

Contract Between Sponsor and Household Member

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-864A OMB No. 1615-0075 Expires 03/31/2020

For Government Use Only						
This Form I-864A relates to a household member who:						
☐ IS the intending ☐ IS NOT the Reviewed By: immigrant intending						
	immigrant Location:		ocation:	Date (mm/dd/yyyy):		
TO DE COMPLETEU DY AM			Attorney State (if applicable)	e Bar I	Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
► START HERE - Type or print in black ink.						
Part 1. Information About You (the Household Member)				Physical Address		
Full Name				4.a.	Street Numb and Name	er
1.a. Family Name				4.b.	Apt.	Ste. Flr.
	(Last Name)			4.c.	City or Town	n
1.b.	Given Name (First Name)			4.d.	State	4.e. ZIP Code
1.c.	Middle Name			4.f.	Province	
Mailing Address					Postal Code	
2.a. In Care Of Name					Country	
				4	Country	
2.b.	Street Number and Name			Other Information		
2.c.	☐ Apt. ☐ Ste. ☐ Flr. ☐					
2.d.	City or Town			5. Place	e of Birth	i (mm/dd/yyyy)
2.e.	State 2.f.	ZIP Code			City or Town	n
2.g.	Province					
2.h.	Postal Code			6.b.	State or Prov	vince
2.i.	Country				Country	
				6.c.	Country	
3. Is your current mailing address the same as your physical address? Yes No			_	7.	U.S. Social S	Security Number (if any)
If you answered "No" to Item Number 3. , provide your physical address.			our	8.	USCIS Onlin	ne Account Number (if any)