

myUSCIS Copydeck: Interactive Forms	
Form Number and Name	I-134A, Online Request to be a Supporter and Declaration of Financial Support
OMB Number	1615-0157
Form Edition Date:	4/25/2022
Form Expiration Date:	7/31/2023
Baseline Copydeck:	I-134A-003 PRA Revision Copydeck v2.0.15

Revision Key		
Description		
<ul style="list-style-type: none"> • All original (old) text is black. • All revised (new) text is red. 		
Example	Original	Revised
<ul style="list-style-type: none"> • All original text is black. • Any text that is removed from original column will be removed in the revision column with the words on either side indicated with red. 	1. Oranges 2. Bananas 3. Apple 4. Pineapple	1. Oranges 2. Bananas 3. Pineapple 4. Pear
	I want to eat a watermelon for lunch and go hiking today.	I want to go hiking today.

FILE A FORM: I-134A

Column Header Descriptions

Header: If needed, a header is located directly under the dropdown menu and above the body text.

Body Text: Based on the purpose of the form found in the paper form instructions.

Link: A reference column to include any URLs that appear as hyperlinks in the body text.

CTA: Copy to include for a button

Heading	Body Text	Alert	Revision	Link	CTA	Notes
<p>Select the form you want to file online</p>	<p>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 submits Form I-134A must establish that they have both sufficient financial resources and access to those funds to support the beneficiary listed on Form I-134A for the duration of the beneficiary's stay in the United States.</p>	<p>[yellow alert] [h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:</p> <p>[b]</p> <ul style="list-style-type: none"> • Cuba • Colombia • El Salvador • Guatemala • Haiti • Honduras • Nicaragua • Ukraine • Venezuela <p>You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-134A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A.</p> <p>Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children.</p> <p>To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and custody of their parent or legal guardian and be able to provide documentation to confirm the relationship.</p> <p>If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must file a paper Form I-134 through the appropriate Lockbox location.</p>	<p>[yellow alert] [h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:</p> <p>[b]</p> <ul style="list-style-type: none"> • Cuba • Colombia • El Salvador • Ecuador • Guatemala • Haiti • Honduras • Nicaragua • Ukraine • Venezuela <p>You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-134A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A.</p> <p>Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children.</p> <p>To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and custody of their parent or legal guardian and be able to provide documentation to confirm the relationship.</p> <p>If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must file a paper Form I-134 through the appropriate Lockbox location.</p>	<p>https://www.uscis.gov/i-134</p>	<p>Start form</p>	

APPLICATION OVERVIEW: I-134A

Heading	Sub-Heading	Conditional Logic	Body Text	Revisions	Alert	Revision	Required?	Link	CTA	Notes
I-134A, Online Request to Be A Supporter And Declaration Of Financial Support		[yellow alert]	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 submits Form I-134A must establish that they have both sufficient financial resources and access to those funds to support the beneficiary listed on Form I-134A for the duration of the beneficiary's stay in the United States.		[yellow alert] [N] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries: [b] • Cuba • Colombia • El Salvador • Guatemala • Haiti • Honduras • Nicaragua • Ukraine • Venezuela You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-134A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A. Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children. To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and custody of their parent or legal guardian and be able to provide documentation to confirm the relationship. If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must file a paper Form I-134 through the appropriate Lockbox location.			https://www.uscis.gov/i-134		
Before You Start Your Declaration	Eligibility Fee Documents you may need Biometric services appointment		Whether the beneficiary of this Form I-134A will have sufficient means of support while in the United States is an important factor in determining whether to exercise discretion to authorize parole. We require evidence that the beneficiary of this Form I-134A has financial support for the duration of their stay in 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. There is no fee to file Form I-134A. As the beneficiary's financial supporter, you must show you have sufficient income or financial resources to support the beneficiary. Evidence should consist of any of the applicable documents listed below: 1. Statement from an officer of the bank or other financial institutions with deposits, identifying the following details regarding the account: • Date account opened • Total amount deposited for the past year; and • Present balance. 2. Statement(s) from your employer on business letterhead 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). If you are filing for a beneficiary under the Family Reunification Parole (FRP) process and they are a derivative of the principal beneficiary listed on the approved USCIS Form I-130, Petition for Alien Relative, provide documentation showing the relationship between the USCIS Form I-130 principle beneficiary and the beneficiary listed in this form. Evidence could include: marriage certificate, birth certificate, adoption certificate, divorce decree, and death certificate when applicable. 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 maintained by the Federal Bureau 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 to attend a biometric services appointment. If an appointment is necessary, the notice will provide you the location of your 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 United States to set up an appointment. If you are required to provide biometrics, at your appointment you must sign an oath reaffirming that: 1. You provided or authorized all information in the declaration; 2. You reviewed and understood all of the information contained in, and submitted with your declaration; and 3. All of this information was complete, true, and correct at the time of filing.							
After You Submit Your Declaration	Track your case online Respond to requests for information Receive your decision		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. 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. USCIS determination to confirm or not to confirm your Form I-134A is based on whether you have established you have sufficient resources to support the beneficiary for the duration of their parole period in the United States. USCIS will notify you of the determination in writing.						Next	
Completing Your Form Online	Filing online Complete the Getting Started section first Provide as many responses as you can We will automatically save your responses How to continue filing out your form DHS Privacy Notice		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. 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. 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. After you start your form, you can sign in to your account to continue your form. AUTHORITIES: The information requested on this declaration, and the associated evidence, is collected under the Immigration and Nationality Act sections 212(g)(5), 214 and 248. PURPOSE: The primary purpose for providing the requested information on this declaration of financial support is to determine whether the beneficiary of this declaration has adequate financial means to support themselves and that, if this individual is admitted or paroled into the United States, this individual has sufficient financial resources available to them for the duration of their temporary stay in the United States. DHS uses the information you provide to grant or deny the immigration benefit the beneficiary of Form I-134A is seeking. 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. ROUTINE USES: DHS may share the information you provide on this declaration and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices (DHS/USCIS/ICE/EBP-001 Alien File, Index, and National File Tracking System, DHS/USCIS-007 Benefits Information System, and DHS/USCIS-018 Immigration Biometric and Background Check, and U.S. Customs and Border Protection (CBP) DHS/ICE/PPA-024 Arrival and Departure Information System and DHS/ICE/PPA-016 CBP One Mobile Application) and the published privacy impact assessments (DHS/USCIS/PPA-003 Integrated Digitization Document Management Program (DDOMP), DHS/USCIS/PPA-051 Case and Activity Management for International Operations, DHS/USCIS/PPA-056 USCIS Electronic Immigration System, and DHS/USCIS/PPA-071 myUSCIS Account Experience) 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.					https://www.dhs.gov/topics/privacy		
	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 valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated to average 2.00 hours 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. Send 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, Regulatory Coordination Division 5900 Capital Gateway Drive, Mail Stop #2140 Camp Springs, MD 20746-0009 Do not mail your completed Form I-134A to this address. OMB No. 1615-0157 Expires: 07/31/2023		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 valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated to average 2.11 hours 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. Send 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, Regulatory Coordination Division 5900 Capital Gateway Drive, Mail Stop #2140 Camp Springs, MD 20746-0009 Do not mail your completed Form I-134A to this address. OMB No. 1615-0157 Expires: 07/31/2023					
	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	

