RMATION: I-131 of the form that contains several pages. le page within a section.														
ry Nav Revision Tertiary Nav Revision	Conditional Logic	Revision [blue plott]	Paper Form Question	Revision	Question	Revision	Sub-Question	Revision	Field Type	Revision Instruction	nal Text Revision Help Text	Revision		equired? Notes
eneficiary		[blue alert]											[blue alert] [b] Provide information about the person who will receive the travel document, parole document, or	
				OO1 (Online only question)		Are you applying on behalf of someone else?		Yes/No		Radio	If you are requesting parole on behalf of someone other than yourself, select yes.		arrival/departure record, if it is approved.	This is a clarifying question creat on the instructions within the fo
	(If 'I am applying for an Advance Parole Document for a person who is outside the I States' - 2.1.f selected)		Part 2, 2.b	2.16	What is the beneficiary's name?		Given name (first name)		Text		Their current legal name is the name on their birth certificate, unless it changed after birth by a legal action such as marriage, adoption, or court order. Do not provide a nickname.			questions 2.16-2.27.
	,	(if OO1 = YES)	Part 2, 2.c Part 2, 2.a	[delete] [delete] 2.17		Have they ever used other names?	Middle name Family name (last name)	Yes/No	Text Text	Radio			x	Simple table CTA= "Add another name"
		(if 2.17 = YES) (if OO1 = YES)	Part 2, 2.d	2.18	What is the beneficiary's date of birth?	Provide all other names the beneficiary has used.	MM/DD/YYYY	Given name (first name) Middle name (if applicable) Family name (last name)	Date	Text Text Text	Include nicknames, aliases, maiden name, and names from all previous marriages.			
Beneficiary's contact information		(if OO1 = YES) (if OO1 = YES) [if OO1 = YES, then show	Part 2, 2.e Part 2, 2.f	2.19 2.20	What is the beneficiary's country of birth? What is the beneficiary's country of citizenship?	What is the beneficiary's country of citizenship or nationality?			Dropdown Dropdown				[blue alert] [b] Provide information about the	
		page] [blue alert]											person who will receive the travel document, parole document, or arrival/departure record, if it is approved.	
			Part 2, 2.g	2.21 2.22 2.24	What is the beneficiary's daytime phone number?	What is the beneficiary's email address? (if any) What is their current mailing address?		In care of name (if any)	Text	Text Text	Provide a 10 to 20-digit not be will use the beneficiary's current mailing address to contact the beneficiary throughout the application process. We may not be able to contact the beneficiary if you do not provide a complete and valid address.	mber. Example: user@domain.com	арргоуса.	
								Country Address line 1 Address line 2 City or town		Dropdown/Text Text Text Text		Street number and name Apartment, suite, unit, or floor		
		(If non-USA use Province and text field) (If non-USA use Postal code and remove help text)						State/Province ZIP code/Postal code		Dropdown/Text Text		Provide a 5 or 9-digit ZIP code.		
		(if 2.25 = NO)	Part 2 Part 2, 2.h Part 2, 2.p	2.25 [delete] [delete] [delete]	What is the beneficiary's physical address?	Is their current mailing address the same as their physical address? What is the beneficiary's current physical address?	In care of name (if any) Country	Yes/No	Text Dropdown/ te Text	Radio	Street number and name		x	
	(If non-USA use Province and text field) (If non-USA use Postal code and remove he	lp	Part 2, 2.p Part 2, 2.i Part 2, 2.j Part 2, 2.k Part 2.l/o	[delete] [delete] [delete] [delete] [delete] [delete] [delete] [delete]			Address line 1 Address line 2 City or town State/Province ZIP code/Postal code		Text Text Dropdown/ te Text	ext	Apartment, suite, unit, or Provide a 5 or 9-digit ZIP o	floor		
Beneficiary's other information	,	[if OO1 = YES, then show page] [blue alert]	·				·				· · · · · · · · · · · · · · · · · · ·		[blue alert] [b] Provide information about the person who will receive the travel document, or	
				2.23		What the beneficiary's A-Number? (if any)				Text	The A-Number is located on the Permanent Resident Card (formerly known as the Alien Registration Card or referred to as the Green Card), and consists of a 7, 8, or 9-digit number.	Provide a 7, 8, or 9-digit number. If their A-Number is fewer than 9 digits, the system will automatically add	arrival/departure record, if it is approved.	Two images shown with question as of A-Number location on card.
