



## Declaration of Financial Support

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
**Form I-134**  
OMB No. 1615-0014  
Expires 02/28/2021

### What Is the Purpose of Form I-134?

Some immigration benefits that involve a temporary stay in the United States require U.S. Citizenship and Immigration Services (USCIS) to determine whether the applicant or beneficiary of the request has sufficient financial resources or financial support to pay for expenses during the temporary stay. The individual who signs and submits Form I-134 must establish that he or she has both sufficient financial resources and access to those funds to support the beneficiary listed on Form I-134 for the duration of the beneficiary's stay in the United States.

This version of Form I-134, Declaration of Financial Support, replaces the previously titled "Form I-134, Affidavit of Support."

### Who Must File Form I-134?

Certain individuals applying for parole based on urgent humanitarian reasons or significant public benefit filed on Form I-131, Application for Travel Document, must submit this form with Form I-131. Form I-134 is filed either by the applicant for parole on his or her own behalf, or by another individual on the parole applicant's behalf.

**NOTE:** Whether or not the beneficiary of this Form I-134 will have sufficient means of support while in the United States is an important factor in determining whether to exercise discretion to authorize parole. We require evidence that the beneficiary of this Form I-134 has financial support for the duration of his or her stay in the United States. Lack of evidence of financial support while in the United States is a strong negative factor that may lead to a denial of parole.

### Who May File Form I-134?

You may file this form on behalf of yourself or on behalf of a B, F, or M nonimmigrant requesting extension of stay or change of status.

Form I-134 may also be requested by Department of State in certain instances.

**Do not use Form I-134 if the beneficiary you are agreeing to financially support must have Form I-864, Affidavit of Support Under Section 213A of the INA, filed on his or her behalf instead.**

### Submission of Declaration

If you are agreeing to financially support more than one beneficiary, you must submit a separate Form I-134 for each beneficiary. You, as the individual agreeing to financially support the beneficiary, must sign your full name on the form.

## General Instructions

USCIS provides forms free of charge through the USCIS [website](#). To view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>. If you do not have internet access, you may call the USCIS **Contact Center** at **1-800-375-5283** and ask that we mail a form to you. **The USCIS Contact Center provides information in English and Spanish.** For TTY (deaf or hard of hearing) call: **1-800-767-1833.**

**Signature.** Each **declaration** must be properly signed and filed. For all signatures on this **declaration**, USCIS will not accept a stamped or typewritten name in place of a **signature**. A legal guardian may also sign for a mentally incompetent person. **If the request is not signed or if the requisite signature on the request is not valid, USCIS will reject the request. See 8 CFR 103.2(a)(7)(ii)(A).** If USCIS accepts a request for adjudication and determines that it has a deficient signature, USCIS will deny the request.

**Validity of Signatures.** USCIS will consider a photocopied, faxed, or scanned copy of the original handwritten signature valid for filing purposes. The photocopy, fax, or scan must be of the original document containing the handwritten ink signature.

**Filing Fee.** There is no **filing** fee to file Form I-134.

**Evidence.** You must submit all evidence requested in these Instructions with your declaration. If you fail to submit required evidence, USCIS may reject or deny your declaration for failure to submit requested evidence or supporting documents in accordance with 8 CFR 103.2(b)(1) and these Instructions.

**Biometric Services Appointment.** USCIS may require that you appear for an interview or provide biometrics (fingerprints, photograph, and/or signature) at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), before making a decision on your application or petition. After USCIS receives your declaration and ensures it is complete, we will inform you if you need to attend a biometric services appointment. If an appointment is necessary, the notice will provide you the location of your local or designated USCIS Application Support Center (ASC) and the date and time of your appointment or, if you are currently overseas, instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the United States to set up an appointment.

If you are required to provide biometrics, at your appointment you must sign an oath reaffirming that:

1. You provided or authorized all information in the declaration;
2. You reviewed and understood all of the information contained in, and submitted with, your declaration; and
3. All of this information was complete, true, and correct at the time of filing.

**Copies.** You should submit legible photocopies of documents requested, unless the Instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of an application or petition. If USCIS requests an original document from you, it will be returned to you after USCIS determines it no longer needs your original.

