

Petition by Entrepreneur to Remove Conditions on Permanent Resident Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-829 OMB No. 1615-0045 Expires: 12/30/2014

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-	Sele	ect this box if	Attorney S	State 1	Bar Number Attorney or Accredited Representative
	a completed by an \Box	rm G-28 is	(if applicat	ole)	USCIS ELIS Account Number (if any)
	autative (if any)	iched to represent			
repre	the	petitioner.		-	
► ST	TART HERE - Type or	print legibly in	black ink.	1	
Part	t 1. Information About	Regional Cente	r	Par	rt 3. Information About You
1.	Was the investment by the ent	repreneur associate	d with	1.a.	Family Name
	an approved regional center?	Yes	No		(Last Name)
				1.b.	
	answered "Yes" to Item Nur Numbers 2.a 2.c.	nber I., please com	plete		(First Name)
				1.c.	Middle Name
2.a.	Name of Regional Center			2.	Alien Registration Number (A-Number) (if any)
					► A-
2.b.	Regional Center Identification	Number		1	USCIS ELIS Account Number (if any)
		\mathbf{X}		5.	USCIS ELIS Account Number (II any)
2.c.	Receipt number for the approv	and Form I 024 An	nlication		
	For Regional Center Under th			4.	U.S. Social Security Number (if any)
	Program, upon which the rela				
	Petition by Alien Entrepreneu	r, was based		5.	Form I-526 Receipt Number (if any)
Part	t 2. Basis for Petition			Othe	er Names You Have Used (including maiden name,
					names, and aliases, if any)
Select	t only one box.			6.a.	Family Name
1.	I am a conditional perman	nent resident based	on my		(Last Name)
	investment in a commerc	ial enterprise.		6.b.	Given Name (First Name)
2.	I am a conditional perman			-	· · · ·
	spouse, former spouse, or			6.c.	Middle Name
	but I am not included in t	he entrepreneur's Fo	orm	7.0	Family Name
	I-829.			/ .a.	(Last Name)

7.b. Given Name (First Name)

7.c. Middle Name

3. I am a conditional permanent resident spouse or child of an entrepreneur who has died.

Form I-829 12/14/12 N

Part 3. Information About You (continued)

Your U.S. Mailing Address

8. a.	In Care Of Name (if any)
8.b.	Street Number and Name 16
8.c.	Apt. Ste. Flr.
8.d.	City or Town
8.e.	State 8.f. ZIP Code ce
9.	Is your mailing address the same as your physical address?
(phys	ar mailing address and the address where you currently live Address) are not the same, you MUST provide your nt physical address in the Item Numbers 10.a 10.h.
You	• Physical Address
10.a.	Street Number and Name
10.b.	Apt. Ste. Flr. 1.
	City or Town 1. State 10.e. ZIP Code 1.
10.f.	Postal Code 2.
10.g.	Province 3.
10.h.	Country 4.
Othe	r Information About You 5.
11.	Date of Birth $(mm/dd/yyyy)$
12.	Gender Male Female O.
13.	Country of Birth
	6.
14.	Country of Citizenship or Nationality 6.
	7.:
	7

Criminal History

15.	Since becoming a conditional permanent resident, have
	you EVER been arrested, cited, charged, indicted,
	convicted, fined, or imprisoned for violating any law or
	ordinance (excluding minor traffic violations)?

Yes No

16. Since becoming a conditional permanent resident, have you EVER committed any crime for which you were not arrested?

If you answered "Yes" to **Item Number 15.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to **Item Number 16.**, provide the date and location (town or city/state or province/ country) of the events and provide an explanation in **Part 11.** Additional Information.

Part 4. Information About Your Current Spouse or Your Former Conditional Permanent Resident Spouse

1.a.	Family Name (Last Name)
1.b.	Given Name (First Name)
1.c.	Middle Name
2.	Gender Male Female
3. 4.	A-Number (if any) ► A-
5.	Date of Birth $(mm/dd/yyyy)$ >

Other Names Used (if applicable)

6.a.	Family Name (Last Name)	
6.b.	Given Name (First Name)	
6.c.	Middle Name	
7 . a.	Family Name (Last Name)	

Part 4. Information About Your Current Spouse or Your Former Conditional Permanent Resident Spouse (continued)