GETTING STARTED: I-134A

Column Header Descriptions

Primary Navigation: A section of the form that contains several pages.

Secondary Navigation: A single page within a section.

Conditional Logic: Indicates whether the question or subquestion only applies if you meet certain criteria.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Revision	Field Type	Instructional Text	Revisions	Help Text	Alert	Required?	Notes
Getting Started	Basis for filing			1.1	On whose behalf are you filing this form?	Another individual who is the beneficiary	Another individual who is the beneficiary	Radio					Yes	For online filing, this is the only option available
				1.2	I am filing this form under one of the following:	Parole Process	Parole Process	Radio	Select "Parole Process" for the Uniting for Ukraine and CHNV parole processes. Select "Family Reunification Parole Process" only if you have received personalized invitation letters inviting you to participate in the Family Reunification Parole Process.				Yes	
			[If "Parole Process" selected in 1.2]	1.3	I am filing for an individual under the parole process for the following country:	Family Reunification Parole Process Cuba Haiti Nicaragua Ukraine Venezuela		Radio Dropdown					Yes	
			[If "Family Reunification Program" selected in 1.2]	1.3	I am filing for my relative who is associated with an approved I-130 and a national of:	Colombia Cuba El Salvador Guatemala Haiti Honduras	Colombia Cuba Ecuador El Salvador Guatemala Haiti Honduras	Dropdown					Yes	
			[If "Family Reunification Program" selected in 1.2]	1.4	Invitation Number:			Text	The Invitation Number can be found on the I-130 beneficiary's Family Reunification Parole Process Invitation Letter.	The Invitation Number can be found on the Form I-130 beneficiary's Family Reunification Parole Process Invitation Letter.				
		[If "Family Reunification Program" selected in 1.2]	1.5	How many total family members will be included in this family reunification group who all share the same invitation number?			Text	Entering "1" indicates no derivative beneficiaries share the same invitation number.					Yes	
		Preparer and interpreter information				Is someone assisting you with completing this declaration?	Yes/No		Radio					
			(IF YES)		Is a preparer assisting you with completing this declaration?	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.					
			(IF YES)		Is an interpreter assisting you with completing this declaration?	Yes/No		Radio	An interpreter is anyone who translates or helps you translate all or part of your declaration using information and answers that you provide.					
		Preparer information		(IF YES TO PREPARER)	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					
					7.3	What is your preparer's mailing address?	My preparer is not part of a business or organization. Country		Checkbox Dropdown					
				(If non-USA use Province and text field) (If non-USA use Postal code and remove help text)			Address line 1 Address line 2 City or town State/Province		Text Text Text Dropdown/ Text		Street number and name Apartment, suite, unit, or floor			
					7.4	What is your preparer's contact information?	Daytime telephone number		Text					Provide a 10-digit phone number.
					7.5		Mobile telephone number		Text					Provide a 10-digit phone number.
				7.6		My preparer does not have a mobile telephone number. Email address My preparer does not have an email address.		Checkbox Text Checkbox					Example: user@domain.com	
	Interpreter information		(IF YES TO INTERPRETER)	6.1	What is your interpreter's full name?	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 mailing address?	My interpreter is not part of a business or organization. Country		Checkbox Dropdown						
			(If non-USA use Province and text field) (If non-USA use Postal code and remove help text)			Address line 1 Address line 2 City or town State/Province		Text Text Text Dropdown/Text		Street number and name Apartment, suite, unit, or floor				
				6.4	What is your interpreter's contact information?	Daytime telephone number		Text					Provide a 10-digit phone number.	
				6.5		Mobile telephone number		Text					Provide a 10-digit phone number.	
				6.6		My interpreter does not have a mobile telephone number. Email address My interpreter does not have an email address.		Checkbox Text Checkbox					Example: user@domain.com	
					What language is your interpreter using to interpret this declaration for you?			Text						

ABOUT THE INDIVIDUAL AGREEING TO FINANCIALLY SUPPORT THE BENEFICIARY: I-134A

Column Header Descriptions

Primary Navigation: A section of the form that contains several pages.

Secondary Navigation: A single page within a section.

