



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 01/31/2026

For Government Use Only

This Form I-864A relates to a household member who:

☐ IS the intending
immigrant

☐ IS NOT the
intending
immigrant

Reviewed By: _____

Location: _____ Date (mm/dd/yyyy): _____

To be completed by an
attorney or accredited
representative (if any).

☐ Select this box if
Form G-28 or
G-28I is attached.

Attorney State Bar Number
(if applicable)

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)

Full Name

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

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.

Physical Address

4.a. Street Number and Name

4.b. ☐ Apt. ☐ Ste. ☐ Flr.

4.c. City or Town

4.d. State 4.e. ZIP Code

4.f. Province

4.g. Postal Code

4.h. Country

Other Information

5. Date of Birth (mm/dd/yyyy)

Place of Birth

6.a. City or Town

6.b. State or Province

6.c. Country

7. U.S. Social Security Number (if any)

8. USCIS Online Account Number (if any)