

**TABLE OF CHANGES – FORM**  
**Form I-864A, Contract Between Sponsor and Household Member**  
**OMB Number: 1615-0075**  
**08/07/2024**

**Reason for Revision: Revision**  
**Project Phase: OMBReview**

Legend for Proposed Text:

- Black font = Current text
- Red font = Changes

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Current Page Number and Section	Current Text	Proposed Text
<b>Page 1, For Government Use Only</b>	<p>[Page 1]</p> <p><b>For Government Use Only</b></p> <p><b>This Form I-864A relates to a household member who:</b>  <input type="checkbox"/> <b>IS</b> the intending immigrant  <input type="checkbox"/> <b>IS NOT</b> the intending immigrant            Reviewed By:            Location:            Date (mm/dd/yyyy):</p>	<p>[no change]</p>
<b>Page 1, To be completed by an attorney or accredited representative (if any).</b>	<p>[Page 1]</p> <p><b>To be completed by an attorney or accredited representative (if any).</b>  <input type="checkbox"/> <b>Select this box if Form G-28 or G-28I is attached.</b>  <b>Attorney State Bar Number (if applicable)</b>  <b>Attorney or Accredited Representative USCIS Online Account Number (if any)</b></p>	<p>[Page 1]</p> <p><b>To be completed by an Attorney or Accredited Representative (if any).</b>            [no change]</p>
<b>Page 1, Part 1. Information About You (the Household Member)</b>	<p>[Page 1]</p> <p><b>START HERE - Type or print in black ink.</b></p> <p><b>Part 1. Information About You (the Household Member)</b></p> <p><i>Full Name</i></p> <p><b>1.a.</b> Family Name (Last Name)  <b>1.b.</b> Given Name (First Name)  <b>1.c.</b> Middle Name</p>	<p>[Page 1]</p> <p><b>START HERE - Type or print in black ink.</b></p> <p><b>Part 1. Information About You (the Household Member)</b></p> <p><i>Full Name</i></p> <p><b>1.</b> Family Name (Last Name)  <b>Given Name (First Name)</b>  <b>Middle Name (if applicable)</b></p>

	<p><b>Mailing Address (USPS ZIP Code Lookup)</b></p> <p>2.a. In Care Of Name  2.b. Street Number and Name  2.c. Apt. Ste. Flr. [Fillable Field]  2.d. City or Town  2.e. State  2.f. ZIP Code  2.g. Province  2.h. Postal Code  2.i. Country</p> <p>3. Is your current mailing address the same as your physical address?  Yes  No</p> <p>If you answered "No" to <b>Item Number 3.</b>, provide your physical address.</p> <p><b>Physical Address</b></p> <p>4.a. Street Number and Name  4.b. Apt. Ste. Flr.  4.c. City or Town  4.d. State  4.e. ZIP Code  4.f. Province  4.g. Postal Code  4.h. Country</p> <p><b>Other Information</b></p> <p>5. Date of Birth (mm/dd/yyyy)</p> <p><b>Place of Birth</b></p> <p>6.a. City or Town  6.b. State or Province  6.c. Country</p> <p>7. U.S. Social Security Number (if any)</p> <p>8. USCIS Online Account Number (if any)</p>	<p><b>Mailing Address (USPS ZIP Code Lookup)</b></p> <p>2. In Care Of Name (if any)  Street Number and Name  Apt. Ste. Flr. [Fillable Field]  City or Town  State  ZIP Code  Province  Postal Code  Country</p> <p>3. Is your current mailing address the same as your physical address?  Yes  No</p> <p>If you answered "No" to <b>Item Number 3.</b>, provide your physical address.</p> <p><b>Physical Address</b></p> <p>4. Street Number and Name  Apt. Ste. Flr. Number  City or Town  State  ZIP Code  Province  Postal Code  Country</p> <p><b>Other Information</b></p> <p>5. Date of Birth (mm/dd/yyyy)</p> <p>[delete]</p> <p>6. Country of Birth</p> <p>7. U.S. Social Security Number (if any)  8. Alien Registration Number (A-Number) (if any)  9. USCIS Online Account Number (if any)</p>
<p><b>Page 2,  Part 2. Your (the Household Member's) Relationship to the Sponsor</b></p>	<p>[Page 2]</p> <p><b>Part 2. Your (the Household Member's) Relationship to the Sponsor</b></p> <p>Select Item Number 1.a., 1.b., or 1.c.</p> <p>1.a. [ ] I am the intending immigrant and also the sponsor's spouse.</p> <p>1.b. [ ] I am the intending immigrant and also a member of the sponsor's household.</p>	<p>[Page 2]</p> <p><b>Part 2. Your (the Household Member's) Relationship to the Sponsor</b></p> <p>Select Item Number 1., 2., or 3.</p> <p>1. [ ] I am the intending immigrant and also the sponsor's spouse.</p> <p>2. [ ] I am the intending immigrant and also a member of the sponsor's household.</p>

