

Request for the Return of Original Documents

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form G-884OMB No. 1615-0100
Expires 09/30/2018

| Fo USC Us On | CIS se ly | File No Date | | F | Remarks | 3 | | |
|---------------------------|--------------------------|--|----------|-----------------------------|-----------|---------------|----------|------------------------|
| | | T HERE - Type or print in black ink. | | | | | | |
| Part | 1. | Information About You (Person rec | questing | the return of original | docum | ents) |) | |
| We w the for proces | ill au rm yo ssing | | e reques | ted once we no longer need | l them. I | Pleas | e refer | to the instructions of |
| | | Full Name | | | | | | |
| F | amily | y Name (Last Name) | Giver | Name (First Name) | | $\neg \sqcap$ | iddle 1 | Name |
| L | | | | | | J L | | |
| | Mailing Address | | | | | | | |
| S | treet | Number and Name | | | Apt. | Ste. | Flr. | Number |
| | | | | | | | | |
| C | ity o | r Town | | | State | | | ZIP Code |
| | | | | | | | | |
| 3. A | lien | Registration Number (A-Number) (if any) | 4. City | /Town/Village of Birth | | | | |
| • | • A | A- | | | | | | |
| 5. C | Count | ry of Birth | 6. | Date of Birth (mm/dd/yy | yy) | 7. | Dayti | ime Telephone Number |
| | | ic information about desired document(s) or certificate, etc.) | record(s |) (For example, marriage li | cense, bi | irth c | ertifica | ate, |
| _ | | | | | | | | |
| _ | | | | | | | | |
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Form G-884 09/19/16 N Page 1 of 3

| Part 2. Data for Identification of Personal Record | | | | | | | | |
|--|---|--|-------------|--|--|--|--|--|
| 1. | Subject's Full Name | | | | | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle Name | | | | | |
| | | | | | | | | |
| 2. | Other Names Used (if any) | | | | | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle Name | | | | | |
| | | | | | | | | |
| 3. | Date of Birth (mm/dd/yyyy) | | | | | | | |
| | | | | | | | | |
| 4. | Place of Birth | | | | | | | |
| | City or Town | State or Province | | | | | | |
| | | | | | | | | |
| | Country | | | | | | | |
| | | | | | | | | |
| Entry Into the United States | | | | | | | | |
| 5. | Date of Entry (mm/dd/yyyy) 6. Port-of-Entr | у | | | | | | |
| | | | | | | | | |
| 7. | Type of Entry (for example, visitor, student, etc.) | 8. A-Number (if any) | | | | | | |
| | | ► A- | | | | | | |
| ЦS | . Citizenship Information | | | | | | | |
| | Name on Certificate of Naturalization | | | | | | | |
| • | Family Name (Last Name) | Given Name (First Name) | Middle Name | | | | | |
| | | | | | | | | |
| 10. | Certificate of Naturalization Number | 11. Certificate of Naturalization Date | | | | | | |
| | | (mm/dd/yyyy) | | | | | | |
| 12. | Name on Certificate of Citizenship | | | | | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle Name | | | | | |
| | | | | | | | | |
| 13. | Certificate of Citizenship Number | 14. Certificate of Citizenship Da | te | | | | | |
| | 1 | (mm/dd/yyyy) | | | | | | |
| 15. | Naturalization Court/USCIS Office and Location | | | | | | | |
| | | | | | | | | |
| 16. | Verification of Requester's Identity | | | | | | | |
| | ☐ In Person With Identification ☐ Legal Photo | copies | | | | | | |

Form G-884 09/19/16 N Page 2 of 3

| Pa | rt 3. Signature of Requester - Affidavit of | f Identity | | |
|----------|---|--|-------------|------------------------------|
| NO | TE: Read the Penalties section of the Form G-884 In | structions before completing this part. | | |
| and | rtify, under penalty of perjury under the laws of the U correct. I authorize the release of any information fr ond to my request. | | | |
| 1. | I swear Affirm that I am the person name statements on this form, I may be punished by fine of | d in Part 1. on Page 1 of this form. I under r imprisonment (18 U.S.C. 1101). | stand th | at if I willfully make false |
| 2. | Print Your Full Name | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle | e Name |
| | | | | |
| 3. | Signature (Your signature must be notarized. Do not s | ign until you are before the Certifying Official) | 4. | Date (mm/dd/yyyy) |
| = | | | | |
| Affi | hereby certify that the requester named in Part 1. or davit of Identity. | Page 1 of this form personally appeared be | fore me | and executed the |
| 5. | Signature of USCIS Official (sign in ink) | | ٦ | |
| | | | | |
| 6. | Title | | 7. □ | Date (mm/dd/yyyy) |
| | | | | |
| 8. | Printed Name of USCIS Official | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle | e Name |
| | | | | |
| | tifying Official | | | |
| | hereby certify that the requester named in Part 1. or davit of Identity. | Page 1 of this form personally appeared be | fore me | and executed the |
| 9. | Printed Name of Certifying Official | | | |
| | Family Name (Last Name) | Given Name (First Name) | Middle | e Name |
| | | | | |
| 10. | Signature of Certifying Official (sign in ink) | | | |
| | | | | |
| 11. | In and for the: | | 12. | Date (mm/dd/yyyy) |
| | | | | |
| | Circon III | ador my hand and official scal | _ | |
| | Given ui | nder my hand and official seal | | 1 |
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Form G-884 09/19/16 N Page 3 of 3