

Susan W. Scheer

ATTORNEY AT LAW

MEMBER OF NJ BAR

THE LIBERTY BUILDING
18 MACCULLOCH AVE.
MORRISTOWN, NJ 07960

PRACTICE LIMITED TO
U.S. IMMIGRATION LAW

TEL: 973-984-8400
FAX: 973-984-8490

To: Potential Client
From: Susan W. Scheer, Esq.
Re: Adjustment of Status Applicant

In response to your possible interest in assisting in the preparation of an Adjustment of Status, enclosed find the following:

1. **Personal Questionnaire - (to be completed by client)**
2. **Adjustment Of Status – Filing Checklist (for reference in assembling documentation)**
3. **Photograph Specifications - (for reference)**
4. **Sample Job and Bank Letter- (for reference)**
5. **Sample Forms I-130, I-485, and G-325 (to be completed by Petitioner and Beneficiary, as applicable)**
6. **Birth and Marriage Certificate Translations (to be completed and notarized, if applicable)**
7. **Synopsis of Matters Handled by Law Office - (for reference)**
8. **Retainer Agreement, for review.** The agreement reflecting terms for processing your case. If acceptable, please return one signed copy for our files.
9. **Self-addressed Envelope - (for return of enclosures)**

If you have any questions, do not hesitate to be in touch with my office. Kindly return the above items as soon as possible, in order to proceed with the preparation of the documents. Thank you for your time and cooperation.

Summaries: AS (Preliminary A.S. Packet – CV,A.S Cklist, PQ, SYN)CL

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PERSONAL ANALYSIS QUESTIONNAIRE

(I-130 Petition/Adjustment of Status Application)

GENERAL INFORMATION

NAME: _____
LAST NAME FIRST MIDDLE

OTHER NAMES, ALIASES, MAIDEN NAME, IF MARRIED: _____

MAILING ADDRESS: _____
NUMBER, STREET, APT# CITY STATE ZIP CODE

TELEPHONE (____) (____) (____) (____)
HOME WORK FAX CELL

PLACE OF BIRTH: _____ CITIZENSHIP: _____
CITY, STATE, COUNTRY

DATE OF BIRTH: ____ / ____ / ____ MARITAL STATUS: _____ SEX: _____

DATE OF LAST ARRIVAL AT U.S.: ____ / ____ / ____ SOCIAL SECURITY #: _____

PLACE OF LAST ARRIVAL AT U.S. _____ USA
City State Country

WERE YOU AN EXCHANGE (J-1) VISITOR? ___ YES ___ NO IF SO, WHEN: ____ / ____ / ____

HAVE YOU EVER BEEN APPREHENDED BY INS OR APPEAR BEFORE AN INS JUDGE IN ANY PROCEEDING? _ YES
NO _ (IF SO, PLEASE EXPLAIN ON THE REVERSE SIDE OF THIS PAGE & FORWARD COPIES OF I.N.S.
CORRESPONDENCE.)

RESIDENCE FOR THE LAST FIVE YEARS - LIST PRESENT ADDRESS FIRST.

Street and Number	City	State	Country	From	To Present
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EMPLOYMENT FOR THE LAST FIVE YEARS - LIST PRESENT ADDRESS FIRST.

Full Name and Address of Employer	Occupation	From	To Present
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INFORMATION ABOUT FAMILY

SPOUSE

SPOUSE'S NAME _____ MAIDEN NAME _____ SOCIAL SECURITY# _____

DATE OF BIRTH _____ PLACE OF BIRTH _____ SPOUSE'S NATIONALITY: _____

DATE OF MARRIAGE _____ PLACE OF MARRIAGE _____ SPOUSE'S OCCUPATION _____

IS YOUR SPOUSE LIVING WITH YOU? ___ YES ___ NO

PRIOR SPOUSE

NAME _____ DATE OF BIRTH _____ PLACE OF BIRTH _____

DATE AND PLACE OF MARRIAGE _____ DATE AND PLACE OF TERMINATION OF MARRIAGE _____

CHILDREN

CHILD NAME	DATE OF BIRTH	PLACE OF BIRTH	RESIDENCE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PARENTS

	First and Last Name	Date of Birth	Place of Birth	Residence
Father	_____	_____	_____	_____
Mother	_____	_____	_____	_____