											The A-Number may be located on the front or back of the card, depending on when the card was issued.	zero(s) after the "A" and before the first digit so there is a total of 9 digits, for example: A-001234567.		of A-Number location on card.
				2.26 2.27		What is the their Class of Admission (COA)? (if any) What is their most recent Form I-94 Arrival/Departure Record numbe	er? (if	I do not have or know their A-Number.		Checkbox Text Text	Where to find the A-Number (sample A-Number card image) Provide their code of admission as found on your Form I-94, Arrival/Departure Record.			
Biographic information		[blue alert]											[blue alert] [b] Provide information about the person who will receive the travel document, parole document, or	
				3.1		What is their ethnicity?		Hispanic or Latino		Radio	Hispanic or Latino refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.		arrival/departure record, if it is approved.	
				3.2		What is their race?		Not Hispanic or Latino American Indian or Alaska Native		Radio Checkbox	Select all that apply. Your race is different from your ethnicity and should reflect your geographical origins.	[tooltip] American Indian or Alaska Native		
												A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or		
								Asian		Checkbox		America), and who maintains tribal affiliation or community attachment. [tooltip] Asian		
												A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia,		
								Black or African American		Checkbox		China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. [tooltip]		
												A person having origins in any of the black racial groups of Africa.		
								Native Hawaiian or Other Pacific Islander		Checkbox		groups of Africa. [tooltip] Native Hawaiian or Other Pacific Islander		
								White		Checkbox		A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. [tooltip] White		
				3.3		What is their height?		Feet		Dropdown / Text		A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.		
				3.4 3.5		What is their weight? What is the color of their eyes?		Inches Pounds Black Blue		Text Dropdown	Provide a weight between 30 and 699 pounds.			
								Brown Gray Green						
								Hazel Maroon Pink Unknown/Other						
				3.6		What is the color of their hair?		Bald (No hair) Black Blond Brown		Dropdown				
								Gray Red Sandy White						
uest Processing information	(All applicants)	[delete row]	Part 3, 1 Part 3, 2	[delete row]	What is your date of intended departure? What is the expected length of your trip (in days)?	[delete row]	MM/DD/YYYY	Unknown/Other [delete row] [delete row]	Date Text	[delete row]	Provide a numeric value b	[delete row] etween 1 and 10000 [delete row]		
		[blue alert]											[blue alert] [b] Provide information about the person who will receive the travel document, or	
			Part 3, 3.a	4.1	Are you, or any person included in this application, now in exclusion, deportation, removal or rescission proceedings?	If your application is approved, have you been in any exclusion, deport removal, or rescission proceedings?	tation, Yes/No		Radio				arrival/departure record, if it is approved.	
	(If yes)		Part 3, 3.b Part 3, 4.a Part 3, 4.b	[delete row] 4.2A 4.2B	Have you ever before been issued a reentry permit or Refugee Travel Document?	[delete row] Have you EVER before been issued a Reentry Permit or Refugee Trave Document?	If "Yes," what is the name of the DHS office? el Yes/No What was the date issued?	[delete row]	Text Radio Date	[delete row]	Before requesting USCIS issue a new document, <u>check your case status online</u> or call the USCIS Contact Center at 800-375-5283 (TTY 800-767-1833) to determine if your document was returned to USCIS.			www.uscis.gov/casestatus
	(If yes) (If yes)	(if 4.2A = YES) (if 4.3A = YES) (if 4.3A = YES)	Part 3, 4.c	4.2C 4.3A 4.3B 4.3C		Have you ever been issued an Advance Parole Document?	What was the disposition (attached, lost, etc.)?	What was the disposition? Yes/No What was the date issued? What was the disposition?	Text	Radio Date Text	For example: Attached, lost, stolen, damaged/destroyed, still in my possession, etc. For example: Attached, lost, stolen, damaged/destroyed, still in my possession, etc.			
