



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 03/31/2015

For USCIS Use Only	Affidavit of Support Submitter	Section 213A Review	Number of Support Affidavits in File
	<input type="checkbox"/> Petitioner <input type="checkbox"/> 1st Joint Sponsor <input type="checkbox"/> 2nd Joint Sponsor <input type="checkbox"/> Substitute Sponsor <input type="checkbox"/> 5% Owner	<input type="checkbox"/> MEETS requirements <input type="checkbox"/> DOES NOT MEET requirements Reviewed By: _____ Office: _____ Date: MM / DD / YYYY	<input type="checkbox"/> 1 <input type="checkbox"/> 2 Remarks

▶ **START HERE - Type or print in black ink.**

Part 1. Basis For Filing Affidavit of Support

I, _____, am the sponsor submitting this affidavit of support because
(Select only one box)

- 1.a. I am the petitioner. I filed or am filing for the immigration of my relative.
- 1.b. I filed an alien worker petition on behalf of the intending immigrant, who is related to me as my _____
- 1.c. I have an ownership interest of at least 5 percent in _____ which filed an alien worker petition on behalf of the intending immigrant, who is related to me as my _____
- 1.d. I am the only joint sponsor.
- 1.e. I am the first second of two joint sponsors.
- 1.f. The original petitioner is deceased. I am the substitute sponsor. I am the intending immigrant's _____

Part 2. Information on the Principal Immigrant

- 1.a. Family Name (Last Name) _____
- 1.b. Given Name (First Name) _____
- 1.c. Middle Name _____

Mailing Address

- 2.a. **In Care of Name** _____
- 2.b. Street Number and Name _____
- 2.c. Apt. Ste. Flr. _____
- 2.d. City or Town _____
- 2.e. State _____ 2.f. ZIP Code _____
- 2.g. Province _____
- 2.h. Postal Code _____
- 2.i. Country _____

NOTE: If you select Item Number 1.a., 1.b., 1.c., 1.d., 1.e., or 1.f., you must include proof of your U.S. citizenship, U.S. national, or lawful permanent resident status.

Part 2. Information on the Principal Immigrant
(continued)

Other Information

- 3. **Citizenship or Nationality**
- 4. Date of Birth (mm/dd/yyyy)
- 5. Alien Registration Number (A-Number)
▶ A-
- 6. USCIS ELIS Account Number (if any)
▶

Part 3. Information on the Immigrant(s) You Are Sponsoring

- 1. I am sponsoring the principal immigrant named in **Part 2**.
 Yes No (Applicable only in cases with two joint sponsors)
- 2. I am sponsoring the following family members immigrating at the same time or within 6 months of the principal immigrant named in **Part 2**. Do not include any relative listed on a separate visa petition.

Family Member 1

- 2.a. Family Name (Last Name)
- 2.b. Given Name (First Name)
- 2.c. Middle Name
- 2.d. Relationship to Sponsored Immigrant
- 2.e. Date of Birth (mm/dd/yyyy)
- 2.f. Alien Registration Number (A-Number)
▶ A-
- 2.g. USCIS ELIS Account Number (if any)
▶

Family Member 2

- 3.a. Family Name (Last Name)
- 3.b. Given Name (First Name)
- 3.c. Middle Name
- 3.d. Relationship to Sponsored Immigrant
- 3.e. Date of Birth (mm/dd/yyyy)
- 3.f. Alien Registration Number (A-Number)
▶ A-
- 3.g. USCIS ELIS Account Number (if any)
▶

Family Member 3

- 4.a. Family Name (Last Name)
- 4.b. Given Name (First Name)
- 4.c. Middle Name
- 4.d. Relationship to Sponsored Immigrant
- 4.e. Date of Birth (mm/dd/yyyy)
- 4.f. Alien Registration Number (A-Number)
▶ A-
- 4.g. USCIS ELIS Account Number (if any)
▶

Family Member 4

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

Part 3. Information on the Immigrant(s) You Are Sponsoring (continued)

