

Affidavit of Support Under Section 213A of the INA

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-864

OMB No. 1615-0075 Expires 12/31/2023

| | Affidavit of Support Submitter | | Section 213A Review | | | riew | Number of Support Affidavits in File | | |
|--|--------------------------------|--|---|------------------|--------------|--|--------------------------------------|----------------------------|--|
| Fo | ır | ☐ Petitioner | □ MEETS | | | NOT MEET | | | |
| USC | | ☐ 1st Joint S | Sponsor | requireme | its | require | ements | Remarks | |
| Us | | ☐ 2nd Joint | Sponsor | Reviewed By | | | | Activat RS | |
| On | ıly | ☐ Substitute | Sponsor | Office: | | | | | |
| | | ☐ 5% Owne | r | Date (mm/dd/ | уууу): | | | | |
| To be completed by an attorney or accredited representative (if any). Select this box if Form G-28 or G-28I is attached. Attorney is (if application). | | | - | e Bar I | Number | Attorney or Accredited Representative USCIS Online Account Number (if any) | | | |
| ▶ S | TAI | RT HERE - Tyl | e or print in black | ink. | | | | | |
| Part | t 1. | Basis For Fi | ling Affidavit of | Support | | Ma | iling Addre | ss | |
| I. Re | eyaa | ansh Agniho | tri | | 1 | 2.a. | In Care Of N | Jame | |
| am | the | sponsor submitt | ing this affidavit of s | support because | | | N/A | | |
| (So | | only one box): I am the petition | ner. I filed or am fili | ng for the | | 2.b. | Street Number and Name | er 37Q6+679, Hunters Rd | |
| | | immigration of | my relative. | | | 2.c. | Apt. | Ste. Flr. N/A | |
| 1.b. | | | worker petition on begrant, who is related | | | 2.d. | City or Town | Chennai | |
| | | | | | | 2.e. | State N/A | 2.f. ZIP Code N/A | |
| 1.c. | X | | ship interest of at lea | ast 5 percent in | | 2.g. | Province | Tamil Nadu | |
| | | Acme, Inc. which filed an a | llien worker petition | on behalf of th | | 2.h. | Postal Code | 600003 | |
| | | | grant, who is related | to me as my | | 2.i. | Country | | |
| | | | rother/sister) | | | 2.1. | India | | |
| 1.d. | | I am the only jo | | | | | | | |
| 1.e. | | | _ | wo joint sponso | rs. | Oth | er Informa | tion | |
| 1.f. | | | citioner is deceased. or. I am the intending | | | 3. | · | Citizenship or Nationality | |
| | | | | | | | India | | |
| | | | this form as a spon | | | 4. | Date of Birth | n (mm/dd/yyyy) 02/11/1985 | |
| include proof of your U.S. citizenship, U.S. national status, or lawful permanent resident status. | | | , | 5. | Alien Regist | ration Number (A-Number) (if any) | | | |
| or ia | viui | permanent resi | dent status. | | | | | ► A- 0 0 0 0 0 0 0 0 0 | |
| Part 2. Information About the Principal | | | | 6. | USCIS Onlin | ne Account Number (if any) | | | |
| Imn | nigr | ant | | | | | • | 1 2 3 1 2 3 1 2 3 1 2 3 | |
| | | ily Name t Name) Agn | ihotri | | | 7. | | ephone Number | |
| 1.b. | | en Name st Name) Kab | ir | | | | 40855512 | 12 | |
| 1.c. | Mid | dle Name N/A | | | | | | | |