Mailing Address

8. a.	Street Number		itional Informa	1
8.b.	and Name	cond	FE: If you have litional permaner	nt reside
8.c.	City or Town	spou	rmation to provi se or former con	ditional
8.d.	State 8.e. ZIP Code	did r	not already includ	de in P a
8.f.	Postal Code	Par	rt 5. Informa	tion A
8.g.	Province		vide the followin	ıg infor
8.h.	Country	Chil		
Oth	er Information		Family Name (Last Name) Given Name	
9.	Current Spouse	1.c.	(First Name) Middle Name	
).	Former Conditional Permanent Resident Spouse		I	Mala
10.	Date of Marriage (mm/dd/yyyy) ►	2.		Male
11.	Date Marriage Terminated	3.	A-Number (if a	iny) ►
	(mm/dd/yyyy) ►	4.	USCIS ELIS A	ccount
12.	Is this spouse currently living with you?			
13.	Is this spouse applying with you? Yes No	5.	Date of Birth	(mm/a
14.	Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)	Oth	er Names Used	(if appli
		6.a.	Family Name (Last Name)	
15.	Is the current immigration status of your spouse or former	6.b.	Given Name (First Name)	
	spouse based on your current immigration status?	6.c.	Middle Name	
Crin	ninal History	Mai	ling Address	
Ansv	wer these questions if your current or former spouse is	7.a.	Street Number	
apply 16.	ying with you. Since becoming a conditional permanent resident, has	7.b.	and Name Apt. Ste.	└── F
10.	your current or former spouse EVER been arrested, cited, charged, indicted, convicted, fined, or imprisoned for	7.c.		
	violations)?	7.d.	State	7.e.
17.	Since becoming a conditional permanent resident, has your	7 .f .	Postal Code	
1/.	current or former spouse EVER committed any crime for which he or she was not arrested?	7.g.	Province	
	which he or she was not arrested? Yes No	7.h.	Country	L

If you answered "Yes" to **Item Number 16.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to **Item Number 17.**, provide the date and location (town or city/state or province/ country) of the events and provide an explanation in **Part 11.** Additional Information.

NOTE: If you have both a current **spouse** and a former conditional permanent resident spouse, use **Part 11. Additional Information** to provide this same information about your current **spouse** or former conditional permanent resident spouse who you did not already include in **Part 4.** above.

Par	t 5. Information About Your Children
Prov	ide the following information about your children.
Chile	d 1
1.a.	Family Name (Last Name)
1.b.	Given Name (First Name)
1.c.	Middle Name
2.	Gender Male Female
3.	A-Number (if any) ► A-
4.	USCIS ELIS Account Number (if any)
5.	Date of Birth $(mm/dd/yyyy)$
Othe	er Names Used (if applicable)
6.a.	Family Name (Last Name)
6.b.	Given Name (First Name)
6.c.	Middle Name
Mail	ing Address
7 .a.	Street Number and Name
7 . b.	Apt. Ste. Flr.
7.c.	City or Town
7.d.	State 7.e. ZIP Code
7 .f .	Postal Code
7.g.	Province
7.h.	Country

Part 5. Information About Your Children (continued)

Child 1 (continued)

- 8. Is this child currently living with you?
- **9.** Is this child applying with you?
- **10.** Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

Criminal History

Answer these questions if this child is applying with you.

11. Since becoming a conditional permanent resident, has this child **EVER** been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)?

Yes No

Yes No

Yes No

12. Since becoming a conditional permanent resident, has this child EVER committed any crime for which he or she was not arrested?Yes No

If you answered "Yes" to **Item Number 11.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to **Item Number 12.**, provide the date and location (town or city/state or province/ country) of the events and provide an explanation in **Part 11.** Additional Information.

Child 2

Cint	1 4	
13.a.	Family Name (Last Name)	
13.b.	Given Name (First Name)	00/14
13.c.	Middle Name	
14.	Gender	Male Female
15.	A-Number (if	any)
		► A-
16.	USCIS ELIS A	account Number (if any)
	►	
17.	Date of Birth	(mm/dd/yyyy) ►
Othe	r Names Used	(if applicable)
10	т. 11 мл	

18.a.	Family Name (Last Name)	
18.b.	Given Name (First Name)	
18.c.	Middle Name	

Mailing Address

19.a.	Street Number and Name
19.b.	Apt. Ste. Flr.
19.c.	City or Town
19.d.	State 19.e. ZIP Code
19.f.	Postal Code
19.g.	Province
19.h.	Country
20.	Is this child currently living with you?
21.	Is this child applying with you?
22.	Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)
Crim	inal History
Answ	ver these questions if this child is applying with you.
23.	Since becoming a conditional permanent resident, has this child EVER been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)?
	Yes No
24.	Since becoming a conditional permanent resident, has this child EVER committed any crime for which he or she was not arrested?

