

UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF COLUMBIA

|                                 |   |                            |
|---------------------------------|---|----------------------------|
| ANGELICA S., <i>et al.</i> ,    | ) |                            |
|                                 | ) | Case No. 1:25-cv-01405-DLF |
| <i>Plaintiffs</i> ,             | ) |                            |
|                                 | ) |                            |
| v.                              | ) |                            |
| U.S. DEPARTMENT OF HEALTH AND   | ) |                            |
| HUMAN SERVICES, <i>et al.</i> , | ) |                            |
|                                 | ) |                            |
|                                 | ) |                            |
| <i>Defendants.</i>              | ) |                            |
| _____                           | ) |                            |

**DEFENDANTS' RESPONSE TO THE COURT'S ORDER OF MARCH 25, 2026**

On March 23, 2026, the Court issued a Minute Order, in which it ordered that Defendants shall:

inform the Court (1) whether the forms it provided, Dkt. 85, are consistent with its representation of [Paperwork Reduction Act (PRA)] approval by [Office of Management and Budget (OMB)], Dkt. 81; (2) if the forms are not consistent with OMB's approval, whether the PRA issue is moot; and (3) what forms, if not those filed with the Court, are currently being provided by [Office of Refugee Resettlement (ORR)] to putative sponsors.

On March 24, 2026, Defendants responded that ORR believes that the forms Defendants submitted to the Court on March 19, 2026, *see* Dkt. 85, are based on the Information Collection that OMB approved on February 27, 2026, Dkt. 86. Defendants requested additional time to assess whether ORR must seek approval for any changes made to the form more recently. *Id.*

On March 25, 2026, the Court ordered that:

[u]pon consideration of the defendants' [86] Response to the Court's Order, it is ORDERED that the defendants shall respond to the Court's second question, *see* March 23, 2026 Minute Order, and confirm their response as to the Court's first question, *see id.*, on or before March 31, 2026.

Minute Order (March 25, 2026). Defendants respond as follows.

## **I. Response to Question (1)**

Yes, the forms that Defendants provided, Dkt. 85, are consistent with Defendants' representation of PRA approval by OMB. ORR informs undersigned counsel that ORR uses Version 18 of the forms. Defendants filed the Version 18 Forms with the Court on March 19, 2026. *See* Dkts. 85 through 85-9. The Version 18 Forms bear the date March 13, 2026. ORR informs undersigned counsel that the Version 18 Forms differ in some respects from the Information Collections OMB approved on February 27, 2026. ORR further informs undersigned counsel that the Version 18 Forms do not include some of the information that OMB approved of ORR collecting in OMB's Information Collection approval dated February 27, 2026, but that all of the information and documents that ORR may collect on the Version 18 Forms have been approved, on February 27, 2026, by OMB, for collection.

On Version 18 of Form SAP-3, ORR lists the documents that ORR will accept from putative sponsors to show Proof of Identity. *See* SAP-3, Dkt. 85-4 at 6 ("Acceptable Proof of Identity Documents"). The list on Version 18 of Form SAP-3 includes all documents that OMB approved on February 27, 2026.<sup>1</sup> On the other hand, the list of documents that putative sponsors may submit as Proof of Income includes some, but not all, of the documents that OMB approved for collection on February 27, 2026. *Id.* at 7 (5) Proof of Income). The list of the documents that ORR lists on Version 18 for Proof of Income and the list of documents that OMB approved for collection on February 27, 2026, are shown side-by-side on the attached list. *See* Exhibit B. ORR

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<sup>1</sup> *See* View Information Collection, Family Reunification Application (Form SAP-3), available at [https://www.reginfo.gov/public/do/PRAViewIC?ref\\_nbr=202508-0970-005&icID=217209](https://www.reginfo.gov/public/do/PRAViewIC?ref_nbr=202508-0970-005&icID=217209) (viewed March 31, 2026), attached as Exhibit A. The forms that OMB approved on February 27, 2026, are available through the following webpage on the OMB website: [https://www.reginfo.gov/public/do/PRAICList?ref\\_nbr=202508-0970-005](https://www.reginfo.gov/public/do/PRAICList?ref_nbr=202508-0970-005). Defendants offer to provide the Forms to the Court upon the Court's request.

concedes that the list of documents in the Information Collection request that OMB approved on February 27, 2026 is more expansive than the list on Version 18 of Form SAP-3. ORR also emphasizes that it is not collecting any information or documents not approved for collection by OMB.

