Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

- **1.a.** I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.
- 1.b. I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

itity

2.b. Date of Signature (mm/dd/yyyy)

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a.	Signature of Attorney or Accredited Representative				
1.b.	Date of Signature (mm/dd/yyyy)				
2.a.	Signature of Law Student or Law Graduate				
2.b.	Date of Signature (mm/dd/yyyy)				

Par		on penalties in the Form instructions before completing or Refugee Travel Document, you must be in the United States			
1.a.	I certify, under penalty of perjury under the laws of the United States of America, that this application and the evidence submitted with it is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking. Signature of Applicant	 1.b. Date of Signature (mm/dd/yyyy) ► 2. Daytime Phone Number (469) 712 - 914 NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, your application may be denied. 			
Par	rt 9. Information About Person Who Prepared	This Application, If Other Than the Applicant			
submas Atappli Preprovi	TE: If you are an attorney or representative, you must hit a completed Form G-28, Notice of Entry of Appearance storney or Accredited Representative, along with this cation. **Parer's Full Name** ide the following information concerning the preparer: Preparer's Family Name (Last Name) Macias	Preparer's Contact Information 4. Preparer's Daytime Phone Number Extension (
1.b. 2.	Preparer's Given Name (First Name) Maria Preparer's Business or Organization Name Macias Law Group PLLC	Declaration To be completed by all preparers, including attorneys and authorized representatives: I declare that I prepared this be request at the request of the applicant, that it is based on al information of which I have knowledge, and that the information is true to the best of my knowledge.			
Pre	parer's Mailing Address	6.a. Signature			
3.b. 3.c. 3.d. 3.f. 3.g.	Street Number and Name PO BOX 302 Apt. Ste. Flr. City or Town Lewisville State TX 3.e. ZIP Code 75067 Postal Code Province Country United States	6.b. Date of Signature (mm/dd/yyyy) ► NOTE: If you require more space to provide any additional information, use a separate sheet of paper. You must include your Name and A-Number on the top of each sheet.			

Part 10. Applicant's Statement, Contact Information, Certification, and Signature (continued)

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

- **1.a.** X I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b. The interpreter named in Part 11. read to me every question and instruction on this application and my answer to every question in

 a language in which I am fluent, and I understood everything.
- 2. \overline{X} At my request, the preparer named in **Part 12.**,

Maria Eugenia Macias

prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

- 3. Applicant's Daytime Telephone Number (469) 712-9145
- 4. Applicant's Mobile Telephone Number (if any) (469) 712-9145
- 5. Applicant's Email Address (if any)

 ososeweddingcakes@gmail.com

Applicant's Certification

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

I understand that if I am a male who is 18 to 26 years of age, submitting this application will automatically register me with the Selective Service System as required by the Military Selective Service Act.

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

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application 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 application and that all of this information is complete, true, and correct.

Applicant's Signature			
6.a. Applicant's Signature (sign in ink)			
6.b. Date of Signature (mm/dd/yyyy)			

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 11. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

	4
1.a.	Interpreter's Family Name (Last Name)
1.b.	Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)

Part 7. Applicant's Statement, Contact Information, Declaration, Certification, and **Signature** (continued)

Applicant's Contact Information

3.	Applicant's Daytime Telephone Number
	4697129145
4.	Applicant's Mobile Telephone Number (if any)
	4697129145
5.	Applicant's Email Address (if any)
	ososeweddingcakes@gmail.com

Applicant's Certification

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

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

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application 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 application and that all of this information is complete, true, and correct.

Applicant's Signature Applicant's Signature (sign in ink)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the instructions, USCIS may deny your application.

6.b. Date of Signature (mm/dd/yyyy)

Part 8. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Inte	erpreter's Full Name			
1.a.	Interpreter's Family Name (Last Name)			
1.b.	Interpreter's Given Name (First Name)			
2. Interpreter's Business or Organization Name (if any)				
Inte	erpreter's Mailing Address			
3.a.	Street Number and Name			
3.b.	Apt. Ste. FIr.			
3.c.	City or Town			
3.d.	State 3.e. ZIP Code			
3.f.	Province			
3.g.	Postal Code			
3.h.	Country			
Inte	erpreter's Contact Information			
4.	Interpreter's Daytime Telephone Number			
5.	Interpreter's Mobile Telephone Number (if any)			
~•	The property of the property of the state of			
6.	Interpreter's Email Address (if any)			
Inte	erpreter's Certification			
I cert	tify, under penalty of perjury, that:			
I am	fluent in English and ,			

which is the same language specified in Part 7., Item Number **1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.

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Part 3. Applicant's Statement, Contact Information, Declaration, Certification, and **Signature**

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application 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 application and that all of this information is complete, true, and correct.

Applicant's Signature			
7.a. →	Applicant's Signature		
7.b.	Date of Signature (mm/dd/yyyy)		
NOTE TO ALL ADDITIONNESS TO 1			

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name			
1.a.	Interpreter's Family Name (Last Name)		
1.b.	Interpreter's Given Name (First Name)		
2.	Interpreter's Business or Organization Name (if any)		

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address				
3.a.	Street Number and Name			
3.b.	Apt. Ste. Flr.			
3.c.	City or Town			
3.d.	State 3.e. ZIP Code			
3.f.	Province			
3.g.	Postal Code			
3.h.	Country			
Inte	erpreter's Contact Information			
4.	Interpreter's Daytime Telephone Number			
5.	Interpreter's Mobile Telephone Number (if any)			
6.	Interpreter's Email Address (if any)			
Inte	erpreter's Certification			
	rify, under penalty of perjury, that:			
which l.b., every answ she u appli	fluent in English and h is the same language specified in Part 3., Item Number and I have read to this applicant in the identified language question and instruction on this application and his or her er to every question. The applicant informed me that he or inderstands every instruction, question, and answer on the cation, including the Applicant's Declaration and ification, and has verified the accuracy of every answer.			
Inte	erpreter's Signature			
7.a.	Interpreter's Signature			
7.b.	Date of Signature (mm/dd/yyyy)			

Part 5. Declarant's Statement, Contact Information, Certification, and Signature (continued)

I certify, under penalty of perjury, that all of the information in my declaration 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 declaration and that all of this information is complete, true, and correct.

De	clarant's Signature				
6.	Declarant's Signature			Date	of Signature (mm/dd/yyyy)
	TE TO ALL DECLARANTS: If you do not completely fill ructions, USCIS may deny your declaration.	out this o	declaration or fail to sub	omit requi	red documents listed in the
Pa	rt 6. Interpreter's Contact Information, Certific	cation,	and Signature		
Prov	vide the following information about the interpreter.				
Int	terpreter's Full Name				
1.	Interpreter's Family Name (Last Name)	In	terpreter's Given Name	(First Nar	ne)
2.	Interpreter's Business or Organization Name (if any)				
Int	terpreter's Mailing Address				
3.	Street Number and Name			Apt. Ste	e. Flr. Number
	City or Town			State	ZIP Code
	Province Postal Code		Country		
Int	terpreter's Contact Information				
4.	Interpreter's Daytime Telephone Number	5.	Interpreter's Mobile T	Celephone	Number (if any)
6.	Interpreter's Email Address (if any)				
Int	terpreter's Certification				
I cei	rtify, under penalty of perjury, that:				
I am	n fluent in English and		which is the	same lang	guage specified in Part 5.,
decl	n B. in Item Number 1., and I have read to this declarant in the laration and his or her answer to every question. The declarant answer on the declaration, including the Declarant's Certific	nt inform	ed me that he or she und	lerstands o	every instruction, question,