

**TABLE OF CHANGES – FORM**  
**Form I-526, Immigrant Petition by Alien Entrepreneur**  
**OMB Number: 1615-0026**  
**REV+FR 06262017 N**  
**12/06/2016**

**Reason for Revision:** Comprehensive revision to correlate with revision to Form I-924/I-924A; integration of standard language and formatting; incorporation of Fee Rule information.

Current Page Number and Section	Current Text	Proposed Text
Page 1,	<p>To be completed by Attorney or Representative, if any</p> <p>G-28 is attached</p> <p>Attorney's State License No.</p>	<p>[Page 1]</p> <p>To be completed by <b>attorney or BIA-accredited representative (if any)</b>.</p> <p><u>  </u> Select this box if Form G-28 is attached.</p> <p><b>Attorney or Accredited Representative USCIS Online Account Number (if any)</b></p>
Page 1, Part 1, Information About You	<p>A-Number (if any)</p> <p>Social Security Number (if any)</p> <p>Family Name</p> <p>Given Name</p> <p>Middle Name</p>	<p>[Page 1]</p> <p><b>Part 1. Information About You</b></p> <p>Provide the following information about yourself.</p> <ol style="list-style-type: none"> <li>1. Alien Registration Number (A-Number) (if any)</li> <li>2. USCIS Online Account Number (if any)</li> <li>3. U.S. Social Security Number (if any)</li> </ol> <p><b>Your Full Name</b></p> <ol style="list-style-type: none"> <li>4.a. Family Name (Last Name)</li> <li>4.b. Given Name (First Name)</li> <li>4.c. Middle Name</li> </ol> <p><b>Other Names Used</b></p> <p>List all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in <b>Part 11. Additional Information</b>.</p> <p>5.a. Family Name (Last Name)</p>

	<p>Address- In Care of Name, if applicable</p> <p>Street Number and Name</p> <p>Apt. Number</p> <p>City</p> <p>State or Province</p> <p>Zip/Postal Code</p> <p>Country</p>	<p>5.b. Given Name (First Name) 5.c. Middle Name</p> <p>6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name</p> <p><b>Mailing Address</b></p> <p><b>7.a. In Care Of Name (if any)</b></p> <p><b>7.b. Street Number and Name</b></p> <p><b>7.c. Apt. Ste. Flr.</b></p> <p><b>7.d. City or Town</b></p> <p><b>7.e. State</b></p> <p><b>7.f. ZIP Code</b></p> <p><b>7.g. Province</b></p> <p><b>7.h. Postal Code</b></p> <p><b>7.i. Country</b></p> <p><b>8. Is your current mailing address the same as your physical address? Yes No</b></p> <p>If you answered “No” to <b>Item Number 8.</b>, provide your physical address in <b>Item Numbers 9.a.-9.h.</b></p> <p><b>Physical Address</b></p> <p>Provide your physical addresses for the last five years. Provide your present address first. If you need extra space to complete this section, use the space provided in <b>Part 11. Additional Information.</b></p> <p><b>9.a. Street Number and Name</b></p> <p><b>9.b. Apt. Ste. Flr.</b></p> <p><b>9.c. City or Town</b></p> <p><b>9.d. State</b></p> <p><b>9.e. ZIP Code</b></p> <p><b>9.f. Province</b></p> <p><b>9.g. Postal Code</b></p> <p><b>9.h. Country</b></p> <p><b>9.i. From (mm/dd/yyyy)</b></p> <p><b>9.j. To ((mm/dd/yyyy)</b> Present</p>
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12.j. To (mm/dd/yyyy)

13.a. Street Number and Name

13.b. Apt. Ste. Flr.

13.c. City or Town

13.d. State

13.e. ZIP Code

13.f. Province

13.g. Postal Code

13.h. Country

13.i. From (mm/dd/yyyy)

13.j. To (mm/dd/yyyy)

***Employment History***

Provide your employment history for the last five years. (If none, so state.) List present employment first. If you need extra space to complete this section, use the space provided in **Part 11. Additional Information.**

14.a. Employer Name

14.b. Street Number and Name

14.c. Apt. Ste. Flr.