| | t 3. Information About the Immigrants You | Fami | lly Member 3 | | |
|------|--|-------|----------------------------|-------------------------------|---------------|
| Are | Sponsoring | 14.a. | Family Name (Last Name) | N/A | |
| 1. | I am sponsoring the principal immigrant named in Part 2. Yes No (Applicable only if you are sponsoring | 14.b. | Given Name (First Name) | N/A | |
| | family members in Part 3. as the second joint sponsor or if you are sponsoring | 14.c. | Middle Name | N/A | |
| | family members who are immigrating | 15. | Relationship to | Principal Immigrant | |
| | more than six months after the principal immigrant) | | N/A | | |
| 2. | ▼ I am sponsoring the following family members | 16. | Date of Birth (| mm/dd/yyyy) | N/A |
| | immigrating at the same time or within six months of the principal immigrant named in Part 2. (Do not include any relative listed on a separate visa petition.) | 17. | Alien Registra | tion Number (A-Num A- N / A | |
| 3. | I am sponsoring the following family members who are immigrating more than six months after the principal immigrant. | 18. | USCIS Online | Account Number (if a | any) |
| Fam | ily Member 1 | Fami | lly Member 4 | | |
| 4.a. | Family Name Agnihot ni | 19.a. | Family Name (Last Name) | N/A | |
| 4.b. | (Last Name) | 19.b. | Given Name (First Name) | N/A | |
| 4.c. | Middle Name N/A | 19.c. | Middle Name | N/A | |
| 5. | Relationship to Principal Immigrant | 20. | Relationship to | Principal Immigrant | |
| | Spouse | | N/A | | |
| 6. | Date of Birth (mm/dd/yyyy) 11/18/1987 | 21. | Date of Birth (| mm/dd/yyyy) | N/A |
| 7. | Alien Registration Number (A-Number) (if any) | 22. | Alien Registra | tion Number (A-Num | |
| | ► A- 0 0 0 0 0 0 0 1 | | | ► A- N / A | |
| 8. | USCIS Online Account Number (if any) | 23. | USCIS Online | Account Number (if a | any) |
| | ► 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | | • | N / A | |
| Fam | ily Member 2 | Fami | lly Member 5 | | |
| 9.a. | Family Name (Last Name) Agnihotri | 24.a. | Family Name (Last Name) | N/A | |
| 9.b. | Given Name (First Name) | 24.b. | Given Name (First Name) | N/A | |
| 9.c. | Middle Name Manoj | 24.c. | Middle Name | N/A | |
| 10. | Relationship to Principal Immigrant | 25. | | Principal Immigrant | |
| | Son | | N/A | | |
| 11. | Date of Birth (mm/dd/yyyy) 10/19/2015 | 26. | Date of Birth (| mm/dd/yyyy) | N/A |
| 12. | Alien Registration Number (A-Number) (if any) | 27. | Alien Registrat | tion Number (A-Num | ber) (if any) |
| | ► A- 0 0 0 0 0 0 0 2 | | | ► A- N / A | |
| 13. | USCIS Online Account Number (if any) | 28. | USCIS Online | Account Number (if a | any) |
| | ► 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | • | N / A | |

| Part 3. | Information About the Immigrants Y | You |
|---------|---|-----|
| Are Spo | onsoring (continued) | |

29. Enter the total number of immigrants you are sponsoring on this affidavit which includes the principal immigrant listed in Part 2., any immigrants listed in Part 3., Item Numbers 1. - 28. and (if applicable), any immigrants listed for these questions in Part 11. Additional Information. Do not count the principal immigrant if you are only sponsoring family members entering more than 6 months after the principal immigrant.

3

| Part 4. | Information A | bout You | (Sponsor) |
|---------|---------------|----------|-----------|
| | | | |

| - | | |
|------|-------------------------|-----------|
| 1.a. | Family Name (Last Name) | Agnihotri |
| | Ciara Mana | Reyaansh |
| 1.c. | Middle Name | N/A |

Sponsor's Mailing Address

3.

address?

Sponsor's Full Name

| Spo | TIBOT B MARKET | is rum ess |
|------|------------------------|---------------------|
| 2.a. | In Care Of Nan | ne |
| | N/A | |
| 2.b. | Street Number and Name | PO Box 1005 |
| 2.c. | ☐ Apt. ☐ | Ste. Flr. N/A |
| 2.d. | City or Town | Cupertino |
| 2.e. | State CA | 2.f. ZIP Code 95014 |
| 2.g. | Province | N/A |
| 2.h. | Postal Code | N/A |
| 2.i. | Country | |
| | United Sta | tes |

Is your current mailing address the same as your physical

Yes X No

If you answered "No" to Item Number 3., provide your physical address in Item Numbers 4.a. - 4.h.