SPOUSE'S PARENTS

	First and Last Name	Date of Birth	Place of Birth	Residence
Father	_____	_____	_____	_____
Mother	_____	_____	_____	_____

PASSPORT INFORMATION

NUMBER: _____ COUNTRY: _____
VALID TO: _____ NUMBER OF ENTRIES: _____

AMERICAN VISA INFORMATION

DATE ISSUED: ____ / ____ / ____ PLACE ISSUED: _____
TYPE OF VISA: _____ EXPIRATION _____ I-94 # _____ EXPIRATION: _____

HAVE YOU EVER FILED DOCUMENTS WITH THE I.N.S. TO OBTAIN A WORKER PERMIT, GREEN CARD, ASYLUM OR CITIZENSHIP OR RECEIVED ANY CORRESPONDENCE FROM THE I.N.S., OR THE AMERICAN CONSULATE ABROAD? IF YES, PLEASE GIVE DETAILS ON REVERSE, i.e., WHAT FILED, WHEN, WHERE, RESULT.

ADJUSTMENT OF STATUS – MARRIAGE CHECKLIST

We are in need of items indicated by an “X” and/or arrow in order to proceed with the filing:

Proof of US Citizenship of Petitioner

- Birth Certificate showing birth in US** or
 Naturalization Certificate

To avoid payment of \$1000 penalty:

- Proof of lawful entry of Beneficiary i.e., valid visa/I-94 document

To prove marriage:

- Marriage Certificate**, signed by Registrar and issued by governmental agency (not religious entity).

To prove dissolution of prior marriages:

- Divorce Judgment(s)** and/or
 Death Certificate(s)
 Copy of valid passport (passport must be valid by time of interview).
 Birth Certificate of Beneficiary and translation
 Photographs (two of Petitioner/four of Beneficiary)
 Filing Fees make checks payable to Susan W. Scheer in separate check in the following amounts:
- | | |
|-----------------------|---|
| Fingerprinting | \$ 50.00 |
| Form I-130 | \$ 130.00 |
| Form I-485 | \$ 255.00 |
| Form I-485 A | \$1000.00 (<i>If NO proof of lawful entry available</i>) |
| Form I-765 | \$ 120.00 (<i>optional - only required if work authorization application is filed</i>) |
| TOTAL: | \$555.00 (<i>unless form I-485A (\$1000.00) is filed</i>) |

- Affidavit of Support**, executed by spouse.
 Job Letter (s) (sample enclosed)
 Paycheck Stubs, most recent.
 Income Tax Returns and W-2's, for previous three years
 Bank Letter and/or Evidence of Joint Investments (401k, CDs) showing date opened & balance (letter should reflect account in joint names at marital address). Bank letter must be supported by recent bank statements.

This additional documentation and the medical results are brought to the interview. This documentation includes:

- _____ **Photo album** including photos of marriage, family gatherings, celebrations, vacations.
_____ **Envelopes** (correspondence/junk mail/magazines) noting names at marital residence.
_____ **Checking** Accounts/Saving Accounts/Investment Accounts in joint names at marital residence.
_____ **Mortgage/Lease** from Landlord of joint marital residence, supported by receipts/cancelled checks.
_____ **Life/Car/Health Insurance** in joint names, reflecting spouse as beneficiary.
(Copy of declaration page reflecting spouse as second driver)
_____ **Driver's License or D.M.V. non-driver I.D. or Permit** reflecting marital address (for both parties).
_____ Any other **evidence of assets or liabilities in joint names at marital residence**, i.e., cable bill, telephone bill, utility bill, loan documents, credit cards, store cards (Blockbuster, Price Club, Shop Rite, etc.)
_____ **Correspondence and holiday/greeting cards** between husband and wife

SUMMARIES: A.S. (CHECKLIST MARRIAGE)

