

Contract Between Sponsor and Household Member

USCIS Form I-864A

Department of Homeland Security U.S. Citizenship and Immigration Services OMB No. 1615-0075 Expires 10/31/2027

For Government Use Only This Form I-864A relates to a household member who: ☐ **IS NOT** the \square **IS** the intending Reviewed By: immigrant intending Date (mm/dd/yyyy): Location: immigrant Select this box if **Attorney State Bar Number Attorney or Accredited Representative** To be completed by an Form G-28 or (if applicable) USCIS Online Account Number (if any) Attorney or Accredited G-28I is attached. Representative (if any). ► START HERE - Type or print in black ink. Part 1. Information About You (the Household Member) Full Name Family Name (Last Name) Given Name (First Name) 1. Middle Name (if applicable) **Mailing Address** (USPS ZIP Code Lookup) 2. In Care Of Name (if any) Street Number and Name Apt. Ste. Flr. Number ZIP Code City or Town State Province Postal Code Country Yes No 3. Is your current mailing address the same as your physical address? If you answered "No" to **Item Number 3.**, provide your physical address.

4.

Street Number and Name			Apt. Ste. Flr.	. Number
City or Town			State	ZIP Code
Province	Postal Code	Country		

Par	Part 1. Information About You (the Household Member) (continued)	
Oth	Other Information	
5. 8.	5. Date of Birth (mm/dd/yyyy) 6. Country of Birth 7. U.S. Social Security	Number (if any)
Par	Part 2. Your (the Household Member's) Relationship to the Sponsor	
Sele	Select Item Number 1., 2., or 3.	
1. 2. 3.	2. I am the intending immigrant and also a member of the sponsor's household.	s his/her:
Par	Part 3. Your (the Household Member's) Employment and Income	
I am	I am currently:	
1.	1. Employed as a/an	
2.	2. Name of Employer Number 1	
3.	3. Name of Employer Number 2 (if applicable)	
4.	4. Self employed as a/an	
5.	5. Retired Since (mm/dd/yyyy)	
6.	6. Unemployed since (mm/dd/yyyy)	
7.	7. My current individual annual income is: \$	

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Pai	rt 4. Your (the Household Member's) Federal Income Tax Information and As	sets					
1.	Have you filed a Federal income tax return for each of the three most recent tax years?	Yes No					
NO.	TE: You MUST attach a photocopy or transcript of your Federal income tax return for only the mos	t recent tax year.					
-	total income (adjusted gross income on IRS Form 1040EZ) as reported on my Federal income tax ret is was:	urns for the most recent three					
	Tax Year Total Income						
2.	Most Recent \$						
	2nd Most Recent \$						
	3rd Most Recent \$						
Му	assets (complete only if necessary).						
3.	Enter the balance of all cash, savings, and checking accounts.	\$					
4.	Enter the net cash value of real-estate holdings. (Net value means assessed value minus mortgage debt.) \$	\$					
5.	Enter the cash value of all stocks, bonds, certificates of deposit, and other assets not listed on Item Numbers 3. - 4.	\$					
6.	Add together Item Numbers 3 5. and enter the number here.	\$					
Pai	rt 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certific	ation, and Signature					
NO'	ΓΕ: Read the Penalties section of the Form I-864A Instructions before completing this part.	,					
		ousehold member's promise					
	apport the following intending immigrants and to be jointly and severally liable for any obligations I	•					
	port, promise to complete and file an affidavit of support on behalf of the following named intending						
1.	Intending Immigrant Number 1						
	Family Name (Last Name) Given Name (First Name) Mide	dle Name (if applicable)					
	Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any) USCIS Online	Account Number (if any)					
2.	Intending Immigrant Number 2						
	Family Name (Last Name) Given Name (First Name) Mide	dle Name (if applicable)					
	Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any) USCIS Online	Account Number (if any)					
3.	Intending Immigrant Number 3						
	Family Name (Last Name) Given Name (First Name) Mide	dle Name (if applicable)					
	Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any) USCIS Online	Account Number (if any)					

