Part 1. Basis for filing Affidavit of Support.

1. I, Rahul Ram Gupta	For Government Use Only				
am the sponsor submitting t a. X I am the petitioner. I f b. I filed an alien worker my	This I-864 is from: the Petitioner a Joint Sponsor #				
c. I have an ownership in which filed an alien wo me as my	the Substitute Sponsor				
d. I am the only joint spo	nsor.			5% Owner	
e. I am the first	second of two joint sp	onsors. (Check appro	priate box.)	This I-864:	
f. The original petitioner immigrant's	does not meet the requirements of section 213A.				
Part 2. Information on th	meets the				
2. Last Name Agrawal	requirements of section 213A.				
First Name					
Manisha	Reviewer				
 Mailing Address Street N 456 Laurel St, Apt 	Location				
City State/Province Zip/Postal Code Country				Date (mm/dd/yyyy)	
Mumbai	Mumbai Maharashtra 400 001 India				
4. Country of Citizenship 5. Date of Birth (mm/dd/yyyy) India 11/20/1975				Number of Affidavits of Support in file:	
 Alien Registration Numbe A- 					

Part 3. Information on the immigrant(s) you are sponsoring.

8. X I am sponsoring the principal immigrant named in Part 2 above.

Yes No (Applicable only in cases with two joint sponsors)

9. I am sponsoring the following family members immigrating at the same time or within six months of the principal immigrant named in **Part 2** above. Do not include any relative listed on a separate visa petition.

Name	Relationship to Sponsored Immigrant	Date of Birth (mm/dd/yyyy)	A-Number (if any)	U.S.Social Security Number (if any)
a. Jay Agrawal	Son	05/01/2003		
b.				
c.				
d.				
e.				

10. Enter the total number of immigrants you are sponsoring on this form from Part 3, Items 8 and 9.



2

0

Part 4. Information on the Sponsor.

11. Name	Last Name	For Government						
	Gupta	Use Only						
	First Name							
	Rahul	Ram						
12. Mailing Address		me (Include Apartment Num	12273 2228					
C	123 Park Avenu	ue, Apt 45, Ediso	n, NJ 08837					
	City		State or Province					
	Edison		NJ					
	Country		Zip/Postal Code					
	USA		08837					
13. Place of Residence	Street Number and Nat	me (Include Apartment Num	iber)					
(if different from								
mailing address)	City		State or Province					
	-							
	Country		Zip/Postal Code					
14. Telephone Number (I	 Include Area Code or Co	ountry and City Codes)						
(732) 555-1212		an a						
15. Country of Domicile								
USA								
16. Date of Birth (mm/dd/	(איזיאי)							
12/22/1974								
17. Place of Birth (City)		State or Province	Country					
Budd Lake		NJ	USA					
18. U.S. Social Security	Number (Required)							
123-45-6789								
19. Citizenship/Residence	су							
🔀 I am a U.S. citize	X I am a U.S. citizen.							
I am a U.S. national (for joint sponsors only).								
I am a lawful permanent resident. My alien registration number is A-								
If you checked box (b), (c), (d), (e) or (f) in line 1 on Page 1, you must include proof of your citizen, national, or permanent resident status.								
20. Military Service (To I	be completed by pet	itioner sponsors only.)						
	I am currently on active duty in the U.S. armed services. Yes No							

21. Your Household Size - DO NOT COUNT ANYONE TWICE		For Government Use Only
Persons you are sponsoring in this affidavit:		Use Only
a. Enter the number you entered on line 10.	0 2	
Persons NOT sponsored in this affidavit:		
b . Yourself.	1	
c. If you are currently married, enter "1" for your spouse.	0	
d . If you have dependent children, enter the number here.	0 0	
e. If you have any other dependents, enter the number here.	0 0	
f. If you have sponsored any other persons on an I-864 or I-864 EZ who are now lawful permanent residents, enter the number here.	00	
g. OPTIONAL : If you have <u>siblings</u> , <u>parents</u> , <u>or adult children</u> with the same principal residence who are combining their income with yours by submitting Form I-864A, enter the number here.	0 0	
h. Add together lines and enter the number here. Household Size:	0 3	
Part 6. Sponsor's income and employment.		
22. I am currently:		
a. 🗙 Employed as a/an Software Engineer		
Name of Employer #1 (if applicable) Star Inc		
Name of Employer #2 (<i>if applicable</i>)		
b . Self-employed as a/an		
c. Retired from since	•	
(Company Name)	(Date)	
d. Unemployed since	,`	
23. My current individual annual income is: \$ 75,000.00		

Part 5. Sponsor's household size.

