myUSCIS Copydeck: Interact	ive 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><li>All original (old) text is black.</li><li>All revised (new) text is red.</li></ul>		
Example	Original	Revised
All original text is black.	1. Oranges	1. Oranges
Any text that is removed from original column will	2. Bananas	2. Bananas
be removed in the revision column with the words	3. Apple	3. Pineapple
on either side indicated with red.	4. Pineapple	4. Pear
	I want to eat a watermelon for lunch	I want to go hiking today.
	and 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	СТА	Notes
Select the form you want to file online	Some immigration benefits that involve a temporary stay in the United States				Start form	
	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.					İ
	The individual who submits Form I-134A must establish that they have both					
1	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.	[vollow plort]	[vallow plort]	https://www.uccia.ass/i.e.a.a		i
		[yellow alert]  [h] We are only accepting online filing of Form I-1344 from individuals agreeing to financially support eligible	[yellow alert]  [h] We are only accepting online filing of Form L1344 from individuals agreeing to financially support eligible beneficiaries from	https://www.uscis.gov/i-134		
		[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible	[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from			
		beneficiaries from the following countries:	the following countries:			
		[b]	[b]			
		• Cuba	• Cuba			
		• Colombia	• Colombia			
		• El Salvador	• El Salvador			
		Guatemala	• Ecuador			
		• Haiti	Guatemala			
		Honduras	• Haiti			
		• Nicaragua	• Honduras			
		• Ukraine	• Nicaragua			
		Venezuela	• Ukraine			
1			• 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	You must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not			
		Form I-134A.	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.	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	•		
		To be eligible for this process, children under the age of 18 must be traveling to the United States in the care and	parent or legal guardian and be able to provide documentation to confirm the relationship.			
		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	<b>'</b> \$,		
		If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs	you must file a paper Form I-134 through the appropriate Lockbox location.			
		or processes, you must file a paper Form I-134 through the appropriate Lockbox location.				

## **APPLICATION OVERVIEW: I-134A**

Heading	Sub-Heading Condition	onal Logic Body Text	Revisions	ort Control of the Co	Revision	equired? Link	CTA Notes
I-134A, Online Request To Be A Supporter And Declaration Of Financial Support		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 beneficial 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 had 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 a	alert]	[h] cou [b] • Cu • Cu • El • G • H	llow alert] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the followin untries:  uba olombia I Salvador duatemala laiti londuras	<ul> <li>[yellow alert]</li> <li>g [h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:</li> <li>[b]</li> <li>• Cuba</li> <li>• Colombia</li> <li>• Ecuador</li> <li>• El Salvador</li> <li>• Guatemala</li> <li>• Haiti</li> <li>• Honduras</li> </ul>	https://www.uscis.gov/i-134	
			• U • Vo You 134	Ikraine lenezuela u must be located in the United States to file Form I-134A online. Individuals seeking parole through these processes may not file Form I-14A on their own behalf. Supporters must include the name of the beneficiary on Form I-134A.	<ul><li>Nicaragua</li><li>Ukraine</li><li>Venezuela</li></ul>		
			To legal	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 al guardian and be able to provide documentation to confirm the relationship.  ou are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must a paper Form I-134 through the appropriate Lockbox location.	If you are agreeing to support a beneficiary who is not seeking consideration for parole under one of these programs or processes, you must		
Before You Start Your Declaration	Eligibility  Fee  Documents you may need	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.			file a paper Form I-134 through the appropriate Lockbox location.		
		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:					
		<ul> <li>Date and nature of employment;</li> <li>Salary paid; and</li> <li>Whether the position is temporary or permanent</li> <li>3. Copy of last U.S. federal income tax return filed (tax transcript); or</li> <li>4. List containing serial numbers and denominations of bonds and name of record owner(s).</li> </ul>					
	Biometric services appointment	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 necessary, the notice will provide you the 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 United States to set up an appointment.	is				
		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.					
fter You Submit Your eclaration ompleting Your Form Onlin	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 duratic of their parole period in the United States. USCIS will notify you of the determination in writing.  Submitting your declaration online is the same as mailing in a completed paper form. They both gather the same information.					<u>Next</u>
ompleting four rollin omili	Complete the Getting Started section first Provide as many responses as you can We will automatically save your responses How to continue filling out your form DHS Privacy Notice	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 tod 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(d)(5), 214 and 248.	day,				
		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 adequardinancial 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/CBP-001 Alien File, Index, and Natio 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/CBP/PIA-024 Arrival and Departure Information System and DHS/CBP/PIA-068 CBP One Mobile Application] and the published privacy impact assessments [DHS/USCIS/PIA-003	es nal			https://www.dhs.gov/topics/privacy	
	Paperwork Reduction Act	Integrated Digitization Document Management Program (IDDMP), DHS/USCIS/PIA-051 Case and Activity Management for International Operations, DHS/USCIS/PIA-056 USCIS Electron Immigration System, and DHS/USCIS/PIA-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.  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 at 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:	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 at 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				
		U.S. Citizenship and Immigration Services Office of Policy and Strategy, Regulatory Coordination Division 5900 Capital Gateway Drive, Mail Stop #2140 Camp Springs, MD 20588-0009  Do not mail your completed Form I-134A to this address.  OMB No. 1615-0157 Expires: 07/31/2023	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 20588-0009  Do not mail your completed Form I-134A to this address.				
	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.	OMB No. 1615-0157 Expires: 07/31/2023				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

