm Name and Address (Include Telephone Number with Area Code and E-Mail Address.)

I declare that I prepared this petition at the request of the above person and it is based on all information of which I have knowledge.

Preparer's Full Name

- **1.a.** Preparer's Family Name (Last Name)
- **1.b.** Preparer's Given Name (First Name)
- **2.** Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

- **3.a.** Street Number and Name
- **3.b.** Apt. Ste. Flr.
- **3.c.** City or Town
- 3.d. State
- 3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- **3.h.** Country

[Page 10]

Preparer's Contact Information

- **4.** Preparer's Daytime Telephone Number
- **5.** Preparer's Fax Number (if any)
- **6.** Preparer's Email Address (if any)

Preparer's Statement

7.a. I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.

7.b. I am an attorney or accredited representative and my representation of the petitioner in this case extends does not extend beyond the preparation of this petition.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you must submit a completed Form G-28, Notice of Attorney or Accredited Representative, with this petition.

Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner. I completed this petition based only on responses the petitioner provided to me. After completing the petition, I reviewed it and all of the petitioner's responses with the petitioner, who agreed with every answer on the petition. If the petitioner supplied additional information concerning a question on the petition, I recorded it on the petition. I have also read the **Acknowledgement of Appointment at USCIS Application Support**

Appointment at USCIS Application Support Center to the petitioner and the petitioner has informed me that he or she understands the ASC Acknowledgement.

Preparer's Signature

8.a. Preparer's Signature

Signature Printed Name

	Date	8.b. Date of Signature (mm/dd/yyyy)
NEW		[Page 11]
		Part 11. Additional Information If you need extra space to provide any additional information within this petition, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this petition or attach a separate sheet of paper. Include your name and A-Number (if any) at the top of each sheet; indicate the Page Number, Part Number, and Item Number to which your answer refers; and sign and date each sheet.
		1.a. Family Name (Last Name)1.b. Given Name (First Name)1.c. Middle Name
		2. A-Number (if any)
		3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d.
		4.a. Page Number4.b. Part Number4.c. Item Number4.d.
		5.a. Page Number 5.b. Part Number 5.c. Item Number 5.d.
		6.a. Page Number6.b. Part Number6.c. Item Number6.d.
		7.a. Petitioner's Signature7.b. Date of Signature (<i>mm/dd/yyyy</i>)