Conditional Logic: Indicates whether the question or subquestion only applies if you meet certain criteria.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Revisions	Sub-Question	Revisions	Field Type	Instructional Text	Help Text	Alert	Required?	Notes		
About the Individual Agreeing to Financially Support the Beneficiary	Name of the individual agreeing to financially support the beneficiary			3.1	What is your current legal name?		Given name (first name)		Text	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.						
				3.2	Have you used any other names since birth?		Middle name Family name (last name) Yes/No		Text Text Radio	Other names used may include aliases, maiden name, and nicknames. Provide the other names you have used.				Table Add another name button		
				[If yes to 3.2]				Given name (first name)		Text						
						3.3	Provide the name of the organization, group, or individual that is providing support to the beneficiary with you (if any).		Middle name Family name (last name) Organization, Group, Individual Name		Text Text Text					
				[If "Parole Process" selected in 1.2]												
						3.3	Provide the name of the individual(s) or co-sponsor(s) that is providing support to the beneficiary with you (if any).	Provide the name of the individual co-supporter(s) joining you to provide financial support to the beneficiary (if any).	Individual(s) or Co-sponsor(s) Name	Individual Co-supporter(s) Name(s)	Text					
				[If "Family Reunification Parole Process" selected in 1.2]												
						5.3	How may we contact you?		Daytime telephone number		Text		Provide a 10-digit phone number.			
						5.4			Mobile telephone number (if any) This is the same as my daytime telephone number.		Text Checkbox		Provide a 10-digit phone number.			
						3.4	What is your current mailing address?		Email address In care of name (if any) Country		Text Text Dropdown	Example: user@domain.com		[yellow alert] [b] You must be located in the United States in order to file at this time.		
				3.4			Address line 1		Text		Street number and name					
				3.4			Address line 2		Text		Apartment, suite, unit, or floor					
				3.4			City or town		Text							
				3.4			State		Dropdown							
				3.4			ZIP code		Text		Provide a 5 or 9-digit ZIP code.					
				3.5	Is your mailing address the same as the physical address?		Yes/No		Radio							
				3.6	What is your physical address?		In care of name (if any) Country		Text Dropdown			[yellow alert] [b] You must be located in the United States in order to file at this time.				
				3.4			Address line 1		Text		Street number and name					
				3.4			Address line 2		Text		Apartment, suite, unit, or floor					
				3.4			City or town		Text							
				3.4			State		Dropdown							
				3.4			ZIP code		Text		Provide a 5 or 9-digit ZIP code.					
				3.5	Is your mailing address the same as the physical address?		Yes/No		Radio							
				3.6	What is your physical address?		In care of name (if any) Country		Text Dropdown			[yellow alert] [b] You must be located in the United States in order to file at this time.				
				3.4			Address line 1		Text		Street number and name					
				3.4			Address line 2		Text		Apartment, suite, unit, or floor					
				3.4			City or town		Text							
				3.4			State		Dropdown							
				3.4			ZIP code		Text		Provide a 5 or 9-digit ZIP code.					
				3.5	Is your mailing address the same as the physical address?		Yes/No		Radio							
				3.6	What is your physical address?		In care of name (if any) Country		Text Dropdown			[yellow alert] [b] You must be located in the United States in order to file at this time.				
				3.7	What is your date of birth?		MM/DD/YYYY		Date		Provide a 5 or 9-digit ZIP code.					
				3.9	What is your city or town of birth?				Text							
				3.9	What is your state or province of birth?				Text							
				3.9	What is your country of birth?				Dropdown							
				3.8	What is your sex?		Male Female X		Radio	Please select the sex that is shown on your passport or other government-issued identity document. For any value other than "Male" ("M") or "Female" ("F") that appears on your identity document, please choose "X" (Unspecified or another gender identity). USCIS requires this information to conduct accurate background checks and security screening.			Yes			
				3.14	What is your current immigration status?		U.S. Citizen U.S. National Lawful Permanent Resident Nonimmigrant Other		Radio							
				3.14	What is your Form I-94 Arrival-Departure Record Number?				Textbox		Provide an 11 character I-94 Number.					
				3.14	What is your A-Number?		A-		Text		Provide a 7, 8, or 9-digit number. If your A-Number is fewer than 9 digits, the system will automatically add zero(s) after the "A" and before the first digit so there is a total of 9 digits, for example: A-001234567.			A-Number is required if Lawful Permanent Resident is selected.		
				3.12	What is your Social Security Number?		I do not have or know my A-Number.		Checkbox Text		Provide a 9-digit Social Security number.					
				3.11	What is your USCIS Online Account Number?		I do not have a U.S. Social Security number.		Checkbox Text	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.)	Provide a 12-digit Online Account Number.					
				3.13	What is your relationship to the beneficiary?		I do not have or know my USCIS Online Account Number.		Checkbox							
				3.15	What is your employment status?		Employed (full-time, part-time, seasonal, self-employed)		Dropdown Radio					Yes		
				3.15	Please provide an explanation.		Unemployed or not employed Retired Other		Radio Radio Radio							
				3.16	What is your type of employment?		I am currently employed as a/an I am currently self-employed as a/an		Radio Radio							
				3.16A	Employed as				Text							
				3.16A	Name of employer				Text							
				3.16B	Self-employed as				Text							
				3.17	What is your current employer's address?		Country Address line 1 Address line 2 City or town State/Province		Dropdown Text Text Text Dropdown/Text		Street number and name Apartment, suite, unit, or floor					
				3.17			ZIP code/Postal code		Text		Provide a 5 or 9-digit ZIP code.					