	WILLIAM WIELLER	.a. diesilon of suon	uestion only applies if v											
ary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Revision	Field Type	Instructional Text	Revisions	Help Text	Alert	Required?	Notes
Started	Basis for filing			1.1		Another individual who is the beneficiary	Another individual who is the beneficiary	Radio					Yes	For online filing, this is the c
				1.2	form? I am filing this form under one of the	Parole Process	Parole Process	Radio	Select "Parole Process" for the Uniting for Ukraine and				Yes	option available
				1.2	following:	raiole riocess	ratole riocess	Radio	CHNV parole processes. Select "Family Reunification				163	
									Parole Process" only if you have received personalized					
									invitation letters inviting you to participate in the Family Reunification Parole Process.					
						Family Reunification Parole Process		Radio						
			[If "Parole Process"	1.3	I am filing for an individual under the			Dropdown					Yes	
			selected in 1.2]		parole process for the following country:	Haiti Nicaragua								
					,	Ukraine								
			[If "Family Reunification	n 12	I am filing for my relative who is	Venezuela Colombia	Colombia	Dropdown					Yes	
			Program" selected in		associated with an approved I-130	Cuba	Cuba	Dгораоwп					res	
			1.2]		and a national of:	El Salvador	Ecuador							
						Guatemala Haiti	El Salvador Guatemala							
						Honduras	Haiti							
			[If "Family Reunification	n 1.4	Invitation Number:		Honduras	Text	The Invitation Number can be found on the I-130	The Invitation Number can be found or	•		Vos	
			Program" selected in	ЛІ 1.4	invitation number.			Text	beneficiary's Family Reunification Parole Process Invitation		I		Yes	
			1.2]						Letter.	Reunification Parole Process Invitation				
			[If "Family Reunification	n 15	How many total family members will			Text	Entering "1" indicates no derivative beneficiaries share the	Letter.			Yes	
			Program" selected in	711 1.5	be included in this family reunification			TOAL	same invitation number.				103	
			1.2]		group who all share the same									
	Preparer and				invitation number? Is someone assisting you with	Yes/No		Radio						
	interpreter				completing this declaration?									
	information		(IF YES)		Is a propagor assisting you with	Yes/No		Radio	A preparer is anyone who completes or helps you					
			(IF TES)		Is a preparer assisting you with completing this declaration?	resylvo		Raulo	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					
					completing this decided.				and answers that you provide.					
	Preparer informatio	on	(IF YES TO PREPARER)	7.1	What is your preparer's full name?	Given name (first name)		Text						
						Family name (last name)		Text						
				7.2	What is your preparer's business or			Text						
					organization name?	My preparer is not part of a business or		Checkbox						
						organization.		CHECKDOX						
				7.3		Country		Dropdown						
					address?	Address line 1		Text			Street number and name			
						Address line 2		Text			Apartment, suite, unit, or floor			
			//5			City or town		Text						
			(If non-USA use Provin and text field)	ce		State/Province		Dropdown/ Text						
			(If non-USA use Postal			ZIP code/Postal code		Text			Provide a 5 or 9-digit ZIP code.			
			code and remove help text)											
			ιτι	7.4	What is your preparer's contact	Daytime telephone number		Text			Provide a 10-digit phone numbe	er.		
					information?									
				7.5		Mobile telephone number		Text			Provide a 10-digit phone number	er.		
						My preparer does not have a mobile		Checkbox						
				7.6		telephone number. Email address		Text			Example: user@domain.com			
				7.0		My preparer does not have an email addre	ess.	Checkbox			Example: d3cl@domaii.com			
	<u> </u>		//5.250.50.50.50.50.50.50.50.50.50.50.50.50.5	·D) C 1										
	Interpreter information		(IF YES TO INTERPRETE	:K) 6.1	What is your interpreter's full name?	Given name (first name)		Text						
						Family name (last name)		Text						
				6.2	What is your interpreter's business or organization name?			Text						
					organization name:	My interpreter is not part of a business or		Checkbox						
				6.0	Miles	organization.								
				6.3	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			
			(If non-USA use Provin	ce		City or town State/Province		Text Dropdown/Text						
			and text field)											
			(If non-USA use Postal code and remove help			ZIP code		Text			Provide a 5 or 9-digit ZIP code.			
			text)											
				6.4	What is your interpreter's contact	Daytime telephone number		Text			Provide a 10-digit phone number	er.		
				6.5	information?	Mobile telephone number		Text			Provide a 10-digit phone numbe	er.		
				-: <del>-</del>							priorie numbe			
						My interpreter does not have a mobile telephone number		Checkbox						
				6.6		Email address		Text			Example: user@domain.com			
						My interpreter does not have an email		Checkbox						
					What language is your interpreter	address.		Text						
					using to interpret this declaration for			·CAC						
					you?									