CONFIRMATION OF BANK ACCOUNT (S)

TO: IMMIGRATION AND NATURALIZATION SERVICE

FROM: NAME OF BANKING INSTITUTION: _____

RE: NAME OF ACCOUNT HOLDER(S): _____

DOB: _____
Month Day Year

POB: _____
City Country

NAME OF ACCOUNT HOLDER(S): _____

DOB: _____
Month Day Year

POB: _____
City Country

ACCOUNT NUMBER (S): _____

STATUS OF ACCOUNT: _____ OPEN _____ CLOSED

MAILING ADDRESS: _____

ACCOUNT BALANCE: _____

DATE ACCOUNT OPENED: _____

DATE ACCOUNT CLOSED: _____
(if applicable)

IF YOU REQUIRE ADDITIONAL INFORMATION, FEEL FREE TO CONTACT THE UNDERSIGNED.

DATE

SIGNATURE OF BANK REPRESENTATIVE
NAME: _____
TITLE: _____

SAMPLE

To be completed and printed on Employer Letterhead

United States Department of Justice
Immigration and Naturalization

Re: Name of Employee:
Position:
Salary:
Name of Emergency Contact (Spouse):
Prospect of Continued Employment: Excellent

To Whom It May Concern:

This is to advise that the above-noted individual is employed as reflected above.

If you require any further information, contact the undersigned.

Thank you.

Very truly yours,

DATE

EMPLOYER'S NAME AND TITLE

SAMPLE

To be completed and printed on Employer Letterhead

United States Department of Justice
Immigration and Naturalization

Re: Name of Employee:
Position:
Salary:
Name of Emergency Contact (Spouse):
Prospect of Continued Employment: Excellent

To Whom It May Concern:

This is to advise that the above-noted individual is employed as reflected above.

If you require any further information, contact the undersigned.

Thank you.

Very truly yours,

DATE

EMPLOYER'S NAME AND TITLE

TRANSLATION - BIRTH CERTIFICATE

NAME: _____
 First **Middle** **Surname(s)**

BIRTH: _____
 City **State** **Country**

DATE: _____
 Month **Day** **Year**

FATHER'S NAME: _____

MOTHER'S NAME: _____

BIRTH REGISTERED ON (Date): _____

PERSON PROVIDING INFORMATION: _____

CERTIFICATE FOUND: Archive/Register: REGISTRY OF BIRTHS _____

BOOK NO.: _____ PAGE NO.: _____ NUMBER: _____

NOTATIONS OF IMPORTANCE: Seal/Fee Stamp Affixed _____

CERTIFICATE ISSUED AT: _____ ON _____
 City **Country** **Date**

NAME/TITLE OF ISSUING OFFICIAL: _____

CERTIFICATION OF TRANSLATOR

I, _____, hereby certify the above is an accurate translation of the original document in the _____ language and I am competent in both ENGLISH and _____ to render such translation.

Date

Signature

Name: _____

Address: _____

TRANSLATION - MARRIAGE CERTIFICATE

NAME OF GROOM: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

NAME OF BRIDE: _____

DATE OF BIRTH: _____

PLACE OF BIRTH: _____

PLACE OF MARRIAGE: _____

DATE OF MARRIAGE: _____

REGISTRY: _____ **BOOK:** _____ **ACT:** _____

TITLE OF OFFICIAL ISSUING: _____

CERTIFICATE: MARRIAGE CERTIFICATE

PLACE OF ISSUANCE: _____

DATE OF ISSUANCE: _____

CERTIFICATION OF TRANSLATOR

I, _____ hereby certify that the above is an accurate translation of the original document in the _____ language and that I am competent in both English and _____ to render such translation.

