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I-134 Declaration of Finanical Support

OMB control number 1615-0014

Baseline version: 04/13/2022

I-134:File a Form

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File A Form Copy	Alerts	Link
	We are only accepting online filing of Form	
	I-134 by individuals agreeing to financially	
	support Ukrainians who are filing parole	
	applications with U.S. Customs and Border	
	Protection (CBP).	
	At this time, we are only accepting online	
	filing of Form I-134 by individuals agreeing	
	to financially support Ukrainians filing	
	parole applicants with CBP. You must be	
	located in the United States in order to file	
	Form I-134 online. Ukrainians applying for	
	parole with CBP may not file Form I-134 on	
	their own behalf.	
Some immigration benefits that involve a temporary stay in the United States require U.S. Citizenship and	If you are agreeing to financially support	
Immigration Services (USCIS) to determine whether the applicant or beneficiary of the request has	any parolees from a country other than	
sufficient financial resources or financial support to pay for expenses during the temporary stay. The	Ukraine, or applicants for any other	
individual who signs and submits Form I-134 must establish that he or she has both sufficient financial	immigration benefit, you must file a paper	
resources and access to those funds to support the beneficiary listed on Form I-134 for the duration of the	Form I-134 through the appropriate	
beneficiary's stay in the United States.	Lockbox location.	https://www.uscis.gov/i-134

I-134:Overview

I-134:Overview					
Heading I-134, Declaration of Finanical Support	Sub-Heading	Body Text Some immigration benefits that involve a temporary stay in the United States require U.S. Citizenship and immigration Services (USCIS) to determine whether the applicant or beneficiary of the request has sufficient financial resources or financial support to pay for expenses during the temporary stay. The individual who significant to the submits Form 1:134 must establish that her or she has both sufficient financial resources and access to those funds to support the beneficiary's stay in the United States.	Link	Alerts CTA	Notes Form I-134 instructions, page 1
		Form I-134, Declaration of Financial Support, was previously titled "Form I-134, Affidavit of Support."			
Before You Start Your Declaration	Eligibility	Certain individuals applying for parole based on urgent humanitarian reasons or significant public benefit filed on Form 131, Application for Travel Document, muss submit this form with Form I-131. Form I-134 is filed either by the applicant for parole on his or her own behalf, or by another individual on the parole applicant's behalf.	t https://www.uscis.gov/i-864	We are only accepting online filing of Form I-134 by individuals agreeing to financially support Ukrainians who are filing parole applications with U.S. Customs and Border Protection (CBP).	Form I-134 instructions, page 1
		Certain individuals applying for parole into the United States for urgent humanitarian reasons or significant public benefit who are not filing from 1.31 may also be required to submit this form. In such cases, From 1.314 completed by an individual other than the beneficiary who is agreeing to financially support the beneficiary for the period of his or her temporary stay in the United States.		At this time, we are only accepting online filing of Form I-134 by individuals agreeing to financially support Ukrainians filing parole applicants with CBP. You must be located in the United States in order to file Form I-134 online. Ukrainians applying for parole with	
		Note: Whether or not the beneficiary of this Form 1:134 will have sufficient means of support while in the United States is an important factor in determining whether to exercise discretion to authorize pariou. We require evidence that the beneficiary of this Form 1:134 has financial support for the united states. Lack of evidence of financial support while in the United States is a strong negative factor that may lead to a denial of parole.		CBP may not file Form I-134 on their own behalf. If you are agreeing to financially support any parolees from a country other than Ukraine, or applicants for any other	
		You may file this form on behalf of yourself or on behalf of a B, F, or M nonimmigrant requesting extension of stay or change of status.		immigration benefit, you must file a paper Form I-134 through the appropriate Lockbox location.	
		Form I-134 may also be requested by Department of State in certain instances.			
		Do not use Form 1-134 if the beneficiary you are agreeing to financially support must have Form 1-864, Affidavit of Support Under Section 213A of the INA, filed on his or her behalf instead.			
	Fee	There is no filing fee to file Form I-134.			Form I-134 instructions, page 2
		Refund golicy: USCS does not refund fees, regardless of any action we take on your application, petition, declaration, or request, or how long USCS takes to reach a decision. By continuing this transaction, you acknowledge that you must submit fees in the exact amount and that you are paying the fees for a government service.			
		Please refer to the instructions for the form(s) you are filing for additional information or you may call the USCIS Contact Center at 800-375-5283. For TTY (deaf or hard of hearing) 800-767-1833.			
	Documents you may need	You must be located in the United States in order to file Form I-134 on behalf of a Ukrainian parolee. Ukrainians requesting parole may not file Form I-134 on their own behalf.			Need to clarify what to say in this section.
		As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary.			
		Evidence should consist of copies of any of the documents listed below that apply.			
		Failure to provide evidence of sufficent income or financial resources may result in the denial of the foreign national's application for a visa or his or her removal from the United States.			Form I-134 instructions
		Submit in duplicate evidence of income and resources, appropriate:			
		1. Statement from an officer of the bank or other financial institutions with deposits, identifying the following details regarding the account: - Date account oppened - Total amount deposited for the past year; and - Present balance.			
		Statement(s) form your employer on business stationery showing: Date and nature of employment; Salary paid; and			
		- Whether the position is temporary or permanent			
		3. Copy of last U.S. federal income tax return filed (tax transcript); or			
		4. List containing serial numbers and denominations of bonds and name of record owner(s).			
	Biometric services appointment	USCIS may require that you appear for an interview or provide biometrics (fingerprints, photograph, and/or signature) at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records manifested by the Ferderal persuand of investigation (FBI), before making a decision on your application or petition. After USCIS receives your declaration and ensures it is complete, we will inform you if you need started a biometric services appointment. If an appointment is necessary, the notice will provide you be location of you local or designated USCIS Application Support Center (ASC) and the date and time of your appointment or, if you are currently overseas, instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the number 3 are appointment.			Specific to digital environment and part of global template previously approved by OMB
		If you are required to provide biometrics, at your appointment you must sign an oath reaffirming that:			
		1.Tou provided or authorized all information in the declaration; 2.Tou reviewed and understood all of the information contained in, and submitted with your declaration; and; 3.Miof this information was complete, true, and correct at the time of filing.			
After You Submit Your Declaration	Track your case online	After you submit your form, you can track its status through your USCIS account. Sign in to your account often to check your case status and read any important messages from USCIS.			Specific to digital environment and part of global template previously
	Respond to requests for information	If we need more information from you, we will send you a Request for Evidence (RFE) or Request for Information (RFI). You can respond to our request and upload your documents through your USCIS account.			Specific to digital environment and part of global template previously
	Receive your decision	The decision on the Form 1-134 involves a determination of whether you have established a basis of support for the beneficary seeking an immigration benefit. USGS will notify you of the decision in writing.			
Completing Your Form Online	Filing online Complete the Gatting Started section first	Submitting your declaration online is the same as mailing in a completed paper form. They both gather the same information. You should answer all questions in the Getting Started section first so we can best customize the rest of your online form experience.			Specific to digital environment and part of global template previously approved by OMB Specific to digital
	complete the secting started section first	too amount unspections in the sessing statical session has so we can sest colorance the fast of your omine form experience.			environment and part of global template previously approved by OMB