| 1 | | |
|------|------------------------|-----------------------|
| 4.a. | Street Number and Name | 123 Main St |
| 4.b. | ☐ Apt. ☐ | Ste. Flr. N/A |
| 4.c. | City or Town | San Jose |
| 4.d. | State CA | 4.e. ZIP Code 95125 |
| 4.f. | Province | N/A |
| 4.g. | Postal Code | N/A |
| 4.h. | Country | |
| | United Sta | ates |
| | | |
| ~ - | | |

Other Information

Sponsor's Physical Address

| 5. | Coun | try c | of Don | nicile | | | | |
|----|------|-------|--------|--------|--|--|--|--|
| | Uni | ted | Sta | tes | | | | |
| | | | | | | | | |

| 6. | Date of | Birth (mm/ | (dd/yyyy) |) | 04/17/1981 |
|----|---------|------------|-----------|---|------------|
|----|---------|------------|-----------|---|------------|

| 7. | City or Town of Birth |
|--------------|-----------------------|
| \mathbf{A} | Chennai |

| 8. | State or Province of Birth | |
|----|----------------------------|--|
| | Tamil Nadu | |

| 9. | Country of Birth |
|----|------------------|
| | India |

0 0 0 0 0 0 0 0

Citizenship or Residency

11.a. X I am a U.S. citizen. 11.b. I am a U.S. national.

11.c. I am a lawful permanent resident.

12. Sponsor's A-Number (if any)

► A- 1 2 3 4 5 6 7 8 9

13. Sponsor's USCIS Online Account Number (if any)



Military Service (To be completed by petitioner sponsors only.)

14. I am currently on active duty in the U.S. Armed Forces or U.S. Coast Guard. Yes X No

| US U | For USCIS Use Only | | | | | | | |
|------------|---|------|---|---------------|--|--|--|--|
| Par | rt 5. Sponsor's Household Size | 5. | Retired Since (mm/dd/yyyy) | | | | | |
| NOT | ΓΕ: Do not count any member of your household more | | | N/A | | | | |
| than | once. | 6. | Unemployed Since (mm/dd/yyyy |) | | | | |
| Pers | ons you are sponsoring in this affidavit: | | | N/A | | | | |
| 1. | Provide the number you entered in Part 3. , Item Number | 7. | My current individual annual income | e is: | | | | |
| | 29. | | \$ | 89650 | | | | |
| Pers | ons NOT sponsored in this affidavit: | Inco | me you are using from any other per | rson who was | | | | |
| 2. | Yourself. 1 | cour | ted in your household size, including | g, in certain | | | | |
| 3. | If you are currently married, enter "1" for your spouse. | | litions, the intending immigrant. (See luctions.) Please indicate name, relatio | | | | | |
| | 1 | Pers | | | | | | |
| 4. | If you have dependent children, enter the number here. | 8. | Name | | | | | |
| | 0 | | N/A | | | | | |
| 5. | If you have any other dependents, enter the number here. | 9. | Relationship | , | | | | |
| | 1 | | N/A | | | | | |
| 6. | If you have sponsored any other persons on Form I-864 or | 10. | Current Income \$ N, | /A | | | | |
| | Form I-864EZ who are now lawful permanent residents, enter the number here. | Pers | | | | | | |
| | 0 | 11. | Name | | | | | |
| 7. | OPTIONAL: If you have siblings, parents, or adult children with the same principal residence who are | 11. | N/A | | | | | |
| | combining their income with yours by submitting Form | 12. | Relationship | | | | | |
| | I-864A, enter the number here. | 12. | N/A | | | | | |
| 8. | Add together Part 5., Item Numbers 1 7. and enter the | 13. | Current Income \$ N | /> | | | | |
| | number here. Household Size: 6 | 13. | Current Income \$ N. | / A | | | | |
| | Household Size. 6 | Pers | on 3 | | | | | |
| Par | rt 6. Sponsor's Employment and Income | 14. | Name | | | | | |
| | | | N/A | | | | | |
| 1 am 1. | currently: X Employed as a/an | 15. | Relationship | | | | | |
| 1. | Manager | | N/A | | | | | |
| 2 | | 16. | Current Income \$ N | /A | | | | |
| 2. | Name of Employer 1 Acme, Inc. | Pers | on 4 | | | | | |
| 3. | Name of Employer 2 (if applicable) | 17. | Name | | | | | |
| J. | N/A | 1/. | N/A | | | | | |
| | | 18. | Relationship | | | | | |
| 4. | Self-Employed as a/an (Occupation) | 10. | N/A | | | | | |
| | N/A | | · | | | | | |