- 5.d. Relationship to Sponsored Immigrant
- 5.e. Date of Birth (mm/dd/yyyy)
- 5.f. Alien Registration Number (A-Number)
▶ A-
- 5.g. USCIS ELIS Account Number (if any)
▶

Family Member 5

- 6.a. Family Name (Last Name)
- 6.b. Given Name (First Name)
- 6.c. Middle Name
- 6.d. Relationship to Sponsored Immigrant

Family Member 5 (Continued)

- 6.e. Date of Birth (mm/dd/yyyy)
- 6.f. Alien Registration Number (A-Number)
▶ A-
- 6.g. USCIS ELIS Account Number (if any)
▶
- 7. Enter the total number of immigrants you are sponsoring on this form from **Item Numbers 1. - 6.**

Part 4. Information on the Sponsor

Sponsor's Full Name

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

Sponsor's Mailing Address

- 2.a. **In Care of Name**
- 2.b. Street Number and Name
- 2.c. Apt. Ste. Fl.
- 2.d. City or Town
- 2.e. State 2.f. ZIP Code
- 2.g. Province
- 2.h. Postal Code
- 2.i. Country
- 3. **Is your current mailing address the same as your physical address?** Yes No

If you answered "No" to **Item Number 3.**, provide your physical address below.

Sponsor's Physical Address

- 4.a. Street Number and Name
- 4.b. Apt. Ste. Fl.
- 4.c. City or Town
- 4.d. State 4.e. ZIP Code
- 4.f. Province
- 4.g. Postal Code
- 4.h. Country

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Part 4. Information on the Sponsor

Other Information

- 5. Country of Domicile
- 6. Date of Birth (mm/dd/yyyy)
- 7. City or Town of Birth
- 8. State or Province of Birth
- 9. Country of Birth
- 10. U.S. Social Security Number (Required)
▶

Citizenship **or** Residency

- 11.a. I am a U.S. citizen.
- 11.b. I am a U.S. national (for joint sponsors only).
- 11.c. I am a lawful permanent resident.
- 11.d. Sponsor's Alien Registration Number (if any)
▶ A-

- 12. Sponsor's USCIS ELIS Account Number (if any)
▶

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

- 13. I am currently on active duty in the U.S. armed services.
 Yes No

Part 5. Sponsor's Household Size

NOTE: Do not count any member of your household more than once.

Persons you are sponsoring in this affidavit:

- 1. Enter the number you entered on line 7 of Part 3.

Persons NOT sponsored in this affidavit:

- 2. Yourself.
- 3. If you are currently married, enter "1" for your spouse.
- 4. If you have dependent children, enter the number here.
- 5. If you have any other dependents, enter the number here.
- 6. If you have sponsored any other persons on an I-864 or I-864 EZ who are now lawful permanent residents, enter the number here.
- 7. **OPTIONAL:** If you have siblings, parents, or adult children with the same principal residence who are combining their income with yours by submitting Form I-864A, enter the number here.
- 8. Add together **Item Numbers 1.-7.** and enter the number here. **Household Size:**

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Part 6. Sponsor's Employment and Income

- 1.** I am currently:
- Employed (Complete **Item Numbers 2.a. - 2.c.**)
 - Retired (Complete **Item Numbers 3.a. - 3.b.**)
 - Self-Employed (Complete **Item Number 4.**)
 - Unemployed (Complete **Item Number 5.**)
- 2.a. Current Occupation**
- 2.b. Name of Employer 1 (if applicable)**
- 2.c. Name of Employer 2 (if applicable)**
- 3.a. Name of Former Employer**
- 3.b. Date of Retirement (mm/dd/yyyy)**
- 4. Self-Employed Occupation**
- 5.** Date of Unemployment (mm/dd/yyyy)
- 6.** My **Current, Individual** Annual Income \$

Income you are using from any other person who was counted in your household size, including, in certain conditions, the intending immigrant. (See Form I-864 Instructions.) Please indicate name, relationship and income.