## 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.

Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Revisions	Sub-Question	Revisions	Field Type	Instructional Text	Help Text	Alert	Required? Notes
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 you birth certificate, unless it changed after birt by a legal action such as marriage or court order. Do not provide any nicknames here.	ch		
						Middle name Family name (last name)		Text Text				
		(If yes to 2.2)	3.2	Have you used any other names since birth?		Yes/No Given name (first name)		Radio	Other names used may include aliases, maiden name, and nicknames.			Table
		[If yes to 3.2]				Middle name		Text Text	Provide the other names you have used.			Add another name
		[If "Parole Process" selected in 1.2]	3.3	Provide the name of the organization, group, or individual		Family name (last name) Organization, Group, Individual Name		Text Text				
		[If "Family Reunification Parole Process" selected in 1.2]	3.3	that is providing support to the beneficiary with you (if any). 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	Individual(s) or Co-sponsor(s) Name	Individual Co-supporter(s) Name(s)	Text				
Contact information			5.3	How may we contact you?	beneficiary (if any).	Daytime telephone number		Text		Provide a 10-digit phone number.		
for the individual agreeing to financially								· exc				
support the beneficiary			5.4			Mobile telephone number (if any)		Text		Provide a 10-digit phone number.		
			5.5			This is the same as my daytime telephone number. Email address		Checkbox Text		Example: user@domain.com		
			3.4 3.4	What is your current mailing 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 3.4			Address line 1 Address line 2		Text Text		Street number and name Apartment, suite, unit, or floor		
			3.4 3.4			City or town State		Text Dropdown				
		[If NO]	3.4 3.5 3.6	Is your mailing address the same as the physical address? What is your physical address?		ZIP code Yes/No In care of name (if any)		Text Radio Text		Provide a 5 or 9-digit ZIP code.		
		[II NO]	3.0	What is your physical address:		Country		Dropdown			[yellow alert] [b] You must be located in the	
											United States in order to file at this time.	
						Address line 1 Address line 2 City or town		Text Text Text		Street number and name Apartment, suite, unit, or floor		
						State ZIP code		Dropdown Text		Provide a 5 or 9-digit ZIP code.		
When and where the individual agreeing to	)		3.7	What is your date of birth?		MM/DD/YYYY		Date				
financially support the beneficiary was born												
			3.9 3.9	What is your city or town of birth? What is your state or province of birth?				Text Text				
			3.9 3.8	What is your country of birth? What is your sex?		Male Female		Dropdown Radio	Please select the sex that is shown on your passport or other government-issued			Yes
						X			identity document. For any value other tha "Male" ("M") or "Female" ("F") that appear on your identity document, please choose "X" (Unspecified or another gender identity USCIS requires this information to conduct accurate background checks and security	r's '/).		
Immigration information for the			3.14	What is your current immigration status?		U.S. Citizen U.S. National		Radio	screening.			
individual agreeing to financially support the						Lawful Permanent Resident Nonimmigrant						
beneficiary		[If Other]	3.14	What is your Farms I OA Arrival Departure Depart Number 2		Other Please provide an explanation.		Textbox		Dravida an 11 aharastar I 04 Number		
		[If Nonimmigrant] (if Lawful Permanent Resident, then A Number is required)	3.14 a- 3.1	What is your Form I-94 Arrival-Departure Record Number? What is your A-Number?		A-		Text Text		Provide an 11 character I-94 Number.  Provide a 7, 8, or 9-digit number. If your A  Number is fewer than 9 digits, the system		A-Number is required if
										will automatically add zero(s) after the "A and before the first digit so there is a tota	п	Lawful Permanent
						Lala mat hava ay liya ay way A. Niyyada ay		Ch salib sir		9 digits, for example: A-001234567.		Resident is selected.
			3.12	What is your Social Security Number?		I do not have or know my A-Number. I do not have a U.S. Social Security number.		Checkbox Text Checkbox		Provide a 9-digit Social Security number.		
			3.11	What is your USCIS Online Account Number?				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.	.,	r.	
									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.)			
			3.13	What is your relationship to the beneficians?		I do not have or know my USCIS Online Account Number	er.	Checkbox Dropdown				Var
Employment information for the individual agreeing to	)		3.15	What is your relationship to the beneficiary? What is your employment status?		Employed (full-time, part-time, seasonal, self-employed	d)	Radio				r Go
financially support the beneficiary												
						Unemployed or not employed Retired		Radio Radio				
		[If Other] [If EMPLOYED to 3.15]	3.15 3.16	Please provide an explanation. What is your type of employment?		Other I am currently employed as a/an		Radio Textbox Radio				
		[If EMPLOYED to 3.15] [IF EMPLOYER IS NOT SELF]	3.16 3.16A	Employed as		I am currently self-employed as a/an		Radio Text				
		[IF EMPLOYER IS NOT SELF] [IF EMPLOYER IS SELF]	3.16A 3.16B	Name of employer Self-employed as		_		Text Text				
			3.17	What is your current employer's address?		Country Address line 1		Dropdown Text		Street number and name		
						Address line 2 City or town		Text Text		Apartment, suite, unit, or floor		
		(If non-USA use Province and text				State/Province		Dropdown/Tex	κt			