14.d. City or Town

14.e. State

14.f. ZIP Code

14.g. Province

14.h. Postal Code

14.i. Country

14.j. Job Title

14.k. From (mm/yyyy)

14.l. To (mm/yyyy)

Present

15.a. Employer Name

15.b. Street Number and Name

**15.c.** Apt. Ste. Flr.  
**15.d.** City or Town  
**15.e.** State  
**15.f.** ZIP Code  
**15.g.** Province  
**15.h.** Postal Code  
**15.i.** Country  
**15.j.** Job Title  
**15.k.** From (mm/yyyy)  
**15.l.** To (mm/yyyy)

**16.a.** Employer Name  
**16.b.** Street Number and Name  
**16.c.** Apt. Ste. Flr.  
**16.d.** City or Town  
**16.e.** State  
**16.f.** ZIP Code  
**16.g.** Province  
**16.h.** Postal Code  
**16.i.** Country  
**16.j.** Job Title  
**16.k.** From (mm/yyyy)  
**16.l.** To (mm/yyyy)

**17.a.** Employer Name  
**17.b.** Street Number and Name  
**17.c.** Apt. Ste. Flr.  
**17.d.** City or Town  
**17.e.** State  
**17.f.** ZIP Code  
**17.g.** Province



	<p>Date of Arrival (<i>mm/dd/yyyy</i>)</p> <p>I-94 Number</p> <p>Passport Number</p> <p>Travel Document Number</p> <p>Country of Issuance for Passport or Travel Document</p> <p>Expiration Date for Passport or Travel Document</p> <p>Current Nonimmigrant Status</p> <p>Date Current Status Expires (<i>mm/dd/yyyy</i>)</p> <p>Daytime Telephone Number (with Area Code)</p>	<p><b>26.</b> Date of Arrival (<i>mm/dd/yyyy</i>)</p> <p>Place of Arrival or Port-of-Entry</p> <p><b>27.a.</b> City or Town</p> <p><b>27.b.</b> State</p> <p><b>28.a.</b> I-94 Arrival-Departure Record Number</p> <p><b>28.b.</b> Date Period of Authorized Stay Expires/Expired (<i>mm/dd/yyyy</i>)</p> <p><b>28.c.</b> Passport Number</p> <p><b>28.d.</b> Travel Document Number</p> <p><b>28.e.</b> Country That Issued Passport or Travel Document</p> <p><b>28.f.</b> Date Passport or Travel Document Expires (<i>mm/dd/yyyy</i>)</p> <p><b>28.g.</b> Current Nonimmigrant Status (if applicable)</p> <p><b>28.h.</b> Date Current <b>Nonimmigrant</b> Status Expires (<i>mm/dd/yyyy</i>)</p> <p>[Deleted; In signature section]</p>
<p><b>Page 1, Part 2. Application Type (Check one)</b></p>		<p>[Page 4] <b>Part 2. Information About Your Investment</b></p> <p><b>Regional Center (if any)</b></p> <ol style="list-style-type: none"> <li><b>1.</b> Is your investment associated with an approved Regional Center? Yes/No</li> <li><b>2.</b> Regional Center Name</li> <li><b>3.</b> Regional Center Identification Number</li> <li><b>4.</b> What is the receipt number for the approved Regional Center application upon which your petition is based?</li> <li><b>5.</b> If applicable, provide the New Commercial Enterprise (NCE) Identification Number.</li> </ol> <p><b>Petition Type and Required Capital Investment</b></p> <p>Select the appropriate box to indicate the type of petition you are filing. If you select <b>Item Number 6.</b>, provide the requested information.</p>

**Page 2,  
Part 4.  
Additional  
Information  
About the  
Enterprise**

a. This petition is based on an investment in a commercial enterprise in a targeted employment area for which the required amount of capital invested has been adjusted downward.

b. This petition is based on an investment in a commercial enterprise in an area for which the required amount of capital invested has been adjusted upward.

c. This petition is based on an investment in a commercial enterprise that is not in either a targeted area or in an upward adjustment area.

**Composition of the Petitioner's Investment:**

Total amount in U.S. bank account

Total value of all assets purchased for use in the enterprise

Total value of all property transferred from

**6. \_\_Targeted Employment Area (TEA)**

This petition is based on an investment in a targeted employment area for which the required investment amount of capital has been adjusted downward.

a. Is the new commercial enterprise (NCE) principally doing business in a targeted employment area? Yes/No

b. Is the area a rural area? Yes/No

c. Is the area a high unemployment area? Yes/No

d. Address where the NCE is principally doing business

e. Is the job-creating-entity (JCE) principally doing business in a targeted employment area? Yes/No

f. Is the area a rural area? Yes/No

g. Is the area a high unemployment area? Yes/No

h. Address where the JCE is principally doing business

**7. \_\_Upward Adjustment Area**

This petition is based on an investment in an area for which the required investment amount of capital has been adjusted upward.