I-134:Overview

	1				
Heading	Sub-Heading Provide as many responses as you can	Body Text You should provide as many responses as you can. Incomplete fields or sections and missing information can slow down the process after you submit your form.	Link Alerts	CTA	Notes Specific to digital environment and part of global template previously approved by OMB
	We will automatically save your responses	We will automatically save your information when you select next to go to a new page or navigate to another section of the form. We will save your information for 30 days from today, or from the last time you worked on the form.			Specific to digital environment and part of global template previously approved by OMB
	How to continue filling out your form	After you start your form, you can sign in to your account to continue your form.			Specific to digital environment and part of global template previously approved by OMB
	DHS Privacy Notice	AUTHORITIES: The information requested on this declaration, and the associated evidence, is collected under the immigration and Nationality Act sections 212(d)(5), 214 and 248.			Form I-134 instructions pg 7- 18
		PUBPOSE: The primary purpose for providing the requested information on this declaration of financial support is to determine whether the beneficiary of this declaration has selectuate financial means to support themselves and that, if this individual is admitted or parellel into the United States, this individual has sufficient for the provident of the providence of th			Form I-134 instructions pg 7- 8
		DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of the beneficiary's benefit request.			Form I-134 instructions pg 7- 8
		ROUTINE USES: Dits may shave the information in our provide on this declaration and any additional requested evidence with other Federal, stats, local, and foreign povernment agencies and authorized organizations. DIS follows approved routine use described in the associated published system of records (IPSI/USCS/SVICE/CEP-002). Alien File, Index, and National File Tracking System, DHS/USCS-003 Benefits information System, and DHS/USCS-003 Immigration Biometric and Background Checkal and the published privacy impact assessments (IPSI/USCS/FOR Index Tracking System, DHS/USCS/FOR Benefits information System, and DHS/USCS-003 Immigration Biometric and Background Checkal and the published privacy impact assessments (IPSI/USCS/FOR Index Tracking System, DHS/USCS/FOR-003 Index and DHS/USCS-003 Intermediated Dispitations Document Management From (IPSI/USCS/FOR-003 ICS) and Activity Management From International Operations) which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.			Form I-134 instructions pg 7-8
	Paperwork Reduction Act	An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently used Office of Management and Budger (DMS) control number. The public responsing budger for this collection of information is estimated at 15 Manus per response, including the time for reviewing instructions, gathering the required documentation and information, completing the declaration, preparing statements, attaching necessary documentation, and submitting the declaration. Sed comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services Office of Policy and Strategy, Regulator Coordination Division 5000 Capital Gateway Drive, Mail Stop #2140 Earny Springs, MD 20588-0009 Do not mail your completed Form I-134 to this address.			Form I-134 instructions pg 7- 8
		Do to K mail you complete voint 1-134 to this adoless. OMB No. 1815/0000000 Expires: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
	Security reminder	If you do not work on your declaration for more than 30 days, we will delete your data in order to prevent storing personal information indefinitely.		Start	Specific to digital environment and part of global template previously approved by OMB

I-134: GETTING STARTED

mary Nav ting Started	Secondary Nav Basis for filing	Tertiary Nav	Paper Form Question 1.1.	Question On whose behalf are you filing this form?	Sub-Question Another individual who is the beneficiary	Field Type Radio	Instructional Text	Help Text	Notes [FOR MVP],this will be the only option available
	Preparer and interpreter information			Is someone assisting you with completing this declaration?		Radio			Specific to digital environment and part of global template previously approved by OMB.
				(IF YES) is a preparer assisting you with completing this declaration?	g Yes/No	Radio	A preparer is anyone who completes or helps you complete all or part of your declaration using information and answers that you provide.		Specific to digital environmen and part of global template previously approved by OMB.
				(IF YES) Is an interpreter assisting you with completing this declaration?	Yes/No 3	Radio	An interpreter is anyone who translates or helps you translate all or part of your declaration using information and answers that you provide.		Specific to digital environmer and part of global template previously approved by OMB.
	(IF YES TO PREPARER QUESTION) Preparer information		7.1	What is your preparer's full name?	Given name (first name)	Text			
			7.2	What is your preparer's business or organization name?	Family name (last name)	Text Text			
					My preparer is not part of a business or organization.	Checkbox			
			7.3	What is your preparer's mailing address?	Country Address line 1	Dropdown	Street number and name		
					Address line 2 City or town State/Province ZIP code/Postal code	Text Text Dropdown/Text Text	Apartment, suite, unit, or floor		
			7.4	What is your preparer's contact information?	Daytime phone number	Text			
			7.5		Mobile telephone number My preparer does not have a mobile telephone number	Text Checkbox			
			7.6		Email address My preparer does not have an email	Text Checkbox			
	(IF YES TO INTERPRETER) Interpreter information		6.1	What is your interpreter's ful name?	address. Given name (first name)	Text			_
			6.2	What is your interpreter's business or organization name?	Family name (last name)	Text Text			
			6.3	What is your interpreter's	My interpreter is not part of a business o organization. Country	r Checkbox Dropdown			
				mailing address?	Address line 1 Address line 2	Text Text	Street number and name Apartment, suite, unit, or floor		
					City or town State/Province	Text Dropdown/Text			