ORR further informs undersigned counsel of the following. Version 18 Forms differ from the forms that OMB approved in that they include minor wording changes made to increase clarity in sections that do not constitute information collections. ORR plans to fully revise its information collection forms to make them consistent with OMB's February 27, 2026 approval in a future version, which will be Version 19. ORR plans to publish further updates to the sponsor application form, including updates regarding Proof of Income, in Version 19.

ORR uses the Version 18 Forms as an interim measure because the Version 18 Forms reflect other updates to ORR's information collection separate from the Proof of Identity and Proof of Income requirements at issue in this litigation. For example, with Version 18, ORR incorporated the collection of Social Security/Taxpayer ID information, which OMB has approved. The future update (Version 19) will incorporate other Information Collections already approved by OMB but not yet incorporated into the form, including updates to Proof of Income updates as described in Exhibit B. All information collected by Version 18, therefore, has been approved by OMB. And, to the extent that OMB has also approved the collection of information not already in Version 18, ORR intends to include that Information Collection in a future Version 19. h.

## **II. Response to Question (2)**

Plaintiffs claim that ORR acted unlawfully because it has not yet obtained OMB approval for its new identification and proof of income information collection requirements. 1st Am. Compl. (Aug. 15, 202), Dkt. 48 ¶¶ 155, 167. Defendants have not previously had the opportunity

to fully brief whether, in light of OMB's approval of ORR's Information Collection request on February 27, 2026, Plaintiffs' PRA claim is moot. If the Court orders briefing, Defendants respectfully seek additional time to fully brief the issue and produce a record of the OMB's approval of ORR's Information Collection request. In response to the Court's order of March 25, 2026, Defendants state as follows.

A claim becomes moot "when it is impossible for a court to grant any effectual relief whatever to the prevailing party." *Beberman v. Blinken*, 61 F.4th 978, 981 (D.C. Cir. 2023). "A request for injunctive relief remains live only so long as there is some present harm left to enjoin." *Taylor v. Resol. Tr. Corp.*, 56 F.3d 1497, 1502 (D.C. Cir.), *opinion amended on reh'g*, 66 F.3d 1226 (D.C. Cir. 1995). OMB has approved an Information Collection request that includes the universe of information that ORR collects in its Sponsor Application. Assuming, *arguendo*, that Plaintiffs suffered any injury from ORR's collection of information before OMB approved the collection—and Plaintiffs have not pled any injury arising out of the pre-OMB approval collection—there is no ongoing injury. Any injury that might have resulted from the collection of information has ended. Consequently, Defendants contend that there is no relief that the Court could provide if Plaintiffs were to prevail on their PRA claim.

Further, a procedural APA claim becomes moot if the agency has corrected the alleged procedural error and no purpose would be served by vacatur. *Schmidt v. United States*, 749 F.3d 1064, 1068 (D.C. Cir. 2014) (affirming district court's dismissal of case as moot where plaintiff had claimed that the Board for Correction of Naval Records procedure allowing for the Acting Executive Director rather than the Board to render a decision on the plaintiff's disability rating was improper, and the plaintiff later received an adjudication of his administrative claim by the Board); *Las Americas Immigrant Advoc. Ctr. v. U.S. Dep't of Homeland Sec.*, 783 F. Supp. 3d

200, 220–21 (D.D.C. 2025), *reconsideration denied*, No. CV 24-1702 (RC), 2025 WL 2105564 (D.D.C. July 28, 2025) (denying as moot a challenge to a defendant agency’s promulgation of an interim final rule without providing the required notice and inviting public comment, where the agency later engaged in notice-and-comment rulemaking). As noted, OMB has approved ORR’s Information Collection request, which includes the information and documents that ORR requests of putative sponsors. ORR has corrected the procedural error. Plaintiffs have not identified any purpose that would be served by vacatur.