### 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 a

Se	econdary Nav To	ertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required? Notes
dual for incially ag reficiary fin	come information or the individual greeing to nancially support ne 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]	Add entry  What is the individual's full name?	Given name (first name) Middle name	CTA Text Text				
				3.18 3.18	What is the individual's date of birth?  What is the individual's relationship to the individual agreeing to	Family name (last name) MM/DD/YYYY	Text Date Dropdown				"If you are the individual agreeing to financially su
				3.18	financially support the beneficiary?  How much income will this individual contribute to the	I'm entering my own financial information	Checkbox Text	If the income contribution is none, type in "0".			beneficiary, type in "Self"" instructions TBD based feedback from Adi.
				0.20	beneficiary annually? 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.		
inf inc	dditional income formation for the dividual agreeing			3.18 3.20	What is the total income?  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	Text Radio				
su	o financially upport the eneficiary		[If YES to 3.19]	3.21	What amount of income comes from an illegal activity?	\$	Text				
			[IF YES TO 3.20]	3.22	Does any of the income listed above come from means-tested public benefits as defined in 8 CFR 213a.1? What amount of income is from means-tested public benefits?	Yes/No \$	Radio Text				
со	pecific ontributions to the eneficiary			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 cove		Text box				Yes
				3.28	their basic living needs.  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		Text box				Yes
				3.29	housing needs are met, including where the beneficiary will reside during their temporary stay in the United States, if known You are responsible for assisting the beneficiary's access to		Text box				Yes
				5.29	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		Text box				TES
	ssets of the dividual agreeing				these responsibilities.			Provide information about any assets you will use to support the beneficiary for the anticipated period of his or her stay.			
to su	o financially upport the eneficiary							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]	Add entry What is the asset holder's full name?	Given name (first name)	СТА				
					What is the type of asset?	Middle name Family name (last name) Checking - Bank Account Savings - Bank Account Annuities Stocks, Bonds, Certificates of Deposit	Dropdown				
					What is the cash value in U.S. dollars?	Retirement or Educational Account Real Estate Holdings Personal Property (net value) \$	Text				
				3.23	Save entry Cancel What is the total amount (U.S. dollars)?	\$	CTA CTA Text				
			Tito and a second	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 134A?		Radio				
res	nancial esponsibility for ther beneficiaries		[If YES to 3.24, conditional "Financial responsibility for othe beneficiaries" section displays]	r				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 entrie are entered and 3.24 is yes]		Add entry		СТА			[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	
				3.25, 3.26 [LARGE TABLE]	What is the person's name?	Given name (first name) Middle name	Text Text			the beneficiary listed on this Form I-134A.	
					What is the person's A-number?	Family name (last name) A-	Text 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		