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	t 5. Sponsor's Promise, Statement, Contact Information, Declaration, Certification, and Signature atinued)
4.	Intending Immigrant Number 4
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	Date of Birth (mm/dd/yyyy) Alien Registration Number (A-Number, if any) USCIS Online Account Number (if any)
Spo	nsor's Statement
NOT	E: Select the box for either Item Number 5.a. or 5.b. If applicable, select the box for Item Number 6.
5.a.	I can read and understand English, I and have read and understand every question and instruction on this contract and my answer to every question.
5.b.	The interpreter named in Part 7. read to me every question and instruction on this contract and my answer to every
	question in , a language in which I am fluent, and I understood everything
6.	At my request, the preparer named in Part 8. ,
	me based only upon information I provided or authorized.
Cno	nsor's Contact Information
-	*
7.	Sponsor's Daytime Telephone Number 8. Sponsor's Mobile Telephone Number (if any)
Δ.	
9.	Sponsor's Email Address (if any)
Spo	nsor's Declaration and Certification
Citize to US	es of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. enship and Immigration Services (USCIS) or the U.S. Department of State (DOS) may require that I submit original documents CIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS DOS may need to determine my eligibility for the immigration benefit that I seek.
	nermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records are entities and persons where necessary for the administration and enforcement of U.S. immigration law.
autho	ify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or rized by me, that I reviewed and understand all of the information contained in, and submitted with, my contract and that all of information is complete, true, and correct.
Spo	nsor's Signature
10.	Sponsor's Signature Date of Signature (mm/dd/yyyy)
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NOTE TO ALL SPONSORS: If you do not completely fill out this contract or fail to submit required documents listed in the Instructions, USCIS may deny your contract.

	t 6. Your (the Household tification, and Signature	Member's) Promi	se, State	ment	, Cont	tact Informatio	on, Declaration,	
NOT	E: Read the Penalties section of	f the Form I-864A Instr	uctions bef	ore co	mpletin	ng this part.		
I, TH	E HOUSEHOLD MEMBER				, in c	onsideration of the	e sponsor's promise to co	mplete
and f	ile an affidavit of support on bel	nalf of the above named	lintending	immig	grants.		(Print number of inte	nding
immi	igrants noted in Part 5. Sponsor	's Promise, Statement	, Contact 1	Inforn	nation,	Declaration, Cer	 tification, and Signatur	:e.)
Α.	Promise to provide any and all financial support necessary to assist the sponsor in maintaining the sponsored immigrants at or above the minimum income provided for in the Immigration and Naturalization Act (INA) section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guidelines) during the period in which the affidavit of support is enforceable;							
В.	Agree to be jointly and severall to the sponsored immigrants, to other private entity that provide	any agency of the Fede	eral Govern					
c.	Certify under penalty under the are true copies or unaltered tax						nitted in support of the c	ontract
D.	Consideration where the household member is also the sponsored immigrant: I understand that if I am the sponsored immigrant and a member of the sponsor's household that this promise relates only to my promise to be jointly and severally liable for any obligation owed by the sponsor under the affidavit of support to any of my dependents, to any agency of the Federal Government, to any agency of a state or local government, or to any other private entity that provides means-tested public benefits and to provide any and all financial support necessary to assist the sponsor in maintaining any of my dependents at or above the minimum income provided for in INA section 213A(a)(1)(A) (not less than 125 percent of the Federal Poverty Guideline) during the period which the affidavit of support is enforceable.							
E.	I understand that, if I am related divorce, dissolution, annulment	-	-	-	-	-		by
F.	I authorize the Social Security A Citizenship and Immigration Se		se informati	ion ab	out me	in its records to the	e Department of State an	d U.S.
You	r (the Household Member	's) Statement						
NOT	E: Select the box for either Iter	n Number 1.a. or 1.b.	If applicab	le, sel	ect the l	box for Item Num	ber 2.	
1.a	I can read and understand I answer to every question.	English, and I have read	and under	stand (every q	uestion and instruc	ction on this contract and	my
1.b.	The interpreter named in Pa	art 7. read to me every o	uestion and	l instru	action o	n this contract and	my answer to every ques	tion in
			, a langu	age in	which	I am fluent, and I u	understood everything.	
2.	☐ At my request, the preparer	named in Part 8. ,					, prepared this con	ntract
	for me based only upon inf	ormation I provided or	authorized.	•				
You	r (the Household Member	's) Contact Inform	ation					
3.	Your (the Household Member's) Daytime Telephone N	lumber	4.		the Household Mer er (if any)	mber's) Mobile Telephon	e
5.	Your (the Household Member's) Email Address (if any	7)					