DATE: April 1, 2026

Respectfully submitted,

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Assistant Attorney General

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Acting Deputy Director

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# Exhibit A



## Administration for Children & Families Office of Refugee Resettlement

# Sponsor Application

## About you - the sponsor - and the child(ren)

### 1) Name(s) of the child(ren)

List the names of all children you are applying to sponsor

|  |
|--|
|  |
|  |
|  |
|  |

### Your relationship to the child(ren)

e.g., mother, uncle, family friend

|  |
|--|
|  |
|  |
|  |
|  |

### 2) Your Name

|  |
|--|
|  |
|--|

### 3) Other names you have used

List other names you have used, such as your name before you were married or maternal last names (separate with commas)

|  |
|--|
|  |
|--|

### 4) Your country of origin

Where you were born

|  |
|--|
|  |
|--|

### 5) Your date of birth

month/day/year (e.g., 12/31/1979)

|  |
|--|
|  |
|--|

### 6) Phone numbers

e.g., 210-555-1234

Primary Phone

|  |
|--|
|  |
|--|

Secondary Phone

|  |
|--|
|  |
|--|

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Public reporting burden for this collection of information is estimated to average 1.5 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Please see the accompanying privacy notice / Privacy Act statement for a discussion of (1) the authority for solicitation of information, and whether disclosure is mandatory or voluntary, (2) the principal purposes for which the information is intended to be used, (3) other routine uses which may be made of the information, and (4) the effects, if any, of not providing all or any part of the requested information. If you have any comments on this collection of information please contact UACPolicy@acf.hhs.gov.

## Sponsor Application

### Office of Refugee Resettlement

7) Your email address

8) Language(s) you speak

## Where will you and the child(ren) live?

### 9) Address

Street Address  
(+ apartment number, if applicable)

City

State

Zip code

### 10) Who else currently lives at this address?

Include everyone who lives at this address, except yourself. A phone number and email address for adults (ages 18 or older).

| Household Member Name   | Date of Birth     | Relationship to you (the sponsor) | Relationship to the child | Phone Number        | Email Address           |
|-------------------------|-------------------|-----------------------------------|---------------------------|---------------------|-------------------------|
| <i>(EXAMPLE) Miguel</i> | <i>12/31/1985</i> | <i>Brother</i>                    | <i>Uncle</i>              | <i>555-555-5555</i> | <i>mperez@email.com</i> |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |
|                         |                   |                                   |                           |                     |                         |

Need Help? Contact your Federal Field Specialist.



## Adult Who Will Care for the Child(ren) if You Cannot

If you become unable to care for the child(ren), who will care for the child(ren)?

**12a) Name of potential adult caregiver**

**12b) Date of birth of potential adult caregiver**

**12c) Contact information of potential adult caregiver**

Phone Number

Street Address  
(+ apartment number, if applicable)

City

State

Zip code

**12d) What is their relationship to the child(ren)?**

(grandparent, aunt, sibling over 18 years old, etc.)

**12e) What is their relationship to you, the sponsor?**

**12f) How will the child(ren) be cared for if you become unable to care for them?**

**Need Help?** Contact your Federal Field Specialist.

## Financial Information

### 13) How will you financially support the child(ren)?

Include all sources and amounts of your income (for example, the amount you are paid each week) as well as explaining any financial support from others who will help financially support the child(ren).

## Health Information

### 14a) Does any person in your household have any serious contagious diseases (TB, AIDS, hepatitis, etc.)?

☐ Yes ☐ No

If yes, please explain:

### 14b) Are you aware of any health conditions the child(ren) may have (disabilities, allergies, diseases, etc.)?

☐ Yes ☐ No

If yes, please explain:

**Need Help?** Contact your Federal Field Specialist.

## Sponsor Application

### Office of Refugee Resettlement

## Criminal History

If you answer "YES" to either of these questions, you will need to provide more information. See the Supporting Documentation section of this form (page 8 of this packet) for more information.

**15a) Have you ever been charged with or convicted of a crime (other than a minor traffic violation; e.g. speeding, parking ticket, etc.)?** ☐ Yes ☐ No

**15b) Have you ever been investigated for the physical abuse, sexual abuse, neglect, or abandonment of a child?** ☐ Yes ☐ No

**15c) Have you ever committed, agreed to commit, asked someone else to commit, helped commit, or tried to commit a crime or offense for which you were NOT arrested?** ☐ Yes ☐ No

## Sign & Date Your Application

I declare and affirm under penalty of perjury that the information contained in this application is true and accurate to the best of my knowledge.

I attest that all documents I am submitting or copies of those documents are free of error and fraud.

I will provide for the physical and mental well-being of the child(ren). I will also comply with my state's laws regarding the care of this child including:

- Enrolling the child(ren) in school;
- Providing medical care when needed;
- Protecting the child(ren) from abuse, neglect, and abandonment; and
- Any other requirement not herein contained.