24.	M	y current annual house	hold income:			For Government Use Only
	a.	List your income from	line 23 of this for	m.	\$ 75,000.00	
	b. Income you are using from any other person who was counted in your household size, including, in certain conditions, the intending immigrant. (See step-by-step instructions.) Please indicate name, relationship and income.					Household Size =
		Name	Relations	hip	Current Income	Poverty line for year
					\$	is:
					\$	\$
					\$	Ψ
					\$	
	c.	Total Household Inco	me:		\$ 75,000.00	ור
	(T	otal all lines from 24a and	24b. Will be Compa	red	to Poverty Guidelines See Form I-864P.)	
		complete Form I-86 accompanying depe	54A because he/she	e is	does not need to (<i>Name</i>) the intending immigrant and has no	
25.	Fec	leral income tax return	information.			
	X	attached the required pl most recent tax year.	hotocopy or transci	ript	e three most recent tax years. I have of my Federal tax return for only the RS Form 1040EZ) as reported on my	
		Federal tax returns for	the most recent three	ee y		
		Tax Year 2011	(most used)	¢	Total Income 75,000.00	
		2011	(most recent) (2nd most recent)	۵ ۶	70,000.00	
		2009	(3rd most recent)	ۍ ۲	60,000.00	
			(sra most recent)	φ		
		(Optional) I have attac second and third most r		' tra	nscripts of my Federal tax returns for my	

Part	7. Use of assets to supplement income. (Optional)	For Government Use Only	
Fede	ur income, or the total income for you and your household, from tral Poverty Guidelines for your household size, YOU ARE NOT plete this Part. Skip to Part 8.	Household Size =	
26. 1	Vour assets (Optional)	—	
a	• Enter the balance of all savings and checking accounts.	\$ 20,000.00	Poverty line for year
b	• Enter the net cash value of real-estate holdings. (Net means current assessed value minus mortgage debt.)	\$ 0.00	is:
c	 Enter the net cash value of all stocks, bonds, certificates of deposit, and any other assets not already included in lines 26 (a) or (b). 	\$ 3,000.00	\$
d	1/ ALTERNATIVE CONTRACTOR CONTRAC	\$ 23,000.00	
As	esets from Form I-864A, line 12d for (Name of Relative)	\$	
28. A	ssets of the principal sponsored immigrant. (Optional)		7
Т	he principal sponsored immigrant is the person listed in line 2.		
a	• Enter the balance of the sponsored immigrant's savings and checking accounts.	\$ 0.00	
b	• Enter the net cash value of all the sponsored immigrant's real estate holdings. (Net means investment value minus mortgage debt.)	\$ 0.00	
c	• Enter the current cash value of the sponsored immigrant's stocks, bonds, certificates of deposit, and other assets not included on line a or b.	\$ 0.00	
d	. Add together lines 28a, b, and c, and enter the number here.	\$ 0.00	The total value of all assests, line 29, must equal 5 times (3 times for spouses and children of
29. To	otal value of assets.		USCs, or 1 time for orphans to be formally adopted in the U.S.) the
	dd together lines 26d, 27 and 28d and enter the umber here. TOTAL:	\$ 23,000.00	difference between the poverty guidelines and the sponsor's household income, line 24c.

Part 8. Sponsor's Contract.

Please note that, by signing this Form I-864, you agree to assume certain specific obligations under the Immigration and Nationality Act and other Federal laws. The following paragraphs describe those obligations. Please read the following information carefully before you sign the Form I-864. If you do not understand the obligations, you may wish to consult an attorney or accredited representative.

What is the Legal Effect of My Signing a Form I-864?

If you sign a Form I-864 on behalf of any person (called the "intending immigrant") who is applying for an immigrant visa or for adjustment of status to a permanent resident, and that intending immigrant submits the Form I-864 to the U.S. Government with his or her application for an immigrant visa or adjustment of status, under section 213A of the Immigration and Nationality Act these actions create a contract between you and the U.S. Government. The intending immigrant's becoming a permanent resident is the "consideration" for the contract.

Under this contract, you agree that, in deciding whether the intending immigrant can establish that he or she is not inadmissible to the United States as an alien likely to become a public charge, the U.S. Government can consider your income and assets to be available for the support of the intending immigrant.

What If I choose Not to Sign a Form I-864?