I-134: GETTING STARTED

Primary Nav	Secondary Nav	Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
					ZIP code/Postal code	Text			
			6.4	What is your interpreter's contact information?	Daytime telephone number	Text			
			6.5		Mobile telephone number	Text			
					My interpreter does not have a mobile telephone number	Checkbox			
			6.6		Email address	Text			
					My interpreter does not have an email	Checkbox			
					address.				
				What language is your		Text			
				interpreter using to interpret					
				this delcaration for you?					_
	(IF YES TO			What is your interpreter's full	Given name (first name)	Text			
	INTERPRETER) Interpreter			name?					
	information								
	oation				Family name (last name)	Text			
				What is your interpreter's	, , ,	Text			
				business or organization					
				name?					
					My interpreter is not part of a business or	r Checkbox			
					organization.				
				What is your interpreter's mailing address?	Country	Dropdown			
					Address line 1	Text	Street number and name		
					Address line 2	Text	Apartment, suite, unit, or floor		
					City or town State/Province	Text Dropdown/Text			
					ZIP code/Postal code	Text			
				What is your interpreter's	Daytime telephone number	Text			
				contact information?					
					Mobile telephone number	Text			
					My interpreter does not have a mobile	Checkbox			
					telephone number				
					Email address	Text			
					My interpreter does not have an email address.	Checkbox			
				What language is your		Text			
				interpreter using to interpret					
				this declaration for you?					

ry Nav		Tertiary Nav	Paper Form Question	ort the Beneficiary	Sub-Question	Field Type	Alert	Instructional Text	Help Text	Notes
he Individual	Name of the individual agreeing	reidaly Nav	3.1.	What is your current legal name?	Given name (first name)	Text	Aleit	Your current legal name is the name on your birth certificate, unless it changed after birth by a legal action such as marriage or court order. Do not provide any nicknames here.	пер тех	Notes
			3.1. 3.1. 3.2	Have you used any other names since birth?	Middle name Family name (last name) Yes/No	Text Text		Other names used may include nicknames, aliases, and maiden names.		
				[If yes to 3.2]	Given name (first name)			Provide the other names you have used.		
					Middle name Family name (last name)					
info indi to f sup	Contact information for the individual agreeing to financially support the beneficiary		5.3	How may we contact you?	Daytime telephone number	Text (9 digits)				
			5.4		Mobile telephone number (if any) This is the same as my daytime telephone number.					
			5.5		Email address	Text				
			3.3	What is your current mailing address?	In care of name (if any)	Text	You must be located in the United States in order to file at this time.			
			3.3		Country	Dropdown				
			3.3		Address line 1	·				
			3.3 3.3		Address line 2 City or town					
			3.3		State/Province or region (FOR FOREIGN ADDRESS) ZIP code/Postal code (FOR FOREIGN					
			3.4	Is your mailing address the same as the physical address?	ADDRESS) Yes/No	Radio	You must be located in the United States in order to file at this time.			
			3.5	[If NO] What is your physical address?	Address line 1	Text				
					Address line 2	Text				
					City or town State	Text Dropdown				
					ZIP code	Text				
	When and Where the individual agreeing to financially support the beneficiary was born		3.6	What is your date of birth?	(mm/dd/yyyy)	Date				Required field
			3.7	What is your city, town, or		Text				
			3.7	village of birth? What is your state or		Text				
			5.7	province of birth?		· CAL				

