I-134 Continuation Sheet - Affidavit of Support

Family (Last) Name	Given Name (First Name)
Middle Name	A-Number (if any)
Page Number F	Part Number Item Number
Dependent(s) Information	
Dependent Family Name (Last Name)	Dependent Family Name (Last Name)
Given Name (First Name) Middle Name	Given Name (First Name) Middle Name
Relationship to Sponsor Date of Birth (mm/dd/yyyy)	Relationship to Sponsor Date of Birth (mm/dd/yyyy)
Degree of Support Dependency Wholly Dependent Partially Depen	Degree of Support Dependency
Dependent Family Name (Last Name)	Dependent Family Name (Last Name)
Given Name (First Name)	Given Name (First Name)
Middle Name	Middle Name
Relationship to Sponsor	Relationship to Sponsor
Date of Birth (mm/dd/yyyy) Degree of Support Dependency Wholly Dependent Partially Dependency	Date of Birth (mm/dd/yyyy) Degree of Support Dependency Mholly Dependent Partially Dependent
Signature	Date