If you answered "Yes" to **Item Number 23.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to **Item Number 24.**, provide the date and location (town or city/state or province/ country) of the events and provide an explanation in **Part 11.** Additional Information.

Child 3

25.a.	Family Name (Last Name)
25.b.	Given Name (First Name)
25.c.	Middle Name
26.	Gender Male Female
27.	A-Number (if any)
	► A-

Part 5.	Information	About	Your	Children
(continu	(ied)			

Child 3 (continued)

Cini	u 5 (continueu)		1 $(1 $ $1 $ $(1 $ 1
28.	USCIS ELIS Account Number (if any)	1	le the date and lo (y) of the events
			ional Informati
29.	Date of Birth $(mm/dd/yyyy)$	Child	4
Othe	er Names Used (if applicable)		Family Name [
30. a.	Family Name (Last Name)	37.b.	Given Name (First Name)
30.b .	Given Name (First Name)	37.c.	Middle Name
30.c.	Middle Name	38.	Gender 🗌 N
Mail	ing Address	39.	A-Number (if an
	Street Number and Name	40.	USCIS ELIS Ac
	City or Town	41.	Date of Birth
31.d .	State 31.e. ZIP Code	Other	· Names Used (i
31.f.	Postal Code	42.a.	Family Name (Last Name)
31. g.	Province	42. b.	Given Name (First Name)
31.h.	Country	42.c.	Middle Name
32.	Is this child currently living with you? Yes No	Maili	ng Address
33.	Is this child applying with you?		Street Number and Name
34.	Current Immigration Status (for example, conditional	43.b.	Apt. Ste.
	resident, tourist/visitor, entered without inspection)	43.c.	City or Town
Crin	ninal History	43d.	State
	ver these questions if this child is applying with you.	43.f.	Postal Code
35.	Since becoming a conditional permanent resident, has this child EVER been arrested, cited, charged, indicted,	43.g.	Province
	convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)?	43.h.	Country
	Yes No	44	
36.	Since becoming a conditional permanent resident, has this child EVER committed any crime for which he or she		Is this child curro Is this child appl
	was not arrested?	46.	Current Immigra resident, tourist/v

If you answered "Yes" to **Item Number 35.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered "Yes" to **Item Number 36.**, provide the date and location (town or city/state or province/ country) of the events and provide an explanation in **Part 11.** Additional Information.

37.a.	Family Name (Last Name)
37.b.	Given Name (First Name)
37.c.	Middle Name
38.	Gender Male Female
39.	A-Number (if any)
40.	USCIS ELIS Account Number (if any)
41.	Date of Birth $(mm/dd/yyyy)$
Othe	r Names Used (if applicable)
42.a.	Family Name (Last Name)
42.b.	Given Name (First Name)
42.c.	Middle Name
	ng Address Street Number and Name
43.b.	
43.c.	City or Town
43d.	State 43.e. ZIP Code
43.f.	Postal Code
43.g.	Province
43.h.	Country
44.	Is this child currently living with you?
45.	Is this child applying with you?
46.	Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

Part 5. Information About Your Children (continued)		6.	Hair Color (Select only one box)
	,		Bald (No hair) Black Blond Brown Gray Red
Child 4 (continued)			Sandy White Unknown/Other
	ninal History		
	ver these questions if this child is applying with you.	Pa	rt 7. Information About the New Commercial
47.	Since becoming a conditional permanent resident, has this child EVER been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or		terprise (NCE)
	ordinance (excluding minor traffic violations)?	Typ	e of Enterprise
	Yes No		NCE formed after November 29, 1990.
48.	Since becoming a conditional permanent resident, has this		 NCE resulting from the purchase of a business,
	child EVER committed any crime for which he or she was not arrested?		formed on or before November 29, 1990, that has been restructured or reorganized.
	u answered "Yes" to Item Number 47. , you must provide fied court dispositions, arrest reports, statements of charges,	3.	NCE resulting from a capital investment in, and
indic	etment information, or any other charging documents that issued. If you answered "Yes" to Item Number 48.,	די	substantial expansion of, a business formed on or before November 29, 1990.
	ide the date and location (town or city/state or province/	Add	litional Information About the NCE
	try) of the events and provide an explanation in Part 11. itional Information.	4.	Name of the NCE
If yo	u need extra space to list additional children, use the space		
	ided in Part 11. Additional Information or attach a		TOTIONT
	rate sheet of paper; type or print your name and A-Number ny) at the top of each sheet; indicate the Page Number ,		sical Address
Part	Number, and Item Number to which your answer refers;	5.a.	Street Number and Name
and s	sign and date each sheet.	5.b.	Apt. Ste. Flr.
Par	rt 6. Your Biographic Information	5.c.	City or Town
1.	Ethnicity (Select only one box)	5.d.	State 5.e. ZIP Code
	Hispanic or Latino	6.	Type of Business Organization (for example, corporation,
	Not Hispanic or Latino		limited liability company, partnership)
2.	Race (Select all applicable boxes)		
	White	7.	Nature of Business (for example, furniture manufacturer)
	Asian		
	Black or African American	8.	Telephone Number
	American Indian or Alaska Native		
	Native Hawaiian or Other Pacific Islander	9.	Internet Web Site Address (if established)
3.	Height Feet Inches		
4.	Weight Pounds	10.	Included Industries (select North American Industry Classification System (NAICS) code or codes)
5.	Eye Color (Select only one box)		
	Black Blue Brown	11.	IRS Tax Identification Number
	Gray Green Hazel		