Replacement document		[if 1.1; 1.2; 1.3; 1.4; or 1.5] [if 4.4 = YES]		4.4		Are you requesting a replacement Reentry Permit, Refugee Travel Document, Advance Parole Document, or TPS Travel Authorization Why are you requesting a replacement?		Yes/No My document was issued, but I did not receive it.		Radio Radio	If we determine you did not receive your Reentry Permit, Refugee Travel Document, Advance Parole Document, or TPS Travel Authorization Document because of USCIS or United States Postal Service error, you			
								I received my document, but then it was lost, stolen,	ı, or	Radio	Document, or TPS Travel Authorization Document because of USCIS or United States Postal Service error, you will not have to submit a new fee. If we determine you did not receive the document because of requestor error, you will need to submit a new fee.			
								damaged. I received my document, but it has incorrect information has changed. I received my document, but it has incorrect information has changed.		Radio				
		[if 4.4 = YES] and		4.6		Select all that apply		I received my document, but it has incorrect information because of an error not caused by me (such as a U.S. Citizenship and Immigration Services (USCIS) error). Name).	Radio Checkboxs				
		[if 4.5 = Incorrect information]						A-Number Country of Birth/Citizenship Terms and Conditions Date of Birth						
		[if 4.4 = YES] and		4.6A				Gender Validity Date Photo Provide an explanation of what is incorrect on your c	current	Textbox				
		[if 4.4 = YES] and [if 4.5 = Incorrect information]						document to support your request for a correction.						
Dalinama entetta the M		[if 4.4 = YES]		4.6B		What is the receipt number for the Form I-131 related to the Reentry Permit, Refugee Travel Document, Advance Parole Document, or TPS Authorization Document that you are seeking to replace?	S Travel	To my ourrent U.C. a. ""		Text				
Delivery outside the Your request page 2 [changed to U.S. secondary na		[if 1.1; 1.2; or 1.3]		4.7A 4.7B		Where do you want your Reentry Permit or Refugee Travel Document	ic scrit:	To my current U.S. mailing address that I previously provided To a U.S. Embassy, U.S. Consulate, USCIS internation office, or Department of Homeland Security (DHS) of	nal field	Radio Radio				
		[if 4.7A] [blue alert]						overseas.					[blue alert] [h] Review this address [b] Below is the physical address you	
													previously provided. We will send the notice to this address, so ensure the address is correct or select the option above to enter a new address.	
		[if 4.7B]		4.7B		Where is the U.S Embassy, U.S. Consulate, or the USCIS international office that you want us to notify?	field	City or town		Text			[Address from question 2.3 displayed]	
		[if 4.7B] [if 4.7B] [if 4.8A] [blue alert]		4.8A 4.8B		Where do you want the notification to pick up the travel document be	e sent?	Country To my current U.S. mailing address that I previously To another address		Dropdown Radio Radio			[blue alert]	
													[h] Review this address[b] Below is the physical address you previously provided. We will send the notice to this address, so ensure the	
													address is correct or select the option above to enter a new address.	
		[if 4.8B]		4.9A		Provide the address you want the notification to pick up the travel do to be sent.	ocument	In care of name (if any) Country		Text Dropdown/Text			[Address from question 2.3 displayed]	
								Address line 1 Address line 2 City or town State/Province ZIP code/Postal code Daytime telephone number		Text Text Text Dropdown/Text Text				
Time spent outside		[if 4.7B] [if 4.7B] [if 1.1]		4.9B 4.9C 5.1		Provide the contact information for someone at this address Since becoming a permanent resident of the United States (or during		ZIP code/Postal code Daytime telephone number Email address Less Than 6 Months		rext Text Text Radio		Provide a 10-digit phone number. Example: user@domain.com		
						past 5 years, whichever is less), how much total time have you spent of the United States?		6 Months to 1 Year		Radio				
the U.S.								1 to 2 Years		Radio				
		[if 1.2 or 1.3, then show page	e]	6.1		What country are you a refugee or asylee from? Do you plan to travel to the country where you are a refugee or an as		1 to 2 Years 2 to 3 Years More Than 4 Years Yes/No Provide an explanation.		Radio Radio Radio Dropdown/Text Radio Textbox				

ON INFORMATION: I-131													
<u>Descriptions</u> ion: A section of the form that contains several pages. gation: A single page within a section.													