FINANCIAL INFORMATION ABOUT THE PERSON AGREEING TO FINANCIALLY SUPPORT THE BENEFICIARY: I-134A

Column Header Descriptions

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Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required?	Notes		
Financial Information About the Individual Agreeing to Financially Support the Beneficiary	Income information for the individual agreeing to financially support the beneficiary							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" section below.						
						3.18 [LARGE TABLE]	What is the individual's full name?	Given name (first name) Middle name Family name (last name)	Text Text Text					
						3.18	What is the individual's date of birth?	MM/DD/YYYY	Date					
						3.18	What is the individual's relationship to the individual agreeing to financially support the beneficiary?		Dropdown					"If you are the individual agreeing to financially support the beneficiary, type in "Self" instructions TBD based on feedback from AdI.
						3.18	How much income will this individual contribute to the beneficiary annually?	I'm entering my own financial information \$	Checkbox Text	If the income contribution is none, type in "0".				
							Save entry Cancel		CTA CTA					
						3.18	What is the total number of dependents?		Text		Provide the total number of dependents. Number must be between 0 and 100.			
						3.18	What is the total income?	\$	Text					
			Additional income information for the individual agreeing to financially support the beneficiary			3.20	Does any of the income listed come from an illegal activity or source (such as proceeds from illegal gambling or illegal drug sales)?	Yes/No	Radio					
					[If YES to 3.19]	3.21	What amount of income comes from an illegal activity?	\$	Text					
					3.22	Does any of the income listed above come from means-tested public benefits as defined in 8 CFR 213a.1?	Yes/No	Radio						
						[If YES TO 3.20]	3.23	What amount of income is from means-tested public benefits?	\$	Text				
			Specific contributions to the beneficiary			3.27	You are responsible for receiving, maintaining, and supporting the beneficiary for the duration of their temporary stay in the United States. Describe the resources you plan to use or provide to ensure the beneficiary has adequate financial support to cover their basic living needs.		Text box				Yes	
				3.28	You are responsible for ensuring the beneficiary has safe and appropriate housing for the duration of their parole in the United States. Describe how you will ensure that the beneficiary's housing needs are met, including where the beneficiary will reside during their temporary stay in the United States, if known.		Text box				Yes			
				3.29	You are responsible for assisting the beneficiary's access to available services and benefits such as learning English, securing employment opportunities once authorized to work, enrolling children in school, and helping to enroll for benefits for which they are eligible. Describe what steps you plan to take as part of these responsibilities.		Text box				Yes			
	Assets of the individual agreeing to financially support the beneficiary							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 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.						
				3.23 [LARGE TABLE]	What is the asset holder's full name?	Given name (first name) Middle name Family name (last name)	Text Text Text							
					What is the type of asset?	Checking - Bank Account Savings - Bank Account Annuities Stocks, Bonds, Certificates of Deposit Retirement or Educational Account Real Estate Holdings Personal Property (net value)	Dropdown							
					What is the cash value in U.S. dollars?	\$	Text							
					Save entry Cancel		CTA CTA							
				3.23	What is the total amount (U.S. dollars)?	\$	Text							
				3.24	Have you previously submitted a Form I-134 or a Form I-134A on behalf of a person other than the beneficiary listed on this Form I-134A?	Yes/No	Radio							
	Financial responsibility for other beneficiaries				[If YES to 3.24, conditional "Financial responsibility for other beneficiaries" section displays]			Provide the information about the people for whom you have previously submitted a Form I-134 or Form I-134A, other than the beneficiary listed on this Form I-134A.						
					[red alert] [If no entries are entered and 3.24 is yes]							[red alert] You must include at least one person for whom you have previously submitted a Form I-134 or Form I-134A, other than the beneficiary listed on this Form I-134A.		
					3.25, 3.26 [LARGE TABLE]	What is the person's name?	Given name (first name) Middle name Family name (last name)	Text Text Text						
					What is the person's A-number?	A-	Text		Provide a 7, 8, or 9-digit number. If your A-Number is fewer than 9 digits, the system will automatically add zero(s) after the "A" and before the first digit so there is a total of 9 digits, for example: A-001234567.					

FINANCIAL INFORMATION ABOUT THE PERSON AGREEING TO FINANCIALLY SUPPORT THE BENEFICIARY: I-134A

Column Header Descriptions

Primary Navigation: A section of the form that contains several pages.

Secondary Navigation: A single page within a section.

Conditional Logic: Indicates whether the question or subquestion only applies if you meet certain criteria.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required?	Notes
						I do not have or know the person's A-Number.	Checkbox					
					Date submitted	MM/DD/YYYY	Date					

ABOUT THE BENEFICIARY: I-134A

Column Header Descriptions

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Secondary Navigation: A single page within a section.

Conditional Logic: Indicates whether the question or subquestion only applies if you meet certain criteria.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Revision	Paper Form	Question	Sub-Question	Field Type	Instructional Text	Help Text	Revision	Alert	Required?	Notes	
			(if Nicaraguan)							Provide a 8 to 9-character passport number, beginning with 1 letter followed by 7-8 digits.					
			(if Ukrainian)							Provide an 8-character passport number, beginning with 2 letters followed by 6 digits.					
			(if Venezuelan)							Provide a 9-digit passport number.					
			(if Colombia)							Provide an 8-character passport number, beginning with 2 letters followed by 6 digits.					
			(if Honduras)							Provide a 7 to 8-character passport number, beginning with 1 letter followed by 6-7 digits.					
			(if Ecuador)							Provide a 9-character passport number, beginning with 1 letter followed by 8 digits.					
			(if El Salvador)							Provide a 9-character passport number, beginning with 1 letter followed by 8 digits.					
			(if Guatemala)							Provide a 9-digit passport number.					
			(if Russian)							Provide a 9-digit passport number.					
			(if Venezuelan is most recent passport show tooltip)		2.8	What is the expiration date of the beneficiary's most recently issued passport?	Confirm the beneficiary's passport number	Date	Expiration Date (MM/DD/YYYY)	Note: The beneficiary must have a valid, unexpired passport. CBP will not approve travel if the beneficiary's passport is expired.				Tooltip only shows if Venezuelan is selected for country that issued the beneficiary's most recent passport. If the beneficiary has received a passport extension, then enter the extension's expiration date. For more information visit the Process for Extensions webpage. Link: https://www.uscis.gov/CHNV	
					2.5	What is the beneficiary's A-Number? A-		Text		Provide a 7, 8, or 9-digit number. If your A-Number is fewer than 9 digits, the system will automatically add zero(s) after the "A" and before the first digit so there is a total of 9 digits, for example: A-00234567.					
					2.16	What is the beneficiary's anticipated period of stay in the United States?	I do not have or know the beneficiary's A-Number.	Checkbox							
						From (MM/DD/YYYY)		Date							
						To (MM/DD/YYYY)		Date							
						No End Date		Checkbox							