**8. \_\_Non-TEA/Non-Upward Adjustment Area**

This petition is based on an investment in an area that is neither a targeted employment area nor an upward adjustment area.

**Composition of Your Investment and Your Income**

**Composition of Investment**

9. Total Amount Deposited or Committed to Deposit into U.S. Business Accounts for NCE

10. Total Value of Assets Purchased for Use in



	<p>abroad to the new enterprise</p> <p>Total of all debt financing</p> <p>Total stock purchases</p> <p>Other (explain on separate paper)</p> <p><b>Total</b></p> <p><b>Income:</b></p> <p>When you made the investment</p> <p>Gross</p> <p>Net</p> <p>Now</p> <p>Gross</p> <p>Net</p> <p><b>Net Worth:</b></p> <p>When you made the investment</p> <p>Gross</p> <p>Now</p>	<p>NCE</p> <p>11. Total Value of All Property Transferred From Abroad for Use in NCE</p> <p>12. Total of All Debt Financing</p> <p>13. Total Stock or Other Equity Purchases</p> <p>14. Other Capital</p> <p><b>Your Income</b></p> <p>15. Your Gross Income at Time of Investment</p> <p>16. Your Net Income at Time of Investment</p> <p>17. Your Current Gross Income</p> <p>18. Your Current Net Income</p> <p><b>Your Net Worth</b></p> <p>19. Your Net Worth at Time of Investment</p> <p>20. Your Current Net Worth</p> <p><b>Your Sources of Investment Capital</b></p> <p>Please identify the source(s) of the capital you have invested or are actively in the process of investing into the NCE. (Select all that apply.)</p> <p>21.a. Income</p> <p>21.b. Indebtedness (Loan, Loan Proceeds, Promissory Note, etc.)</p> <p>21.c. Gift (including capital obtained through inheritance)</p> <p>21.d. Tangible Assets (Equipment, Inventory, etc.)</p> <p>21.e. Other</p> <p>21.f. In the space below, describe the documentation included with this petition to demonstrate that the capital you have invested or are actively in the process</p>
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		<p>of investing was obtained through lawful means.</p> <hr/>
<p><b>Page 1, Part 3. Information About Your Investment</b></p> <p><b>Part 4. Additional Information About the Enterprise</b></p>	<p>New commercial enterprise resulting from the creation of a new business.</p> <p>New commercial enterprise resulting from the purchase of an existing business.</p> <p>New commercial enterprise resulting from a capital investment in an existing business.</p> <p>Name of commercial enterprise in which funds are invested (<b>Required Field - Do Not Leave Blank</b>)</p> <p>Street Address</p> <p>Phone Number with Area Code</p> <p>Business organized as (corporation, partnership, etc.)</p> <p>Kind of business (e.g. furniture manufacturer)</p> <p>Date established (mm/dd/yyyy)</p> <p>IRS Tax #</p>	<p>[Page 6]</p> <p><b>Part 3. Information About the New Commercial Enterprise (NCE)</b></p> <p><b>Type of NCE (Select only one)</b></p> <p><b>1.a. NCE</b> formed after November 29, 1990.</p> <p><b>1.b. NCE</b> resulting from the purchase of a business formed on or before November 29, 1990 that is restructured or reorganized</p> <p><b>1.c. NCE</b> resulting from a capital investment in and substantial expansion of a business formed on or before November 29, 1990.</p> <p><b>Additional Information About the NCE</b></p> <p><b>2. Name of NCE (Required Field - Do Not Leave Blank)</b></p> <p><b>Address of NCE</b></p> <p><b>3.a.</b> Street Number and Name</p> <p><b>3.b.</b> Apt. Ste. Flr.</p> <p><b>3.c.</b> City or Town</p> <p><b>3.d.</b> County</p> <p><b>3.e.</b> State</p> <p><b>3.f.</b> ZIP Code</p> <p><b>4. Telephone Number of NCE</b></p> <p><b>5. Type of Entity (for example, corporation, limited liability company, partnership)</b></p> <p><b>6. Nature of Activity (for example, furniture manufacturer)</b></p> <p><b>7. Included Industries (provide North American Industry Classification System (NAICS) codes)</b></p> <p><b>8. Have you invested or are you actively in the process of investing in a troubled business? Yes/No</b></p> <p><b>NOTE:</b> If you answered “Yes” to <b>Item Number 8.</b>, you must provide an explanation in <b>Part 11. Additional Information</b> of how the <b>NCE</b> qualifies as a troubled business.</p> <p><b>9. Date NCE Formed (mm/dd/yyyy)</b></p> <p><b>10. Federal Employer Identification Number</b></p>