	<p>1.c. <input type="checkbox"/> I am not the intending immigrant. I am the sponsor's household member. I am related to the sponsor as his/her:</p> <p><input type="checkbox"/> Spouse  <input type="checkbox"/> Son or daughter (at least 18 years of age)  <input type="checkbox"/> Parent  <input type="checkbox"/> Brother or sister  <input type="checkbox"/> Other dependent (Specify)</p>	<p>3. <input type="checkbox"/> I am not the intending immigrant. I am the sponsor's household member. I am related to the sponsor as his/her:</p> <p><input type="checkbox"/> Spouse  <input type="checkbox"/> Son or <b>Daughter</b> (at least 18 years of age)  <input type="checkbox"/> Parent  <input type="checkbox"/> Brother or <b>Sister</b>  <input type="checkbox"/> Other <b>Dependent</b> (Specify)</p>
<p><b>Page 2,</b>  <b>Part 3. Your (the Household Member's) Employment and Income</b></p>	<p><b>[Page 2]</b></p> <p><b>Part 3. Your (the Household Member's) Employment and Income</b></p> <p><b>I am currently:</b></p> <p>1. <input type="checkbox"/> Employed as a/an  2. Name of Employer Number 1  3. Name of Employer Number 2 (if applicable)  4. <input type="checkbox"/> Self employed as a/an  5. <input type="checkbox"/> Retired from (Company Name)  Since (mm/dd/yyyy)  6. <input type="checkbox"/> Unemployed since (mm/dd/yyyy)  7. <b>My current individual annual income is:</b>  \$</p>	<p><b>[Page 2]</b></p> <p><b>Part 3. Your (the Household Member's) Employment and Income</b></p> <p><b>I am currently:</b></p> <p>1. <input type="checkbox"/> Employed as a/an  2. Name of Employer Number 1  3. Name of Employer Number 2 (if applicable)  4. <input type="checkbox"/> Self employed as a/an  5. <input type="checkbox"/> <b>Retired Since</b> (mm/dd/yyyy)  6. <input type="checkbox"/> Unemployed since (mm/dd/yyyy)  7. My current individual annual income is: \$</p>
<p><b>Page 2,</b>  <b>Part 4. Your (the Household Member's) Federal Income Tax Information and Assets</b></p>	<p><b>[Page 2]</b></p> <p><b>Part 4. Your (the Household Member's) Federal Income Tax Information and Assets</b></p> <p>1.a. Have you filed a Federal income tax return for each of the three most recent tax years? Yes/No</p> <p><b>NOTE:</b> You <b>MUST</b> attach a photocopy or transcript of your Federal income tax return for only the most recent tax year.</p> <p>1.b. (Optional) I have attached photocopies or transcripts of my Federal income tax returns for my second and third most recent tax years.</p> <p>My total income (adjusted gross income on IRS Form 1040EZ) as reported on my Federal income tax returns for the most recent three years was:</p> <p>2.a. Most Recent  Tax Year  Total Income \$</p> <p>2.b. 2nd Most Recent  Tax Year  Total Income \$</p> <p>2.c. 3rd Most Recent  Tax Year  Total Income \$</p> <p><b>My assets (complete only if necessary).</b></p>	<p><b>[Page 2]</b></p> <p><b>Part 4. Your (the Household Member's) Federal Income Tax Information and Assets</b></p> <p>1. Have you filed a Federal income tax return for each of the three most recent tax years? Yes/No</p> <p><b>NOTE:</b> You <b>MUST</b> attach a photocopy or transcript of your Federal income tax return for only the most recent tax year.</p> <p><b>[delete]</b></p> <p>My total income (adjusted gross income on IRS Form 1040EZ) as reported on my Federal income tax returns for the most recent three years was:</p> <p>2. Most Recent  Tax Year  Total Income \$</p> <p>2nd Most Recent  Tax Year  Total Income \$</p> <p>3rd Most Recent  Tax Year  Total Income \$</p> <p><b>My assets (complete only if necessary).</b></p>

	<p><b>3.a.</b> Enter the balance of all cash, savings, and checking accounts. \$</p> <p><b>3.b.</b> Enter the net cash value of real-estate holdings. (Net value means assessed value minus mortgage debt.) \$</p> <p><b>3.c.</b> Enter the cash value of all stocks, bonds, certificates of deposit, and other assets not listed on <b>Item Numbers 3.a.</b> or <b>3.b.</b> \$</p> <p><b>3.d.</b> Add together <b>Item Numbers 3.a., 3.b.,</b> and <b>3.c.</b> and enter the number here. \$</p>	<p><b>3.</b> Enter the balance of all cash, savings, and checking accounts. \$</p> <p><b>4.</b> Enter the net cash value of real-estate holdings. (Net value means assessed value minus mortgage debt.) \$</p> <p><b>5.</b> Enter the cash value of all stocks, bonds, certificates of deposit, and other assets not listed on <b>Item Numbers 3. - 4.</b> \$</p> <p><b>6.</b> Add together <b>Item Numbers 3. - 5.</b> and enter the number here. \$</p>