Secondary Nav Revision Tertiary Nav	Revision Conditional Logic	Revision	Paper Form Question	Revision	Question	Revision	Sub-Question	Revision	Field Type Revision Instruction	nal Text Revision Help Text	Revision	Alert Revision	Required? Notes
		[if 6.3a = YES]		6.3b		Since you were admitted to the United States as a refugee or granted as	ylee	Provide an explanation. Yes/No	Textbox Radio				
		[if 6.3b = YES]		6.3c		status, have you EVER applied for and/or obtained a national passport, passport renewal, or entry permit from the country? Since you were admitted to the United States as a refugee or granted as	ylee	Provide an explanation. Yes/No	Textbox Radio				
		[if 6.3c = YES]				status, have you EVER applied for and/or received any benefit from the country?		Provide an explanation.	Textbox				
	Refugee Travel Document page 2	[if 1.2 or 1.3, then sho	ow page]	6.4a		Since you were admitted to the United States as a refugee or granted as status in the United States, have you, by any legal procedure or voluntar act reacquired the nationality of the country?		Yes/No	Radio				
		[if 6.4a = YES]		6.4b		Since you were admitted to the United States as a refugee or granted as status in the United States, have you, by any legal procedure or voluntar		Provide an explanation. Yes/No	Textbox Radio				
		[if 6.4b = YES]		6.4c		act acquired a new nationality? Since you were admitted to the United States as a refugee or granted as status in the United States, have you, by any legal procedure or voluntar		Provide an explanation. Yes/No	Textbox Radio				
		[if 6.4c = YES]		6.5		act been granted refugee or asylee status in any other country? Are you filing for a Refugee Travel Document before departing the United		Provide an explanation. Yes/No	Textbox Radio				
		[if 6.5 = YES] [if 6.5 = NO]		6.6a		States? Are you currently outside the United States?		Provide an explanation. Yes/No	Textbox Radio				
		[if 6.5 = NO] [if 6.6a = YES] [if 6.6a = YES] [if 6.6a = YES]		6.6b 6.6c		What is your current location? What other countries have you traveled to since leaving the United State	as?	City or town Country Country	Text Dropdown Dropdown				Simple table
Advance Parole		[if 1.5]		7.1		What is your date of intended departure?	=20.	MM/DD/YYYY	Diopuowii				CTA = "Add another"
Document						What is the purpose of the trip? What countries do you intend to visit?		Country	Textbox Simple Table				Simple table
						How many trips do you intend to use this document for?		One trip	Radio				Simple table CTA = "Add another"
Qualifying parole	(If Advance Parole 1.e and 1.f)	[if 1.6; 1.7; 1.8; 1.9; 1	1 10· or			How long do you expect the trip(s) to take?		More than one trip	Text	Provide the number of days you expect the trip(s) to take.		[blue alert]	
Quality ing parote	(II Advance Faroic 1.c and 1.1)	1.11 show page] [blue alert]	1.10, 01									[b] Provide information a person who will receive to document, parole document arrival/departure record	ne travel ent, or
				8.1		How do you qualify for parole, parole in place, or re-parole?			Textbox	You must show, through the parole request and supporting evidence, that you (or the person on whose behalf you are applying) qualify for parole and merit a favorable exercise of discretion. Please explain the urgent humanitarian reason or significant public benefit that supports your request.		approved.	
		(if 1.6 or 1.7)	Part 3, 5	8.2 8.3A	Where do you want this travel document sent?	What is the expected length of stay in the United States? When is the date of intended arrival to the United States?	To the physical address you provided in the "About You" section	MM/DD/YYYY	Radio Text Radio Date	digent numanitarian reason of significant public benefit that supports your request.			