I-134: About the Individual Agreeing to Financially Support the Beneficiary

	y Nav Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type Alert	Instructional Text Help Text	Notes
		3.7	What is your country of		Dropdown		
			birth?				
Immigratio		3,10	What is your current	U.S. Citizen	Radio		
informatio			immigration status?				
individual to financia							
support th							
beneficiar							
benencial	ıy	3,10		U.S. National	Radio		
		3,10		Lawful Permanent Resident	Radio		
		3,10		Nonimmigrant	Radio		
		3,10		Other	Radio		
		3.8	What is your A-number?	A -	Text (9 digits)		
							A-Number is required if Law
							Permanent Resident is selec
			I do not have or know my A-		Checkbox		
			Number.				
		3.9	What is your USCIS Online		Text (12 digits)		
			Account Number?			You will only have an OAN if you	
						previously filed a form that has a	
						receipt number that begins with	
						IOE. If you filed the form online,	
						you can find your OAN in your	
						account profile. If you mailed us	
						the form, you can find your OAN	
						at the top of the Account Access	
						Notice we sent you.	
						If you do not have receipt	
						number that begins with IOE, you	
						do not have an OAN.	
						(The OAN is not the same as an A-	
						Number.)	
			I do not have or know my		Checkbox		
			USCIS Online Account				
			Number.				
			What is your relationship to the beneficiary?		Textbox		
		[If Nonimmigrant]	What is your Form I-94 Arrival-				
		[II NONIMIMIRI	Departure Record Number?				
			.,				
		[If Other]			Texthox		
		[If Other]	Please provide an explanation.		Textbox		
Employme	ent	[if Other]	Please provide an	Employed (full-time, part-time, seasonal,			
Employme informatic			Please provide an explanation.	Employed (full-time, part-time, seasonal, self-employed)			
	on for the		Please provide an explanation. What is your employment				
informatio	on for the I agreeing		Please provide an explanation. What is your employment				
informatio individual to financia support th	on for the Lagreeing ally he		Please provide an explanation. What is your employment	self-employed) Unemployed or not employed Retired			
informatio individual to financia	on for the Lagreeing ally he	3.11	Please provide an explanation. What is your employment	self-employed) Unemployed or not employed			
informatio individual to financia support th	on for the Lagreeing ally he		Please provide an explanation. What is your employment status?	self-employed) Unemployed or not employed Retired			
informatio individual to financia support th	on for the Lagreeing ally he	3.11	Please provide an explanation. What is your employment status? Please provide an explanation.	self-employed) Unemployed or not employed Retired	, Dropdown Textbox		
informatio individual to financia support th	on for the Lagreeing ally he	3.11	Please provide an explanation. What is your employment status?	self-employed) Unemployed or not employed Retired	, Dropdown		
informatio individual to financia support th	on for the Lagreeing ally he	3.11 [if Other] [if EMPLOYED to 3.11] 3.12A	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an	self-employed) Unemployed or not employed Retired	, Dropdown Textbox Radio		
informatio individual to financia support th	on for the Lagreeing ally he	3.11 [if Other] [if EMPLOYED to 3.11] 3.12A [if EMPLOYED to 3.11]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as	self-employed) Unemployed or not employed Retired	, Dropdown Textbox		
informatio individual to financia support th	on for the Lagreeing ally he	3.11 [if Other] [if EMPLOYED to 3.11] 3.12A	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an	self-employed) Unemployed or not employed Retired	, Dropdown Textbox Radio		
informatio individual to financia support th	on for the Lagreeing ally he	3.11 [if Other] [if EMPLOYED to 3.11] 3.12A [if EMPLOYED to 3.11] 3.12B [if 3.12A]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed	self-employed) Unemployed or not employed Retired	, Dropdown Textbox Radio		
informatio individual to financia support th	on for the Lagreeing ally he	3:11 [If Other] [If EMPLOYED to 3:11] 3:12A [If EMPLOYED to 3:11] 3:12B [IF 3:12A] [IF 3:12A]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an	self-employed) Unemployed or not employed Retired	, Dropdown Textbox Radio Radio Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a s/an Name of employer	self-employed) Unemployed or not employed Retired Other	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	3:11 [If Other] [If EMPLOYED to 3:11] 3:12A [If EMPLOYED to 3:11] 3:12B [IF 3:12A] [IF 3:12A]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired	, Dropdown Textbox Radio Radio Text Text		
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informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1 Address line 2	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1 Address line 2 City or town	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1 Address line 2 City or town State/Province or region (FOR FOREIGN	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1 Address line 2 City or town State/Province or region (FOR FOREIGN ADDRESS)	, Dropdown Textbox Radio Text Text Text		
informatio individual to financia support th	on for the Lagreeing ally he	[If Other] [If EMPLOYED to 3.11] 3.12A [If EMPLOYED to 3.11] 3.12B [IF 3.12A] [IF 3.12A] [IF 3.12B]	Please provide an explanation. What is your employment status? Please provide an explanation. I am currently employed as a/an I am currently self-employed as a/an Name of employer What is your current	self-employed) Unemployed or not employed Retired Other Country Address line 1 Address line 2 City or town State/Province or region (FOR FOREIGN	, Dropdown Textbox Radio Text Text Text		

I-134: Financial Information About the Person Agreeing to Financially Support the Beneficiary

			o Financially Suppo					
Primary Nav Financial Information About the Individual Agreeing to Financially Support the Beneficiary	Income information for the individual agreeing	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text Provide all of the information requested in the table below about yourself, all of your dependents, and any other individuals you financially support. Do not include any individuals listed in the "Beneficiary's Financial Information" section. Information about assets that are not based on employment should be added in the "Assets of the individual agreeing to financially support the beneficiary"	Help Text	Notes
			Add entry		СТА	section below.		
		3.14 [LARGE TABLE]	What is the individual's current legal name?	Given name (first name)				
				Middle name				
			What is the individual's date	Family name (last name) (mm/dd/yyyy)	Date			
			of birth? What is the individual's relationship to the individual agreeing to financially support the beneficiary?		Text	If you are the individual agreeing to financially support th beneficiary, type in "Self".	е	
			How much income will this individual contribute to the beneficiary annually? Save Entry	\$	Text (numerical)	If the income contribution is none, type in "0".		
		3.14	Cancel What is the total number of		CTA Text			
		3.14	dependents? What is the total income?	\$	Text (numerical)			
	Additional income information for the individual agreeing to financially support the beneficiary	3.15	Does any of the income lister come from an illegal activity or source (such as proceeds from illegal gambling or illegal drug sales)?	Yes/No	Radio			
	Jelielikai y	[If YES to 3.15] 3.16	What amount of income comes from an illegal activity? Does any of the income listed above come from meanstested public benefits as defined in 8 CFR 213a.1?	\$ I Yes/No	Text (numerical)	A means-tested benefit is a public benefit—offered by federal, state, or local agencies—for which eligibility and amount considerations are based on a person's income and resources. USCIS formerly considered Medicaid, Supplemental Mutrition Assistance Program, Temporary Assistance to Needy Families, and Supplemental Security Income during eligibility evaluations		
		3.21	What amount of income is from means-tested public benefits? Do you intend to make specific contributions to the support of the beneficiary named in this Form I-134?	\$ Yes/No	Radio			

I-134: Financial Information About the Person Agreeing to Financially Support the Beneficiary