	<p>Date of your initial investment (mm/dd/yyyy)</p> <p>Amount of your initial investment \$_____</p> <p>Your total capital investment in the enterprise to date \$_____</p> <p>Percentage of the enterprise you own _____</p> <p>If you are not the sole investor in the new commercial enterprise, list on separate paper the names of all other parties (natural and non-natural) who hold a percentage share of ownership of the new enterprise and indicate whether any of these parties is seeking classification as an alien entrepreneur. Include the name, percentage of ownership, and whether or not the person is seeking classification under section 203(b)(5). <b>NOTE:</b> A "natural" party would be an individual person, and a "non-natural" party would be an entity such as a corporation, consortium, investment group, partnership, etc.</p> <p>If you indicated in <b>Part 2</b> that the enterprise is in a targeted employment area or in an upward adjustment area, name the county and State:</p> <p>County _____</p> <p>State _____</p>	<p><b>11.</b> Date of Your Initial Investment (mm/dd/yyyy)</p> <p><b>12.</b> Amount of Your Initial Investment <b>in the NCE</b> \$_____</p> <p><b>13.</b> Your Total Capital Investment <b>in the NCE</b> To Date \$_____</p> <p><b>14.</b> <b>What percentage of the NCE do you own?</b> _____%</p> <p><b>Multiple Investors.</b> If you are not the sole investor in the NCE, list the name of any other person or entity (for example, a corporation, limited liability company, partnership, etc.) that holds a percentage ownership of the NCE. Also indicate the percentage of ownership and whether any of these persons obtained classification as an alien entrepreneur under INA section 203(b)(5) on the basis of his or her investment in this NCE or is seeking classification as an alien entrepreneur under INA section 203(b)(5). If you need additional space, provide the information in <b>Part 11. Additional Information.</b></p> <p>15.a. Name of Party _____  15.b. Percentage of Ownership _____  15.c. Is the party seeking classification as an alien entrepreneur under INA Section 203(b)(5) or has the party obtained classification as an alien entrepreneur under INA section 203(b)(5) on the basis of his or her investment in this NCE? Yes No</p> <p>16.a. Name of Party _____  16.b. Percentage of Ownership _____  16.c. Is the party seeking classification as an alien entrepreneur under INA Section 203(b)(5) or has the party obtained classification as an alien entrepreneur under INA section 203(b)(5) on the basis of his or her investment in this NCE? Yes No</p> <p>17.a. Name of Party _____  17.b. Percentage of Ownership _____  17.c. Is the party seeking classification as an alien entrepreneur under INA Section 203(b)(5) or has the party obtained classification as an alien entrepreneur under INA section 203(b)(5) on the basis of his or her investment in this NCE? Yes No</p> <p>[Deleted]</p>
<p><b>Page 2, Part 4.</b></p>		<p>[Page 7]</p>