	[delete row] (If embassy)	[delete row] (if 1.6 or 1.7)	Part 3, 6 Part 3, 6.a and 7.a	[delete row] 8.3B		[delete row] What is the location of the U.S Embassy, U.S. Consulate, or the USCIS international field office that you want us to notify?	To a U.S. Embassy or consulate	[delete row]	Radio [delete row] Text				
Employment Authorization for	(If embassy)	[delete logic] [if 1.10 or 1.11]	Part 3, 6.b and 7.b	8.3B 9.1		Are you requesting an Employment Authorization Document (EAD) upon approval of my new period of parole (re-parole)?	Country	Yes/No	Dropdown Radio	If you were previously paroled into the United States and are requesting a new period of parole (re-parole), you may request employment authorization as part of the Form I-131 filing. This option is not currently			
Reparole [All remaining		[delete row]	Part 3, 7	[delete row]		[delete row]	To a DHS office overseas	[delete row]	Radio [delete row]	available to noncitizens seeking an initial parole authorization.	[delete row]		
content is deleted]	(If DHS)	[delete row] [delete row]	Part 3, 6.a and 7.a Part 3, 6.b and 7.b	[delete row] [delete row]		[delete row] [delete row]	City or town Country	[delete row] [delete row]	Text [delete row] Dropdown [delete row]		[delete row] [delete row]		
	(If 1e) and (if US embassy or DHS office		1 art 3, 0.0 and 7.0	[delete row]	If you selected U.S. Embassy or DHS office overseas, where do you want notice to pick up the travel document be sent?	[access con]		[delete row]	[delete row]		[delete row]		
		[delete row] [delete row] [delete row]	Part 3, 10.a Part 3, 10.i Part 3, 10.b	[delete row] [delete row] [delete row]		[delete row] [delete row] [delete row]	In care of name (if any) Country Address line 1	[delete row] [delete row] [delete row]	Text [delete row] Dropdown/ text [delete row] Toxt [delete row]	Street number and name	[delete row] [delete row] [delete row]		
		[delete row] [delete row]	Part 3, 10.c Part 3, 10.d	[delete row] [delete row]		[delete row] [delete row]	Address line 2 City or town	[delete row] [delete row]	Text [delete row] Text [delete row] Text [delete row]	Apartment, suite, unit, or f			
		[delete row] [delete row]	Part 3, 10.e/h Part 3, 10.f/g	[delete row] [delete row]		[delete row] [delete row]	State/Province ZIP code/Postal code	[delete row] [delete row]	Dropdown/ text [delete row] Text [delete row]	Provide a 5 or 9-digit ZIP co	[delete row]		
	(if 1f) and (if US embassy or DHS office		2.12.0	[delete row]	If you selected U.S. Embassy or DHS office overseas, where do you want notice to pick up the travel document be sent?			[delete row]	[delete row]		[delete row]		
	(If new address is selected)	[delete row] [delete row] [delete row]	Part 3, 8 Part 3, 9	[delete row] [delete row] [delete row]	What is the new address you want the notice to pick up the travel docum	[delete row] ent [delete row]	To the beneficiary's physical address you previously provi To a new address	[delete row] [delete row]	Radio [delete row] Radio [delete row] [delete row]		[delete row] [delete row] [delete row]		
		[delete row]	Part 3, 10.a	[delete row]	be sent?	[delete row]	In care of name (if any)	[delete row]	Text [delete row]		[delete row]		
		[delete row] [delete row]	Part 3, 10.i Part 3, 10.b	[delete row] [delete row]		[delete row] [delete row]	Country Address line 1	[delete row] [delete row]	Dropdow/text [delete row] Text [delete row]	Street number and name	[delete row] [delete row]		
	(If non-USA use Province and text fie	[delete row] [delete row] d) [delete row]	Part 3, 10.c Part 3, 10.d Part 3, 10.e/h	[delete row] [delete row] [delete row]		[delete row] [delete row] [delete row]	Address line 2 City or town State/Province	[delete row] [delete row] [delete row]	Text [delete row] Text [delete row] Dropdown/ text [delete row]	Apartment, suite, unit, or f	oor [delete row] [delete row] [delete row]		
Advance parole [All remaining	(If non-USA use Postal code and remo (If Advance Pariole 1e, 1f)		Part 3, 10.f/g Part 7 New question ba	[delete row]	Explain how you or the beneficiary qualify for an Advance Parole Docume	[delete row]	ZIP code/Postal code	[delete row] [delete row]	Text [delete row] Textbox [delete row]	Provide a 5 or 9-digit ZIP co			"Please provide an explanation
document content is deleted]		[delete row]	instructional text Part 7, 1	[delete row]	and what circumstances warrant issuance for advance parole. How many trips do you intend to use this document?	[delete row]	One trip	[delete row]	Radio [delete row]		[delete row]		textbox