Part 7. Information About the New Commercial Enterprise (NCE) (continued)	 20.b. Amount of Subsequent Investment \$ 20.c. Type of Subsequent Investment (for example, cash,
12. Date Business Established (mm/dd/yyyy) ►	equipment, inventory, other tangible property, cash equivalents, or qualifying indebtedness as described in 8 CFR 204.6(e))
13. Amount of the Entrepreneur's Initial Investment in the NCE	NOTE: If multiple investments have been made since the
14. Date of the Entrepreneur's Initial Investment $(mm/dd/yyyy)$	entrepreneur's initial investment in the commercial enterprise use Part 11. Additional Information to list the dates, amoun and type of investments.
15. What percentage of the NCE does the entrepreneur own?	Gross and Net Incomes
16. Is this petition based on investment in a troubled businessYes No	Include all income generated in the present year to date
Full-time Positions and Qualifying Employees Provide the number of full-time positions for direct and qualifying employees in the NCE in the United States (excluding you, your spouse, and your children):	21.a. Year 21.b. Gross Income \$ 21.c. Net Income \$
17.a. At the Time of the Entrepreneur's Initial Investment	22.a. Year
17.b. Currently Employed in the NCE	22.b. Gross Income \$ 22.c. Net Income \$
18.a. How many new direct jobs did the entrepreneur's investment create?	23.a. Year
18.b. How many new direct jobs will the entrepreneur's investment create within a reasonable amount of time after filing this petition?	23.b. Gross Income \$ 23.c. Net Income \$
19.a. If the NCE is associated with an approved regional center, how many indirect jobs were created?	nature of the business, or made any changes in its organization or ownership since the date of the
19.b. If the NCE is associated with an approved regional center, how many indirect jobs will the NCE create within a reasonable amount of time after filing this petition?	 entrepreneur's initial investment? Yes Yes Has the commercial enterprise sold any corporate asset shares, or property, or had any capital withdrawn since the date of the entrepreneur's initial investment?
Subsequent Investments in the NCE	
Provide the following information about how much the entrepreneur has invested in the NCE since the entrepreneur's	NOTE: If you answered "Yes" to Item Number 24. or 25. , provide an explanation in Part 11. Additional Information .

20.a. Date of Subsequent Investment

(mm/dd/yyyy) ►

- Amount of Subsequent Investment \$
- Type of Subsequent Investment (for example, cash, equipment, inventory, other tangible property, cash equivalents, or qualifying indebtedness as described in 8 CFR 204.6(e))

E: If multiple investments have been made since the preneur's initial investment in the commercial enterprise, Part 11. Additional Information to list the dates, amounts, ype of investments.

s and Net Incomes

ide the gross and net incomes generated annually by the nercial enterprise since the entrepreneur's initial investment. de all income generated in the present year to date.

21.a. Year				
21.b.	Gross Income \$			
21.c.	Net Income \$			
22.a.	Year			
22.b.	Gross Income \$			
22.c.	Net Income \$	UN		
23. a.	Year			
23.b.	Gross Income \$			
23.c.	Net Income \$			
24.	Has the commercial enterprise filed for ceased business operations, materially	changed the		
	nature of the business, or made any ch organization or ownership since the da	-		
	entrepreneur's initial investment?	Yes No		
25	Has the commercial enterprise sold an	v corporate assets		

initial investment.