<p><b>Pages 2-4,</b> <b>Part 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p>	<p><b>[Page 2]</b></p> <p><b>Part 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p> <p><b>NOTE:</b> Read the Penalties section of the Form I-864A Instructions before completing this part.</p> <p><b>I, THE SPONSOR,</b> [fillable box (Print Name) ], in consideration of the household member's promise to support the following intending immigrants and to be jointly and severally liable for any obligations I incur under the affidavit of support, promise to complete and file an affidavit of support on behalf of the following named intending immigrants. [fillable box (Indicate Number)]</p> <p><b>[Page 3]</b></p> <p><b>Intending Immigrant Number 1 Name</b></p> <p><b>1.a.</b> Family Name (Last Name) <b>1.b.</b> Given Name (First Name) <b>1.c.</b> Middle Name <b>2.</b> Date of Birth (mm/dd/yyyy) <b>3.</b> Alien Registration Number (A-Number, if any) <b>4.</b> U.S. Social Security Number (if any) <b>5.</b> USCIS Online Account Number (if any)</p> <p><b>Intending Immigrant Number 2 Name</b></p> <p><b>6.a.</b> Family Name (Last Name) <b>6.b.</b> Given Name (First Name) <b>6.c.</b> Middle Name <b>7.</b> Date of Birth (mm/dd/yyyy) <b>8.</b> Alien Registration Number (A-Number, if any) <b>9.</b> U.S. Social Security Number (if any) <b>10.</b> USCIS Online Account Number (if any)</p> <p><b>Intending Immigrant Number 3</b></p>	<p><b>[Page 2]</b></p> <p><b>Part 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p> <p><b>NOTE:</b> Read the Penalties section of the Form I-864A Instructions before completing this part.</p> <p><b>I, THE SPONSOR,</b> [fillable box (Print Name) ], in consideration of the household member's promise to support the following intending immigrants and to be jointly and severally liable for any obligations I incur under the affidavit of support, promise to complete and file an affidavit of support on behalf of the following named intending immigrants. [fillable box (Indicate Number)]</p> <p><b>[Page 3]</b></p> <p><b>1.</b> Intending Immigrant Number 1</p> <p>Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any)</p> <p>[delete] USCIS Online Account Number (if any)</p> <p><b>2.</b> Intending Immigrant Number 2</p> <p>Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any)</p> <p>[delete] USCIS Online Account Number (if any)</p> <p><b>3.</b> Intending Immigrant Number 3</p>

	<p><b>Name</b></p> <p><b>11.a.</b> Family Name (Last Name)  <b>11.b.</b> Given Name (First Name)  <b>11.c.</b> Middle Name  <b>12.</b> Date of Birth (mm/dd/yyyy)  <b>13.</b> Alien Registration Number (A-Number, if any)  <b>14.</b> U.S. Social Security Number (if any)  <b>15.</b> USCIS Online Account Number (if any)</p> <p><b>Intending Immigrant Number 4 Name</b></p> <p><b>16.a.</b> Family Name (Last Name)  <b>16.b.</b> Given Name (First Name)  <b>16.c.</b> Middle Name  <b>17.</b> Date of Birth (mm/dd/yyyy)  <b>18.</b> Alien Registration Number (A-Number, if any)  <b>19.</b> U.S. Social Security Number (if any)  <b>20.</b> USCIS Online Account Number (if any)</p> <p><b>Intending Immigrant Number 5 Name</b></p> <p><b>21.a.</b> Family Name (Last Name)  <b>21.b.</b> Given Name (First Name)  <b>21.c.</b> Middle Name  <b>22.</b> Date of Birth (mm/dd/yyyy)  <b>23.</b> Alien Registration Number (A-Number) (if any)  <b>24.</b> U.S. Social Security Number (if any)  <b>25.</b> USCIS Online Account Number (if any)</p> <p><b>Sponsor's Statement</b></p> <p><b>NOTE:</b> Select the box for either <b>Item Number 26.a.</b> or <b>26.b.</b> If applicable, select the box for <b>Item Number 27.</b></p> <p><b>26.a.</b> <input type="checkbox"/> I can read and understand English, I and have read and understand every question and instruction on this contract and my answer to every question.</p> <p><b>[Page 4]</b></p> <p><b>26.b.</b> <input type="checkbox"/> The interpreter named in <b>Part 7.</b> read to me every question and instruction on this contract and my answer to every question in [fillable field], a language in which I am fluent, and I understood everything.</p> <p><b>27.