**Translations.** If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English. The certification should also include **the translator's signature, printed name, the signature date, and the translator's contact information.**

### How To Fill Out Form I-134

1. Type or print legibly in black ink.

2. If you need extra space to complete any item within this **declaration**, use the space provided in **Part 8. Additional Information** or attach a separate sheet of **paper**. **Type** or print your name and Alien Registration Number (**A-Number**) **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.
3. Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks “Provide the name of your current spouse”), type or print “**N/A**” unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, “How many children do you have” or “How many times have you departed the United States”), type or print “**None**” unless otherwise directed.
4. **Part 4. Statement, Contact Information, Certification, and Signature of the Beneficiary (if filing Form I-134 on his or her own behalf).** You must sign in **Part 4.** if you are filing Form I-134 on your own behalf. Select the appropriate box to indicate whether you read this declaration yourself or whether you had an interpreter assist you. If someone helped you complete the declaration, select the box indicating that you used a preparer. You also must sign and date your declaration and provide your daytime telephone number, mobile telephone number, and email address. A stamped or typewritten name in place of a signature is not acceptable.
5. **Part 5. Statement, Contact Information, Certification, and Signature of the Individual Agreeing to Financially Support the Beneficiary.** You must sign **Part 5.** if you are filing Form I-134 on behalf of someone else (a beneficiary). Select the appropriate box to indicate whether you read this **declaration** yourself or whether you had an interpreter assist you. If someone assisted you in completing **the declaration**, select the box indicating that you used a preparer. Further, you must sign and date your **declaration** and provide your daytime telephone number, mobile telephone number, and email address. Every **declaration** **MUST** contain the signature of the **individual agreeing to financially support the beneficiary** (or parent or legal guardian, if applicable). A stamped or typewritten name in place of a signature is not acceptable.
6. **Part 6. Interpreter’s Contact Information, Certification, and Signature.** If you used anyone as an interpreter to read the **Instructions** and questions on this **declaration** to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization, his or her daytime telephone number, his or her mobile telephone number, and his or her email address. The interpreter must sign and date the **declaration**.
7. **Part 7. Contact Information, Declaration, and Signature of the Person Preparing this Declaration, if Other Than the Individual Agreeing to Financially Support the Beneficiary.** If someone other than you, the **individual agreeing to financially support the beneficiary** (which is the beneficiary if filing on behalf of him or herself), **completed your declaration, this section must contain the signature.** If the same individual acted as your interpreter **and** your preparer, that person should complete both **Part 6.** and **Part 7.** If the person who completed this **declaration** is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you complete this **declaration** **MUST** sign and date the **declaration**. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your **declaration** is an attorney or accredited **representative, he** or she **may also need to** submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your **declaration**.

**We recommend that you print or save a copy of your completed **declaration** to review in the future and for your records.**

### **Specific Instructions**

#### **Part 1. Basis for Filing.** Select the appropriate box for **Item Number 1.**

Select the first box if you are the beneficiary who is the alien applying for an immigration benefit. A beneficiary may file Form I-134 on his or her own behalf.

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Select the second box if you are the individual agreeing to financially support the beneficiary.

## Part 2. Information about the Beneficiary

The beneficiary is the alien who is applying for an immigration benefit. A beneficiary may file Form I-134 on behalf of himself or herself.

**Item Number 1. Beneficiary's Current Legal Name.** Provide the beneficiary's legal name, as shown on his or her birth certificate or legal name change document. If the beneficiary has two last names, include both and use a hyphen (-) between the names, if appropriate. Type or print the beneficiary's last, first, and middle names in each appropriate field.

**Item Number 3. Date of Birth.** Enter the beneficiary's date of birth in mm/dd/yyyy format in the space provided. For example, type or print October 5, 1967 as 10/05/1967.

**Item Number 4. Gender.** Provide the beneficiary's gender.

**Item Number 5. Alien Registration Number (A-Number).** Provide the beneficiary's A-Number. The A-Number is the number used to identify an individual's immigration records. It begins with an "A" and can be found on correspondence the beneficiary received from the Department of Homeland Security (DHS) or USCIS. If the beneficiary does not have an A-Number, type or print "N/A."

**Item Number 6. Place of Birth.** Enter the name of the city or town, state or province, and country where the beneficiary was born. Type or print the name of the country as it was named when the beneficiary was born, even if the country's name has changed or the country no longer exists.

