

# **Application for Provisional Unlawful Presence Waiver**

**Department of Homeland Security** U.S. Citizenship and Immigration Services

|                 | Initial Receipt                           | Fee Stamp        |                                 |               |                         | Action Block  |
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| ]               | attorney or Form<br>BIA-accredited attacl |                  | Attorney Sta<br>(if applicable) |               | Number                  | Attorney or Accredited Representative<br>USCIS Online Account Number (if any) |
|                 | START HERE - Type or print                |                  |                                 |               |                         |   |
| Par             | t 1. Information About Y                  | ou               |                                 |               |                         | iling Address (USPS ZIP Code Lookup)  |
| Provi           | de the following information ab           | 2                |                                 | <b>7.a.</b> I | n Care Of N             | Vame  |
| 1.              | Alien Registration Number (A-             | Number) (if any) |                                 |               |                         |   |
|                 | ► A-                                      |                  |                                 |               | Street Numb<br>and Name | ber   |
| 2.              | U.S. Social Security Number (i            | f any)           |                                 | 7.c. [        | Apt.                    | Ste. Flr.   |
| 3.              | USCIS Online Account Number               | er (if any)      |                                 | 7.d. (        | City or Tow             | 7n  |
|                 |   |                  |                                 | 7.e. S        | State                   | ▼ 7.f. ZIP Code   |
|                 | r Full Name                               |                  |                                 |               | s your curre<br>ddress? | ent physical address the same as your mailing<br>Yes No                       |
| <b>4.</b> a.    | Family Name (Last Name)                   |                  |                                 |               |                         | ered "No" to <b>Item Number 8.</b> , provide your                             |
| 4.b.            | Given Name<br>(First Name)                |                  |                                 | ł             | mysical add             | dress in Item Numbers 9.a 9.e.  |
| 4.c.            | Middle Name                               |                  |                                 | Your          | U.S. Phy                | vsical Address  |
| Oth             | er Names Used (if any)                    |                  |                                 |               | Street Numb<br>and Name | ber   |
|                 | Family Name                               |                  |                                 | 9.b. [        | Apt.                    | ] Ste. [] Flr.  |
|                 | (Last Name)                               |                  |                                 | 9.c. (        | City or Tow             | 'n  |
| 5.b.            | Given Name<br>(First Name)                |                  |                                 | 9.d. S        | -                       | ▼ 9.e. ZIP Code   |
| 5.c.            | Middle Name                               |                  |                                 |               |                         |   |
|                 | Family Nama                               |                  |                                 | Othe          | r Informa               | ation   |
| 6.a.            | Family Name<br>(Last Name)                |                  |                                 | 10. 5         | Sex                     | Male Female   |
| 6.b.            | Given Name<br>(First Name)                |                  |                                 | <b>11.</b> I  | Date of Birt            | h (mm/dd/yyyy)  |
| 6.c.            | Middle Name                               |                  |                                 |               |                         |   |

|       |   | 22   | DL           |
|-------|---|------|--------------|
| Par   | t 1. Information About You (continued)                      | 23.2 | ı. Pla       |
| 12.   | City or Town of Birth                                       |      |              |
|       |   | 23.1 | o. Sta       |
| 13.   | Country of Birth  | 24.a | ı. Fr        |
|       |   |      |              |
| 14.   | Country of Citizenship or Nationality                       | 24.1 | <b>).</b> То |
|       |   | 25.  | Im           |
| 15.a. | Mother's Family Name (Last Name)                            |      |              |
|       |   | 26.  | Ar           |
| 15.b. | Mother's Given Name (First Name)                            |      | If           |
|       |   |      | pla          |
| 16.a. | Father's Family Name (Last Name)                            |      | tin<br>pro   |
|       |   |      | pr           |
| 16 h  | Father's Given Name (First Name)                            | Yo   | ur I         |
| 10.0. |   | 27.  | Ar           |
|       |   |      | pro<br>im    |
| You   | r Last Entry Into the United States                         |      | DI           |
| 17.   | Date of Entry (On or about mm/dd/yyyy)                      |      | pro          |
|       |   |      | de<br>Vi     |
| 18.a. | Place or Port-of-Entry (Actual or approximate city or town) |      | see          |
|       |   |      | rec<br>23    |
| 10 L  | State 🔽   |      | 10           |
|       |   |      | If :<br>Nu   |
| 19.   | Immigration Status (At the time of entry)                   |      | 27           |
|       |   |      | 28<br>sit    |
| You   | r Previous Entries Into the United States                   | 28.8 | _            |
| Vou   | were previously in the United States as follows:            | 20.0 | •            |
|       | Place or Port-of-Entry (Actual or approximate city or town) |      |              |
| 20    |   |      |              |
|       |   |      |              |
| 20.b. | State   |      |              |
| 21.a. | From (On or about mm/dd/yyyy)                               |      |              |
| )1 ե  | To (On or about mm/dd/agas)                                 |      |              |
|       | To (On or about mm/dd/yyyy)                                 |      |              |
| 22.   | Immigration Status (At the time of entry)                   |      |              |