I understand that knowingly and willfully falsifying, concealing, or covering up a material fact, or making any materially false, fictitious, or fraudulent statement or representation, or making or using any false writing or document knowing it contains any materially false, fictitious, or fraudulent statement or entry, is a violation of 18 U.S.C. § 1001 and may subject me to fines, imprisonment, or both. ORR may report fraudulent information to Federal law enforcement.

**YOUR SIGNATURE**

**DATE**

**Need Help?** Contact your Federal Field Specialist.

**Sponsor Application**  
**Office of Refugee Resettlement**

**STAFF USE ONLY** - The Federal Field Specialist must complete this section if they assisted the sponsor applicant with entering information into this form.

I attest under penalty of perjury that to the best of my knowledge:

- Any information I entered into this form on behalf of the sponsor applicant is an accurate and complete representation of information provided to me by the sponsor applicant; and
- I have not altered or otherwise misrepresented the information provided by the sponsor applicant.

**Federal Field Specialist Signature**

**Federal Field Specialist Name**

**Date**

**Need Help?** Contact your Federal Field Specialist.

## Supporting Documents

Please provide the following documents. If you are unable to provide the documents we ask for, please explain why in the textbox below and contact your Federal Field Specialist. We may reject your application if any of the required information is missing, incomplete, or inaccurate.

### 1) Proof of Child's Identity

Legible full color photocopy, digital scan, high-resolution digital photo, or original version of the child's birth certificate.

### 2) Proof of Identity for you and, as applicable, any household members

Legible full color photocopies, digital scans, high-resolution digital photos, or original versions of government-issued identification documents. You must present at least one selection from the list below for yourself and each adult member of your household. Expired documents will **not** be accepted.

| Acceptable Proof of Identity Documents                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| U.S. Passport or U.S. Passport Card                                                                                                                                                                                                                    |
| Permanent Resident Card or Alien Registration Receipt Card (Form I-551)                                                                                                                                                                                |
| Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa                                                                                                                        |
| Employment Authorization Document that contains a photograph (Form I-766)                                                                                                                                                                              |
| Foreign passport with Form I-94 or Form I-94A with Arrival-Departure Record, and containing an endorsement to work                                                                                                                                     |
| Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI |
| Driver's license or ID card issued by a U.S. state or outlying possession of the United States provided it contains a photograph or information such as a name, date of birth, sex, height, eye color, and address                                     |
| ID card issued by U.S. federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address                                                      |
| U.S. Military card or draft record                                                                                                                                                                                                                     |
| U.S. Military dependent's ID card                                                                                                                                                                                                                      |
| U.S. Coast Guard Merchant Mariner Card                                                                                                                                                                                                                 |
| Native American tribal document                                                                                                                                                                                                                        |
| Driver's license issued by a Canadian government authority                                                                                                                                                                                             |

**Need Help?** Contact your Federal Field Specialist.

**3) Legal Records (if applicable)**

If you answered "YES" to either question 15(a) or 15(b) on this form, please provide us with the following information for each charge/conviction:

- Name of person involved
- Place and date of the incident
- Explanation of the incident
- Disposition of the incident (e.g., charges dropped, fined, imprisoned, probation, mandated or voluntary classes, counseling, or other required actions that were part of a plea agreement or court agreement)
- Legible full color photocopies, digital scans, high-resolution digital photos, or original versions of court record(s), police record(s), and/or governmental social service agency record(s) related to the incident(s)

**4) Proof of Address**

An original version of at least one form of documentation verifying your current address. Acceptable forms of documentation include:

- Your current lease with your name
- Your current mortgage statement with your name, dated within the last month before submission of this application
- A valid, unexpired state ID with your current address and photo
- A utility bill, addressed to you at your current address, dated within the last month before submission of this application
- Your bank statement dated within the last month before submission of this application
- A payroll check stub issued by your employer, dated within the last month before submission of this application

**5) Proof of Income**

Legible full color photocopy, digital scan, high-resolution digital photo, or original version of at least one form of documentation verifying your income. Acceptable forms of documentation include:

- Previous year's tax return (if in the United States during that year)
- Copies of paystubs for the past consecutive 60 days;
- An original letter from your employer, signed within the past 60 days, verifying employment and salary.
  - The letter must be on company letterhead and contains verifiable contact information for the employer and supervisor.
  - An ORR Representative must speak with the supervisor or company Human Resources division to verify the information in the letter.
- Documentation of:
  - Income received from assets (for example, a 1099-INT tax form from the previous year or receipts from rental income received covering the last 60 days) or investments