**Item Number 7. Country of Citizenship or Nationality.** Provide the name of the country where the beneficiary is a citizen and/or national. This is not necessarily the country where the beneficiary was born. If the beneficiary does not have citizenship in any country, type or print "stateless" and provide an explanation in **Part 8. Additional Information.**

**Item Number 8. Marital Status.** Select the appropriate box.

**Item Numbers 9. - 11. Beneficiary's Physical Address.** Provide the physical address where the beneficiary lives.

**Item Number 12. Beneficiary's Anticipated Length of Stay.** Enter the anticipated start date of the beneficiary's stay in the United States in **Item Number 12.** Select the option that matches the anticipated end date of the beneficiary's stay. If the beneficiary's stay has an end date, you must enter the anticipated end date in mm/dd/yyyy format in the space provided for that option. If the beneficiary's anticipated stay does not have an end date, select the "No End Date" option.

**Item Number 13. Beneficiary's Income.** Provide information on any income the beneficiary will receive. If the beneficiary will not receive any income, then type or print \$0 in the table. Do not include any individuals named in **Part 3.**

**Item Numbers 14. - 15.** Identify whether any of the beneficiary's total income comes from an illegal activity or source, such as proceeds from illegal gambling or illegal drug sales or other activities and identify the amount. Do not include income from illegal gambling or illegal drug sales attributed to any individuals named in **Part 3.**

**Item Number 18. Beneficiary's Assets.** Provide information about any assets available to the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in U.S. dollars, regardless of whether the assets are held in the United States or outside of the United States. Do not include assets from any individuals named in **Part 3.**

You may include the net value of the beneficiary's home as an asset. The net value of the home is the appraised value of the home, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you list the net value of the beneficiary's home, then you must include documentation demonstrating that the beneficiary owns the home, a recent appraisal by a licensed appraiser, and evidence of the amount of all loans secured by a mortgage, trust deed, or other lien on the home.

You may not include the net value of the beneficiary's automobile unless the beneficiary has more than one automobile, and at least one automobile is not included as an asset. Submit evidence of the value of the assets listed. Evidence must include the name of the asset holder, a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash value.

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### Part 3. Information About the Individual Agreeing to Financially Support the Beneficiary Named in Part 2.

**Item Number 1. Current Legal Name.** Provide the full name of the individual who is agreeing to financially support the beneficiary named in **Part 2**. Provide your legal name, as shown on your birth certificate or legal name change document. If you have two last names, include both and use a hyphen (-) between the names, if appropriate. Type or print your last, first, and middle names in each appropriate field.

**Item Number 8. Alien Registration Number (A-Number).** Provide your A-Number. Your A-Number is the number used to identify your immigration records. It begins with an "A" and can be found on correspondence you have received from the Department of Homeland Security (DHS) or USCIS. If you do not have an A-Number, type or print "N/A."

**Item Number 10. Immigration Status.** Select the appropriate box for your current immigration status. Provide evidence of your status. A U.S. citizen or U.S. national may submit a copy of a birth certificate, certificate of naturalization, certificate of citizenship, consular report of birth abroad to U.S. parents, or a copy of the biographic data page on your U.S. passport. Proof of lawful permanent resident status includes a photocopy of both sides of the Permanent Resident Card or Alien Registration Receipt Card (Form I-551), or a photocopy of an unexpired temporary Form I-551 stamp in either a foreign passport or DHS Form I-94 Arrival Departure Record. Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foreign passport.

**Item Number 19. Assets.** Provide information about any assets you will use to support the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in U.S. dollars, regardless of whether they are held in the United States or outside of the United States. Do not include assets from any individuals named in **Part 2**.

You may include the net value of a home as an asset. The net value of the home is the appraised value of the home, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you include the net value of your home, then you must include documentation demonstrating that you own the home, a recent appraisal by a licensed appraiser, and evidence of the amount of all loans secured by a mortgage, trust deed, or other lien on the home.

You may not include the net value of an automobile unless you show that you have more than one automobile, and at least one automobile is not included as an asset.

Submit evidence of the value of your or your household members' assets. Evidence must include the name of the asset holder, a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash value.

#### Supporting Evidence (for beneficiary and person providing support to beneficiary)

As the beneficiary or the person who agrees to financially support the beneficiary, you must show you have sufficient income or financial resources to support the beneficiary.

Evidence should consist of copies of any of the documents listed below that apply.

Failure to provide evidence of sufficient income or financial resources may result in the denial of the foreign national's application for a visa or his or her removal from the United States.