| $\left \begin{array}{c c} \mathbf{USCIS} \\ \mathbf{Use} \end{array}\right \square 4 \square 5 \square$ | Year 6 | ty Guideline :: 20 erty Line: | Remarks | 3 | | | |
|--|----------------------------------|-------------------------------|------------------|---|---|---|--|
| Part 6. Sponsor's Em (continued) | ployment a | and Income | | | rt 7. Use of Assets to Supple otional) | ement Income | |
| 20. My Current Annual from Part 6. Item Nu total will be compared Form I-864P.) | mbers 7., 10 I to Federal P | ., 13., 16., and | 19. ; the | from Fede | pur income, or the total income for your Part 6. , Item Numbers 20. or 24.a eral Poverty Guidelines for your hour FREQUIRED to complete this Par | sehold size, YOU ARE | |
| 21. The people listed 17. have complet with this affidavi completed by the | ed Form I-864 t all necessary | 4A. I am filin | g along | You 1. 2. | | N/A | |
| 22. One or more of the people listed in Item Numbers 8., 11., 14., and 17. do not need to complete Form I-864A because he or she is the intending immigrant and has no accompanying dependents. | | | | | Enter the net cash value of real-es value means current assessed value. \$ Enter the net cash value of all stoops. | ne minus mortgage debt.) | |
| Name N/A | | | | | 3. Enter the net cash value of all stocks, bonds, cert of deposit, and any other assets not already inclusive Number 1. or Item Number 2. | | |
| Federal Income Tax Return | n Informatio | o n | | 4. | | N/A | |
| 23.a. Have you filed a Federal income tax return for each of the three most recent tax years? Yes No NOTE: You MUST attach a photocopy or transcript of | | | | | Add together Item Numbers 1 here. TOTAL: \$ ets from Form I-864A, Part 4., Ite Name of Relative | N/A | |
| your Federal income tax year. | ax return for | only the most | recent | 5.a. | N/A | | |
| 23.b. Optional) I have of my Federal inc | come tax retui | | | 5.b. | Your household member's assets to (optional). | | |
| third most recent tax years. My total income (adjusted gross income on Internal Revenue Service (IRS) Form 1040EZ) as reported on my Federal income tax returns for the most recent three years was: Tax Year Total Income | | | | | ets of the principal sponsored immediates principal sponsored immigrant is the tem Numbers 1.a 1.c. Only including immigrant is being sponsored port. | he person listed in Part ude the assets if the | |
| 24.a. Most Recent | 2021 | \$ 87532 | | 6. | Enter the balance of the principal | | |
| 24.b. 2nd Most Recent | 2020 | \$ 78233 | | _ | | N/A | |
| 24.c. 3rd Most Recent 2019 \$ 63762 25. | | | | 7. | Enter the net cash value of all the real estate holdings. (Net value m minus mortgage debt.) | | |
| as my income wa have attached evi | | | 8. | Enter the current cash value of the stocks, bonds, certificates of depoincluded in Item Number 6. or It | sit, and other assets not | | |
| | | | | | \$ | N/A | |

| | Household Size | | Size | Poverty Guideline | Sponsor's Household Income | Remarks |
|--------------|----------------|-----|------|-------------------|---|---|
| For | □ 1 | □ 2 | □ 3 | Year: 20 | (Page 5, Line 10) | |
| USCIS Use | □ 4 | □ 5 | □ 6 | 1 car. 20 | \$ | |
| Only | □ 7 | □ 8 | □ 9 | Poverty Line: | | t equal 5 times (3 times for spouses and children of lly adopted in the U.S.) the difference between the |
| | □ Other \$ | | | \$ | poverty guidelines and the sponsor's hou. | |

Part 7. Use of Assets to Supplement Income (Optional) (continued)

| 9. | Add together Ite | em Numbers 6 | 8. an | d enter the number |
|----|------------------|--------------|--------------|--------------------|
| | here. | \$ | N/2 | A. |

Total Value of Assets

10. Add together **Item Numbers 4.**, **5.b.**, and **9.** and enter the number here.

| TOTAL: \$ | N/A |
|-----------|-----|
|-----------|-----|

Part 8. Sponsor's Contract, Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-864 Instructions before completing this part.

