Intake Form for I-130

The information elicited in this questionnaire will be used to prepare your immigrant petition on behalf of your relative and, if applicable, your relative’s green card application. Please complete all questions. If a question does not apply to you, please answer “N/A” or “none.” Failing to answer a question could result in delays in preparing your application. This questionnaire is for use by my office only, so feel free to write additional notes if you feel your response to a question needs clarification. Please contact my office if you are having difficulty answering any of the questions.

Please send the completed questionnaire to:

Attention: Edward N. Mangaron, Esq.

By Mail: Law Office of Edward N. Mangaron

P.O. Box 9624, Spring, Texas 77382

By Email: [atty.edward@mangaronlaw.com](mailto:atty.edward@mangaronlaw.com) or [edn.mangaron.esq@gmail.com](mailto:edn.mangaron.esq@gmail.com)

**PART I: INFORMATION ABOUT U.S. CITIZEN OR LAWFUL PERMANENT RESIDENT PETITIONER**

1. FAMILY (LAST) NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MIDDLE NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Marital Status: Single\_\_\_\_\_ Married\_\_\_\_\_ Widowed\_\_\_\_ Divorced\_\_\_\_

3. Other Names Used, Aliases (If married woman, give maiden and surnames of any previous spouses):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. LOCAL ADDRESS c/o:

House No. and Street and Apt. No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date you moved in: \_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_ Business Phone: \_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_

5. PERMANENT ADDRESS (Outside the United States, *i.e.*, parents, family,):

House No. and Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State/Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. BIRTHDATE:

Mo/Day /Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State & Country of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. BIOGRAPHIC INFORMATION:

Ethnicity: \_\_\_ Hispanic or Latino \_\_\_ Not Hispanic or Latino

Race: \_\_\_ White, \_\_\_ Asian, \_\_\_ Black or African American,

\_\_\_ American Indian or Alaska Native, \_\_\_\_ Native Hawaiian or Other Pacific Islander.

Height : Feet \_\_\_\_ Inches \_\_\_\_\_

Weight: Pounds \_\_\_\_\_

Eye Color: Black \_\_\_, Gray \_\_\_ , Maroon \_\_\_, Blue \_\_\_\_, Green \_\_\_\_, Pink \_\_\_\_,

Brown \_\_\_

Hazel \_\_\_ , Unknown/Other \_\_\_\_ .

Hair Color: Bald (No Hair) \_\_\_\_, Brown \_\_\_\_, Sandy \_\_\_\_, Black \_\_\_\_ Gray \_\_\_\_\_,

White \_\_\_\_, Blond \_\_\_\_, Red \_\_\_\_, Unknown/Other \_\_\_\_ .

8.A. Father’s full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Living or deceased? \_\_\_\_\_\_\_\_\_\_ If deceased, please give date: \_\_\_\_\_\_\_\_\_

8. B. Mother’s maiden/full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Living or deceased? \_\_\_\_\_\_\_\_\_\_ If deceased, please give date: \_\_\_\_\_\_\_\_\_

9. Spouse’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of marriage\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of marriage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9a. Spouse’s Color of Eyes: \_\_\_\_\_\_\_ Color of hair: \_\_\_\_\_\_\_\_

Complexion: \_\_\_\_\_\_\_\_ Height: \_\_\_\_\_\_\_\_\_\_\_\_\_

Marks of identification (tattoos birth marks, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have you been married before? (List names, dates, and places of

marriages and divorces):

Marriage(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Divorce(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Alien Registration Number (if any): A\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of lawful permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_

Place of lawful permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you receive your residence (marriage, amnesty, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did you file taxes the last three years? Y or N. If so, please **list years**\_\_\_\_\_\_\_\_

13. Have you ever petitioned for anyone before?

If so, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What was the result? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14. Does your relative need work authorization? \_\_\_\_\_\_\_\_\_\_\_\_

15. Has your relative ever before had work authorization? \_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, where and when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Is your relative physically in the United States? \_\_\_\_\_\_\_\_\_\_\_

If not, in which country would he/she like to process? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16a. LIST THE ADDRESSES OF THE PLACES YOU HAVE LIVED FOR THE

**PAST FIVE YEARS** (use back of page if more space is needed; please start with present and work your way back).

Full Address (Street No. & Name/City/State/Zip Code):Dates (From - To) Month, Day & Year:

16b. Your last address out of the United States (**give full address and dates**):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16c. LIST THE JOBS YOU HAVE HELD FOR THE **PAST FIVE YEARS** (use

back of page if more space is needed; please start with present and work your way back).