		[delete row] [delete row]	Part 7	[delete row] [delete row]	Is the person intended to receive an Advance Parole Document outside t	[delete row]	More than one trip Yes/No	[delete row] [delete row]	Radio [delete row] Radio [delete row]		[delete row] [delete row]		
	(If yes)	[delete row]	Part 7, 2.a	[delete row]	United States?	[delete row]	What is the city or town of the U.S. Embassy or consulate	or [delete row]	Text [delete row]		[delete row]		
	(If yes)	[delete row]	Part 7, 2.b	[delete row]		[delete row]	the DHS overseas office that you want us to notify? What is the country of the U.S. Embassy or consulate or t	he [delete row]	Dropdown [delete row]		[delete row]		
	(If 1e)	[delete row]		[delete row]	If the travel document will be delivered to an overseas office, where sho	ıld [delete row]	DHS overseas office that you want us to notify?	[delete row]	[delete row]		[delete row]		
		[delete row]	Part 7, 4.a	[delete row]	the notice to pick up the document be sent?	[delete row]	In care of name (if any)	[delete row]	Text [delete row]		[delete row]		
		[delete row] [delete row] [delete row]	Part 7, 4.i Part 7, 4.b Part 7, 4.c	[delete row] [delete row] [delete row]		[delete row] [delete row] [delete row]	Country Address line 1 Address line 2	[delete row] [delete row] [delete row]	Dropdown/ text [delete row] Text [delete row] Text [delete row]	Street number and name Apartment, suite, unit, or f	[delete row] [delete row] por [delete row]		
		[delete row]	Part 7, 4.d Part 7, 4.e/h	[delete row] [delete row]		[delete row] [delete row]	City or town State/Province	[delete row] [delete row]	Text [delete row] Dropdown/ text [delete row]	Apartment, suite, unit, or i	[delete row] [delete row]		
		[doloto row]		[ucicle row]		[delete row]	ZIP code/Postal code	[delete row]	Text [delete row]	Provide a 5 or 9-digit ZIP co	e. [delete row]		
	/;f 1 f\	[delete row] [delete row]	Part 7, 4.f/g	[delete row]	If the travel document will be delivered to an evergoes office, where the	ıld (delete row)		Idelete rowl	[doloto rour]		Idoloto romi		
	(if 1f)	[delete row] [delete row]	Part 7, 4.f/g	[delete row] [delete row]	If the travel document will be delivered to an overseas office, where sho the notice to pick up the document be sent?		To the honeficiands who wised address.	[delete row]	[delete row]		[delete row]		
	(if 1f)	[delete row] [delete row] [delete row] [delete row]		[delete row] [delete row] [delete row] [delete row]	the notice to pick up the document be sent?	[delete row] [delete row]	To the beneficiary's physical address you previously provi To a new address	ded [delete row] [delete row]	Radio [delete row] Radio [delete row]		[delete row] [delete row]		
	(if 1f) (If new address is selected)	[delete row] [delete row] [delete row] [delete row] [delete row] [delete row]	Part 7, 4.f/g Part 7, 3 Part 7, 4 Part 7, 4.a	[delete row] [delete row] [delete row] [delete row] [delete row] [delete row]		[delete row] [delete row] [delete row] [delete row]	To a new address In care of name (if any)	ded [delete row] [delete row] [delete row] [delete row]	Radio [delete row] Radio [delete row] [delete row] Text [delete row]		[delete row] [delete row] [delete row] [delete row]		
	(if 1f) (If new address is selected)	[delete row]	Part 7, 4.f/g Part 7, 3 Part 7, 4 Part 7, 4.a Part 7, 4.i Part 7, 4.b	[delete row]	the notice to pick up the document be sent?	[delete row] [delete row] [delete row] [delete row] [delete row] [delete row]	To a new address In care of name (if any) Country Address line 1	ded [delete row] [delete row] [delete row] [delete row] [delete row] [delete row]	Radio [delete row] Radio [delete row] [delete row] Text [delete row] Text [delete row] Text [delete row]	Street number and name	[delete row] [delete row] [delete row] [delete row] [delete row] [delete row]		
	(If non-USA use Province and text fie	[delete row]	Part 7, 4.f/g Part 7, 3 Part 7, 4 Part 7, 4.a Part 7, 4.i	[delete row]	the notice to pick up the document be sent?	[delete row] [delete row] [delete row] [delete row] [delete row]	In care of name (if any) Country	ded [delete row] [delete row] [delete row] [delete row] [delete row]	Radio [delete row] Radio [delete row] [delete row] Text [delete row] Text [delete row]	Street number and name Apartment, suite, unit, or f	[delete row] [delete row] [delete row] [delete row] [delete row] [delete row]		