BENEFICIARY'S FINANCIAL INFORMATION: I-134A

Column Header Descriptions

Primary Navigation: A section of the form that contains several pages.

Secondary Navigation: A single page within a section.

Conditional Logic: Indicates whether the question or subquestion only applies if you meet certain criteria.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required?	Notes
Beneficiary's Financial Information	Beneficiary Income Information							Provide information about the income of 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.				Opens up large table once clicked
					Add entry		CTA					
				2.17 [LARGE TABLE]	What is the individual's full name?	Given name (first name) Middle name Family name (last name)	Text Text Text					
					What is individual's date of birth?	MM/DD/YYYY	Date					
					What is the individual's relationship to the beneficiary?		Dropdown					
					How much income will this individual contribute to the beneficiary annually?	\$	Text	If the income contribution is none, type in "0".				
					Save entry		CTA					
					Cancel		CTA					
				2.17	What is the beneficiary's total number of dependents?		Text			Provide the total number of dependents. Number must be between 0 and 100.		
				2.17	How much income will the beneficiary's dependents contribute to the beneficiary annually?	\$	Text					
	Beneficiary additional income information			2.18	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 Person Agreeing to Financially Support the Beneficiary" section) come from an illegal activity or source (such as proceeds from illegal gambling or illegal drug sales)?	Yes/No	Radio					
			[if YES to 2.18]	2.19	What amount of the beneficiary's total income comes from an illegal activity or source?	\$	Text					
				2.20	Does any of the beneficiary's total income come from means-tested public benefits as defined in 8 CFR 213a.1?	Yes/No	Radio					
			[if YES to 2.20]	2.21	What amount of the beneficiary's total income comes from means-tested public benefits?	\$	Text					
	Beneficiary assets							Provide the current cash value of any assets available to the beneficiary for the expected period of his or her stay. List only assets that can be converted to 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 U.S. dollars, regardless of whether the assets are held in the United States or outside of the United States. Do not include assets from any individuals named in the "Financial Information About the Individual 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 demonstrating 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 included 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 for the owner's claim of its net cash value.				
								Attach evidence in the "Evidence" section under "Proof of beneficiary's assets" and "Bonds" showing that the beneficiary has these assets.				
					Add entry		CTA					
				2.22 [LARGE TABLE]	What is the asset holder's full name?	Given name (first name) Middle name Family name (last name)	Text Text Text					
					What is the type of asset?	Checking - Bank Account Savings - Bank Account Annuities Stocks, Bonds, Certificates of Deposit Retirement or Educational Account Real Estate Holdings Personal Property (net value)	Dropdown					
					What is the cash value of the asset in U.S. dollars?	\$	Text					
					Save entry		CTA					
					Cancel		CTA					
					What is the total amount (U.S. dollars)?	\$	Text					