Sponsor's Contract

Please note that, by signing this Form I-864, you agree to assume certain specific obligations under the Immigration and Nationality Act (INA) and other Federal laws. The following paragraphs describe those obligations. Please read the following information carefully before you sign Form I-864. If you do not understand the obligations, you may wish to consult an attorney or accredited representative.

What is the Legal Effect of My Signing Form I-864?

If you sign Form I-864 on behalf of any person (called the intending immigrant) who is applying for an immigrant visa or for adjustment of status to a lawful permanent resident, and that intending immigrant submits Form I-864 to the U.S. Government with his or her application for an immigrant visa or adjustment of status, under INA section 213A, these actions create a contract between you and the U.S. Government. The intending immigrant becoming a lawful permanent resident is the consideration for the contract.

Under this contract, you agree that, in deciding whether the intending immigrant can establish that he or she is not inadmissible to the United States as a person likely to become a public charge, the U.S. Government can consider your income and assets as available for the support of the intending immigrant.

What If I Choose Not to Sign Form I-864?

The U.S. Government cannot make you sign Form 1-864 if you do not want to do so. But if you do not sign Form I-864, the intending immigrant may not become a lawful permanent resident in the United States.

What Does Signing Form I-864 Require Me To Do?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under Form I-864 terminate, you must:

- A. Provide the intending immigrant any support necessary to maintain him or her at an income that is at least 125 percent of the Federal Poverty Guidelines for his or her household size (100 percent if you are the petitioning sponsor and are on active duty in the U.S. Armed Forces or U.S. Coast Guard, and the person is your husband, wife, or unmarried child under 21 years of age); and
- **B.** Notify U.S. Citizenship and Immigration Services (USCIS) of any change in your address, within 30 days of the change, by filing Form I-865.

What Other Consequences Are There?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under Form I-864 terminate, the U.S. Government may consider (deem) your income and assets as available to that person, in determining whether he or she is eligible for certain Federal means-tested public benefits and also for state or local means-tested public benefits, if the state or local government's rules provide for consideration (deeming) of your income and assets as available to the person.

This provision does **not** apply to public benefits specified in section 403(c) of the Welfare Reform Act such as emergency Medicaid, short-term, non-cash emergency relief; services provided under the National School Lunch and Child Nutrition Acts; immunizations and testing and treatment for communicable diseases; and means-tested programs under the Elementary and Secondary Education Act.

What If I Do Not Fulfill My Obligations?

If you do not provide sufficient support to the person who becomes a lawful permanent resident based on a Form I-864 that you signed, that person may sue you for this support.



Part 8. Sponsor's Contract, Statement, Contact Information, Declaration, Certification, and Signature (continued)

If a Federal, state, local, or private agency provided any covered means-tested public benefit to the person who becomes a lawful permanent resident based on a Form I-864 that you signed, the agency may ask you to reimburse them for the amount of the benefits they provided. If you do not make the reimbursement, the agency may sue you for the amount that the agency believes you owe.

If you are sued, and the court enters a judgment against you, the person or agency that sued you may use any legally permitted procedures for enforcing or collecting the judgment. You may also be required to pay the costs of collection, including attorney fees.

If you do not file a properly completed Form I-865 within 30 days of any change of address, USCIS may impose a civil fine for your failing to do so.

When Will These Obligations End?

Your obligations under a Form I-864 that you signed will end if the person who becomes a lawful permanent resident based on that affidavit:

- **A.** Becomes a U.S. citizen:
- **B.** Has worked, or can receive credit for, 40 quarters of coverage under the Social Security Act;
- **C.** No longer has lawful permanent resident status and has departed the United States;
- **D.** Is subject to removal, but applies for and obtains, in removal proceedings, a new grant of adjustment of status, based on a new affidavit of support, if one is required; or
- E. Dies.