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

Secondary Nav Terti	or subquestion only applies if you meet certain crite iary Nav Conditional Logic Revision	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Revision	Alert	Revision	Required? Notes
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.					
	[If yes to 2.2]	2.1 2.1 2.2	Has the beneficiary used any other names since birth? [LIST]	Middle name Family name (last name) r Yes/No Given name (first name)	Text Text Radio Text	Other names used may include aliases, maiden name, and nicknames. Provide the other names the beneficiary has used					Table
	[If "Family Reunification Program" selected in 1.2]		Is this the individual listed as the principal beneficiary in your Fami Reunification Parole Process		Text Text Radio						Add another name button Yes
Beneficiary contact information	1.2]	2.13	invitation letter?  How may we contact the beneficiary?	Daytime telephone number	Text		Provide a 10 to 20-digit number.				
iniorniation		2.14	beneficiary:	Mobile telephone number (if any) This is the same as the beneficiary's daytime telephone number.	Text Checkbox		Provide a 10 to 20-digit number.		[blue alert] [b] You must provide a valid email address for the beneficiary. If your Form I-134A is confirmed, we will send important information to the beneficiary at this email address. If		
	[If selected "Family Reunification Parole Process" in 1.2," show United States in dropdown]	2.15 2.10	What is the beneficiary's current mailing address?	Email address  Confirm the beneficiary's email address In care of name (if any)	Text Text Text		Example: user@domain.com Example: user@domain.com		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.		
		2.10 2.10 2.10 2.10 2.10		Country Address line 1 Address line 2 City or town Province	Dropdown Text Text Text Dropdown/Text		Street number and name Apartment, suite, unit, or floor				Yes
	[If United States mailing address,	2.10 2.11	Is the beneficiary's mailing address the same as the physical address?	Postal code s Yes/No	Text Radio						
	default to 'No'] [If no]  [If selected "Family Reunification Parole Process" in 1.2," show	2.12	What is the beneficiary's physical address?		Text	The beneficiary's physical address must be outsid of the United States.					Instructional text conditional b
	instructional text]	2.12 2.12 2.12 2.12		Country Address line 1 Address line 2 City or town Province	Dropdown Text Text Text Dropdown/Text		Street number and name Apartment, suite, unit, or floor				
When and where beneficiary was born		2.12	What is the beneficiary's date of birth?	Postal code MM/DD/YYYY	Text Date						Yes
		<ul><li>2.6</li><li>2.6</li><li>2.6</li></ul>	What is the beneficiary's city or town of birth? What is the beneficiary's state or province of birth? What is the beneficiary's country of birth?		Text  Text  Dropdown/Text						
Other Information about the Benefiiciary			A grant of parole is a discretionary determination granted on a case-basis for urgent humanitariar reasons or significant public benefule exercise of discretion is merited fothis individual.	oy- n fit.	Text Box						Yes
		2.4	What is the beneficiary's 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
		2.9	What is the beneficiary's marital status?	Single, Never Married Married Divorced Widowed Legally Separated Marriage Annulled	Radio	checks and security screening.					
	[If OTHER] [If selected "Parole Process" in 1.2, show yellow alert]	2.9 2.7	What is the beneficiary's country c citizenship or nationality?	Other  Provide an explanation	Text box Dropdown				[yellow alert] [h] 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  [b] Immediate family members are:  • Their spouse or common-law partner; and  • Unmarried children under the age of 21.		
	[If selected "Family Reunification Parole								<b>Note:</b> Individuals only eligible as immediate family members and children under age 18 must travel with their beneficiary spouse, common law partner, parent, or legal guardia to be eligible for parole.  [yellow alert]  [h] We are only accepting online filing of Form I-134A from individuals agreeing to		
	Process" in 1.2 show yellow alert]								financially support Cuban, Colombian, Haitian, Honduran, Salvadoran, and Guatamalan citizens and their immediate family  [b] Immediate family members are:	financially support Cuban, Colombian, Haitian, Honduran, Ecuadorian, Salvadoran, and Guatamalan citizens and their immediate family  [b] Immediate family members are:  • The spouse or common-law partner of the primary beneficiary who is a citizen of a	
									Note: Individuals only eligible as immediate family members and children under age 18	<ul> <li>qualifying country; and</li> <li>Unmarried children under the age of 21.</li> <li>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.</li> </ul>	
	[If selected "Parole Process" in 1.2, show yellow alert]	2.8	What country issued the beneficiary's most recently issued passport?		Dropdown				[yellow alert] [h] 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		
									<ul> <li>[b] Immediate family members are:</li> <li>Their spouse or common-law partner; and</li> <li>Unmarried children under the age of 21.</li> <li>Note: Individuals only eligible as immediate family members and children under age 18</li> </ul>		
	[If selected "Family Reunification Parole Process" in 1.2 show								must travel with their beneficiary spouse, common law partner, parent, or legal guardian to be eligible for parole.  [yellow alert]  [h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Salvadoran, and Guatamalan	[yellow alert] [h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Ecuadorian, Salvadoran, and	
	yellow alert]								<ul> <li>Their spouse or common-law partner; and</li> <li>Unmarried children under the age of 21.</li> </ul>	Guatamalan citizens and their immediate family  [b] Immediate family members are:  • The spouse or common-law partner of the primary beneficiary who is a citizen of a qualifying country; and	
									Note: Individuals only eligible as immediate family members and children under age 18	<ul> <li>Unmarried children under the age of 21.</li> <li>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.</li> </ul>	
		2.8	What is the number of the beneficiary's most recently issued		Text		Provide a 7 to 12-character passport number.	·.			
	(if Cuban)		passport?				Provide a 7-character passport number, beginning with 1 letter followed by 6 digits.  Provide a 9-character passport number, beginning with 1-3 letters followed by 6-8				

#### **ABOUT 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. Required? Notes Paper Form Question Question Sub-Question Field Type Instructional Text Help Text Primary Nav Secondary Nav Tertiary Nav Conditional Logic Revision Revision (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. Provide a 9-digit passport number. (if Venezuelan) (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. Provide a 9-digit passport number. (if Guatemala) Provide a 9-digit passport number. (if Russian) Confirm the beneficiary's passport number What is the expiration date of the MM/DD/YYYY Note: The beneficiary must have a valid, Tooltip only shows if Venezuelan is selected for country that issued the beneficiary's most recent (if Venezuelan is most Expiration Date (MM/DD/YYYY) recent passport show beneficiary's most recently issued unexpired passport. CBP will not approve travel if the beneficiary's passport is tooltip) expired. If the beneficiary has received a passport extension, then enter the extension's expiration date. For more information visit the Process for Venezuelans webpage. Link: https://www.uscis.gov/CHNV Text Provide a 7, 8, or 9-digit number. If your A-What is the beneficiary's A-Number? 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. I do not have or know the beneficiary's A- Checkbox What is the beneficiary's anticipated From (MM/DD/YYYY) period of stay in the United States? To (MM/DD/YYYY)