<p><b>Additional Information About the Enterprise</b></p>	<p>New commercial enterprise resulting from the creation of a new business.</p> <p>New commercial enterprise resulting from the purchase of an existing business.</p> <p>New commercial enterprise resulting from a capital investment in an existing business.</p>	<p><b>Part 4. Information About the Job-Creating Entity (JCE) (if different from the NCE)</b></p> <p>1. Is the JCE different from the NCE? Yes No</p> <p>2. Name of the JCE</p> <p>3.a. Street Number and Name  3.b. Apt. Ste. Flr.  3.c. City or Town  3.d. County  3.e. State  3.f. ZIP Code</p> <p>4. Telephone Number of JCE (with area code)</p> <p>5. Type of Entity (for example, corporation, limited liability company, partnership)</p> <p>6. Nature of Activity (for example, furniture manufacturer)</p> <p>7. Included Industries (provide North American Industry Classification System (NAICS) codes)</p> <p><b>Multiple Job-Creating Entities.</b> If there is more than one JCE involved in the project, provide information regarding all JCE's involved with the new commercial enterprise. If you need additional space, use the space provided in <b>Part 11. Additional Information.</b></p> <p>8. Name of Additional Job-Creating Entity  9.a. Street Number and Name  9.b. Apt. Ste. Flr.  9.c. City or Town  9.d. County  9.e. State  9.f. ZIP Code</p> <p>10. Telephone Number of Job-Creating Entity (with area code)</p> <p>11. Type of Entity (for example, corporation, limited liability company, partnership)</p> <p>12. Nature of Activity (for example, furniture manufacturer)</p> <p>13. Included Industries (provide North American Industry Classification System (NAICS) codes)</p>
<p>Page 3,</p>		<p>[Page 8]</p>

<p><b>Part 5. Employment Creation Information</b></p>	<p>What is your position, office, or title with the new commercial enterprise?</p> <p>Briefly describe your duties, activities, and responsibilities.</p> <p>What is your salary?</p> <p>What is the cost of your benefits?</p> <p><b>Number of full-time employees in the enterprise in U.S.</b> (excluding you, your spouse, sons, and daughters)</p> <p>When you made your initial investment?</p> <p>Now</p> <p>Difference</p> <p>How many of these new jobs were created by your investment?</p> <p>How many additional new jobs will be created by your additional investment?</p>	<p><b>Part 5. Employment Creation Information</b></p> <ol style="list-style-type: none"> <li>1. What is your position, office, or title with the NCE?</li> <li>2. What are your duties, activities, and responsibilities in the NCE?</li> </ol> <p><b>NOTE: If you need additional space, provide the information in Part 11. Additional Information.</b></p> <ol style="list-style-type: none"> <li>3. What is your current salary in the NCE?</li> <li>4. What are the costs for benefits you receive in your current position in the NCE?</li> <li>5. Number of Full-Time Direct and Qualifying Employees in the NCE at the Time of Your Initial Investment:</li> <li>6. Current Number of Full-Time Direct and Qualifying Employees in the NCE</li> <li>7. Difference In Number of Full-Time Direct and Qualifying Employees</li> <li>8. Estimated Number of Full-Time Direct and Indirect Positions That Will Be Created During the Relevant Time Period</li> <li>9. If the new commercial enterprise is associated with a Regional Center, does this petition rely on indirect job creation? Yes No</li> </ol> <p>If you answered “Yes” to <b>Item Number 9</b>, indicate the economic model used to estimate indirect job creation in <b>Part 11. Additional Information.</b></p> <ol style="list-style-type: none"> <li>10. Total Amount of Your Capital That Has Been or Will Be Made Available to the JCE</li> <li>11. Total Amount of Capital Derived From Investors Who Have Not Sought and Are Not Seeking Classification As Alien Entrepreneurs</li> </ol>
<p><b>Page 3, Part 6. Processing Information</b></p>	<p><b>Check One:</b></p>	<p>[Page 8] <b>Part 6. Processing Information</b></p> <p>Select the appropriate box to indicate how you will seek lawful permanent resident status.</p>



	<p>Have you ever worked in the United States without permission?</p> <p>Yes (Explain on separate paper)</p> <p>No</p>	<p>8.a. City or Town</p> <p>8.b. State</p> <p>9. Are you currently subject to a final order of exclusion, deportation, or removal, or subject to reinstatement of such an order? Yes/No</p> <p><b>Employment in the United States</b></p> <p>10. Have you ever worked in the United States without permission? Yes/No</p> <p>11. If you answered “Yes” to <b>Item Number 10.</b>, explain below. If you need additional space, use <b>Part 11. Additional Information.</b></p>
		<p>[Page 9]</p> <p>[New]</p> <p><b>Part 7. Information on Petitioner’s Spouse and Children</b></p> <p><b>List your spouse and all of your children.</b> Also, note if the individual will be applying for a visa abroad or for adjustment of status as your dependent. If you need additional space to list other children, use <b>Part 11. Additional Information.</b></p> <p><b>Family Member 1</b></p> <p>1.a. Family Name (Last Name)</p> <p>1.b. Given Name (First Name)</p> <p>1.c. Middle Name</p> <p>2. Date of Birth (mm/dd/yyyy)</p> <p>3. Country of Birth</p> <p>4. Relationship to You</p> <p>5. Applying for Adjustment of Status? Yes/No</p> <p>6. Applying for Visa Abroad? Yes/No</p> <p><b>Family Member 2</b></p> <p>7.a. Family Name (Last Name)</p> <p>7.b. Given Name (First Name)</p> <p>7.c. Middle Name</p> <p>8. Date of Birth (mm/dd/yyyy)</p> <p>9. Country of Birth</p> <p>10. Relationship to You</p> <p>11. Applying for Adjustment of Status? Yes/No</p> <p>12. Applying for Visa Abroad? Yes/No</p> <p><b>Family Member 3</b></p> <p>13.a. Family Name (Last Name)</p> <p>13.b. Given Name (First Name)</p> <p>13.c. Middle Name</p> <p>14. Date of Birth (mm/dd/yyyy)</p> <p>15. Country of Birth</p> <p>16. Relationship to You</p>

		<p>17. Applying for Adjustment of Status? Yes/No  18. Applying for Visa Abroad? Yes/No</p> <p><b>Family Member 4</b></p> <p>19.a. Family Name (Last Name)  19.b. Given Name (First Name)  19.c. Middle Name</p> <p>20. Date of Birth (mm/dd/yyyy)  21. Country of Birth  22. Relationship to You  23. Applying for Adjustment of Status? Yes/No  24. Applying for Visa Abroad? Yes/No</p> <p><b>Family Member 5</b></p> <p>25.a. Family Name (Last Name)  25.b. Given Name (First Name)  25.c. Middle Name</p> <p>26. Date of Birth (mm/dd/yyyy)  27. Country of Birth  28. Relationship to You  29. Applying for Adjustment of Status? Yes/No  30. Applying for Visa Abroad? Yes/No</p> <p><b>Family Member 6</b></p> <p>31.a. Family Name (Last Name)  31.b. Given Name (First Name)  31.c. Middle Name</p> <p>32. Date of Birth (mm/dd/yyyy)  33. Country of Birth  34. Relationship to You  35. Applying for Adjustment of Status? Yes/No  36. Applying for Visa Abroad? Yes/No</p>
<p><b>Page 3,  Part 7.  Signature</b> Read the information on penalties in the instructions before completing this section.</p>		<p>[Page 10]</p> <p><b>Part 8. Statement, Contact Information, Declaration, Certification, and Signature of the Petitioner or Authorized Signatory</b></p> <p><b>NOTE:</b> Read the <b>Penalties</b> section of the Form I-526 Instructions before completing this part.</p> <p><b>Petitioner's or Authorized Signatory's Statement</b></p> <p><b>NOTE:</b> Select the box for either <b>Item 1.a.</b> or <b>1.b.</b> If applicable, select the box for <b>Item Number 2.</b></p> <p><b>1.a.</b> <input type="checkbox"/> I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.</p> <p><b>1.b.</b> <input type="checkbox"/> The interpreter named in <b>Part 9.</b> read to me every question and instruction on this petition and my</p>





		<p>[New]</p> <p><b>Part 9. Interpreter’s Contact Information, Certification, and Signature</b></p> <p>Provide the following information about the interpreter.</p> <p><b>Interpreter’s Full Name</b></p> <p>1. Interpreter’s Family Name (Last Name) Interpreter’s Given Name (First Name)</p> <p>2. Interpreter’s Business or Organization Name (if any)</p> <p><b>Interpreter’s Mailing Address</b></p> <p>3.a. Street Number and Name</p> <p>3.b. <input type="checkbox"/> Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr. [fillable field]</p> <p>3.c. City or Town</p> <p>3.d. State</p> <p>3.e. ZIP Code</p> <p>3.f. Province</p> <p>3.g. Postal Code</p> <p>3.h. Country</p> <p><b>Interpreter’s Contact Information</b></p> <p>4. Interpreter’s Daytime Telephone Number</p> <p>5. Interpreter’s Mobile Telephone Number (if any)</p> <p>6. Interpreter’s Email Address (if any)</p> <p><b>Interpreter’s Certification</b></p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in <b>Part 8., Item 1.b.</b>, and I have read to this petitioner or the authorized signatory in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner or authorized signatory informed me that he or she understands every instruction, question, and answer on the petition, including the <b>Petitioner’s or Authorized Signatory’s Declaration and Certification</b>, and has verified the accuracy of every answer.</p> <p><b>Interpreter’s Signature</b></p> <p>7.a. Interpreter’s Signature</p> <p>7.b. Date of Signature (mm/dd/yyyy)</p>
<p><b>Page 3, Part 8. Signature of Person Preparing Form, If Other Than Above (Sign below)</b></p>	<p>Print Your Name</p> <p>Firm Name</p> <p>Address</p>	<p>[Page 12]</p> <p><b>Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner</b></p> <p>Provide the following information about the preparer.</p> <p><b>Preparer’s Full Name</b></p> <p>1.a. Preparer’s Family Name (Last Name)</p> <p>1.b. Preparer’s Given Name (First Name)</p> <p>2. Preparer’s Business or Organization Name (if any)</p> <p><b>Preparer’s Mailing Address</b></p>

	<p>Daytime phone # with area code</p> <p>I declare that I prepared this application at the request of the above person, and it is based on all information of which I have knowledge.</p> <p><b>Signature</b> Date</p>	<p><b>3.a. Street Number and Name</b>  <b>3.b.</b> <input type="checkbox"/> Apt. <input type="checkbox"/> Ste. <input type="checkbox"/> Flr. [fillable field]  <b>3.c.</b> City or Town  <b>3.d.</b> State  <b>3.e.</b> ZIP Code  <b>3.f.</b> Province  <b>3.g.</b> Postal Code  <b>3.h.</b> Country</p> <p><b>Preparer's Contact Information</b>  <b>4.</b> Preparer's Daytime Telephone Number  <b>5.</b> Preparer's Mobile Telephone Number (if any)  <b>6.</b> Preparer's Email Address (if any)</p> <p><b>Preparer's Statement</b></p> <p><b>7.a.</b> <input type="checkbox"/> I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner <b>and with the petitioner's</b> consent.</p> <p><b>7.b.</b> <input type="checkbox"/> I am an attorney or accredited representative and my representation of the petitioner in this case <input type="checkbox"/> extends <input type="checkbox"/> does not extend beyond the preparation of this petition.</p> <p><b>NOTE:</b> If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this petition.</p> <p><b>Preparer's Certification</b>  By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner or authorized signatory. The petitioner has reviewed this completed petition, including the <b>Petitioner's or Authorized Signatory's Declaration and Certification</b>, and informed me that all of this information in the form and in the supporting documents is complete, true, and correct.</p> <p><b>Preparer's Signature</b>  <b>8.a.</b> Preparer's Signature  <b>8.b.</b> Date of Signature (mm/dd/yyyy)</p>
		<p>[Page13]  <b>[New]</b>  <b>Part 11. Additional Information</b></p> <p>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 <b>petition</b> or attach a separate sheet of paper. <b>Type or print</b> your name and A-Number (if any) at the top of each sheet, <b>indicate</b> the <b>Page Number, Part Number, and Item Number</b> to which your answer refers, and sign and date each sheet.</p> <p><b>1.a.</b> Family Name (Last Name) [Auto-populated field]</p>

		<p><b>1.b.</b> Given Name (First Name) [Auto-populated field]  <b>1.c.</b> Middle Name [Auto-populated field]</p> <p><b>2.</b> A-Number (if any) [Auto-populated field]</p> <p><b>3.a.</b> Page Number   <b>3.b.</b> Part Number   <b>3.c.</b> Item Number  <b>3.d.</b> _____</p> <p><b>4.a.</b> Page Number   <b>4.b.</b> Part Number   <b>4.c.</b> Item Number  <b>4.d.</b> _____</p> <p><b>5.a.</b> Page Number   <b>5.b.</b> Part Number   <b>5.c.</b> Item Number  <b>5.d.</b> _____</p> <p><b>6.a.</b> Page Number   <b>6.b.</b> Part Number   <b>6.c.</b> Item Number  <b>6.d.</b> _____</p> <p><b>7.a.</b> Page Number   <b>7.b.</b> Part Number   <b>7.c.</b> Item Number  <b>7.d.</b> _____</p>
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