Submit in duplicate evidence of income and resources, as appropriate:

1. Statement from an officer of the bank or other financial institutions with deposits, identifying the following details regarding the account:
  - A. Date account opened;
  - B. Total amount deposited for the past year; and
  - C. Present balance.
2. Statement(s) from your employer on business stationery showing:
  - A. Date and nature of employment;



- B.** Salary paid; and
- C.** Whether the position is temporary or permanent.
- 3.** Copy of last U.S. federal income tax return filed (**tax transcript**); or
- 4.** List containing serial numbers and denominations of bonds and name of record owner(s).

### What Is the Filing Fee?

There is no filing fee for Form I-134.

### Where To File?

Please see our **website** at [www.uscis.gov/I-134](http://www.uscis.gov/I-134) or visit the **USCIS Contact Center** at [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter) to connect with a **USCIS representative** for the most current information about where to file this **declaration**. The **USCIS Contact Center provides information in English and Spanish**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

### Address Change

If you are not a U.S. citizen or U.S. national, you must notify USCIS of your new address within 10 days of moving from your previous residence. For information on filing a change of address, go to the USCIS **website** at [www.uscis.gov/addresschange](http://www.uscis.gov/addresschange) or reach out to the USCIS **Contact Center** at [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter) for help. The **USCIS Contact Center provides information in English and Spanish**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

**NOTE:** Do not submit a change of address request to the USCIS Lockbox facilities because the Lockbox does not process change of address requests.

### Processing Information

**Initial Processing.** Once USCIS accepts your **declaration**, we will check it for completeness. If you do not completely fill out this **declaration**, you will not establish a basis of support for the **beneficiary or for yourself** (if you are applying on your own behalf), and USCIS or the Department of State may reject or deny your **declaration**.

**Requests for More Information.** USCIS or Department of State may request that you provide more information or evidence to support your **declaration**. We may also request that you provide the originals of any copies you submit. If USCIS requests an original document from you, it will be returned to you after USCIS determines it no longer needs your original.

**Requests for Interview.** We may request that you appear at a USCIS office for an interview based on your **declaration**. At the time of any interview or other appearance at a USCIS office, we may require that you provide your **biometrics** to verify your identity and/or update background and security checks.

**Decision.** The decision on Form I-134 involves a determination of whether you have established a basis of support for the beneficiary seeking an immigration benefit. USCIS will notify you of the decision in writing.

## USCIS Forms and Information

To ensure you are using the latest version of this **declaration**, visit the USCIS **website** at [www.uscis.gov](http://www.uscis.gov) where you can obtain the latest USCIS forms and immigration-related information. If you do not have internet access, you may **call** the USCIS Contact Center at **1-800-375-5283** and **ask that we mail a form to you**. The USCIS Contact Center provides information in English and Spanish. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Please visit us at [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter) to get basic information about immigration services and ask questions about a pending case. Through our digital self-help tools and live assistance, the USCIS Contact Center provides a pathway for you to get consistent, accurate information and answers to immigration case questions.

## Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-134, we will deny your Form I-134 and may deny any other immigration benefit the beneficiary seeks. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

## DHS Privacy Notice

**AUTHORITIES:** The information requested on this **declaration**, and the associated evidence, is collected under the Immigration and Nationality Act (INA), sections 101, 1182(a)(4), 1183, 1184(a), and 1258.

**PURPOSE:** The primary purpose for providing the requested information on this **declaration** is to show that the applying immigrant has enough financial support to live without concern of becoming reliant on U.S. Government welfare.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, **including your Social Security number (if applicable)**, and any requested evidence, may delay a final **decision** or result in denial of your **immigration benefit**.

**ROUTINE USES:** DHS may share the information you provide on this **declaration and any additional requested evidence** with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [**DHS/USCIS-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System**] and the published privacy impact assessments [**DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems, DHS/USCIS/PIA-051 Case and Activity Management for International Operations, and DHS/USCIS/PIA-056 USCIS Electronic Immigration System**] which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share **this** information, as appropriate, for law enforcement purposes or in the interest of national security.

## Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at **2 hours** per response, including the time for reviewing instructions, gathering the required documentation and information, completing the **declaration**, preparing statements, attaching necessary documentation, and submitting the **declaration**. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0014. **Do not mail your completed Form I-134 to this address.**