- **23.a.** Place or Port-of-Entry (Actual or approximate city or town)
- 23.b. State 
  24.a. From (On or about mm/dd/yyyy)
  24.b. To (On or about mm/dd/yyyy)
  25. Immigration Status (At the time of entry)
- **26.** Are there other previous entries? Yes No

If you answered "Yes" to **Item Number 26.**, include the place of entry, dates, and your immigration status at the time of entry for any other prior entries in the space provided in **Part 9. Additional Information**.

# Your Immigration or Criminal History

27. Are you currently in removal, exclusion, or deportation proceedings in which there is no final order issued by the immigration judge, the Board of Immigration Appeals, a DHS officer, or a Federal court yet? (This includes proceedings under INA section 239, an exclusion or deportation proceeding initiated before April 1,1997, a Visa Waiver Program removal proceeding under INA section 217, expedited removal under INA 235, and a request for a judicial removal order under INA section 238(c))?

If you answered "No" to **Item Number 27.**, go to **Item Number 29.a.** If you answered "Yes" to **Item Number 27.**, select the statement below (either **Item Number 28.a.** or **28.b.**) that most accurately describes your current situation.

**28.a.** I am in removal, exclusion, or deportation proceedings that are administratively closed and, at the time of filing my Form I-601A, have not been placed back on EOIR's calendar to continue my removal, exclusion, or deportation proceedings.

**NOTE:** You may be eligible for a provisional unlawful presence waiver. Provide a copy of the administrative closure order. Also, if U.S. Citizenship and Immigration Services (USCIS) approves your provisional unlawful presence waiver, it is important that you resolve your removal, exclusion, or deportation proceedings before you depart the United States for your immigrant visa interview.

### Part 1. Information About You (continued)

**28.b.** I am currently in removal, exclusion, or deportation proceedings that are not administratively closed, or in removal, exclusion, or deportation proceedings that were administratively closed, but EOIR has placed my proceedings back on its calendar in order to continue them.

**NOTE:** You are ineligible for a provisional unlawful presence waiver unless your proceedings are administratively closed at the time you file your Form I-601A, and the proceedings have not been put back on EOIR's calendar to continue your removal, exclusion, or deportation after having been previously administratively closed.

29.a. Are you currently subject to a final order of removal, exclusion or deportation? (This includes an order entered in proceedings under INA section 239, an exclusion or deportation order entered in proceedings initiated before April 1, 1997, a Visa Waiver Program removal order under INA section 217, an expedited removal order under INA section 235, and a judicial order under INA section 238(c))?

**NOTE:** If you answered "Yes" to **Item Number 29.a.**, you are ineligible for a provisional unlawful presence waiver unless you applied for, and USCIS has already approved, an application for permission to reapply for admission under INA section 212(a)(9)(A)(iii) and 8 CFR 212.2 on Form I-212, Application for Permission to Reapply for Admission into the United States after Deportation or Removal. If you have already applied for and if USCIS has already granted you permission to reapply for admission, provide the relevant information in **Item Number 29.b.** If you answered "No" to **Item Number 29.a.**, go to **Item Number 31.** 

**29.b.** USCIS Receipt Number for Your Approved Form I-212:

|--|

**NOTE:** You may also provide a copy of the approval notice that USCIS sent to you when it approved your Form I-212.

- **30.a.** Has DHS served you with a DHS Form I-871, giving you notice that DHS intends to reinstate a prior deportation, exclusion, or removal order against you as permitted under INA section 241(a)(5)? ☐ Yes ☐ No
- **30.b.** If you answered "Yes" to **Item Number 30.a.**, has DHS served you with a final decision reinstating a prior deportation, exclusion, or removal order under INA section 241(a)(5)? □ Yes □ No

31. Are you currently subject to a grant of voluntary departure that has not expired and that was granted to you by the immigration judge or the Board of Immigration Appeals during removal, exclusion, or deportation proceedings?

