

I-134 Continuation Sheet - Affidavit of Support

Family (Last) Name

Given Name (First Name)

Middle Name

A-Number (if any)

Page Number

Part Number

Item Number

Dependent(s) Information

Dependent

Family Name (Last Name)

Given Name (First Name)

Middle Name

Relationship to Sponsor

Date of Birth (mm/dd/yyyy)

Degree of Support Dependency

☐

Wholly Dependent

☐

Partially Dependent

Dependent

Family Name (Last Name)

Given Name (First Name)

Middle Name

Relationship to Sponsor

Date of Birth (mm/dd/yyyy)

Degree of Support Dependency

☐

Wholly Dependent

☐

Partially Dependent

Dependent

Family Name (Last Name)

Given Name (First Name)

Middle Name

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Wholly Dependent

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Given Name (First Name)

Middle Name

Relationship to Sponsor

Date of Birth (mm/dd/yyyy)

Degree of Support Dependency

☐

Wholly Dependent

☐

Partially Dependent

Signature _____ Date _____