START HERE - Please type	For USCIS Use Only					
Part 1. Information about y	Returned	Receipt				
all three pages of this for						
Family Name	Given Name		Middle Name			
Address - C/O	<u> </u>			<u> </u>	Resubmitted	
Street Number and Name				Apt. #		
City		State or Province			Reloc Sent	
Country		Zip/Postal Code				
Date of Birth (mm/dd/yyyy) Country of Birth		Country of Citizenship		Reloc Rec'd		
U.S. Social Security # (If any)		A# (If any)	-			
Telephone Number		E-Mail Add	ress (If anv)			
()			(-55)		Applicant	
Part 2. Processing Informa	tion.				Interviewed	
Date you became a permanent resident	mm/dd/yyy	vy)				
Since you were admitted to the United S	States as a i	nermanent resi	ident have	you been absent for a	A.C. Divi	
period of six months or longer? No	-		-	e/arrival dates of all	Action Block	
·		absences.				
		on penalties in		tions before nited States when you		
				elow and also sign		
		opriate places	(Signature o	of Applicant on Pages		
2 and 3) of I desire to declare my intention to become		of the United	States Lo	ertify under nenalty		
of perjury under the laws of the United						
submitted with it is all true and correct.						
that U.S. Citizenship and Immigration S seeking.	services ne	eds to determi	ne eligibilit	y for the benefit I am		
Signature			Date			
Part 4. Signature of person	nronori	na form i	f other t	han ahaya		
(Sign below.)	prepari	ng iorm, i	i other t	nan above.		
I declare that I prepared this application information of which I have any knowle		est of the abo	ve person, a	and it is based on all		
Signature			Date			
Print Your Name					T. D. C.	
Firm Name						ompleted by presentative, if any
					Fill in box if Grepresent the a	-28 is attached to
Firm Address					ATTY State License	
Telephone Number		E-Mail Add	ress (If any)			
()						

Family Name	Given Name		Middle Name	
Address - C/O				-
Street Number and Name			Apt. #	Affix
City State or		State or Provin	ce	- _ Photograph
Country			Zip/Postal Code	- I notograph
Date of Birth (mm/dd/yyyy) Country of Birth			Country of Citizenship	Here
U.S. Social Security # (If any)	1	A# (If any)		-
Telephone Number	1	E-Mail Addres	s (If any)	-
dmission.	C	Jinica States	pursuant to such	applied below.
hereby declare my intention certify that the photographs of me and were signed by me.	in good faith to becaffixed to the origin	come a citize	n of the United States and	applied below.
hereby declare my intention certify that the photographs	in good faith to becaffixed to the origin	come a citizernal and duplice	n of the United States and cate hereof are a likeness intentions I have	applied below.
hereby declare my intention certify that the photographs of me and were signed by me. do swear (or affirm) that the expressed in this declaration of knowledge and belief.	in good faith to becaffixed to the origin	come a citizernal and duplice	n of the United States and cate hereof are a likeness intentions I have	applied below.
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Family Name	Given	Name	Middle Name	
Address - C/O				
Street Number and Name			Apt.#	Affix
City		State or Prov	ince	
Country			Zip/Postal Code	Photograph
Date of Birth (mm/dd/yyyy) Cor	untry of Birth		Country of Citizenship	Here
U.S. Social Security # (If any)		A# (If any)		
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lmission.	w residing in the	e United State	o the United States as a s pursuant to such	Not valid unless DHS Seal applied below.
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Imission. nereby declare my intention in the pertify that the photographs at the and were signed by me. It is swear (or affirm) that the suppressed in this declaration of nowledge and belief.	n good faith to be ffixed to the original statements I have	pecome a citiz ginal and dupl e made and th	en of the United States and icate hereof are a likeness e intentions I have re true to the best of my	