Primary Nav	Secondary Nav	Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
. unlary Nov	Jeconuary Nav	, custy nav	[if YES to 3.12]	Explain the contribution. For example, if you intend to furnish room and board, state for how long. If you intend to provide money, state the amount in U.S. dollars and whether it is to be given in a lump sum, weekly, or monthly, and for how long.	Sur Qualitin	Text box	TOTAL COLONIAL TEXT	Top too	1000
	Assets of the individual agreeing to financially support the beneficiary		3.17 [LARGE TABLE]	current legal name? What is the type of asset?	Given name (first name) Middle name Family name (last name) N/A Checking - Bank Account Savings - Bank Account Annuities Stockes, Bonds, Certificates of Deposit Retirement or Educational Account Real Estate Holdings Personal Property (not value) S	CTA Dropdown Text (numerical) CTA CTA	Provide information about any assets you will use to support the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in the U.S. dollars, regardless of whether they are held in the United States or outside of the United States. Do not include assets from any individuals in the "Beneficiary's Financial Information" section. You may also include your household members' assets below. Attach evidence in the "Evidence" section under "Proof of Assets and Bonds" showing that you, or your dependents, have these assets.		
				What is the total amount (U.S. dollars)?	\$	Text (numerical)	-		
			3.18 [If YES to 3.18, conditional "Sponsor financial responsibility" page displays]	Have you previously submitted a Form I-134 on behalf of a person other than the beneficiary listed on this Form I-134?	Yes/No	Radio			

I-134: Financial responsibility for other beneficiaries

Primary Nav		Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
Financial responsibility for other beneficiaries	Financial						Provide the information about the persons who you have		
for other beneficiaries	responsibility for other beneficiaries						previously submitted a Form I-		
	other beneficiaries						134 other than the beneficiary		
							listed on this Form I-134.		[If YES to 3.18]
				Add entry		CTA			
			2 40 (14005 74015)		Ohanna (Gardana)	<u>.</u>			
			3.19 [LARGE TABLE]	What is the person's current legal name?	Given name (first name)	Text			
					Middle name	Text			
					Family name (last name)	Text			
				What is the person's A-	A -	Text			
				number?					
				I do not have or know the person's A-Number.		Checkbox			
				Date submitted	(mm/dd/yyyy)	Date			

I-134: About the Beneficiary

	іе вепетісіагу								
	Secondary Nav Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Alerts	Instructional Text	Help Text	Notes
eficiary	Beneficiary name	2.1.	What is the beneficiary's current legal name?	Given name (first name)	Text		The beneficiary's current legal name is the name on their birth certificate, unless it changed after birth by a legal action such as marriage or court order. Do not provide any nicknames here.		
		2.4		Middle	T				
		2.1. 2.1.		Middle name Family name (last name)	Text Text				
		2.2	Has the beneficiary used any		TEXT		Other names used may		
			other names since birth?				include nicknames, aliases, and maiden names.		
			[If yes to 2.2]	Given name (first name)			Provide the other names the		
							beneficiary has used.		
				Middle name Family name (last name)					
-	Beneficiary contact	4.3	How may we contact the	Daytime telephone number	Text (9 digits)				
	information		beneficiary?		, ,				
		4.4		Mobile telephone number (if any)	Text (9 digits)				
				This is the same as my daytime	Checkbox				
		4.5		telephone number. Email address	Text				
		2.9	What is the beneficiary's	In care of name (if any)	Text				
		2.9	current mailing address?	Country	Dropdown				
		2.9		Address line 1	Dropuown				
		2.9		Address line 2					
		2.9		City or town					
		2.9		State/Province or region (FOR FOREIGN					
		2.9		ADDRESS)					
		2.9		ZIP code/Postal code (FOR FOREIGN					
		2,10	Is the beneficiary's mailing	ADDRESS) Yes/No	Radio				
		2,10	address the same as the physical address?	ics/ito	Nadio				
		2.11	(If no) What is the beneficiary's physical address?	Country	Dropdown				
		2.11		Address line 1					
		2.11		Address line 2					
		2.11		City or town					
		2.11		State/Province or region (FOR FOREIGN ADDRESS)					
		2.11		ZIP code/Postal code (FOR FOREIGN ADDRESS)					
-									
	When and Where beneficiary was	2.3	What is the beneficiary's date of birth?	(mm/dd/yyyy)	Date				Required field
	born	2.6	What is the beneficiary's city		Text				
'			or town of birth?						
					Text				
		2.6	What is the beneficiary's state or province of birth?		TEXT				

I-134: About the Beneficiary

Primary Nav	Secondary Nav	Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Alerts	Instructional Text	Help Text	Notes
	Other information about the beneficiary		2.4	What is the beneficiary's gender?	Male	Radio				
					Female	Radio				
			2.8	What is the beneficiary's martial status?	Single, Never Married	Radio				
			2.8		Married	Radio				
			2.8		Divorced	Radio				
			2.8		Widowed	Radio				
			2.8		Legally Separated	Radio				
			2.8		Marriage Annulled	Radio				
			2.8		Other	Radio				
			2.8	[If OTHER]	Provide an explanation	Text box				
			2.7	What is the beneficiary's		Dropdown	At this time, we are only			
				country of citizenship or			accepting online filing of			
				nationality?			Form I-134 by individuals			
							agreeing to financially			
							support Ukrainians filing			Only Ukraine will be available in
						_	parole applicants with CBP.			dropdown
				What is the number of the		Text				
				beneficiary's most recently						
				issued passport?						
				What country issued the		Dropdown				
				beneficiary's most recently						
				issued passport?						
				What is the expiration date		Date				
				of the beneficiary's most						
			3.5	recently issued passport?		T-++ (0 -!!-!+-)				
			2.5	What is the beneficiary's A- Number?	A -	Text (9 digits)				
				I do not have or know the		Charlthan				
				beneficiary's A-Number.		Checkbox				
			2.12	What is the beneficiary's	From (mm/dd/yyyy)	Date				
				anticipated period of stay in		Sate				
				the United States?						
				the office states:	To (mm/dd/yyyy)	Date				
					No End Date	Checkbox				

