(List each person

Supplement-1 Attach to Form I-539 when more than one person is included in the petition or application. separately. Do not include the person you named on the form).

		1		1	
Family Name		Given Name	Middle Initial	Date of Birth (month/day/year)	
Country		Social	IIIIIdi	A#	
of Birth		Security No.			
IF	,		I-94#		
IF IN	(month/day/year)				
THE					
THE Current Nonimmigrant U.S. Status			Expires on (month/day/year)		
			(montil/day/year)		
Country where passport issued		Expiration Date			
passpo	rtissued	(month/day/year)			
Family		Given	Middle	Date of Birth	
Name		Name	Initial	(month/day/year)	
Country		Social		A#	
of Birth		Security No.			
IF	Date of Arrival		I-94#		
IN	IN (month/day/year)				
THE Current Nonimmigrant			Expires on		
U.S.	Status		(month/day/yea	ar)	
Country where Expiration Date					
passport issued		(month/day/year)			
Family		Given	Middle	Date of Birth	
Name		Name Social	Initial	(month/day/year)	
Country of Birth				A#	
			1		
IF	Date of Arrival		I-94#		
IN					
THE Current Nonimmigrant		Expires on			
U.S.	Status			(month/day/year)	
Country where		Expiration Date			
passport issued		(month/day/year)			
Family		Given	Middle	Date of Birth	
Name		Name	Initial	(month/day/year)	
Country		Social		A#	
of Birth		Security No.			
IF	Date of Arrival		I-94#		
IN	(month/day/year)				
THE	Current Nonimmigrant		Expires on		
U.S.			(month/day/year)		
Country where		Expiration Date			
passport issued		(month/day/year)			
Family		Given	Middle	Date of Birth	
Name		Name	Initial	(month/day/year)	
Country		Social	Innia	A#	
of Birth		Security No.			
IF			I-94#	J	
IF IN	(month/day/year)				
THE	E Current Nonimmigrant				
U.S.			Expires on (month/day/year)		
			(monun/day/year)		
Country where		Expiration Date			
passport issued		(month/day/year)			