</b> <input type="checkbox"/> At my request, the preparer named in <b>Part 8.,</b> [Fillable Filed], prepared this contract for me based only upon information I provided or authorized.</p>	<p>Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)  Date of Birth (mm/dd/yyyy)  Alien Registration Number (A-Number, if any)</p> <p>[delete]  USCIS Online Account Number (if any)</p> <p><b>4.</b> Intending Immigrant Number 4</p> <p>Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)  Date of Birth (mm/dd/yyyy)  Alien Registration Number (A-Number, if any)</p> <p>[delete]  USCIS Online Account Number (if any)</p> <p>[delete]</p> <p><b>Sponsor's Statement</b></p> <p><b>NOTE:</b> Select the box for either <b>Item Number 5.a.</b> or <b>5.b.</b> If applicable, select the box for <b>Item Number 6.</b></p> <p><b>5.a.</b> <input type="checkbox"/> I can read and understand English, I and have read and understand every question and instruction on this contract and my answer to every question.</p> <p><b>[Page 4]</b></p> <p><b>5.b.</b> <input type="checkbox"/> The interpreter named in <b>Part 7.</b> read to me every question and instruction on this contract and my answer to every question in [fillable field], a language in which I am fluent, and I understood everything.</p> <p><b>6.</b> <input type="checkbox"/> At my request, the preparer named in <b>Part 8.,</b> [Fillable Filed], prepared this contract for me based only upon information I provided or authorized.</p>
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	<p><b><i>Sponsor's Contact Information</i></b></p> <p>28. Sponsor's Daytime Telephone Number  29. Sponsor's Mobile Telephone Number (if any)  30. Sponsor's Email Address (if any)</p> <p><b><i>Sponsor's Declaration and Certification</i></b></p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. Citizenship and Immigration Services (USCIS) or the U.S. Department of State (DOS) may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I furthermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.</p> <p>I certify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my contract and that all of this information is complete, true, and correct.</p> <p><b><i>Sponsor's Signature</i></b></p> <p>31.a. Sponsor's Signature  31.b. Date of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL SPONSORS:</b> If you do not completely fill out this contract or fail to submit required documents listed in the Instructions, USCIS may deny your contract.</p>	<p><b><i>Sponsor's Contact Information</i></b></p> <p>7. Sponsor's Daytime Telephone Number  8. Sponsor's Mobile Telephone Number (if any)  9. Sponsor's Email Address (if any)</p> <p><b><i>Sponsor's Declaration and Certification</i></b></p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. Citizenship and Immigration Services (USCIS) or the U.S. Department of State (DOS) may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I furthermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.</p> <p>I certify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my contract and that all of this information is complete, true, and correct.</p> <p><b><i>Sponsor's Signature</i></b></p> <p>10. Sponsor's Signature  Date of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL SPONSORS:</b> If you do not completely fill out this contract or fail to submit required documents listed in the Instructions, USCIS may deny your contract.</p>
<p><b>Pages 4-5,  Part 6. Your (the Household Member's) Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p>	<p><b>[Page 4]</b></p> <p><b>Part 6. Your (the Household Member's) Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p> <p><b>NOTE:</b> Read the Penalties section of the Form I-864A Instructions before completing this part.</p> <p><b>I, THE HOUSEHOLD MEMBER,</b> [fillable box (Print Name)], in consideration of the sponsor's promise to complete and file an affidavit of support on behalf of the above named intending immigrants.  [fillable box] (Print number of intending</p>	<p><b>[Page 4]</b></p> <p><b>Part 6. Your (the Household Member's) Promise, Statement, Contact Information, Declaration, Certification, and Signature</b></p> <p><b>NOTE:</b> Read the Penalties section of the Form I-864A Instructions before completing this part.</p> <p><b>I, THE HOUSEHOLD MEMBER,</b> [fillable box (Print Name)], in consideration of the sponsor's promise to complete and file an affidavit of support on behalf of the above named intending immigrants.</p>