EVIDENCE: I-134A

Column Header Descriptions

Primary Navigation: A section of the form that contains several pages.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form	Evidence Title	Field Type	Instructional Text	Document type	File Requirements	Alerts	Required?	Links	Notes
Evidence	Bank officer statement			Form I-134 instructions (pg 5)	Bank Officer Statement	Upload	<p>Provide a statement from an officer of the bank or other financial institutions with deposits, identifying the following details:</p> <ul style="list-style-type: none"> • Date account opened • Total amount deposited for the past year; and • Present balance. <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Bank officer statement</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Employer statement			Form I-134 instructions (pg 5)	Employer Statement	Upload	<p>Provide statement(s) from your employer on business stationery showing:</p> <ul style="list-style-type: none"> • Date and nature of employment • Salary paid; and • Whether the position is temporary or permanent. <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Employer statement</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Income tax return			Form I-134 instructions (pg 6)	Income Tax Return	Upload	<p>Provide a copy of the last U.S. federal income tax return filed (tax transcript).</p> <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Income tax return</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Bonds			Form I-134 instructions (pg 6)	Bonds	Upload	<p>Provide a list containing serial numbers and denominations of bonds and name of record owner(s).</p> <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Bonds</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Proof of immigration status			Form I-134 instructions (pg 5) Item #10: Immigration Status	Proof Of Immigration Status	Upload	<p>Provide evidence of your status.</p> <p>A U.S. citizen or U.S. national may submit a copy of a birth certificate, certificate of naturalization, certificate of citizenship, consular report of birth abroad to U.S. parents, or a copy of the biographic data page on your U.S. passport.</p> <p>Proof of lawful permanent resident status includes a photocopy of both sides of the Permanent Resident Card or Alien Registration Receipt Card (Form I-551), or a photocopy of an unexpired temporary Form I-551 stamp in either a foreign passport or DHS Form I-94 Arrival Departure Record.</p> <p>Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foreign passport.</p>	<p>Immigration status</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Proof of assets of individual agreeing to financially support the beneficiary			Form I-134 instructions (pg 5) Item #19: Assets	Proof Of Assets Of Individual Agreeing To Financially Support The Beneficiary	Upload	<p>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 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.</p> <p>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, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you include the net value of your home, then you must include documentation demonstrating that you own 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.</p> <p>You may not include the net value of an automobile unless you show that you have more than one automobile, and at least one automobile is not included as an asset.</p> <p>Submit evidence of the value of your or your 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 value.</p> <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Assets</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Proof of beneficiary's assets			Form I-134 instructions (pg 4) Item #22: Beneficiary's Assets	Proof Of Beneficiary's Assets	Upload	<p>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 the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in U.S. dollars, regardless of whether the assets are held in the United States or outside of the United States. Do not include assets from any individuals in the "Financial Information About the Person Agreeing to Financially Support the Beneficiary" section.</p> <p>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 demonstrating 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.</p> <p>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 included 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 for the owner's claim of its net cash value.</p> <p>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 value.</p> <p>As the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary. Failure to provide evidence of sufficient 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.</p>	<p>Beneficiary asset</p> <p>Other documents</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Proof of the beneficiary's marital status		[If "Family Reunification Parole Process" selected in 1.2 AND if user did NOT select "Single, Never Married" in 2.9]		Proof Of Beneficiary's Marital Status	Upload	<p>Provide evidence of the beneficiary's marital status.</p> <p>If the beneficiary is married or has had a change in marital status since submission of the USCIS Form I-130, submit a copy of the beneficiary's current marriage certificate and any divorce decree, annulment decree, or death certificate showing that their prior marriages were terminated (if applicable).</p>	<p>Marriage certificate</p> <p>Divorce decree</p> <p>Annulment decree</p> <p>Death certificate</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				
	Proof of the beneficiary's family relationship		[If "Family Reunification Parole Process" selected in 1.2]		Proof Of Beneficiary's Family Relationship	Upload	<p>Provide evidence of the beneficiary's age and family relationship with the principal beneficiary of an approved Form I-130.</p> <p>If the beneficiary is the principal beneficiary of an approved Form I-130, only evidence of the beneficiary's age is required.</p>	<p>Birth certificate</p> <p>Adoption decree</p>	<ul style="list-style-type: none"> • 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, spaces, periods, hyphens, underscores, and parentheses • Maximum size: 12MB per file 				

ADDITIONAL INFORMATION: I-134A

Column Header Descriptions

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Secondary Navigation: A single page within a section.

Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required?	Notes
Additional Information	Additional Information						Large table	<p>If you need to provide any additional information for any of your answers to the questions in this form, enter it into the space below. You should include the questions that you are referencing.</p> <p>If you do not need to provide any additional information, you may leave this section blank.</p>			No	Large Table Pattern Ghost Sub Nav

