TABLE OF CHANGES – FORM

Supplement B to Form I-914, 3l, of Law Enforcement Office for Victim of Trafficking in Persons

OMB Number: 1615-0099 06/09/2020

Reason for Revision: Fee Rule. Project Phase: Post G-1056

Please note – all instances of "if any" and "if applicable" have been remove from Form I-914 Sup B.

Legend for Proposed Text:

• Black font = Current text

• Red font = Changes

Expires 04/30/2021 Edition Date 4/15/2019

Current Page Number and Section	Current Text	Proposed Text
Page 1,	[Page 1]	[Page 1]
Part A. Victim		
Information	•••	•••
	Family Name (Last Name)	Family Name (Last Name)
	Given Name (First Name)	Given Name (First Name)
	Middle Name (if any)	Middle Name
	[D . 4]	[D 4]
Page 1,	[Page 1]	[Page 1]
Part B. Agency		
Information	•••	•••
	FBI or SID Number (if applicable)	FBI or SID Number
Pages 1-2,	[Page 2]	[Page 2]
Part C. Statement of		
Claim		
	5 8 11 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 5 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	7. Provide the date on which the investigation	7. Provide the date on which the investigation
	or prosecution was completed (<i>if any</i>).	or prosecution was completed.