	<p>immigrants noted in <b>Part 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature.</b></p> <p><b>A.</b> Promise to provide any and all financial support necessary to assist the sponsor in maintaining the sponsored immigrants at or above the minimum income provided for in the Immigration and Naturalization Act (INA) section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guidelines) during the period in which the affidavit of support is enforceable;</p> <p><b>B.</b> Agree to be jointly and severally liable for payment of any and all obligations owed by the sponsor under the affidavit of support to the sponsored immigrants, to any agency of the Federal Government, to any agency of a state or local government, or to any other private entity that provides means-tested public benefits;</p> <p><b>C.</b> Certify under penalty under the laws of the United States that the Federal income tax returns submitted in support of the contract are true copies or unaltered tax transcripts filed with the Internal Revenue Service;</p> <p><b>D. Consideration where the household member is also the sponsored immigrant:</b> I understand that if I am the sponsored immigrant and a member of the sponsor's household that this promise relates only to my promise to be jointly and severally liable for any obligation owed by the sponsor under the affidavit of support to any of my dependents, to any agency of the Federal Government, to any agency of a state or local government, or to any other private entity that provides means-tested public benefits and to provide any and all financial support necessary to assist the sponsor in maintaining any of my dependents at or above the minimum income provided for in INA section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guideline) during the period which the affidavit of support is enforceable.</p> <p><b>[Page 5]</b></p> <p><b>E.</b> I understand that, if I am related to the sponsored immigrant or the sponsor by marriage, the termination of the marriage (by divorce, dissolution, annulment, or other legal process) will not relieve me of my obligations under this Form I-864A.</p> <p><b>F.</b> I authorize the Social Security Administration to release information about me</p>	<p>[fillable box] (Print number of intending immigrants noted in <b>Part 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature.</b>)</p> <p><b>A.</b> Promise to provide any and all financial support necessary to assist the sponsor in maintaining the sponsored immigrants at or above the minimum income provided for in the Immigration and Naturalization Act (INA) section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guidelines) during the period in which the affidavit of support is enforceable;</p> <p><b>B.</b> Agree to be jointly and severally liable for payment of any and all obligations owed by the sponsor under the affidavit of support to the sponsored immigrants, to any agency of the Federal Government, to any agency of a state or local government, or to any other private entity that provides means-tested public benefits;</p> <p><b>C.</b> Certify under penalty under the laws of the United States that the Federal income tax returns submitted in support of the contract are true copies or unaltered tax transcripts filed with the Internal Revenue Service;</p> <p><b>D. Consideration where the household member is also the sponsored immigrant:</b> I understand that if I am the sponsored immigrant and a member of the sponsor's household that this promise relates only to my promise to be jointly and severally liable for any obligation owed by the sponsor under the affidavit of support to any of my dependents, to any agency of the Federal Government, to any agency of a state or local government, or to any other private entity that provides means-tested public benefits and to provide any and all financial support necessary to assist the sponsor in maintaining any of my dependents at or above the minimum income provided for in INA section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guideline) during the period which the affidavit of support is enforceable.</p> <p><b>[Page 5]</b></p> <p><b>E.</b> I understand that, if I am related to the sponsored immigrant or the sponsor by marriage, the termination of the marriage (by divorce, dissolution, annulment, or other legal process) will not relieve me of my obligations under this Form I-864A.</p> <p><b>F.</b> I authorize the Social Security</p>