REVIEW AND SUBMIT: I-134A

Column Header Descriptions

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Primary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper form question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required?	CTA	Notes
Review and Submit	Review your declaration				Check your declaration before you submit			Please review your declaration and check it for accuracy and completeness before you submit it. We encourage you to provide as many responses as you can throughout the declaration. Missing or incomplete information may slow down the review process after you submit your declaration. You can return to this page to review your declaration as many times as you want before you submit it.		[blue alert header for active drafts] [b] The name of this form has changed			Alert appears only for drafts started before toggle on of I-134A--12/21 https://www.uscis.gov/i-134a
			[blue alert] [Alert appears only for drafts started before toggle on of I-134A--12/21]		Your fee	Your form filing fee is: \$[xxx]							
					Alerts and warnings	Refund policy: USCIS does not refund fees, regardless of any action we take on your application, petition or request, or how long USCIS 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.		You have one or more alerts and warnings based on the information you provided in your declaration. A red alert means you have incomplete responses or inconsistent data. You cannot submit your declaration with any alerts. Green alert: We found no alerts or warnings in your declaration.				Next	
	Your declaration summary				Review the I-134A form information			Here is a summary of all the information you provided in your declaration. 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. We also prepared a draft case snapshot with your responses, which you can download below.				Next	
	Preparer statement	(IF PREPARER)	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 and with that individual's consent.	I am an attorney or accredited representative but have prepared this declaration on behalf of the individual agreeing to financially support the beneficiary and with that individual's consent.	Radio	Your preparer must read the statements below and select the statement that applies to him or her.					
				Preparer's certification and signature	I am an attorney or accredited representative and my representation of the individual agreeing to financially support the beneficiary in this case does not extend beyond the preparation of this declaration. I am an attorney or accredited representative and my representation of the individual agreeing to financially support the beneficiary in this case extends beyond the preparation of this declaration. By my signature, I certify, under penalty of perjury, that I prepared this declaration at the request of the individual agreeing to financially support the beneficiary (which is the beneficiary if on behalf of him or herself). The individual agreeing to financially support the beneficiary then reviewed this completed declaration and informed me that he or she understands all of the information contained in, and submitted with, his or her declaration, including the Certification of the Individual Agreeing to Financially Support the Beneficiary, and that all of this information is complete, true, and correct. I completed this declaration based only on filing information that the individual agreeing to financially support the beneficiary provided to me or authorized me to obtain or use. As the declarant's preparer, you must sign on paper and provide your signature page to the declarant. Follow these steps: 1. Download the Preparer Signature page 2. Print the Preparer Signature page 3. Read and sign the Preparer Signature page 4. Give the signed Preparer Signature page to the declarant	I am an attorney or accredited representative and my representation of the individual agreeing to financially support the beneficiary in this case does not extend beyond the preparation of this declaration. I am an attorney or accredited representative and my representation of the individual agreeing to financially support the beneficiary in this case extends beyond the preparation of this declaration. By my signature, I certify, under penalty of perjury, that I prepared this declaration at the request of the individual agreeing to financially support the beneficiary (which is the beneficiary if on behalf of him or herself). The individual agreeing to financially support the beneficiary then reviewed this completed declaration and informed me that he or she understands all of the information contained in, and submitted with, his or her declaration, including the Certification of the Individual Agreeing to Financially Support the Beneficiary, and that all of this information is complete, true, and correct. I completed this declaration based only on filing information that the individual agreeing to financially support the beneficiary provided to me or authorized me to obtain or use. As the declarant's preparer, you must sign on paper and provide your signature page to the declarant. Follow these steps: 1. Download the Preparer Signature page 2. Print the Preparer Signature page 3. Read and sign the Preparer Signature page 4. Give the signed Preparer Signature page to the declarant	Radio	Your preparer must read and agree to the certification below.			Next		
	Preparer signature	(IF PREPARER)	7.8	Preparer's Signature Upload			Upload	Scan and upload your preparer's completed signature page below.				Next	
	Interpreter certification	(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 answer to every question. The individual agreeing to financially support the beneficiary informed me that they understand every instruction, question, and answer on the declaration, including the Certification of the Individual Agreeing to Financially Support the Beneficiary, and has verified the accuracy of every answer. As the declarant's interpreter, you must sign on paper and provide your signature page to the declarant. Follow these steps: 1. Download the Interpreter Signature page 2. Print the Interpreter Signature page 3. Read and sign the Interpreter Signature page 4. Give the signed Interpreter Signature page to the declarant	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 answer to every question. The individual agreeing to financially support the beneficiary informed me that they understand every instruction, question, and answer on the declaration, including the Certification of the Individual Agreeing to Financially Support the Beneficiary, and has verified the accuracy of every answer. As the declarant's interpreter, you must sign on paper and provide your signature page to the declarant. Follow these steps: 1. Download the Interpreter Signature page 2. Print the Interpreter Signature page 3. Read and sign the Interpreter Signature page 4. Give the signed Interpreter Signature page to the declarant	Radio	Your interpreter must read and agree to the certification below.			Next		
	Interpreter signature	(IF INTERPRETER)		Interpreter's Signature Upload			Upload	Scan and upload your interpreter's completed signature page below.				Next	
	Statement of the individual agreeing to financially support the beneficiary	(IF NO INTERPRETER)	5.1.A	Individual agreeing to financially support the beneficiary's statement	I can read and understand English, and have read and understand every question and instruction on this declaration and my answer to every question.		Checkbox	I, as the individual agreeing to financially support the beneficiary, certify the following: You must read and agree to the statement below.					MVP
		(IF PREPARER)	5.2	Individual agreeing to financially support the beneficiary's statement regarding the preparer	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.		Checkbox	You must read and agree to the statement below.					MVP
		(IF INTERPRETER)	5.1.B	Individual agreeing to financially support the beneficiary's statement regarding the interpreter	The interpreter 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 language I specified in the Getting Started section, a language in which I am fluent, and I understood everything.		Checkbox	You must read and agree to the statement below.				Next	MVP
	Signature of the individual agreeing to financially support the beneficiary	(If "Statement of the individual agreeing to financially support the beneficiary" is complete)	5.6	Individual agreeing to financially support the beneficiary's Certification	Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or the Department of State may require that I submit original documents to USCIS or the Department of State at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or the Department of State may need to determine my eligibility for the immigration benefit I seek. I further authorize release of information contained in this declaration, in supporting documents, and in my USCIS or the Department of State records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws. I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that: 1. I reviewed and provided or authorized all of the information in my declaration; 2. I understood all of the information contained in, and submitted with, my declaration; and 3. All of this information was complete, true, and correct at the time of filing. I certify, under penalty of perjury, that I provided or authorized all of the information in my declaration, I understand all of the information contained in, and submitted with, my declaration, and that all of this information is complete, true, and correct. That this declaration is made by me to assure the U.S. Government that the beneficiary named under the About Beneficiary section will be financially supported while in the United States. That I am willing and able to receive, maintain, and support the person named under the About Beneficiary section to better ensure that such persons will have sufficient financial resources or financial support to pay for necessary expenses for the period of his or her temporary stay in the United States. I acknowledge that I have read this section, and I am aware of my responsibilities as an individual agreeing to financially support the beneficiary.	I certify, under penalty of perjury, that I provided or authorized all of the information in my declaration, I understand all of the information contained in, and submitted with, my declaration, and that all of this information is complete, true, and correct. That this declaration is made by me to assure the U.S. Government that the beneficiary named under the About Beneficiary section will be financially supported while in the United States. That I am willing and able to receive, maintain, and support the person named under the About Beneficiary section to better ensure that such persons will have sufficient financial resources or financial support to pay for necessary expenses for the period of his or her temporary stay in the United States. I acknowledge that I have read this section, and I am aware of my responsibilities as an individual agreeing to financially support the beneficiary.							
				Individual Agreeing to Financially Support the Beneficiary's Signature			Checkbox	You must provide your digital signature below by typing your full legal name. If you do not 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. Once you submit this declaration, you will receive a confirmation with details on any next steps. We will record the date of your submission with the declaration. Your case status will be updated on your home page.			Yes	Next	
	Submit	(If "Statement of the individual agreeing to financially support the beneficiary" and "Signature of Individual Agreeing to Financially Support the Beneficiary's Signature" are complete)			Submit the I-134A							Submit the I-134A	
	Successful submission (No nav)				You have successfully submitted your Online Request to be a Supporter and Declaration of Financial Support (I-134A)			We will contact you if we have any questions or need additional information. You can track the status of your declaration through your USCIS online account.					Go to my cases

WARNINGS, ALERTS, NOTICES, AND ERRORS: I-134A

Column Header Descriptions

Section: The primary nav where the alert can be found.

