

Payment in the U.S. for F/M Visa



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Preferred Customer No. (Numero de Cliente Preferido)

Dollar amount in words: **ONE HUNDRED U.S.**
 Monto en dolares on palabras

Dollar amount: **\$ 100.00**
 No to exceed US\$5,000
 Monto en dolares No debe exceder US\$5,000

Pay to: **U S BANK DHS**
 Paguese a

Code City: **FMSEVISFEE** State: **MO**
 Codigo de ciudad Estado

Sender's name: **JOHN STEINBECK**
 Nombre del remitente

Sender's account number with company: **N0002359074 - 05/05/1980**
 Numero de cuenta del remitente con la empresa

Sender's telephone (area code): **201** Number: **125-2223**
 Telefono del remitente (codigo de area) Numero

Sender's address: **23 GREEN STREET**
 Direccion del remitente

CLEVELAND **OH** **11222**
 City Estado Zip
 Ciudad Estado Codigo postal

Attention: **MALE WAS214F99999003**
 Atencion:

Customer's signature

INSTRUCTIONS

Enter the **dollar amount** in words and numbers

- Enter \$100 to have the I-797 receipt sent by regular mail
- Enter \$130 for expedited delivery

Pay To: US Bank DHS
Code City: FMSEVISFEE
State: MO

The information in the sender block is your information – do not copy the information from the sample.

Sender's Name: Write your name exactly as it appears on your Form I-20

Account Number: Write your SEVIS number exactly as it appears on your Form I-20, followed by a dash "-" and your date of birth in MM/DD/YYYY format

Telephone Number: The telephone number is to help facilitate delivery if you paid for expedited delivery of your I-797 receipt

Address: Write the address where you want your I-797 receipt sent

Attention: Write your gender (male or female), a slash "/", and the school code found on your Form I-20

U.S. Department of Justice
 Immigration and Naturalization Service

Certificate of Eligibility for Nonimmigrant (F-1) Student
 Status - For Academic and Language Students (OMB NO. 1115-0051) Page 1

Please read Instructions on Page 2
 This page must be completed and signed in the U.S. by a designated school official.

1. Family Name (surname): **Steinbeck**
 First (given) Name: **John** Middle Name:
 Country of birth: **FINLAND** Date of birth (mo/day/year): **05/05/1980**
 Country of citizenship: **FINLAND** Admission number:

2. School (School district name):
Test School Updce 1.7.2005
Chinatown Campus

School Official to be notified of student's arrival in U.S. (Name and Title):
Ann Balough
International Student Advisor

School address (include zip code):
800 K Street
Washington, DC 20001

School code (including -digit suffix, if any) and approval date:
WAS214F99999003 approved on **11/20/2002**

3. This certificate is issued to the student named above for:
Initial attendance at this school.

4. Level of education the student is pursuing or will pursue in the United States:
BACHELOR'S

For Immigration Official User

Student's Copy
N0002359074

Visa issuing post Date Visa Issued

Reinstated, extension granted to: