**TABLE OF CHANGES – FORM**

**Form I-751, Petition to Remove Conditions on Residence**

**OMB Number: 1615-0038**

**Date 06/15/2020**

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| **Reason for Revision: Fee Rule** **Project Phase: Post G-1056*** Please note – all instances of “if any” and “if applicable” have been removed from Form I-751.

Legend for Proposed Text:* Black font = Current text
* Red font = Changes

Expires 06/30/2022Edition Date 06/09/2020 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1**  | **[Page 1]****To be completed by an attorney or accredited representative** (if any)**.****Select this box if Form G-28 is attached.****Attorney State Bar Number** (if applicable)**Attorney or Accredited Representative USCIS Online Account Number** (if any) | **[Page 1]****To be completed by an attorney or accredited representative.****Select this box if Form G-28 is attached.****Attorney State Bar Number****Attorney or Accredited Representative USCIS Online Account Number** |
| **Pages 1-2,** **Part 1. Information About You, the Conditional Permanent Resident**  | **[Page 1]****…****8.** Alien Registration Number(A-Number) (if any)**9.** USCIS Online Account Number(if any)**10.** U.S. Social Security Number(if any)**…****[Page 2]****17.a.** In Care Of Name (if any)**17.b.** Street Number and Name**17.c.** [] Apt. [] Ste. [] Flr.**17.d.** City or Town**17.e.** State**17.f.** ZIP Code**…** | **[Page 1]****…****8.** Alien Registration Number(A-Number) **9.** USCIS Online Account Number**10.** U.S. Social Security Number**…****[Page 2]****17.a.** In Care Of Name **17.b.** Street Number and Name**17.c.** [] Apt. [] Ste. [] Flr.**17.d.** City or Town**17.e.** State**17.f.** ZIP Code**…** |
| **Pages 3-5,****Part 3. Additional Information About You** | **[Page 4]****…****8.** A-Number (if any) **…*****Information About Prior Marriages*** *(if any)* **…****14.** A-Number (if any) **…** | **[Page 4]****…****8.** A-Number **…*****Information About Prior Marriages*** **…****14.** A-Number **…** |
| **Pages 5-7,** **Part 5. Information About the U.S. Citizen or Lawful Permanent Resident Spouse or Stepparent Through Whom You Gained Your Conditional Permanent Residence** | **[Page 6]****…****4.** U.S. Social Security Number(if any)**5.** A-Number (if any)**…** | **[Page 6]****…****4.** U.S. Social Security Number **5.** A-Number **…** |
| **Pages 7-11,** **Part 6. Information About Your Children** | **[Page 8]****…****15.a.** In Care of Name (if any)**15.b.** Street Number and Name**15.c.** [] Apt. [] Ste. [] Flr.**15.d.** City or Town**15.e.** State**15.f.** ZIP Code**…****17.a..** In Care Of Name (if any)**17.b.** Street Number and Name**17.c.** Apt. Ste. Flr.**17.d.** City or Town**17.e.** State**17.f.** ZIP Code**…****[Page 9]****…****30.a.** In Care of Name (if any)**30.b.** Street Number and Name**30.c.** [] Apt. [] Ste. [] Flr.**30.d.** City or Town**30.e.** State**30.f.** ZIP Code**…****32.a.** In Care Of Name (if any)**32.b.** Street Number and Name**32.c.** Apt. Ste. Flr.**32.d.** City or Town**32.e.** State**32.f.** ZIP Code**…****[Page 10]****45.a.** In Care of Name (if any)**45.b.** Street Number and Name**45.c.** [] Apt. [] Ste. [] Flr.**45.d.** City or Town**45.e.** State**45.f.** ZIP Code**…****47.a.** In Care Of Name (if any)**47.b.** Street Number and Name**47.c.** Apt. Ste. Flr.**47.d.** City or Town**47.e.** State**47.f.** ZIP Code**…****[Page 11]****53.** A-Number (if any)**…****60.** A-Number (if any)**…****67.** A-Number (if any)**…** | **[Page 8]****…****15.a.** In Care of Name **15.b.** Street Number and Name**15.c.** [] Apt. [] Ste. [] Flr.**15.d.** City or Town**15.e.** State**15.f.** ZIP Code**…****17.a..** In Care Of Name **17.b.** Street Number and Name**17.c.** Apt. Ste. Flr.**17.d.** City or Town**17.e.** State**17.f.** ZIP Code**…****[Page 9]****…****30.a.** In Care of Name**30.b.** Street Number and Name**30.c.** [] Apt. [] Ste. [] Flr.**30.d.** City or Town**30.e.** State**30.f.** ZIP Code**…****32.a.** In Care Of Name **32.b.** Street Number and Name**32.c.** Apt. Ste. Flr.**32.d.** City or Town**32.e.** State**32.f.** ZIP Code**…****[Page 10]****45.a.** In Care of Name **45.b.** Street Number and Name**45.c.** [] Apt. [] Ste. [] Flr.**45.d.** City or Town**45.e.** State**45.f.** ZIP Code**…****47.a.** In Care Of Name **47.b.** Street Number and Name**47.c.** Apt. Ste. Flr.**47.d.** City or Town**47.e.** State**47.f.** ZIP Code**…****[Page 11]****53.** A-Number **…****60.** A-Number **…****67.** A-Number **…** |
| **Page 16,** **Part 11. Additional Information** | **[Page 16]****…**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. 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. **…****2.** A-Number (if any) **…** | **[Page 16]****…**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. Type or print your name and A-Number 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. **…****2.** A-Number**…** |