Page: The secondary nav where the alert can be found.

Type: The color of the alert. (Red, Yellow, Blue, Green)

Conditional Logic: A column used to indicate whether the question or subquestion only applies if you meet certain criteria.

Messages: The copy that will show on the alert. Use [b] to indicate the header copy, and [i] to indicate the body copy.

Navigation	Sub-navigation	Type	Conditional Logic	Message	Revision	Link	Notes
File A-Form Overview		Yellow alert	Always show	<p>[b] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:</p> <ul style="list-style-type: none"> • Cuba • Colombia • El Salvador • Guatemala • Haiti • Honduras • Nicaragua • Ukraine • Venezuela <p>You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-134A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A.</p> <p>Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children.</p> <p>To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and custody of their parent or legal guardian and be able to provide documentation to confirm the relationship.</p> <p>If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must file a paper Form I-134 through the appropriate Lockbox location.</p>	<p>[b] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:</p> <ul style="list-style-type: none"> • Cuba • Colombia • Ecuador • El Salvador • Guatemala • Haiti • Honduras • Nicaragua • Ukraine • Venezuela <p>You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-134A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A.</p> <p>Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children.</p> <p>To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and custody of their parent or legal guardian and be able to provide documentation to confirm the relationship.</p> <p>If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must file a paper Form I-134 through the appropriate Lockbox location.</p>	https://www.uscis.gov/i-134	
About the IATFSB	Contact information for the individual agreeing to financially support the beneficiary	Yellow alert	Always show under "What is your current mailing address?" question and "What is your physical address?" question	[b] You must be located in the United States in order to file at this time.			
About the IATFSB	When and where the individual agreeing to financially support the beneficiary was born	Red alert	If date of birth is different than the date of birth of the applicant's profile, the following red alert is shown.	<p>NS: This account has already been verified with a different date of birth</p> <p>The date of birth in this account's profile is [MM/DD/YYYY].</p> <p>If you need to apply for a benefit for someone else using the date of birth you entered, you should sign out of this account and create a new account for them at https://myaccount.uscis.gov/</p> <p>NS: This account has already been verified with a different A-Number</p> <p>The A-Number in this account's profile is [xxxxxxxx].</p> <p>If you need to apply for a benefit for someone else using the A-Number you entered, you must sign out of this account and create a new account for them at https://myaccount.uscis.gov/</p>		https://myaccount.uscis.gov/	
About the IATFSB	Immigration information for the individual agreeing to financially support the beneficiary	Red alert	If A-Number is different than the A-Number of the applicant's profile, the following red alert is shown.	<p>NS: This account has already been verified with a different A-Number</p> <p>The A-Number in this account's profile is [xxxxxxxx].</p> <p>If you need to apply for a benefit for someone else using the A-Number you entered, you must sign out of this account and create a new account for them at https://myaccount.uscis.gov/</p>		https://myaccount.uscis.gov/	
Financial Info	Financial responsibility for other beneficiaries	Red alert	If no entries are entered and 3.24 is yes	You must include at least one person for whom you have previously submitted a Form I-134 or Form I-134A, other than the beneficiary listed on this Form I-134A.			
ATATFSB	Beneficiary contact information	Blue alert	Always show	[b] You must provide a valid email address for the beneficiary. We will send them important information at this email address if Form I-134A is confirmed. If you do not provide an email address that the beneficiary can access, they will not be able to complete the parole process. DO NOT enter your email address in this field.			
About the Beneficiary	Other information about the beneficiary	Yellow alert	If user selected "Parole Process" in question 1.2, show under "What is the beneficiary's country of citizenship or nationality?" question and "What country issued the beneficiary's most recently issued passport?" question	<p>[b] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Haitian, Nicaraguan, Ukrainian, and Venezuelan citizens and their immediate family</p> <p>[b] Immediate family members are:</p> <ul style="list-style-type: none"> • Their spouse or common-law partner; and • Unmarried children under the age of 21. <p>Note: Individuals only eligible as immediate family members and children under age 18 must travel with their beneficiary spouse, common law partner, parent, or legal guardian to be eligible for parole.</p>			
About the Beneficiary	Other information about the beneficiary	Yellow alert	If user selected "Family Reunification Parole Process" in question 1.2, show under "What is the beneficiary's country of citizenship or nationality?" question and "What country issued the beneficiary's most recently issued passport?" question	<p>[yellow alert]</p> <p>[b] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Salvadoran, and Guatemalan citizens and their immediate family</p> <p>[b] Immediate family members are:</p> <ul style="list-style-type: none"> • Their spouse or common-law partner; and • Unmarried children under the age of 21. <p>Note: Individuals only eligible as immediate family members and children under age 18 must travel with their beneficiary spouse, common law partner, parent, or legal guardian to be eligible for parole.</p>	<p>[yellow alert]</p> <p>[b] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Ecuadorian, Salvadoran, and Guatemalan citizens and their immediate family</p> <p>[b] Immediate family members are:</p> <ul style="list-style-type: none"> • Their spouse or common-law partner of the primary beneficiary who is a citizen of a qualifying country; and • Unmarried children under the age of 21. <p>Note: Individuals only eligible as immediate family members and children under age 18 must travel with their beneficiary spouse, common law partner, parent, or legal guardian to be eligible for parole.</p>		
Review & Submit	Review your declaration	Blue alert	Alert appears only for active drafts started before toggle on of I-134A "12/21"	<p>[b] The name of this form has changed</p> <p>[b] The name of this form has changed to Form I-134A, Online Request to be a Supporter and Declaration of Financial Support.</p> <p>No other changes have been made to your draft. Learn more about Form I-134A.</p>		https://www.uscis.gov/i-134a	