Part 6. Your (the Household Member's) Promise, Statement, Contact Information, Declaration, Certification, and Signature (continued)

Your (the Household Member's) Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or DOS may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this contract, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I certify, under penalty of perjury, that all of the information in my contract and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my contract and that all of this information is complete, true, and correct.

Yo	our (the Household Member's) Signature							
6.	Your (the Household Member's) Printed Name							
7.	Your (the Household Member's) Signature			Date of Signature (mm/dd/yyyy)				
-	• I can (intersection from our s) signature			2 ato 31 22gratuse (min ata jijiji)				
	NOTE TO ALL HOUSEHOLD MEMBERS: If you do not completely fill out this contract or fail to submit required documents isted in the Instructions, USCIS may deny your contract.							
Pa	rt 7. Interpreter's Contact Information, Certifica	ation	, and Signature					
In	terpreter's Full Name							
1.	Interpreter's Family Name (Last Name)	Inter	preter's Given Name (First	Name)				
2	Language Design of Control Name (Control							
2.	Interpreter's Business or Organization Name (if any)							
In	terpreter's Contact Information							
3.	Interpreter's Daytime Telephone Number	4.	Interpreter's Mobile Telep	phone Number (if any)				
_	Intermedials Essail Address (if any)							
э.	interpreter's cinan Address (ii any)							
5.	Interpreter's Email Address (if any)							

Pa	art 7. Interpreter's Contact Information, Certification, and Signature (continued)
In	terpreter's Certification
que lang	rtify, under penalty of perjury, that: that I am fluent in English and
In	terpreter's Signature
6.	Interpreter's Signature Date of Signature (mm/dd/yyyy)
	art 8. Contact Information, Declaration, and Signature of the Person Preparing this Contract, if Other nan the Sponsor or Household Member
Pr	eparer's Full Name
1.	Preparer's Family Name (Last Name) Preparer's Given Name (First Name)
2.	Preparer's Business or Organization Name (if any)
Pr	eparer's Contact Information
3.	Preparer's Daytime Telephone Number 4. Preparer's Mobile Telephone Number (if any)
5.	Preparer's Email Address (if any)
Pr	eparer's Certification and Signature
con refl	ertify, under penalty of perjury, that I prepared this contract for the sponsor and household member at their request and with express sent and that all of the responses and information contained in and submitted with the contract are complete, true, and correct and ects only information provided by the sponsor and household member. The sponsor and household member reviewed the conses and information and informed me that they understand the responses and information in or submitted with the contract.
6.	Preparer's Signature Date of Signature (mm/dd/yyyy)

D	A 1 1 1 4	· T	. P	
Part 9.	Addit	ionai ii	niorma	ation

If you need extra space to provide any additional information within this contract, 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 contract or attach a separate sheet of paper. Type or print 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.

1.	Family Name (La	st Name)	Given I	Name (First Name)	Middle Name (if applicable))
2.	A-Number (if any	y) ► A-				
3.	Page Number	Part Number	Item Number			
4.	Page Number	Part Number	Item Number			
5.	Page Number	Part Number	Item Number			
6.	Page Number	Part Number	Item Number			