**Need Help?** Contact your Federal Field Specialist.

## Sponsor Application

### Office of Refugee Resettlement

- o Unemployment benefits
- o Strike pay
- o Gifts
- o Annuities
- o Alimony
- o Proceeds from a settlement
- Public Assistance Records:
  - o Temporary Assistance for Needy Families (TANF)
  - o Supplemental Security Income (SSI)
  - o Cash Assistance
- A balance page from the sponsor's most recent quarterly bank statement
- *Affidavit of Financial Support* (Form SAP-8) (multiple forms may be submitted)

#### 6) Proof of Relationship

Legible full color photocopy, digital scan, high-resolution digital photo, or original version of at least one document to provide proof of a relationship between you and the child.

| Your Relationship to the Child                           | Acceptable Documents                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Parent</b>                                            | <ul style="list-style-type: none"> <li>• Birth certificates</li> <li>• Court records</li> <li>• Parent's government-issued photo ID</li> </ul>                                                                                                                                                            |
| <b>Step-Parent</b><br>You have legally adopted the child | <ul style="list-style-type: none"> <li>• Birth certificates</li> <li>• Parent's government-issued photo ID</li> <li>• Step-Parent's government-issued photo ID</li> <li>• Marriage certificate</li> <li>• Court order documents confirming adoption or legal guardianship has been established</li> </ul> |
| <b>Legal Guardian</b>                                    | <ul style="list-style-type: none"> <li>• Court order documents confirming adoption or legal guardianship has been established</li> <li>• Birth certificates</li> <li>• Legal guardian's government-issued photo ID</li> <li>• Guardianship records</li> <li>• Death Certificates</li> </ul>               |

**Need Help?** Contact your Federal Field Specialist.

**Sponsor Application**  
Office of Refugee Resettlement

|                                         |                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Family Member</b>                    | <ul style="list-style-type: none"> <li>• Birth certificates</li> <li>• Trail of familial birth and/or death certificates showing that you and the child are related</li> <li>• Marriage certificates</li> <li>• Court records</li> <li>• Written affirmation of relationship from your Consulate</li> </ul> |
| <b>You are not related to the child</b> | Please contact your Federal Field Specialist                                                                                                                                                                                                                                                                |

**7) Reason you are unable to provide all the documents we ask for (if applicable)**

**Need Help?** Contact your Federal Field Specialist.



# Exhibit B

| <b>Proof of Income</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Version 18 of SAC-3, Dkt. 85-4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>Exhibit A (Information Collection approved by OMB on February 27, 2026)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| A copy of at least one form of documentation verifying your income. Acceptable forms of documentation include:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Legible full color photocopy, digital scan, high-resolution digital photo, or original version of at least one form of documentation verifying your income. Acceptable forms of documentation include:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <ul style="list-style-type: none"> <li>• Your tax return from the previous year (if in the United States during prior year)</li> <li>• Copies of your paystubs for at least the past 60 days continuously</li> <li>• An original letter from your employer verifying your employment and salary information, signed within the past 60 days. The letter must be on company letterhead and contain verifiable contact information for your employer and supervisor. An ORR representative must speak with the supervisor or company human resources division to verify the information in the letter.</li> </ul> | <ul style="list-style-type: none"> <li>• Previous year's tax return (if in the United States during that year)</li> <li>• Copies of paystubs for the past consecutive 60 days;</li> <li>• An original letter from your employer, signed within the past 60 days, verifying employment and salary. <ul style="list-style-type: none"> <li>○ The letter must be on company letterhead and contains verifiable contact information for the employer and supervisor.</li> <li>○ An ORR Representative must speak with the supervisor or company Human Resources division to verify the information in the letter.</li> </ul> </li> <li>• Documentation of: <ul style="list-style-type: none"> <li>○ Income received from assets (for example, a 1099-INT tax form from the previous year or receipts from rental income received covering the last 60 days) or investments</li> <li>○ Unemployment benefits</li> <li>○ Strike pay</li> <li>○ Gifts</li> <li>○ Annuities</li> <li>○ Alimony</li> <li>○ Proceeds from a settlement</li> </ul> </li> <li>• Public Assistance Records: <ul style="list-style-type: none"> <li>○ Temporary Assistance for Needy Families (TANF)</li> <li>○ Supplemental Security Income (SSI)</li> <li>○ Cash Assistance</li> </ul> </li> <li>• A balance page from the sponsor's most recent quarterly bank statement</li> <li>• Affidavit of Financial Support (Form SAP-8) (multiple forms may be submitted).</li> </ul> |