I-134: Beneficiary's Financial Information

1 154. Delicite	iai y 5 i iiiaiici	ai iiiioiiiiatioii						
Primary Nav Beneficiary's Financial Information	Secondary Nav Beneficiary income information	Paper Form Question	Question Add entry	Sub-Question	Field Type	Instructional Text Provide information about the income and assets about the beneficiary, all of the beneficiary's dependents, and any other individuals the beneficiary financially supports. Do not include any individuals named in the "Financial Information About the Individual Agreeing to Financially Support the Beneficiary" section.	Help Text	Notes Opens up large table once
		2.13 [LARGE TABLE]	What is the individual's current legal name?	Given name (first name) Middle name		Provide all of the information requested in the table below about the beneficiary, all of the beneficiary's dependents, and any other individuals the beneficiary financially supports (do not include information about the sponsor, even if you are sponoring yourself). Information about assets that are not based on employment should not be included here but may be added under "Beneficiary Assets" below.		clicked
				Family name (last name)				
			What is individual's date of birth? What is the individual's relationship to the beneficiary?	(mm/dd/yyyy)	Date Text			
			How much income will this individual contribute to the beneficiary annually? Save Entry Cancel	\$	Text (numerical) CTA CTA	If the income contribution is none, type in "0".		
		2.13	What is the beneficiary's total number of dependents?		Text	-		
		2.13	How much income will the beneficiary's dependents contribute to the beneficiary annually?	\$	Text (numerical)			

I-134: Beneficiary's Financial Information

		iai iiiioiiiiatioii						
rimary Nav	Secondary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
innaty Nav	Secondary New Beneficiary additional income information	2.14	Does any of the beneficiary's total income (including income from dependents and other individuals who contribute to the beneficiary's income, excluding any individuals named in the "Financial Information About the Persor Agreeing to Financially Support the Beneficiary" section)	Yes/No I	Radio	nistractional Text	TICIP TEAL	NVC3
		[If YES to 2.14] 2.15	come from an illegal activity or source (such as proceeds from illegal gambling or illega drug sales)? What amount of the beneficiary's total income comes from an illegal activity	\$	Text (numerical)			
		X.xx	or source? Does any of the income listed above come from meanstested public benefits as defined in 8 CFR 213a.1?	l Yes/No				
		[If YES to ^]	What amount of income is from means-tested public benefits?	\$				
	Beneficiary assests					Provide the current cash vaue of assets available to the beneficiary for the expected period of his or her stay (excluding assets from any individuals named in the "Financial Information About the Individual Agreeing to Financially Support the Beneficiary" section).		
						You may also include assets owned by th beneficiary's dependents.	e	
						Attach evidence in the "Evidence" section under "Proof of Assets and Bonds" showing that the beneficiary has these assets.	1	
			Add entry	6: 45.	CTA	_		
		2.16 [LARGE TABLE]	What is the asset holder's current legal name?	Given name (first name) Middle name Family name (last name)				
			What is the type of asset?	N/A Checking - Bank Account Savings - Bank Account Annuities Stockes, Bonds, Certificates of Deposit Retirement or Educational Account Real Estate Holdings Personal Property (not value)	Dropdown			
			What is the cash value of the asset in U.S dollars? Save Entry		Text (numerical)			
			Cancel		СТА			

I-134: Beneficiary's Financial Information

Primary Nav	Secondary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
						<u></u>		
		•	What is the total amount	\$		_		
			(U.S. dollars)?		Text (numerical)			

I-134: Evidence

Formitter In the Company of the Com	Secondary Nav	Tertiary Nav	Paper Form Question	Instructional Text	Field Type	File Requirements	Document types dropdown	Logic	Help Text	Notes
Past State of the past of th					Upload					
Total and provide the page year, and expected for the page year, and the description of the page year, and the page year			=1							
Total amount depoted by the party say, and Total amount depote				- Date account opened			Other documents			
Proposition										
As the beneficiary or the person whose genes to financially support the beneficiary, you must show you have been been been been been been been be						with each original document				
sufficiency in the formation recover of impact in concers to impact the bordinary in product or yellow for a five in the formation of the fore						 Upload no more than five documents at a time 				
Incomplete Inc										
Promiting Prom										
Form 1-34 instructions (gr Provide statements) (gr Pro										
Comment Comm										
Form 1-34 indication law productions are production of the produ				Provide statement(s) from your employer on business stationery showing:	Upload					
- Service Serv	statement		5)				statement			
From 134 individuals are return From 134 individuals great from the black distance of the benefiting y the person who agrees to florationally support the benefiting y, you must show you beneated the person of the person who agrees to florationally support the benefiting y, you must show you beneated the person of the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the benefiting yet the person who agrees to florationally support the benefiting y, you must show you beneated from the person who agrees to florationally support the benefiting y, you must show you beneated from the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the person who agrees to florationally support the benefiting y, you must show you beneated from the black of the person who agrees to florationally support the benefiting y, you must show you beneated the person who agrees to florationally support the benefiting y, you must show you beneated the person who agrees to florationally support the benefiting y, you must show you beneated the person who agrees to florationally support the benefiting y, you must show you beneated you who was allowed to the person who agrees to florationally support the benefiting y, you must show you beneated you who was allowed to the show of the person who agrees to florationally support the benefiting y, you must show you beneated you who was allowed to the show of the person who agrees to florationally support the benefiting y, you must show you benefit yet you downwards on an expension of the person who agrees to florationally support the benefiting y, you must show you b										
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sufficient score or financial resources to appoint the beneficiary, failure to provide evidence of sufficient converse or financial resources to appoint the beneficiary and provide evidence of sufficient converse or financial resources in appoint to the lateral Science. From 134 instructions (pr. 1 pr. 1										
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Form 1-234 instructions (pg Provide a copy of the last U.5. Federal income tax return (filed (lax transcript)). Upload										
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As the beneficiary or the person who agrees to financially support the beneficiary, you must show you have sufficent income or financial recourses to support the beneficiary. Full mits or goode evidence of sufficient with activities of the foreign evidence of sufficient with activities of the discussion. The support of the foreign evidence	Income tour		Form I 124 instruction / - / -	Describes a secure of the last LLC fordered income tour seture filed (tour transacient)	Haland		Innome tours			
As the beneficiary or the person who agrees to financially support the beneficiary, you must show you have used to stand income or financial resources may result in the demis of the forigin national's application for a viso or his or white each original document. No excepted or password-optoclected lists will be made the provided and the provided and the provided and the provided provided in the provided provide	income tax returi	n		Provide a copy of the last U.S. federal income tax return filed (tax transcript).	ohioaa		income tax return			
sufficient income or financial resources are support the behavioral resources are years for the control of the contro			O)	As the benefician as the server the server to francially a server the benefician			Other dealers			
income or financial resources may result in the denial of the forigen rational's application for a visa or his or her removal from the United States. Value Value							outer accuments			
her removal from the United States. Proof of Form 1-334 instructions (pg Formula status Formula sta										
Sends Form 134 instructions [gg Provide a list containing serial numbers and denominations of blonds and name of record owner(s). Column										
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stamp in either a foreign passport or DHS From I-94 Arrival Departure Record. numbers, spaces, periods, hyphens, underscores, and parentheses										
parentheses										
Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foriegn passport. • Maximum size: 6MB per file										
				Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foriegn passport.		Maximum size: 6MB per file				

