

## Request for Exemption for Intending Immigrant's Affidavit of Support

USCIS Form I-864W

OMB No. 1615-0075 Expires 09/30/2021

## Department of Homeland Security

U.S. Citizenship and Immigration Services

For Government Use Only			
This Form I-864W:			
□ DOES NOT MEET □ MEETS the the requirements of requirements of exemption	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 (if applicable)	Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
► START HERE - Type or print in black ink.			
Part 1. Information About You or Your Adopted Child (Intending Immigrant)  Physical Address			
	4.a.	Street Numb and Name	er
Name of Requestor	4.b.	Apt.	Ste. Flr.
1.a. Family Name (Last Name)			
1.b. Given Name	4.c.	City or Tow	n
(First Name)  1.c. Middle Name	4.d.	State	4.e. ZIP Code
1.c. Middle Name	4.f.	Province	
Mailing Address	4.g.	Postal Code	
2.a. In Care Of Name	4.h.	Country	
2.b. Street Number and Name			
2.c.	Ot Ot	her Informa	tion
	5.	Date of Birth	n (mm/dd/yyyy)
2.d. City or Town	6.	City or Tow	n of Birth
2.e. State 2.f. ZIP Code			
2.g. Province	7.	State or Prov	vince of Birth (if applicable)
2.h. Postal Code			
2.i. Country	8.	Country of E	Birth
		A.E Di-s	- i - N - l - (A N - l - )
3. Is your current mailing address the same as you	r physical	Allen Kegisi	ration Number (A-Number)  • A-
address? Yes No		USCIS Onli	ne Account Number (if any)
If you answered "No" to Item Number 3., prov	ide your	)	> Count (value (ii aliy)
physical address.	11.	U.S. Social S	Security Number (Required)
			<b>▶</b>