**NOTE:** If you answered "Yes" to **Item Number 31.**, you are ineligible for a provisional unlawful presence waiver.

If you were granted voluntary departure in the past, but then you withdrew your voluntary departure request or otherwise terminated voluntary departure you should not select "Yes" to **Item Number 31.** In this case you may be in removal proceedings or you may be the subject of a final order of removal, deportation, or exclusion. You should select the statements that apply to you in **Item Numbers 27. - 28.b.** or **Item Number 29.a.** If you filed a motion to withdraw your voluntary departure request, please submit a copy with your Form I-601A.

Answer Item Numbers 32. - 38. If you answer "Yes" to any question in Item Numbers 32. - 38., your application for a provisional unlawful presence waiver may be denied as a matter of discretion. For each "Yes" response for Item Numbers 32. - 38., provide the location and date of the event and a brief description in Part 9. Additional Information. For Item Number 34., if you were arrested but not charged with any crime or offense, provide a statement or other documentation from the arresting authority, prosecutor's office, or court to show that you were not charged with any crime or offense. If you answer "Yes" to Item Number 35., you must provide all related court dispositions.

- **32.** Have you **EVER** knowingly and willfully given false or misleading information to a U.S. Government official while applying for an immigration benefit or to gain entry or admission into the United States? Yes No
- **33.** Have you **EVER** been engaged in alien smuggling?

Yes No

- 34. Have you EVER been arrested, cited, or detained by a law enforcement officer (including immigration and military officers) in the United States, your home country, and/or any other country for any reason other than traffic violations?
- **35.** Have you **EVER** been charged, indicted, convicted, imprisoned, or jailed in the United States, your home country, and/or any other country for any crime or offense?
- **36.** Have you **EVER** trafficked in or are you **NOW** trafficking in any controlled substance? ☐ Yes ☐ No

| Part 1. Information About You (continued)   | 42. Have you EVER assisted or participated in selling or providing weapons to any person who to your knowledge   |
|---|--|
| <ul><li>37. Are you NOW or have you EVER knowingly assisted, abetted, conspired, or colluded with others in the unlawfu trafficking of any controlled substance?</li><li>Yes No</li></ul> | used them against another person, or in transporting<br>weapons to any person who to your knowledge used them<br>against another person?                   |
| <ul><li>38. Are you NOW or have you EVER been engaged in prostitution?</li><li>Yes No</li></ul>   | <b>43.</b> Have you <b>EVER</b> received any type of military, paramilitary, or weapons training?<br>Yes No  |
| Answer Item Numbers 39.a 45. If you answer "Yes" to an question in Item Numbers 39.a 45., your application for a provisional unlawful presence waiver may be denied as a                  | 44. Have you EVER recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group?         Yes      |
| matter of discretion. For each "Yes" response for <b>Item</b><br><b>Numbers 39.a 45.</b> , provide a complete explanation in<br><b>Part 9. Additional Information</b> .                   | <ul><li>45. Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat?</li></ul> |
| Have you <b>EVER</b> ordered, incited, called for, committed, assisted,   |  |
| helped with, or otherwise participated in any of the following:   | Part 2. Biographic Information   |
| <b>39.a.</b> Acts involving torture or genocide? Yes No   | 1. Ethnicity (Select only one box)   |
| <b>39.b.</b> Killing any person?  | Hispanic or Latino   |
| <b>39.c.</b> Intentionally and severely injuring any person?  | Not Hispanic or Latino   |
| Yes No  | 2. Race (Select all applicable boxes)  |
| <b>39.d.</b> Engaging in any kind of sexual contact or relations with   | White  |
| any person who was being forced or threatened?  | Asian  |
| <b>39.e.</b> Limiting or denying any person's ability to exercise   | Black or African American  |
| religious beliefs? Yes No   | American Indian or Alaska Native   |
| Have you EVER:  | Native Hawaiian or Other Pacific Islander  |
| <b>40.a.</b> Served in, been a member of, assisted in, or participated  | 3. Height Feet Inches  |
| in any military unit, paramilitary unit, police unit, self-<br>defense unit, vigilante unit, rebel group, guerilla group,   | 4. Weight Pounds   |
| militia, or insurgent organization? Yes No  | 5. Eye Color (Select <b>only one</b> box)  |
| <ul><li>40.b. Served in any prison, jail, prison camp, detention facility labor camp, or any other situation that involved detaining persons?</li><li>Yes No</li></ul>                    |  |
| 41. Have you EVER been a member of, assisted in, or   | 6. Hair Color (Select only one box)  |
| participated in any group, unit, or organization of any kind in which you or other persons used any type of   | Bald (No hair) Black Blond   |
| weapon against any person or threatened to do so?   | Brown  Gray  Red    Sandy  White  Unknown/   |
| Yes No  | Other  |