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	<p>in its records to the Department of State and U.S. Citizenship and Immigration Services (USCIS).</p> <p><b>Your (the Household Member's) Statement</b></p> <p><b>NOTE:</b> Select the box for either <b>Item Number 1.a.</b> or <b>1.b.</b> If applicable, select the box for <b>Item Number 2.</b></p> <p><b>1.a.</b> <input type="checkbox"/> I can read and understand English, and I have read and understand every question and instruction on this contract and my answer to every question.</p> <p><b>1.b.</b> <input type="checkbox"/> The interpreter named in <b>Part 7.</b> read to me every question and instruction on this contract and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p><b>2.</b> <input type="checkbox"/> At my request, the preparer named in <b>Part 8.</b>, [Fillable Filed], prepared this contract for me based only upon information I provided or authorized.</p> <p><b>Your (the Household Member's) Contact Information</b></p> <p><b>3.</b> Your (the Household Member's) Daytime Telephone Number  <b>4.</b> Your (the Household Member's) Mobile Telephone Number (if any)  <b>5.</b> Your (the Household Member's) Email Address (if any)</p> <p><b>Your (the Household Member's) Declaration and Certification</b></p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or DOS may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I furthermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law</p> <p>I certify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the</p>	<p>Administration to release information about me in its records to the Department of State and U.S. Citizenship and Immigration Services (USCIS).</p> <p><b>Your (the Household Member's) Statement</b></p> <p><b>NOTE:</b> Select the box for either <b>Item Number 1.a.</b> or <b>1.b.</b> If applicable, select the box for <b>Item Number 2.</b></p> <p><b>1.a.</b> <input type="checkbox"/> I can read and understand English, and I have read and understand every question and instruction on this contract and my answer to every question.</p> <p><b>1.b.</b> <input type="checkbox"/> The interpreter named in <b>Part 7.</b> read to me every question and instruction on this contract and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p><b>2.</b> <input type="checkbox"/> At my request, the preparer named in <b>Part 8.</b>, [Fillable Filed], prepared this contract for me based only upon information I provided or authorized.</p> <p><b>Your (the Household Member's) Contact Information</b></p> <p><b>3.</b> Your (the Household Member's) Daytime Telephone Number  <b>4.</b> Your (the Household Member's) Mobile Telephone Number (if any)  <b>5.</b> Your (the Household Member's) Email Address (if any)</p> <p><b>Your (the Household Member's) Declaration and Certification</b></p> <p>Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or DOS may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the immigration benefit that I seek.</p> <p>I furthermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law</p> <p>I certify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or authorized</p>
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	<p>information contained in, and submitted with, my contract and that all of this information is complete, true, and correct.</p> <p><b>Your (the Household Member's) Signature</b></p> <p><b>6.a.</b> Your (the Household Member's) Printed Name  <b>6.b.</b> Your (the Household Member's) Signature  <b>6.c.</b> Date of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL HOUSEHOLD MEMBERS:</b>  If you do not completely fill out this contract or fail to submit required documents listed in the Instructions, USCIS may deny your contract.</p>	<p>by me, that I reviewed and understand all of the information contained in, and submitted with, my contract and that all of this information is complete, true, and correct.</p> <p><b>Your (the Household Member's) Signature</b></p> <p><b>6.</b> Your (the Household Member's) Printed Name  <b>7.</b> Your (the Household Member's) Signature  <b>Date</b> of Signature (mm/dd/yyyy)</p> <p><b>NOTE TO ALL HOUSEHOLD MEMBERS:</b>  If you do not completely fill out this contract or fail to submit required documents listed in the Instructions, USCIS may deny your contract.</p>