I-134: Evidence

Primary Nav	Secondary Nav	Tertiary Nav	Paper Form Question	Instructional Text	Field Type	File Requirements	Document types dropdown	Logic	Help Text	Notes
Evidence	Proof of assets of individual agreeing to financially support the beneficiary		Form 1-134 instructions (pg 5 Item #17: Assets	Froudie information about any assets you will use to support the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in the U.S. dollars, regardless of whether they are held in the United States. Provide the value of all assets listed in the U.S. dollars, regardless of whether they are held in the United States or outside of the United States. Do not include assets from any individuals in the "Beneficiary's Financial Information" section. You may include the net value of a home as an asset. The net value of the home is the appraised value of the home, and the stay of the propriet of		Clear and readable Accepted file formats: JPG, JPEG, PDF, TIF or TIFF No encrypted or password-protected files If your documents are in a foreign language, upload a full finglish translation and the translator's certification with each original document Upload no more than five documents at a time Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses Maximum size: 6MB per file	Assets Other documents*			
				income or financial resources may result in the denial of the foriegn national's application for a visa or his or her removal from the United States.						
	Proof of beneficiary's assets		Form I-134 instructions (pg 4 Item #16: Beneficiary's Assets	Provide information about any assets available to the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support he beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in the U.S. dollars, regardless of whether the assets are held in the United States or outside the United States. Do not include assets from any individuals in the "Financial Information About the Person Agreeing to Financially Support the Beneficiary" section. You may include the net value of the beneficiary's home as an asset. The net value of the home is the appraised value of the home, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you list the net value of the beneficiary's home, then you must include documentation demonstration that the beneficiary owns the home, a recent appraisal by a licensed appraiser, and evidence of the amount of all loans secured by a mortgage, trust deed, or other lien on the home. You may not include the net value of the beneficiary's automobile unless the beneficiary has more than one automobile, and at least one automobile is not include as an asset. Submit evidence of the value of the assets listed. Evidence must include the name of the asset holder, a description of the asset, proof of ownership, and the basis of the owner's claim of its net cash a value. You may submit evidence of the value of the beneficiary's household members' assets. Evidence must include the name of the asset holder, a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash a value.		Clear and readable Accepted file formats: JPG, JPEG, PDF, TIF or TIFF No encrypted or password-protected files If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document Upload no more than five documents at a time Accepted file name characters: English letters, numbers, spaese, periods, hyphens, underscores, and parentheses Maximum size: 6MB per file	Beneficiary asset Other documents			
				As the beneficiary or the person who agrees to financially support the beneficiary, you must show you have sufficent income or financial resources to support the beneficiary. Failure to provide evidence of sufficent income or financial resources may result in the denial of the foriegn national's application for a visa or his or her removal from the United States.			_			

I-134: Additional Information

Primary Nav	Secondary Nav	Tertiary Nav	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Notes
Additional Information	Additional		Part 8	You may provide additional	Additional information	No	If you need to provide any		
	information			information for your			additional information for any of		
				declaration.			your answers to the questions in		
							this form, enter it into the space		
							below. You should include the		
							questions that you are		
							referencing.		
							If you do not need to provide any		
							additional information, you may		
							leave this section blank.		