### **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.

rimary Nav	Secondary Nav	Tertiary Nav	Conditional Logic	Paper Form Question	Question	Sub-Question	Field Type	Instructional Text	Help Text	Alert	Required? N	lotes
eficiary's Financial rmation	Beneficiary incon information	ne						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.				
					Add entry		СТА				0	pens up large table once clic
								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 individual agreeing to financially support the beneficiary). Information about assets that are not based on employment should not be included here but may be added under "Beneficiary Assets" below.				
				2.17 [LARGE TABLE]	What is the individual's full name?	Given name (first name) Middle name	Text Text					
						Family name (last name)	Text					
					What is individual's date of birth? What is the individual's relationship to the	MM/DD/YYYY	Date Dropdown					
					beneficiary?  How much income will this individual	\$	Text	If the income contribution is none, type in "0".				
					contribute to the beneficiary annually? Save entry		СТА					
					Cancel		СТА					
				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 incom	e		2.18	Does any of the beneficiary's total income (including income from dependents and	Yes/No	Radio					
	information				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)?							
			[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 a defined in 8 CFR 213a.1?		Radio					
			[If YES to 2.20]	2.21	What amount of the beneficiary's total income comes from means-tested public	\$	Text					
	Beneficiary asset	s			benefits?			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 Unit  States. Do not include assets from any individuals named in the "Financial Information About the Individual Agreeing to Financially	5.			
								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, min 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, the 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 or 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.	ne			
								Attach evidence in the "Evidence" section under "Proof of beneficiary's assets" and "Bonds" showing that the beneficiary has these assets.				
					Add entry		СТА					
				2.22 [LARGE TABLE]	What is the asset holder's full name?	Given name (first name) Middle name	Text Text					
					What is the type of asset?	Family name (last name) Checking - Bank Account Savings - Bank Account	Text Dropdown					
						Annuities Stocks, Bonds, Certificates of Deposit Retirement or Educational Account Real Estate Holdings						
					What is the cash value of the asset in U.S.	Personal Property (net value) \$	Text					
					dollars? Save entry		СТА					
					Cancel		СТА					
					What is the total amount (U.S. dollars)?	\$	Text					

34A						
criptions						
section of the form that contains seven Secondary Nav Tertiary Nav	· ·	Field Type	Instructional Text	Document type	File Requirements Alerts	Requi
Bank officer statement	Form I-134 instructions (pg 5) Bank Officer Statement		Provide a statement from an officer of the bank or other financial institutions with deposits, identifying the following details:  • Date account opened	Bank officer statement Other documents	<ul> <li>Clear and readable</li> <li>Accepted file formats: JPG, JPEG, PDF, TIF or TIFF</li> </ul>	Requi
			<ul> <li>Total amount deposited for the past year; and</li> <li>Present balance.</li> </ul>		<ul> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document.</li> </ul>	
			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.		<ul> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> <li>Maximum size: 12MB per file</li> </ul>	
Employer statement	Form I-134 instructions (pg 5) Employer Statement	Upload	Provide statement(s) from your employer on business stationery showing:	Employer statement	Clear and readable     Accepted file formats: JPG, JPEG, PDF, TIF or TIFF	
Statement			<ul> <li>Date and nature of employment</li> <li>Salary paid; and</li> <li>Whether the position is temporary or permanent.</li> </ul>	Other documents	<ul> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original</li> </ul>	
			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.		<ul> <li>document.</li> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> </ul>	
Income tax return	Form I-134 instructions (pg 6) Income Tax Return	Upload	Provide a copy of the last U.S. federal income tax return filed (tax transcript).	Income tax return	Maximum size: 12MB per file     Clear and readable	
			· ·		<ul> <li>Accepted file formats: JPG, JPEG, PDF, TIF or TIFF</li> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document.</li> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> </ul>	
	5 1404: ( 0) B			<u> </u>	Maximum size: 12MB per file	
Bonds	Form I-134 instructions (pg 6) Bonds	Upload	Provide a list containing serial numbers and denominations of bonds and name of record owner(s).  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.	Bonds Other documents	<ul> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document.</li> </ul>	
	5 1404 :				<ul> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> <li>Maximum size: 12MB per file</li> </ul>	
Proof of immigration	Form I-134 instructions (pg 5 Proof Of Immigration Item #10: Immigration Status) Status	Upload		•	<ul><li>• Clear and readable</li><li>• Accepted file formats: JPG, JPEG, PDF, TIF or TIFF</li></ul>	
status			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.		<ul> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original</li> </ul>	
			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.  Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foreign passport.		<ul> <li>document.</li> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> <li>Maximum size: 12MB per file</li> </ul>	
Proof of assets of individual agreeing to financially support the	Form I-134 instructions (pg 5 Proof Of Assets Of Item #19: Assets Individual Agreeing To Financially Support The Beneficiary	Upload	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.	Other documents	Clear and readable	
beneficiary			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.	)	<ul> <li>document.</li> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> <li>Maximum size: 12MB per file</li> </ul>	
			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.		'	
			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.			
Description of the second of t			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.			
Proof of beneficiary's assets	Form I-134 instructions (pg 4 Proof Of Beneficiary's Item #22: Beneficiary's Assets Assets	Upload	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 the United States. Do not include assets from any individuals in the "Financial Information About the Person Agreeing to Financially Support the Beneficiary" section.	Other documents		
			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.		<ul> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> <li>Maximum size: 12MB per file</li> </ul>	
			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 of the owner's claim of its net cash 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 value.			
			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.			
Proof of the beneficiary's marital status	[If "Family Reunification Parole Proof Of Beneficiary's Man Process" selected in 1.2 AND if user Status did NOT select "Single, Never Married" in 2.9]	rital Upload	Provide evidence of the beneficiary's marital status.  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).	Divorce decree Annulment decree	<ul> <li>Clear and readable</li> <li>Accepted file formats: JPG, JPEG, PDF, TIF or TIFF</li> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document.</li> <li>Upload no more than five documents at a time</li> <li>Accepted file name characters: English letters, numbers, spaces, periods, hyphens, underscores, and parentheses</li> </ul>	
Proof of the	[If "Family Reunification Parole Process" Proof Of Beneficiary's Fam	nily Unload	Provide evidence of the beneficiary's age and family relationship with the principal beneficiary of an approved Form I-130.	Birth certificate	Maximum size: 12MB per file     Clear and readable	
beneficiary's family relationship	selected in 1.2] Relationship	my Opioau	If the beneficiary is the principal beneficiary of an approved Form I-130, only evidence of the beneficiary's age is required.	Adoption decree	<ul> <li>Clear and readable</li> <li>Accepted file formats: JPG, JPEG, PDF, TIF or TIFF</li> <li>No encrypted or password-protected files</li> <li>If your documents are in a foreign language, upload a full English translation and the translator's certification with each original document.</li> </ul>	