<p><b>Pages 5-6, Part 7. Interpreter's Contact Information, certification, and Signature</b></p>	<p><b>[Page 5]</b></p> <p><b>Part 7. Interpreter's Contact Information, Certification, and Signature</b></p> <p>Provide the following information about the interpreter.</p> <p><b>Interpreter's Full Name</b></p> <p><b>1.a.</b> Interpreter's Family Name (Last Name)  <b>1.b.</b> Interpreter's Given Name (First Name)  <b>2.</b> Interpreter's Business or Organization Name (if any)</p> <p><b>[Page 6]</b></p> <p><b>Interpreter's Mailing Address</b></p> <p><b>3.a.</b> Street Number and Name  <b>3.b.</b> Apt. Ste. Flr.  <b>3.c.</b> City or Town  <b>3.d.</b> State  <b>3.e.</b> ZIP Code  <b>3.f.</b> Province  <b>3.g.</b> Postal Code  <b>3.h.</b> Country</p> <p><b>Interpreter's Contact Information</b></p> <p><b>4.</b> Interpreter's Daytime Telephone Number  <b>5.</b> Interpreter's Mobile Telephone Number (if any)  <b>6.</b> Interpreter's Email Address (if any)</p> <p><b>Interpreter's Certification</b></p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in <b>Part 5, Item Number 26.b.</b> or <b>Part 6., Item Number 1.b.</b>, and I have read to this sponsor or</p>	<p><b>[Page 5]</b></p> <p><b>Part 7. Interpreter's Contact Information, Certification, and Signature</b></p> <p>[delete]</p> <p><b>Interpreter's Full Name</b></p> <p><b>1.</b> Interpreter's Family Name (Last Name)  <b>Interpreter's</b> Given Name (First Name)  <b>2.</b> Interpreter's Business or Organization Name (if any)</p> <p><b>[Page 6]</b></p> <p>[delete]</p> <p><b>Interpreter's Contact Information</b></p> <p><b>3.</b> Interpreter's Daytime Telephone Number  <b>4.</b> Interpreter's Mobile Telephone Number (if any)  <b>5.</b> Interpreter's Email Address (if any)</p> <p><b>Interpreter's Certification</b></p> <p>I certify, under penalty of perjury, <b>that I</b> am fluent in English and [Fillable Field], <b>and I have interpreted every question on the contract and instructions and interpreted the sponsor's or household member's answers to the questions in that language and the</b> sponsor or household</p>

	<p>household member in the identified language every question and instruction on this contract and his or her answer to every question. The sponsor or household member informed me that he or she understands every instruction, question, and answer on the contract, including the <b>Sponsor's</b> or <b>Household Member's Declaration and Certification</b>, and has verified the accuracy of every answer.</p> <p><i>Interpreter's Signature</i></p> <p>7.a. Interpreter's Signature 7.b. Date of Signature (mm/dd/yyyy)</p>	<p>member informed me that he or she <b>understood</b> every instruction, question, and answer on the <b>contract</b>.</p> <p>[delete]</p> <p>6. Interpreter's Signature Date of Signature (mm/dd/yyyy)</p>
<p><b>Pages 6-7, Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Contract, if Other Than the Sponsor or Household Member</b></p>	<p>[Page 6]</p> <p><b>Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Contract, if Other Than the Sponsor or Household Member</b></p> <p>Provide the following information about the preparer.</p> <p><i>Preparer's Full Name</i></p> <p>1.a. Preparer's Family Name (Last Name) 1.b. Preparer's Given Name (First Name) 2. Preparer's Business or Organization Name (if any)</p> <p><i>Preparer's Mailing Address</i></p> <p>3.a. Street Number and Name 3.b. Apt. Ste. Flr. 3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country</p> <p><i>Preparer's Contact Information</i></p> <p>4. Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any) 6. Preparer's Email Address (if any)</p> <p>[Page 7]</p> <p><i>Preparer's Statement</i></p> <p>7.a. [ ] I am not an attorney or accredited representative but have prepared this contract on behalf of the sponsor and household member and with the sponsor's or household member's consent.</p>	<p>[Page 6]</p> <p><b>Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Contract, if Other Than the Sponsor or Household Member</b></p> <p>[delete]</p> <p><i>Preparer's Full Name</i></p> <p>1. Preparer's Family Name (Last Name) <b>Preparer's</b> Given Name (First Name) 2. Preparer's Business or Organization Name (if any)</p> <p>[delete]</p> <p><i>Preparer's Contact Information</i></p> <p>3. Preparer's Daytime Telephone Number 4. Preparer's Mobile Telephone Number (if any) 5. Preparer's Email Address (if <b>any</b>)</p> <p>[Page 7]</p> <p>[delete]</p>