Date

Signature

Name: _____

Address: _____

Susan W. Scheer

ATTORNEY AT LAW

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SYNOPSIS OF MATTERS HANDLED BY LAW OFFICE

The following is a summary of services handled by my office. Such services are limited to matters arising under the laws of the Immigration & Naturalization Service. These matters most commonly involve:

1. U.S. Employers who seek to hire foreign professionals or skilled workers, or to transfer foreign personnel to existing or newly established branches in the U.S., on a temporary or permanent basis.
2. U.S. citizens or lawful permanent residents who wish to petition to have alien relatives (residing in the U.S. or abroad) enter the U.S. for a limited period of time or to remain in the U.S. permanently.
3. Aliens residing in the U.S. or abroad, who desire to lawfully enter or remain in the U.S. permanently as immigrants.

It is possible for an immigrant visa petition to be filed on behalf of an alien by: (a) a close relative as noted in Item 2 above; or (b) by an Employer who can demonstrate that it is not possible to find a U.S. worker to fill the specific position (i.e., live-in housekeeper, foreign car mechanic, specialty chef, skilled machine operators, nurse, architect, engineer) for which the alien is qualified.

4. Aliens residing in the U.S. or abroad, who desire to lawfully enter or remain in the U.S. temporarily as non-immigrants for a limited period of time and limited purpose i.e. (F-1) students, (B-2) tourists, (L-1) corporate transferees, (H-1) professionals, (H-2)
5. U.S. Employers who desire assistance in complying with the Employee Verification requirements (Form I-9) of the immigration law (IRCA) which took effect in November 1986.
6. Aliens or Employers who require clarification of provisions of the 1996 Immigration Reform Act (i.e., Effective Dates, Sponsorship, Worksite Compliance, Public Benefits Eligibility).

If my office can be of assistance to you in connection with these or any other related matters, feel free to contact us.

R E T A I N E R

PROCESSING OF APPLICATION FOR ADJUSTMENT OF STATUS TO PERMANENT RESIDENT

PETITIONER:

BENEFICIARY:

The undersigned hereby retains the **LAW OFFICE OF SUSAN W. SCHEER**, 18 Macculloch Avenue, Morristown, New Jersey 07960, in connection with the processing of the above matter. The undersigned has been informed of the steps that have to be taken to process this matter and agrees to pay the above Law Office the legal fee in the sum of **\$3600.00 + Disbursements**, for the following services:

1. Consultation with client to gather information and documentation in connection with preparation of Adjustment of Status application including the following: I-485, I-130, G-325A, I-864, and F.D.-258.
2. Preparation and submission of petition to Client for review prior to filing with I.N.S.
3. Preparation and filing of Adjustment of Status application with I.N.S. to obtain interview date for case and request employment authorization for applicant.
4. Monitor gathering of documentation by client prior to final interview at I.N.S.
5. Preparation of supporting documentation for final interview and counselling of Client prior to Visa Appointment at I.N.S.
6. Accompany client to Adjustment of Status interview at I.N.S. and monitor interview.
7. Disbursements include, but are not limited to, Filing Fees, Duplicating Fees, and Postage Fees.

The payment of the above stated fee shall be made as follows:

\$1200.00 Down payment, plus filing fees, to be paid upon commencement of case

\$1200.00 Upon notification of readiness for filing

\$1200.00 Upon notification of interview date

Client understands that fee for additional family members to be included in final Visa Appointment will be and additional \$500 per individual.

**** IN THE EVENT CASE IS DISCONTINUED THROUGH NO FAULT OF THE ATTORNEY'S OFFICE, 50% OF PREVIOUS PAYMENTS MAY BE CREDITED TOWARDS A NEW CASE IF ACCOUNT IS CURRENT AS PER RETAINER. THERE WILL BE NO REFUNDS OF ANY MONIES PAID.**

All filing fees and disbursements are the responsibility of the clients. Payments received shall be applied first to filing fees and disbursements then to reduce the account balance for legal fees. In the event there is a balance remaining at the completion of the case or at the time a visa appointment is scheduled, the remaining balance, if any, shall be accelerated and become due and payable immediately. The client further understands that the above fee does not include appearances by attorney in any United States Court; if required, fee will be determined prior to court appearance.

The client has read the above retainer, understands the meaning of its terms and has received a copy of the same.

Date

Susan W. Scheer, Esq.