Accepted file name characters: English letters, numbers, spaces, periods,

Upload no more than five documents at a time

hyphens, underscores, and parentheses

Maximum size: 12MB per file

### **ADDITIONAL 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.

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

## **REVIEW AND SUBMIT: I-134A**

Column Header Descriptions

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

Secondary Navigation: A single page within a section.

Secondary Nav Tertiary Nav  Review your declaration	Conditional Logic Paper fo	Check your declaration before you submit	Sub-Question Field		elp Text Alert	Required? CTA	Notes
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			
	[blue alert]			submit it.	[blue alert header for active drafts]		Alert appears only for drafts started befo
	[Alert appears only for drafts started before toggle on of I-134A ~12/21]				<ul><li>[h] The name of this form has changed</li><li>[b] The name of this form has changed to Form I-134A, Online Request to be a Supporter and</li></ul>		toggle on of I-134A ~12/21  https://www.uscis.gov/i-134a
					Declaration of Financial Support.  No other changes have been made to your draft. Learn more about Form I-134A.		
		Your fee	Your form filing fee is: \$[xxx]		The other changes have been made to your drain Learn more about <u>rolling to have</u> .		
		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		Next	
				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.			
Your declaration summary		Review the I-134A form information		Here is a summary of all the information you provided in your declaration.		Next	
				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.			
Preparer statement	(IF PREPARER) 7.7	Preparer's statement	I am <b>not</b> an attorney or accredited representative but have prepared this declaration on behalf of the individual agreeing to financially support the beneficiary and with that Radic individual's consent.	Your preparer must read the statements below and select the statement that applies to him or her.			
				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.			
			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.				
		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 extends beyond the preparation of Radic 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	o  Your preparer must read and agree to the certification below.			
			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:			Next	
			Download the Preparer Signature page     Print the Preparer Signature page				
			3. Read and sign the Preparer Signature page 4. Give the signed Preparer Signature page to the declarant				
reparer signature	(IF PREPARER) 7.8	Preparer's Signature Upload	The declarant will need to scan and upload your completed signature page on the next screen.  Uploa  Leartify, under panalty of parity that Lam flyant in English and the language provided in the Catting Started section of this declaration, and Lhave read to this individual agracing			Next	
nterpreter 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:	Your interpreter must read and agree to the certification below.		Next	
			Download the Interpreter Signature page     Print the Interpreter Signature page				
			3. Read and sign the Interpreter Signature page 4. Give the signed Interpreter Signature page to the declarant				
nterpreter signature	(IF INTERPRETER)	Interpreter's Signature Upload	The declarant will need to scan and upload your completed signature page on the next screen.	1 7 1 1 0 10		Next	
Statement of the individual agreeing to financially	(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.	I, as the individual agreeing to financially support the beneficiary, certify the following:  kbox You must read and agree to the statement below.			MVP
support the beneficiary	(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. Check	ckbox You must read and agree to the statement below.			MVP
Circulations of the Parking I	(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.			Next	MVP
Signature of the individual agreeing to financially support the beneficiary	(If "Statement of the 5.6 Individual agreeing to financially support the	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.	You must read and agree to the certification below. If you knowingly and willfully falsify or conceal a material fact or submit a false document with your declaration, we can deny your declaration and may deny any other immigration benefit. You may also face criminal prosecution			
	beneficiary" is complete)		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.	and penalties provided by the law.			
			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:				
			<ol> <li>I reviewed and provided or authorized all of the information in my declaration;</li> <li>I understood all of the information contained in, and submitted with, my declaration; and</li> </ol>				
			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 have read and agree to the statement and certification of the individual agreeing to financially support the beneficiary  Check	ckbox			
		Individual Agreeing to Financially Support the Beneficiary's Signature	Text	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		Yes Next	
ubmit	(If "Statement of the Individual agreeing to		Submit the I-134A	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		Submit the I	I-134A
	financially support the beneficiary" and "Signature			on your home page.			
	of Individual Agreeing to						

