C. FACSIMILE 1: AALN - ALIEN DATA

```
MSSICS                              ALIEN DATA                    PAGE 1 OF AALN
                                                                      [1-O]
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                                  TRANSFER TO: XXXX
[2-M]                                                    [3-M]
U.S. ENTRY DATE (MMDDCCYY): PPPPPPPP                  COUNTRY OF ORIGIN: XX
[4-M]                          [5-O]
ALIEN STATUS CODE: X           ALIEN STATUS VERIFIED (Y/N): X
[6-M]
GRANDFATHERED ALIEN (Y/N): X
[7-C]
IF CODE K, S, Y OR 3, DATE OF LAPR (MMDDCCYY): 99999999
[8-C]
IF CODE F, REFUGEE PER SECTION 207 (Y/N): X
[9-C]
IF CODE L, ASYLEE STATUS GRANTED DATE (MMDDYY): 999999
[10-C]
IF CODE X AND CUBAN/HAITIAN ENTRANT, DATE GRANTED (MMYY): 9999
[11-C]
IF CODE G OR X, PAROLEE STATUS GRANTED FOR 1 YEAR OR MORE (Y/N): X
[12-O]
IF CODE J AND SECTION 243(H), 241(B)(3),
    DEPORTATION WITHHELD DATE (MMDDYY): 999999
[13-C]
IF CODE Z, BATTERY PETITION FILED (Y/N): X
[14-O]                  [15-C]                      [16-C]
EXCEPTION MET: 9        FROM (MMDDYY): 999999       TO: (MMDDYY): 999999
    1=ACTIVE DUTY MILITARY/VETERAN        3=CHILD OF MILITARY/VETERAN
    2=SPOUSE/WIDOW(ER) OF MILITARY/VETERAN
[17-C]
IF EXCEPTION 2 OR 3, MILITARY/VETERAN SSN: 999999999
[18-C]
IF CODE K, S, Y OR 3 OR NEW VERSION AFFIDAVIT IN EFFECT,
    40 QCS CREDITED (Y/N): X     [19-C]
                                 IF YES, DATE MET (MMYY): 9999
    [20-C]                              [21-C]
    QCS FROM ANOTHER WORKER (Y/N): X    IF YES, WORKER SSN: 999999999
[23-C]                      [22-D]                      [24-O]
SPONSORED AT ANY TIME SINCE SS/SS/SSSS (Y/N): X         REMARKS (Y): X
```

D. FACSIMILE 2: AALN - ALIEN DATA

```
MSSICS                              ALIEN DATA                    PAGE 2 OF AALN
                                                                      [1-O]
 SSS-SS-SSSS   SSSSS SSSSSSSSSS                                  TRANSFER TO: XXXX
 [25-C]
 SPONSOR TYPE: 9
  1=PERSON(S)
  2=ORGANIZATION
  3=SPONSOR DECEASED  [26-C]
  4=NO SPONSOR        EXPLAIN: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
    [27-C]
    IF SPONSOR IS PERSON(S), NEW VERSION AFFIDAVIT (Y/N): X
     IF YES,
     [28-C]                          [29-C]
     BATTERY APPLIES (Y/N): X        IF YES, DATE ESTABLISHED (MMYY): 9999
     [30-C]                          [31-C]
     INDIGENCE APPLIES (Y/N): X      IF YES, DATE ESTABLISHED (MMYY): 9999
                                                                  [24-O]
                                                                  REMARKS (Y): X
```

E. FACSIMILE 3: AALN - ALIEN DATA

```
MSSICS                            ALIEN DATA                    PAGE 3 OF AALN
                                                                      [1-O]
  SSS-SS-SSSS  SSSSS SSSSSSSSSS                                  TRANSFER TO:XXXX
  [32-D]
  ALIEN STATUS CODE: S
  [33-M]
  COLLECT TIME LIMITED EXTENSION INFORMATION (Y/N): X

  [34-C]
  CITIZENSHIP APPLICATION OR SWEARING IN CEREMONY PENDING (Y/N): X
     [35-C]
     IF YES, DATE ESTABLISHED (MMDDCCYY): 99999999
  [36-C]
  STATUS ADJUSTED TO LAPR (Y/N): X
     [37-C]
     IF YES, DATE ESTABLISHED (MMDDCCYY): 99999999
  [38-C]
  PENDING STATUS ADJUSTMENT TO LAPR (Y/N): X
     [39-C]
     IF YES, DATE ESTABLISHED (MMDDCCYY): 99999999
  [40-C]
  CITIZENSHIP APPLICATION GOOD FAITH ESTABLISHED (Y/N): X
```