	<p><b>7.b.</b> [ ] I am an attorney or accredited representative and my representation of the household member and sponsor in this case [ ] extends [ ] does not extend beyond the preparation of this contract.</p> <p><b>NOTE:</b> If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this contract.</p> <p><b>Preparer's Certification</b></p> <p>By my signature, I certify, under penalty of perjury, that I prepared this contract at the request of the sponsor and household member. The sponsor and household member then reviewed this completed contract and informed me that he or she understands all of the information contained in, and submitted with, his or her contract, including the Sponsor's or Household Member's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this contract based only on information that the sponsor and household member provided to me or authorized me to obtain or use.</p> <p><b>Preparer's Signature</b></p> <p><b>8.a.</b> Preparer's Signature <b>8.b.</b> Date of Signature (mm/dd/yyyy)</p>	<p><b>Preparer's Certification and Signature</b></p> <p>I certify, under penalty of perjury, that I prepared this <b>contract</b> for the sponsor and household member <b>at their request and with express consent and that all of the responses and information contained in and submitted with the contract are complete, true, and correct and reflects only information provided by the sponsor and household member. The sponsor and household member reviewed the responses and information and informed me that they understand the responses and information in or submitted with the contract.</b></p> <p>[delete]</p> <p><b>6.</b> Preparer's Signature <b>Date</b> of Signature (mm/dd/yyyy)</p>
<p><b>Page 8, Part 9. Additional Information</b></p>	<p><b>[Page 8]</b></p> <p><b>Part 9. Additional Information</b></p> <p>If you need extra space to provide any additional information within this contract, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this contract or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the <b>Page Number, Part Number, and Item Number</b> to which your answer refers; and sign and date each sheet.</p> <p><b>1.a.</b> Family Name (Last Name) <b>1.b.</b> Given Name (First Name) <b>1.c.</b> Middle Name <b>2.</b> A-Number (if any)</p> <p><b>3.a.</b> Page Number <b>3.b.</b> Part Number <b>3.c.</b> Item Number</p>	<p><b>[Page 8]</b></p> <p><b>Part 9. Additional Information</b></p> <p>If you need extra space to provide any additional information within this contract, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this contract or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the <b>Page Number, Part Number, and Item Number</b> to which your answer refers; and sign and date each sheet.</p> <p><b>1.</b> Family Name (Last Name) <b>Given</b> Name (First Name) <b>Middle</b> Name (if applicable) <b>2.</b> A-Number (if any)</p> <p><b>3.</b> Page Number <b>Part</b> Number <b>Item</b> Number</p>

	<p><b>3.d.</b> [fillable lines]</p> <p><b>4.a.</b> Page Number  <b>4.b.</b> Part Number  <b>4.c.</b> Item Number  <b>4.d.</b> [fillable lines]</p> <p><b>5.a.</b> Page Number  <b>5.b.</b> Part Number  <b>5.c.</b> Item Number  <b>5.d.</b> [fillable lines]</p> <p><b>6.a.</b> Page Number  <b>6.b.</b> Part Number  <b>6.c.</b> Item Number  <b>6.d.</b> [fillable lines]</p> <p><b>7.a.</b> Page Number  <b>7.b.</b> Part Number  <b>7.c.</b> Item Number  <b>7.d.</b> [fillable lines]</p>	<p>[fillable lines]</p> <p><b>4.</b> Page Number  Part Number  Item Number  [fillable lines]</p> <p><b>5.</b> Page Number  Part Number  Item Number  [fillable lines]</p> <p><b>6.</b> Page Number  Part Number  Item Number  [fillable lines]</p> <p>[deleted]</p>
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