NOTE: Divorce **does not** terminate your obligations under Form I-864.

Your obligations under a Form I-864 that you signed also end if you die. Therefore, if you die, your estate is not required to take responsibility for the person's support after your death. However, your estate may owe any support that you accumulated before you died.

Sponsor's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. $\boxed{\times}$ I can read and understand English, and I have read and understand every question and instruction on this affidavit and my answer to every question.

| 1.b. | The interpreter named in Part 9. read to me every question and instruction on this affidavit and my answer to every question in |
|------|--|
| | N/A |
| | a language in which I am fluent, and I understood everything. |
| 2. | At my request, the preparer named in Part 10. , |
| | N/A |
| | prepared this affidavit for me based only upon information I provided or authorized. |

Sponsor's Contact Information

3. Sponsor's Daytime Telephone Number

4085551212

4. Sponsor's Mobile Telephone Number (if any)

4085551212

5. Sponsor's Email Address (if any)

sponsor@gmail.com

Sponsor's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that 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 benefit that I seek.

I furthermore authorize release of information contained in this affidavit, 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.

I certify, under penalty of perjury, that all of the information in my affidavit 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 affidavit and that all of this information is complete, true, and correct.

- **A.** I know the contents of this affidavit of support that I signed;
- **B.** I have read and I understand each of the obligations described in **Part 8.**, and I agree, freely and without any mental reservation or purpose of evasion, to accept each of those obligations in order to make it possible for the immigrants indicated in **Part 3.** to become lawful permanent residents of the United States;
- C. I agree to submit to the personal jurisdiction of any Federal or state court that has subject matter jurisdiction of a lawsuit against me to enforce my obligations under this Form I-864;



| | | Sponsor's Contract, Statement, Contact nation, Declaration, Certification, and | Into | erpreter's Mailing Address |
|--------|----------------|--|-------|---|
| | | ure (continued) | 3.a. | Street Number and Name N/A |
| | D. | Each of the Federal income tax returns submitted in support of this affidavit are true copies, or are | 3.b. | Apt. Ste. Flr. N/A |
| | | unaltered tax transcripts, of the tax returns I filed with the IRS; | 3.c. | City or Town N/A |
| | E. | I understand that, if I am related to the sponsored | 3.d. | State N/A 3.e. ZIP Code N/A |
| | | immigrant by marriage, the termination of the marriage (by divorce, dissolution, annulment, or | 3.f. | Province N/A |
| | | other legal process) will not relieve me of my obligations under this Form I-864; and | 3.g. | Postal Code N/A |
| | F. | I authorize the Social Security Administration to release information about me in its records to | 3.h. | Country |
| | | USCIS and DOS. | | N/A |
| Spo | nso | or's Signature | Inte | erpreter's Contact Information |
| - | | onsor's Signature | 4. | Interpreter's Daytime Telephone Number |
| .a. | Spi | onsor's dignature | | N/A |
| L | D ₀ | te of Signature (mm/dd/yyyy) | 5. | Interpreter's Mobile Telephone Number (if any) |
|).D. | Da | te of Signature (IIIII/dd/yyyy) | | N/A |
| | | O ALL SPONSORS: If you do not completely fill | 6. | Interpreter's Email Address (if any) |
| | | ffidavit or fail to submit required documents listed in actions, USCIS or DOS may deny your affidavit. | | N/A |
| 110 11 | .13111 | actions, obelo of Boo may delly your arridavit. | | G 10 1 |
| Par | t 9. | Interpreter's Contact Information, | Inte | erpreter's Certification |
| | | cation, and Signature | I cer | tify, under penalty of perjury, that: |
| | | he following information about the interpreter. | I am | fluent in English and N/A |
| 101 | ide i | the following information about the interpreter. | | h is the same language specified in Part 8., Item Numbe |
| Inte | erpi | eter's Full Name | | and I have read to this sponsor in the identified language y question and instruction on this affidavit and his or her |
| .a. | Int | erpreter's Family Name (Last Name) | answ | ver to every question. The sponsor informed me that he or understands every instruction, question, and answer on the |
| | | | | question, and the title |

N/A

1.b. Interpreter's Given Name (First Name)

N/A

2. Interpreter's Business or Organization Name (if any)

N/A

| Inter | preter | 2. | Sign | ature |
|--------|-----------------------------|----|-------|--------|
| 111101 | $p_I \cup \iota \cup \iota$ | D) | DUSIU | uiui c |

7.a. Interpreter's Signature

N/A

7.b. Date of Signature (mm/dd/yyyy)

affidavit, including the Sponsor's Declaration and

Certification, and has verified the accuracy of every answer.