•

them

# Part 3. Information About Your Immigrant Visa Case

Provide the basis on which you are immigrating to the United States using the check boxes below. (Select **only one** box)

- **1.a.** Diversity Visa Program Selectee or Derivative
- **1.b.** Immediate Relative Petition (Form I-130)
- **1.c.** Preference-Based Family Petition (Form I-130), including Derivatives
- **1.d.** Employment-Based Petition (Form I-140), including Derivatives
- **1.e.** Special Immigrant/Widow Petition (Form I-360), including Derivatives

If you selected **Item Number 1.a.** because you are a Diversity Visa (DV) Program selectee or derivative, provide information about your (or your spouse's or parent's) DV case:

2.a. DOS DV Case Number (KCC Case Number)

| • |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

DV Program Selectee's Full Name (If you are a derivative and your parent or spouse is the DV Program Selectee)

| 2.b. | Family Name<br>(Last Name) |  |
|------|----------------------------|--|
| 2.c. | Given Name<br>(First Name) |  |
| 2.d. | Middle Name                |  |

If you selected **Item Numbers 1.b.**, **1.c.**, **1.d.**, or **1.e.** provide the following information about the approved immigrant visa petition (Form I-130, Form I-140, or Form I-360) that was filed on your (or your spouse's or parent's) behalf, or that you used to self-petition on your behalf, that is your basis to immigrate and the related Department of State (DOS) immigrant visa application.

| 3.a. | USCIS I | Rece | eipt N | umb  | er   |        |     |     |     |    |      |  |
|------|---------|------|--------|------|------|--------|-----|-----|-----|----|------|--|
|      | Þ       | • [  |        |      |      |        |     |     |     |    |      |  |
| 3.b. | DOS Co  | nsu  | lar Ca | se N | Juml | ber (N | IVC | Cas | e N | um | ber) |  |
|      | ►       |      |        |      |      |        |     |     |     |    |      |  |
|      | L       |      |        |      |      |        |     |     |     |    |      |  |

**Petitioner Name** (Provide the full name of the family member or the company who petitioned for you (or your spouse or parent).)

| 3.c. | Family Name     (Last Name)  |
|------|------------------------------|
| 3.d. | Given Name (First Name)      |
| 3.e. | Middle Name                  |
| 3.f. | Company or Organization Name |

# Part 4. Information About Your Qualifying Relative

Provide the following information about the qualifying relative (the U.S. citizen or Lawful Permanent Resident (LPR) spouse or parent) who would experience extreme hardship if you were refused admission to the United States.

# Your Qualifying Relative's Full Name and Relationship to You

| 1 <b>.</b> a. | Family Name<br>(Last Name) |
|---------------|----------------------------|
| 1.b.          | Given Name<br>(First Name) |
| 1.c.          | Middle Name                |
| 2.a.          | U.S. Citizen Spouse        |
| 2.b.          | U.S. Citizen Parent        |
| •             |                            |

- **2.c.** LPR Spouse
- **2.d.** LPR Parent

# Your Other Qualifying Relative

3. Do you have more than one qualifying relative (U.S. citizen or LPR spouse or parent)? ☐ Yes ☐ No

If you answered "Yes" to **Item Number 3.**, provide the other qualifying relative's name and your relationship to the qualifying relative in **Item Numbers 4.a. - 5.d.** Also provide evidence of the U.S. citizenship or LPR status of the other qualifying relative with your application. See the **What Evidence Must I Submit With Form I-601A** section of the Instructions.