Person 1

- 7.a. Name**

- 7.b. Relationship**

- 7.c. Current Income** \$

Person 2

- 8.a. Name**

- 8.b. Relationship**

- 8.c. Current Income** \$

Person 3

- 9.a. Name**

- 9.b. Relationship**

- 9.c. Current Income** \$

Person 4

- 10.a. Name**

- 10.b. Relationship**

- 10.c. Current Income** \$

- 11. My current Annual Household Income** (Total all lines from **Part 5., Item Numbers 7.c., 8.c., 9.c., and 10.c.** Will be Compared to Poverty Guidelines -- See Form I-864P.) \$

- 12.** The persons listed in **Item Numbers 7.a., 8.a., 9.a., and 10.a.** have completed Form I-864A. I am filing along with this form all necessary Forms I-864A completed by these persons.

For USCIS Use Only	Household Size	Poverty Guideline	Remarks
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> Other _____	Year: <u>20</u> <u>YY</u>	
		Poverty Line: \$ _____	

Part 6. Sponsor's Employment and Income (continued)

13. The persons listed in **Item Numbers 7.a., 8.a., 9.a., or 10.a.** does not need to complete Form I-864A because he or she is the intending immigrant and has no accompanying dependents.

Name

Federal income tax return information

- 14.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 your Federal **income** tax return for only the most recent tax year.

- 14.b. (Optional) I have attached photocopies or transcripts of my Federal **income** tax returns for my second and third most recent tax years.

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:

	Tax Year	Total Income
15.a. Most Recent	\$	\$
15.b. 2nd Most Recent	\$	\$
15.c. 3rd Most Recent	\$	\$

16. I was not required to file a tax return as my income was below the IRS required level and I have attached evidence to support this.

Part 7. Use of Assets to Supplement Income (optional)

If your income, or the total income for you and your household, from Part 6., line 10 exceeds the Federal Poverty Guidelines for your household size, YOU ARE NOT REQUIRED to complete this Part. Skip to Part 8.

Your assets (Optional)

1. Enter the balance of all savings and checking accounts. \$
2. Enter the net cash value of real-estate holdings. (Net means current assessed value minus mortgage debt.) \$
3. Enter the net cash value of all stocks, bonds, certificates of deposit, and any other assets not already included in **Item Number 1. or Item Number 2.** \$
4. **Add together Item Numbers 1-3 and enter the number here.** **TOTAL:** \$

Assets from Form I-864A, line 12d for:

- 5.a. Name of Relative
- 5.b. **Your household member's assets from Form I-864A.** (Optional) \$

Assets of the principal sponsored immigrant (Optional). The principal sponsored immigrant is the person listed in **Item Numbers 1.a. - 1.c. in Part 2.**

6. Enter the balance of the sponsored immigrant's savings and checking accounts. \$

For USCIS Use Only	Household Size	Poverty Guideline	Sponsor's Household Income <i>(Page 5, Line 10)</i>	Remarks
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> Other _____	Year: <u>20YY</u> Poverty Line: \$ _____	\$ _____ <i>The total value of all assets, line 10, must equal 5 times (3 times for spouses and children of USC's, or 1 time for orphans to be formally adopted in the U.S.) the difference between the poverty guidelines and the sponsor's household income, line 10.</i>	

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

7. Enter the net cash value of all the sponsored immigrant's real estate holdings. (Net means investment value minus mortgage debt.)

\$

8. Enter the current cash value of the sponsored immigrant's stocks, bonds, certificates of deposit, and other assets not included on **Item Number 6.** or **Item Number 7.**

\$

9. **Add together Item Numbers 6.-8. of Part 7. and enter the number here.**

\$

Total value of assets.

10. **Add together Item Number 4., Item Number 5.b., and Item Number 9. of Part 7. and enter the number here.**

TOTAL: \$

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

Please note that, by signing this Form I-864, you agree to assume certain specific obligations under the Immigration and Nationality Act and other Federal laws. The following paragraphs describe those obligations. Please read the following information carefully before you sign the 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 a Form I-864?