N/A

| Part 10. | Contact Information, Declaration, and |
|-----------------|--|
| Signatur | e of the Person Preparing this Affidavit, |
| if Other | Than the Sponsor |

Provide the following information about the preparer.

| Pre | parer's Full Name | | | | | | | |
|------|---|--|--|--|--|--|--|--|
| 1.a. | Preparer's Family Name (Last Name) | | | | | | | |
| | N/A | | | | | | | |
| 1.b. | Preparer's Given Name (First Name) | | | | | | | |
| | N/A | | | | | | | |
| 2. | Preparer's Business or Organization Name (if any) | | | | | | | |
| | N/A | | | | | | | |
| Dua | parer's Mailing Address | | | | | | | |
| 1 re | parer's Mannig Address | | | | | | | |
| 3.a. | Street Number and Name | | | | | | | |
| 3.b. | Apt. Ste. Flr. N/A | | | | | | | |
| 3.c. | City or Town N/A | | | | | | | |
| 3.d. | State N/A 3.e. ZIP Code N/A | | | | | | | |
| 3.f. | Province N/A | | | | | | | |
| 3.g. | Postal Code N/A | | | | | | | |
| 3.h. | Country | | | | | | | |
| | N/A | | | | | | | |
| | | | | | | | | |
| Pre | parer's Contact Information | | | | | | | |
| 4. | Preparer's Daytime Telephone Number | | | | | | | |
| | N/A | | | | | | | |
| 5. | Preparer's Mobile Telephone Number (if any) | | | | | | | |
| | N/A | | | | | | | |
| 6. | Preparer's Email Address (if any) | | | | | | | |
| | N/A | | | | | | | |
| | | | | | | | | |

Preparer's Statement

| 7.a. | have prepared this affidavit on behalf of the sponsor and with the sponsor's consent. |
|------|--|
| 7.b. | I am an attorney or accredited representative and my representation of the sponsor in this case extends does not extend beyond the preparation of this affidavit. |
| | NOTE: 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 affidavit. |

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this affidavit at the request of the sponsor. The sponsor then reviewed this completed affidavit and informed me that he or she understands all of the information contained in, and submitted with, his or her affidavit, including the **Sponsor's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this affidavit based only on information that the sponsor provided to me or authorized me to obtain or use.

Preparer's Signature

| 8.a. | Preparer's Signature | | | | | | |
|------|----------------------|--|--|--|--|--|--|
| | N/A | | | | | | |
| | | | | | | | |

8.b. Date of Signature (mm/dd/yyyy) **N/A**

| Part 11. Additional Information | | | | | Page Number | 5.b. | Part Number | 5.c. | Item Number |
|---|----------------------------|--------------------|------------------|------|-------------|------|-------------|------|-------------|
| If you need extra space to provide any additional information within this affidavit, 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 affidavit 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 Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet. | | | | 5.d. | | | | | |
| 1.a. | Family Name (Last Name) | Agiiiiotii | | | | | | | |
| 1.b. | Given Name (First Name) | | | | | | | | |
| 1.c. | Middle Name | N/A | | | | | | | |
| 2. | A-Number (if | any) ► A- 1 2 3 | 4 5 6 7 8 9 | | | | | | |
| 3.a. | Page Number | 3.b. Part Number | 3.c. Item Number | 6.a. | Page Number | 6.b. | Part Number | 6.c. | Item Number |
| 3.d. | | | | 6.d. | | | | | |
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| | | | | | | | | | |
| 4.a. | Page Number | 4.b. Part Number | 4.c. Item Number | 7.a. | Page Number | 7.b. | Part Number | 7.c. | Item Number |
| 4.d. | | | | 7.d. | | | | | |
| | | | | | | | | | |