For each position provide:

1. Employer’s Name & Full Address
2. Your Occupation/Position
3. Dates you were Employed: (From – To) Month, Day, and Year:

16d. Your last job out of the United States (give **full address and dates of employment**):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART II: INFORMATION ABOUT YOUR ALIEN RELATIVE BENEFICIARY**

17. FAMILY (LAST) NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MIDDLE NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

18. Other Names Used, Aliases (If married woman, give maiden and surnames

of any previous spouses):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

19. Place of Birth (City, Province, & Country): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

20. Father’s full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Living or deceased? \_\_\_\_\_\_\_ If deceased, please give date: \_\_\_\_\_\_\_\_\_\_\_\_\_

21. Mother’s maiden/full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s birth date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current residence: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Living or deceased? \_\_\_\_\_\_ If deceased, please give date: \_\_\_\_\_\_\_\_\_\_\_\_\_

22. Spouse’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of marriage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of marriage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

23. Have you been married before? (List names, dates and places of prior marriages and divorces):

Marriage(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Divorce(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

24. Present Address

House No. & Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date you moved in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_

Telephone: home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

25. Occupation of Spouse: ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

26. Alien Registration Number (if any): A# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

27. Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did you file taxes the last three years? Y or N If so, **list years**\_\_\_\_\_\_\_\_\_\_

28. PASSPORT: \_\_\_\_\_\_\_\_\_\_\_\_\_

Issued by (Country): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have an I-94? Yes, or No

29. Date of Last Entry to the United States: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

30. Place of Last Entry to the United States: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

31. Status at time of entry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

32. Were you inspected by an Immigration Officer? \_\_Yes or No\_\_\_

33. During your stay in the United States, have you ever been out of legal immigration status? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

34. Have you ever been in deportation or exclusion proceedings? Yes/No

If yes, when\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and where\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

35. LIST THE ADDRESSES OF THE PLACES YOU HAVE LIVED FOR THE

**PAST FIVE YEARS** (use back of page if more space is needed; also please start with present address work your way back).

Full Address (Street No. & Name/City/State/Zip Code):Dates (From - To)

Month and Year:

36. Your last address out of the United States (**give full address and dates**):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

37. LIST THE JOBS YOU HAVE HELD FOR THE **PAST FIVE YEARS** (use back of page if more space is needed)

For each position provide:

1. Employer’s Name & Full Address
2. Your Occupation/Position
3. Dates you were Employed: (From – To) Month and Year:

38. Your last job out of the USA (give **full address and dates of employment**):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

39. CHILDREN OF ALIEN RELATIVE (INCLUDING STEP-CHILDREN):

Name Place of Birth Birthdate Current Address

(Male or Female) (City, State, Country)

(Please list additional children and their information on back of form)

40. SIBLINGS OF ALIEN RELATIVE **(List all brothers and sisters)**

Name Place of Birth Birthdate Current Address

(Male or Female) (City, State, Country)

(Please list additional children and their information on back of form)

41. Have you ever been arrested, cited, charged, indicted, fined in the United States or any other country? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

42. Have you ever received any public assistance in the United States or will you receive any public assistance in the future? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

43. In the past 10 years, have you been involved in any form of prostitution or procuring prostitution for anyone else; illegal gambling; illicitly trafficked in any controlled substance? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

44. Have you ever engaged in or conspired in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

45. Do you intend to engage while in the United States in espionage, overthrow the government of the United States, illegally prohibit the export from the United States of goods, technology or sensitive information? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

46. Have you ever been a member or affiliated in any way with the Communist Party or any other totalitarian party? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

47. Did you, between March 23, 1933 to May 8, 1945, in association with the Nazi Government of Germany persecute, directly or indirectly, any person due to race, religion, national origin or political opinion? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

48. Have you ever engaged in genocide, directly or indirectly, killing any person due to race, religion, national origin or political opinion? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

49. Have you ever been charged under section 274C of the Immigration Act for use of fraudulent documents or have you ever lied to obtain a visa or other documents to enter the United States or any other immigration benefit? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

50. Have you ever left the United States to avoid being drafted into the U.S. Armed Forces?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

51. Have you ever been a J nonimmigrant exchange visitor, subject to the two-year foreign residence requirement and not yet complied with that requirement or obtained a waiver?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

52. Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

53. Do you plan to practice polygamy in the United States? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

54. How were you referred to my law office? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IS THE ABOVE INFORMATION TRUE, COMPLETE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE, INFORMATION AND BELIEF AS EVIDENCED BY YOUR SIGNATURE BELOW? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CLIENT SIGNATURE:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_