If you sign a 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 the Form I-864 to the U.S. Government with his or her application for an immigrant visa or adjustment of status, under section 213A of the INA these actions create a contract between you and the U. S. Government. The intending immigrant's 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 an alien likely to become a public charge, the U.S. Government can consider your income and assets to be available for the support of the intending immigrant.

What If I choose Not to Sign a Form I-864?

You cannot be made to sign a Form I-864 if you do not want to do so. But if you do not sign the Form I-864, the intending immigrant may not be able to become a lawful permanent resident in the United States.

What Does Signing the 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 the 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 and the person is your husband, wife, unmarried child under 21 years old); and

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

- (b) Notify 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 the Form I-864 terminate, your income and assets may be considered ("deemed") to be 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, but not limited to, 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 the Form I-864 that you signed, that person may sue you for this support.

If a Federal, state or local agency, or a private agency provides any covered means-tested public benefit to the person who becomes a lawful permanent resident based on the 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 will end if the person who becomes a lawful permanent resident based on a Form I-864 that you signed:

1. Becomes a U.S. citizen;
2. Has worked, or can be credited with, 40 quarters of coverage under the Social Security Act;
3. No longer has lawful permanent resident status, and has departed the United States;
4. Becomes 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
5. Dies.

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

Your obligations under a Form I-864 also end if you die. Therefore, if you die, your Estate will not be required to take responsibility for the person's support after your death. Your Estate may, however, be responsible for any support that you owed before you died.

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

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.** I can read and understand English, and have read and understand every question and instruction on this affidavit, as well as my answer to every question.
- 1.b.** The interpreter named in **Part 9.** has also read to me every question and instruction on this affidavit, as well as my answer to every question, in

a language in which I am fluent. I understand every question and instruction on this affidavit as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above.

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

2. I have requested the services of and consented to _____, who is is not an attorney or accredited representative, preparing this affidavit for me.

Sponsor's Contact Information

3. Sponsor's Daytime Telephone Number

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

5. Sponsor's Email Address (if any)

Sponsor'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 benefit that I seek.

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

I certify, under penalty of perjury, that the information in my affidavit and any document submitted with my affidavit were provided by me and are 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;
D. Each of the Federal income tax returns submitted in support of this affidavit are true copies, or are unaltered tax transcripts, of the tax returns I filed with the U.S. Internal Revenue Service; and
E. I authorize the Social Security Administration to release information about me in its records to the Department of State and U.S. Citizenship and Immigration Services.

Sponsor's Signature

- 6.a. Sponsor's Signature

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

NOTE TO ALL SPONSOR'S: If you do not completely fill out this request or fail to submit required documents listed in the instructions, USCIS may deny your request.

Part 9. Interpreter's Contact Information, Certification, 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)

Part 9. Interpreter's Contact Information, Certification, and Signature (continued)

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. Province

3.g. Postal Code

3.h. Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Email Address (if any)

Interpreter's Certification

I certify 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 **sponsor** every question and instruction on this **affidavit**, as well as the answer to every question, in the language provided in **Part 8., Item Number 1.b.**; and

The **sponsor** has informed me that he or she understands every instruction and question on the **affidavit**, as well as the answer to every question, and the **sponsor verified** the accuracy of every answer.

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 Affidavit, If Other than the Sponsor

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

Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Affidavit, If Other than the Sponsor (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 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 whose representation extends beyond preparation of this affidavit, you must submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this affidavit.

Preparer's Certification

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

Preparer's Signature

- 8.a. Preparer's Signature
- 8.b. Date of Signature (mm/dd/yyyy)

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Part 11. Additional Information

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. 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 each sheet.

Your Full Name

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

2. A-Number (if any)
▶ A-

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d.

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d.

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d.

6.a. Sponsor's Signature

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

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