Yes No

Part 8. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature

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

- **1.a.** I can read and understand English, and have read and understand each and every question and instruction on this petition, as well as my answer to each question. I have read the Acknowledgement of Appointment at USCIS Application Support Center.
- **1.b.** The interpreter named in **Part 9.** has read each and every question and instruction on this petition, as well as my answer to each question, in

a language in which I am fluent. I understand each and every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in **Part 9**. has also read the **Acknowledgement of Appointment at USCIS Application Support Center** to me, in the language in which I am fluent, and I understand this USCIS ASC Acknowledgement as read to me by my interpreter.

I have requested the services of and consented to

who is is not an attorney or accredited representative, in preparing this petition for me. This person who assisted me in preparing my petition has reviewed the Acknowledgement of Appointment at USCIS Application Support Center with me and I understand the ASC Acknowledgement.

Petitioner's Contact Information

- 3. Petitioner's Daytime Telephone Number
- 4. Petitioner's Mobile Phone Number (if any)

5. Petitioner's Email Address (if any)

Acknowledgement of Appointment at USCIS Application Support Center

I.

understand that the purpose of a USCIS Application Support Center (ASC) appointment is for me to provide fingerprints, photographs, and/or signature and to verify that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following certification which USCIS will display to me at the time I provide my fingerprints, photographs, and/or signature during my USCIS ASC appointment:

By signing here, I declare under penalty of perjury that I have reviewed and understand my petition, as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my petition that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-verifying that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this Acknowledgement of Appointment at USCIS Application Support Center with me.

Petitioner's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.

I certify, under penalty of perjury under the laws of the United States of America, that the information in my petition and any document submitted with my petition were provided by me and are complete, true and correct.

Petitioner's Signature

6.a. Petitioner's Signature

6.b. Date of Signature (*mm/dd/yyyy*) ►

Part 9.	Interpreter's Certification, Contact
Inform	ation, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- 1.a. Interpreter's Family Name (Last Name)
- 1.b. Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

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. 3.g.	Province Postal Code			
3.h.	Country			
Inte	erpreter's Contact Information			
4.	Interpreter's Daytime Telephone Number			
5.	Interpreter's Email Address (if any)			
Interpreter's Certification				
I cer	tify that:			
I am fluent in English and which is the same language provided in Part 8., Item Number 1.b. ;				
I have read to this petitioner every question and instruction on				

The petitioner has informed me that he or she understands every instruction and question on the petition, as well as the answer to each question, and the petitioner verified the accuracy of each answer; and

The petitioner has also informed me that he or she understands the ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his or her fingerprints, photographs, and/or signature, he or she is affirming that the contents of this petition and all supporting documentation are complete, true, and correct.

Interpreter's Signature

- 6.a. Interpreter's Signature
- 6.b. Date of Signature (*mm/dd/yyyy*) ►

Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner

Provide the following information about the preparer.

Preparer's Full Name

- 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)

Preparer's Mailing Address

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

this petition, as well as the answer to each question, in the language provided in **Part 8.**, **Item Number 1.b.**; and

I have read the Acknowledgement of Appointment at USCIS Application Support Center to the petitioner in the same language provided in Part 8., Item Number 1.b. Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner (continued)

Preparer's Contact Information

- 4. Preparer's Daytime Telephone Number
- 5. Preparer's Fax Number
- 6. Preparer's Email Address (if any)

Preparer's Statement

- **7.a.** I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.
- 7.b. I am an attorney or accredited representative and my representation of the petitioner in this case
 extends does not extend beyond the preparation of this petition.

Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner. I completed this petition based only on responses the petitioner provided to me. After completing the petition, I reviewed it and all of the petitioner's responses with the petitioner, who agreed with each and every answer on the petition. If the petitioner supplied additional information concerning a question on the petition, I recorded it on the petition. I also have read the

Acknowledgement of Appointment at USCIS Application Support Center to the petitioner and the petitioner has informed me that he or she understands the ASC Acknowledgement.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy) >

Part 11. Additional Information	4.a.	Page Number 4.b. Part Number 4.c. Item Number
If you need extra space to provide any additional information within this petition, 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 petition or attach a separate sheet of paper. Include 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	4.d.	
each sheet. 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name		FT
 2. A-Number (if any) ▶ A- 3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d. 	Ē	TOR
REPROE	5.d.	Page Number 5.b. Part Number 5.c. Item Number
08/12		2014
	-	
		Petitioner's Signature Date of Signature (mm/dd/yyyy) ►
	0.D.	