You cannot be made to sign a Form 1-864 if you do not want to do so. But if you do not sign the Form I-864, the intending immigrant may not be able to become a permanent resident in the United States.

What Does Signing the Form I-864 Require Me to do?

If an intending immigrant becomes a permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under the Form I-864 terminate, you must:

- -- Provide the intending immigrant any support necessary to maintain him or her at an income that is at least 125 percent of the Federal Poverty Guidelines for his or her household size (100 percent if you are the petitioning sponsor and are on active duty in the U.S. Armed Forces and the person is your husband, wife, unmarried child under 21 years old.)
- -- Notify USCIS of any change in your address, within 30 days of the change, by filing Form I-865.

What Other Consequences Are There?

If an intending immigrant becomes a permanent resident in the United States based on a Form I-864 that you have signed, then until your obligations under the Form I-864 terminate, your income and assets may be considered ("deemed") to be available to that person, in determining whether he or she is eligible for certain Federal means-tested public benefits and also for State or local means-tested public benefits, if the State or local government's rules provide for consideration ("deeming") of your income and assets as available to the person.

This provision does **not** apply to public benefits specified in section 403(c) of the Welfare Reform Act such as, but not limited to, emergency Medicaid, short-term, non-cash emergency relief; services provided under the National School Lunch and Child Nutrition Acts; immunizations and testing and treatment for communicable diseases; and means-tested programs under the Elementary and Secondary Education Act.

Contract continued on following page.

What If I Do Not Fulfill My Obligations?

If you do not provide sufficient support to the person who becomes a permanent resident based on the Form I-864 that you signed, that person may sue you for this support.

If a Federal, State or local agency, or a private agency provides any covered means-tested public benefit to the person who becomes a permanent resident based on the Form I-864 that you signed, the agency may ask you to reimburse them for the amount of the benefits they provided. If you do not make the reimbursement, the agency may sue you for the amount that the agency believes you owe.

If you are sued, and the court enters a judgment against you, the person or agency that sued you may use any legally permitted procedures for enforcing or collecting the judgment. You may also be required to pay the costs of collection, including attorney fees.

If you do not file a properly completed Form I-865 within 30 days of any change of address, USCIS may impose a civil fine for your failing to do so.

When Will These Obligations End?

Your obligations under a Form I-864 will end if the person who becomes a permanent resident based on a Form I-864 that you signed:

- Becomes a U.S. citizen;
- Has worked, or can be credited with, 40 quarters of coverage under the Social Security Act;
- No longer has lawful permanent resident status, and has departed the United States;
- Becomes subject to removal, but applies for and obtains in removal proceedings a new grant of adjustment of status, based on a new affidavit of support, if one is required; or
- Dies.

Note that divorce does not terminate your obligations under this Form I-864.

Your obligations under a Form I-864 also end if you die. Therefore, if you die, your Estate will not be required to take responsibility for the person's support after your death. Your Estate may, however, be responsible for any support that you owed before you died.

30. I. Rahul Ram Gupta

(Print Sponsor's Name)

certify under penalty of perjury under the laws of the United States that:

- a. I know the contents of this affidavit of support that I signed.
- b. All the factual statements in this affidavit of support are true and correct.
- **c.** I have read and I understand each of the obligations described in Part 8, and I agree, freely and without any mental reservation or purpose of evasion, to accept each of those obligations in order to make it possible for the immigrants indicated in Part 3 to become permanent residents of the United States;
- **d.** I agree to submit to the personal jurisdiction of any Federal or State court that has subject matter jurisdiction of a lawsuit against me to enforce my obligations under this Form I-864;
- e. Each of the Federal income tax returns submitted in support of this affidavit are true copies, or are unaltered tax transcripts, of the tax returns I filed with the U.S. Internal Revenue Service; and

Sign on following page.

- **f.** I authorize the Social Security Administration to release information about me in its records to the Department of State and U.S. Citizenship and Immigration Services.
- g. Any and all other evidence submitted is true and correct.
- 31.

(Sponsor's Signature)

(Date-- mm/dd/yyyy)

Part 9. Information on Preparer, if prepared by someone other than the sponsor.

I certify under penalty of perjury under the laws of the United States that I prepared this affidavit of support at the sponsor's request and that this affidavit of support is based on all information of which I have knowledge.

Signature:	Date:
Printed Name:	(mm/dd/yyyy)
Firm Name:	_
Address:	
Telephone Number:	
E-Mail Address :	
Business State ID # (if any)	