Secondary Nav Tertian Review your declaration	v Nav Paper Form	Question	Sub-Question Field Tvo	Instructional Text Help Text CTA	Notes
		Check your declaration before you submit		We will review your declaration to check for accuracy and completeness before you submit it.	Specific to digital environr global template previously
				We encourage you to provide as many responses as you can throughout the declaration, to the best of your knowledge. Missing information can slow down the review process after you submit your declaration.	global template previous
				You can return to this page to review your declaration as many times as you want before you submit it.	
		Alerts and warnings		You have one or more alerts and warnings based on the information you provided in your declaration.	Specific to digital environm global template previously
				A red alert means you have incomplete responses or inconsistent data. You cannot submit your declaration with any alerts.	
(IF PREPARES) Preparer 7.7 (IF PREPARES) Preparer 7.7 (IF PREPARES) Preparer 7.7 (IF PREPARES) Preparer 7.8 (IF INTERPARES) (INTERPARES) (INTERP	Review the I-134 form information		Here is a summary of all the information you provided in your declaration. Next	Specific to digital environm	
				Make sure you have provided responses for everything that applies to you before you submit your declaration. You can edit your responses by going to each declaration section using the site navigation.	global template previously
				We also prepared a draft case snapshot with your responses, which you can download below.	
(IF PREPARER) Preparer statement	7.7	Preparer's statement	I am not an attorney or accredited representative but have prepared this declaration on behalf of the individual agreeing to financially support the beneficiary Radio (which is the beneficiary if filling on behalf of him or herself) and with that individual's consent	Your preparer must read the statements below and select the statement that applies to him or her.	Will remove (which is the on behalf of him or herself
				If your preparer is an attorney or accredited representative whose representation extends beyond preparation of this declaration, he or she may be obliged to submit a completed Notice of Entry of Appearance as Attorney or Accredited Representative (G-28) with your declaration.	
		Preparer's certification and signature	I am an atomey or accredited representative and my representation of the individual agreeing to financially support the beneficiary (which is the beneficiary if flauto filling on behalf of him or herself) in this case does not extend beyond the preparation of this declaration. The property of the property of the property of the property of the declaration. In the property of the	Your preparer must read and agree to the certification below.	Will remove (which is the on behalf of him or herself Will remove (which is the on behalf of him or herself
			penerically provided to me or authorized me to collain or use. As the applicant's preparer, you must sign on paper and provide your signature page to the applicant. Follow these steps:		Specific to digital environn global template previously
			Download the Preparer Signiture page Print the Prepare Signiture page Read and sign the Preparer Signiture page Read and sign the Preparer Signiture page Core the suggest Preparer Signiture page to the applicant		global template previously
(IF PREPARER) Preparer	7.8	Preparer's signature upload	The applicant will need to scan and upload your completed signature page on the next screen. Upload	Scan and upload your preparer's completed signature page below.	
signature (IF INTERPRETER)	6.7	Interpreter's certification and signature	I certify, under penalty of perjury, that: I am fluent in English and the language provided in the Getting Started section of this declaration, and I have read to this individual agreeing to financially support the beneficiary in the identified language every question and instruction on this declaration and his or her	Your interpreter must read and agree to the certification below.	
Interpreter certification			this individual agreeing to financially support the beneficiary in the identified ingrauge every question and instruction on this declaration and his or her instruction control to the instruction of the		
			As the applicant's interpreter, you must sign on paper and provide your signature page to the applicant. Follow these steps:		Specific to digital environm global template previously
			Downdood the Interpreter Signature page Print the Interprete Signature page Read and sign the Interprete Signature page Read and sign the Interpreter Signature page (A (see the signed Interpreter Signature page to the applicant		
			The applicant will need to scan and upload your completed signature page on the next screen.		
		Interpreter's signature upload	Upload	Scan and upload your interpreter's completed signature page below.	
(IF INTERPRETER)					
Interpreter signature Statement of the Individual agreeing to	5.1.A	Individual agreeing to financially support the beneficiary's statement	Las the individual agreeins to financially support the beneficiary, certify the following: Chickbo I can read and understand English, and have read and understand every question and instruction on this declaration and my answer to every question.	You must read and agree to the statement below.	MVP MVP
Interpreter signature Statement of the individual agreeing to	5.2	beneficiary's statement Individual agreeing to financially support the beneficiary's statement regarding the preparer	I can read and understand English, and have read and understand every question and instruction on this declaration and my answer to every question. At my request, the preparer named in the Getting Started section of this declaration prepared this declaration for me based only upon the information I provided or authorized. Oncideous	You must read and agree to the statement below.	MVP
Interpreter signature Statement of the individual agreeing to	5.2	beneficiary's statement Individual agreeing to financially support the	Lan read and understand English, and have read and understand every question and instruction on this declaration and my answer to every question. All my request the mensurer named in the Celtino Started section of this declaration present this declaration for me based only upon the information 1.	You must read and agree to the statement below.	MVP
Interpreter signature Statement of the Individual purpose to Indiv	5.2 5.1.8 Form I-134 "Declaration	beneficiary's statement Individual agreeing to financially support the beneficiary's statement regarding the preparer Individual agreeins of Inancially support the	Lan read and understand English, and have read and understand every question and instruction on this declaration and my answer to every question. All my request, the preparer named in the Getting Started section of this declaration prepared this declaration for me based only upon the information 1 provided or asthorized. The interpretar named in the Getting Started section of this declaration read to me every question and instruction on this declaration and my answer to every question in the laterguage is specified in the Getting Started section, a language in which I am fluent, and I understood everything. Given of any documents I have submitted are exact photocopies of unstatement, original documents, and I understand that USCS or the Department of State may require that it submit original documents to USCS or the Department of State as a later data. Furthermore, I submitted the release of any information from any and all of my records that	You must read and agree to the statement below. You must read and agree to the statement below. You must read and agree to the certification below. If you knowingly and willfully failably or concess a material fact or submit a false document with your declaration,	MVP
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Secondary Nav	Tertiary Nav	Paper Form	Question	Sub-Question Sub-Question	Field Type Instructional Text	Help Text CTA	Notes
			Individual Agreeing to Financially Support the		You must provide your digital signature below by typing your full legal name. If you do not		Required field
			Beneficiary's Signature		completely fill out this declaration, or if you do not submit the required documents listed in		
					the instructions, we may deny your declaration. We will record the date of your signature		
					with your declaration.		
				[Date of signature]			
(If "Statement of the				Submit the I-134	Once you submit this declaration, you will receive a confirmation with details on any	y Submit	
Individual agreeing to					next steps. We will record the date of your submission with the declaration. Your		
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