

Hemos incluido instrucciones en español, pero ¡la prueba de su pago a la corte debe estar en inglés!

Your Name:

Your Address:

**UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
BOARD OF IMMIGRATION APPEALS**

In the Matter(s) of:

(Your Name)

File No.: A

(your alien registration number)

(Name of any spouse or child included in your case)

A

(Name of any spouse or child included in your case)

A

***Solo incluya esta parte si usted tiene un esposo/a o hijos incluidos en su caso en la corte de inmigración**

Proof of Payment of Annual Asylum Fee - BIA

Paid using “Court - Form I-589, Annual Asylum Fee for Asylum and for Withholding of Removal (AAF)” on the EOIR Payment Portal because there is no current option to pay the Annual Asylum Fee to the BIA specifically.

[INSERT YOUR PAYMENT RECEIPT HERE]

[Incluya su recibo de pago aquí]

CERTIFICATE OF SERVICE

On Escriba la fecha aquí, I, Escriba su nombre completo aquí,
(date) (your name)

served a copy of this Proof of Payment of Annual Asylum Fee - BIA to:
the ICE Office of Chief Counsel (OPLA)

at the following address: Escriba la dirección del fiscal aquí. Puede usar esta página web para buscarla: <https://www.ice.gov/es/contactenos/oficinas-de-campo>.
(address of the government attorney)

by Escriba cómo va a enviarle una copia al fiscal. Ejemplo: si usa el correo nacional, puede escribir "USPS mail."
(method of service, for example: "mail" or "in-person delivery")

Firme aquí

(your signature)

Escriba la fecha aquí mes/
día/año (mm/dd/aaa)

(date)