# 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.

nditional Logic	f the alert. (Red, Yellow, Blue, Green) :: A column used to indicate whether the qu		question only applies if you meet certain criteria.				
rigation	Sub-navigation			Message	Revision	Link	Not
A-Form	Jub Havigation			[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:	[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support eligible beneficiaries from the following countries:	https://www.uscis.gov/i-134	140
iew		renow alere	Always show	[II] We are only accepting of this in 154A from marviadas agreeing to mandally support engine beneficialles from the following countries.		11ttp3.// www.u3ci3.gov/1 134	
				[b] • Cuba	[b]  ◆ Cuba		
				• Colombia	• Colombia		
				• El Salvador	• Ecuador		
				• Guatemala	• El Salvador		
				<ul> <li>Haiti</li> <li>Honduras</li> </ul>	<ul> <li>Guatemala</li> <li>Haiti</li> </ul>		
				• Nicaragua	• Honduras		
				• Ukraine	• Nicaragua		
				• Venezuela	<ul> <li>Ukraine</li> <li>Venezuela</li> </ul>		
				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	• Veriezuela		
				include the name of the beneficiary on Form I-134A.	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	Supporters must file a separate Form I-134A for each beneficiary they are planning to support, including minor children.		
				documentation to confirm the relationship.	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	documentation to commit the relationship.		
				appropriate Lockbox location.	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.		
t the IATFSTB	Contact information for the individual agreeing to financially support the beneficiary	ng 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.			
	When and where the individual agreeing to financially support the beneficiary was born	Red alert	·	h5. This account has already been verified with a different date of birth		https://myaccount.uscis.gov/	
				The date of birth in this account's profile is [MM/DD/YYYY].			
				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 <a href="https://myaccount.uscis.gov/">https://myaccount.uscis.gov/</a>			
• • • • • • • • • • • • • • • • • • • •	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.	h5. This account has already been verified with a different A-Number		https://myaccount.uscis.gov/	
				The A-Number in this account's profile is [xxxxxxxxxx].			
				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 <a href="https://myaccount.uscis.gov/">https://myaccount.uscis.gov/</a>			
cial Info FSTP	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.			
the Beneficiar	y Beneficiary contact information	Blue alert	,	[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. <b>DO NOT</b> enter your email address in this field.			
About the Beneficiary Other information about the beneficiary	y Other information about the beneficiary	Yellow alert		[h] 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			
			issued the beneficiary's most recently issued passport?" question	[b] Immediate family members are:			
			<ul> <li>Their spouse or common-law partner; and</li> <li>Unmarried children under the age of 21.</li> </ul>				
			<b>Note:</b> 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.				
About the Beneficiary Other information about the beneficiary	Yellow alert	If user selected "Family Reunification Parole Process"		[yellow alert]			
			[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Salvadoran, and Guatamalan citizens and their immediate family	[h] We are only accepting online filing of Form I-134A from individuals agreeing to financially support Cuban, Colombian, Haitian, Honduran, Ecuadorian, Salvadoran, and Guatamalan citizens and their immediate family			
		"What country issued the beneficiary's most recently issued passport?" question	[b] Immediate family members are:	[b] Immediate family members are:			
			<ul> <li>Their spouse or common-law partner; and</li> <li>Unmarried children under the age of 21.</li> </ul>	<ul> <li>Their spouse or common-law partner of the primary beneficiary who is a citizen of a qualifying country; and</li> <li>Unmarried children under the age of 21.</li> </ul>			
				<b>Note:</b> 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.	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.		
w & Submit	Review your declaration	Blue alert	Alert appears only for active drafts started before toggle on of I-134A ~12/21			https://www.uscis.gov/i-134a	
			•	[b] The name of this form has changed to Form I-134A, Online Request to be a Supporter and Declaration of Financial Support.			
				No other changes have been made to your draft. Learn more about <u>Form I-134A</u> .			