# Additional Qualifying Relative's Full Name and Relationship to You

| <b>4.a.</b> | Family Name<br>(Last Name) |  |
|-------------|----------------------------|--|
| 4.b.        | Given Name<br>(First Name) |  |
| 4.c.        | Middle Name                |  |

- **5.a.** U.S. Citizen Spouse
- **5.b.** U.S. Citizen Parent
- 5.c. **LPR** Spouse
- 5.d. DLPR Parent

# Part 5. Statement From Applicant

In the space provided, explain in detail why you believe USCIS should approve your application for a provisional unlawful presence waiver as a matter of discretion. Provide all of the reasons you believe support your application for this waiver, including information about the extreme hardship your qualifying relatives would experience if you were refused admission to the United States. If you need extra space to complete your statement, use the space provided in **Part 9.** Additional Information.

#### Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

**NOTE:** Read the **Penalties** section of the Form I-601A Instructions before completing this section. You must file Form I-601A while in the United States.

#### **Applicant's Statement**

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

- **1.a.** I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- **1.b.** The interpreter named in **Part 7.** read to me every question and instruction on this application and my answer to every question in

a language in which I am fluent, and I understood everything.

2. At my request, the preparer named in Part 8.,

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

# **Applicant's Contact Information**

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

#### Applicant's Declaration and Certification

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

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

# **Part 6.** Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

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

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

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

# **Applicant's Signature**

6.a. Applicant's Signature

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

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

#### Part 7. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

#### Interpreter's Full Name

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

# Interpreter's Mailing Address

| 3.a. | Street Number and Name     |
|------|----------------------------|
| 3.b. | Apt. Ste. Flr.             |
| 3.c. | City or Town               |
| 3.d. | State <b>J.e.</b> ZIP Code |
| 3.f. | Province                   |
| 3.g. | Postal Code                |
| 3.h. | Country                    |
|      |                            |

### Interpreter's Contact Information

- 4. Interpreter's Daytime Telephone Number
- 5. Interpreter's Mobile Telephone Number (if any)
- 6. Interpreter's Email Address (if any)

# Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and

which is the same language specified in **Part 6.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

#### Interpreter's Signature

- 7.a. Interpreter's Signature
- **7.b.** Date of Signature (mm/dd/yyyy)

# Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

#### **Preparer's Full Name**

- **1.a.** Preparer's Family Name (Last Name)
- 1.b. Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if any)

#### **Preparer's Mailing Address**

| 3.a. | Street Number and Name     |
|------|----------------------------|
| 3.b. | Apt. Ste. Flr.             |
| 3.c. | City or Town               |
| 3.d. | State <b>3.e.</b> ZIP Code |
| 3.f. | Province                   |
| 3.g. | Postal Code                |
| 3.h. | Country                    |
|      |                            |

# **Preparer's Contact Information**

- 4. Preparer's Daytime Telephone Number
- 5. Preparer's Mobile Telephone Number (if any)
- 6. Preparer's Email Address (if any)

#### **Preparer's Statement**

- **7.a.** I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- **7.b.** I am an attorney or accredited representative and my representation of the applicant in this case extends/ does not extend beyond the preparation of this application.

**NOTE:** If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

#### **Preparer's Certification**

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

#### **Preparer's Signature**

**8.a.** Preparer's Signature

**8.b.** Date of Signature (mm/dd/yyyy)

|   |             |      | Item Number |
|---|-------------|------|-------------|
| If you need extra space to provide any additional information<br>within this application, use the space below. If you need more<br>space than what is provided, you may make copies of this page<br>to complete and file with this application or attach a separate<br>sheet of paper. Type or print your name and A-Number (if any)<br>at the top of each sheet; indicate the <b>Page Number</b> , <b>Part</b><br><b>Number</b> , and <b>Item Number</b> to which your answer refers; and<br>sign and date each sheet. |             |      |             |
| 1.a. Family Name     (Last Name)  |             |      |             |
| 1.b. Given Name<br>(First Name)   |             |      |             |
| 1.c. Middle Name  |             |      |             |
| 2. A-Number (if any) $\blacktriangleright$ A-   |             |      |             |
| <b>3.a.</b> Page Number <b>3.b.</b> Part Number <b>3.c.</b> Item Number <b>6.a.</b> Page Number <b>6.b.</b>   | Part Number | 6.c. | Item Number |
| 3.d. 6.d.   |             |      |             |
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| 4.a. Page Number 4.b. Part Number 4.c. Item Number 7.a. Page Number 7.b.  | Part Number | 7.c. | Item Number |
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