

# THE UNITED STATES OF AMERICA

## I-797A | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY  
U.S. CITIZENSHIP AND IMMIGRATION SERVICES



Receipt Number WAC2128650235		Case Type I-129 - PETITION FOR A NONIMMIGRANT WORKER
Received Date 07/15/2021	Priority Date	Petitioner OPTUM SERVICES INC.
Notice Date 08/24/2021	Page 1 of 2	Beneficiary SRIVASTAVA, HIMANSHU SUSHIL

OPTUM SERVICES INC  
c/o INGRID BARNES  
BERRY APPLEMAN & LEIDEN LLP  
2400 N GLENVILLE DR BLDG A STE 100  
RICHARDSON TX 75082

**Notice Type:** Approval Notice  
**Class:** L1B  
**Valid from** 09/01/2021 to 05/15/2023

The above petition and accompanying request for an extension of stay have been approved. The status of the named beneficiary(ies) in this classification is valid as indicated on the I-94 attached below. The beneficiary(ies) can work for the petitioner pursuant to this approval notice, but only as detailed in the petition and during the petition validity period indicated above, unless otherwise authorized by law. Changes in employment or training may require you to file a new Form I-129, Petition for a Nonimmigrant Worker.

The dates in the I-94 attached below might not be the same dates as the petition validity dates above because the I-94 below may contain a grace period of up to 10 days before and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-1S, P-2, P-2S, P-3, P-3S, TN-1, and TN-2. An I-94 for H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. However, the beneficiary(ies) may not work during such grace periods, unless otherwise authorized by law. The decision to grant a grace period and the length of the granted grace period is discretionary, final, and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the beneficiary(ies). The beneficiary(ies) should keep the right part (the I-94 portion) with his or her other Forms I-94, Arrival-Departure Record. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted an extension of stay who leaves the U.S. and is not visa-exempt must normally obtain a new visa before returning. The left part can be used when applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry based on this approval notice at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, Application for Action on an Approved Application or Petition, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.


The approval of this petition does not guarantee that the beneficiary(ies) will be found to be eligible for a visa, for admission to the United States (if traveling abroad and seeking re-admission), or for a subsequent extension of stay, change of status, or adjustment of status.

**THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.**

Please see the additional information on the back. You will be notified separately about any other cases you filed.

California Service Center  
U. S. CITIZENSHIP & IMMIGRATION SVC.  
P.O. Box 30111  
Laguna Niguel CA 92607-0111

USCIS Contact Center: [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter)



Detach This Half for Personal Records

**Receipt#** WAC2128650235

**I-94#** 580035574 A2

**NAME** SRIVASTAVA, HIMANSHU SUSHIL

**CLASS** L1B

**VALID FROM** 09/01/2021 **UNTIL** 05/15/2023

**PETITIONER**

OPTUM SERVICES INC.  
9900 BREN ROAD EAST MN008  
MINNETONKA MN 55343

580035574 A2

**Receipt Number** WAC2128650235

**US Citizenship and Immigration Services**

**I94 Departure Record**

**Petitioner:** OPTUM SERVICES INC

14. Family Name SRIVASTAVA	
15. First (Given) Name HIMANSHU	16. Date of Birth 05/07/1991
17. Country of Citizenship INDIA	



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The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at [www.sba.gov/ombudsman](http://www.sba.gov/ombudsman) or phone 202-205-2417 or fax 202-481-5719.

**NOTICE:** Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

California Service Center  
U. S. CITIZENSHIP & IMMIGRATION SVC  
P.O. Box 30111  
Laguna Niguel CA 92607-0111  
Customer Service Telephone: 800-375-5283



PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

Detach This Half for Personal Records

Receipt Number  
**INTENTIONALLY LEFT BLANK**  
I-94#  
**INTENTIONALLY LEFT BLANK**  
NAME  
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CLASS  
**INTENTIONALLY LEFT BLANK**  
VALID FROM UNTIL  
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PETITIONER  
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Receipt Number  
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US Citizenship and Immigration Services  
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I-94 Departure Record  
Petitioner:  
**INTENTIONALLY LEFT BLANK**  
14. Family Name  
**INTENTIONALLY LEFT BLANK**  
15. First (Given) Name  
**INTENTIONALLY LEFT BLANK**  
16. Date of Birth  
**INTENTIONALLY LEFT BLANK**  
17. Country of Citizenship  
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