Law Office of Willia	aw Office of William Jang, PLLC EB-1 International Executive Transferee Information Sheet						
	A)	) Principal Beneficia	ary (Executive	Transferee)			
1) Full Name			2) City and Country of Birth		3) Has Beneficiary been in U.S.		
4) All Other Names	Used (including maid	en name) 5) A Number (if any)		if any)	6) Social Security Number (if any)		
7) If not in US, Desi	sired Consular (City)	8) Name and addre	Name and address in native language, if not nat		ive language is not roman.		
9) Home Phone	10) Cell Phone	11) Office Phone	12) Fax	13) E-Mail			
9) Home Frione	10) Cell Frione	11) Office Friorie	12) Fax	13) E-Iviali		-	
14) Father's full nar	_ <del></del> me	15) Father's Date, (	5) Father's Date, City and Country of Birth		16) City and Cou	intry of Residence	
		107. adioi o Bato, ony ana obantry of Bitti					
17) Mother's full na	me (maiden)	18) Mother's Date,	18) Mother's Date, City and Country of Birth			19) City and Country of Residence	
20\ 0						22) Data of Courant Manniana	
20) Current spouse	e's full name (maiden)	21) Place of Curren	ıt Marrıage		22) Date of Current Marriage		
23) Former spouse	s full name (maiden)	24) Former spouse	s Date, City an	d Country of Birt	25) Date and Place of Marriage		
		<del> </del>			<del>                                     </del>		
			. List present address first		From	То	
Street ar	nd Number	City	State/Country	Zip Code	month/year	month/year	
		+	<del>                                     </del>	<del> </del>	<del> </del>	Present	
		<del> </del>	<u> </u>	<u> </u>	<del> </del>	<del> </del>	
				<u></u>			
27) Beneficiary's las	st address outside the	United States of mo	ore than one ve	ar	From	То	
_ ′ •	nd Number	City	State/Country	7	month/year	month/year	
20) D fisis male From	t leat Eve week	"tata) Liat	-t - randaum	. C -1	From		
28) Beneficiary's Emp	ployment last five years ( Full name and addre		present employir	nent first. Occupation	From month/year	To month/year	
Tail Hame and address of employer						Present	
				<u> </u>	<del> </del>	<u> </u>	
					<u> </u>	<u> </u>	
				<del>                                     </del>	<del>                                     </del>	<u> </u>	
OO) Charr balaw las	-tation obroad if	f at abayya abayya			From	То	
29) Show below last occupation abroad if not shown above  Full name and address of employer				Occupation	From month/year	month/year	
30) (	30) Current US Address (if any)			31) Current Foreign Address (if any)			
32) Activity to be n	verformed by heneficiary	in the LIS company	33) Position	33) Position Being Offered 34) Proposed Wages/Salar			
32) Activity to be performed by beneficiary in the US company.			50) i Usition Deing Oneieu   54) Flupuseu Wayes/Salal			a wages/Salary	

	pal Applicant's Spe	ouse (if none p	olease write nor	ne)			
1) Full Name	2) City and Country of Birth		3) Has Beneficiary been in U.S.				
4) All Other Names Used (including maide	5) A Number (if any)		6) Social Security Number (if any)				
4) 7 iii Othor Names Coca (mordanig mara	3) A Number (II arry)		o) Social Security Number (ii arry)				
7) If not in US, Desired Consular (City)	8) Name and addre	ss in native lan	guage, if not nat	ive language is r	not roman.		
O) Fath and full access	40) Fatharia Data (	Site and Oncomb	at Dinth	144) 0': 10	. (5 :1		
9) Father's full name	10) Father's Date, City and Country of Birth			11) City and Country of Residence			
12) Mother's full name (maiden)	13) Mother's Date, City and Country of Birth			14) City and Country of Residence			
,	(a) Modificio Butto, only and Country of Birth						
15) Former spouse's full name (maiden)	16) Former spouse's Date, City and Country of Birth		17) Date and Place of Marriage				
18) Beneficiary's Employment last five years (	if none. so state). List	present employm	nent first.	From	То		
Full name and addre			Occupation	month/year	month/year		
					Present		
19) Show below last occupation abroad if	not shown above		•	From	То		
Full name and addre	ss of employer		Occupation	month/year	month/year		
	ildren's Informatio			CC # (if any)	Λ # (if on s)		
1) Full Name	Accompanying?	City of Birth	Country of Birth	SS # (if any)	A # (if any)		
2) Is any of your children currently employed or ever been employed in the past? If so please list all employment.							
Has any of your children ever been married or have any children?							
D) (	Questions to Princi	pal Beneficiar	v and Family				
Has anyone been removed or deported				ease provide info	ormation):		
2) Has an immigration (green card) application been filed for any one? (if yes, please provide information):							
3) Has anyone been arrested, charged, or had	l any dealings with not	ice or had other	criminal problems	) (if yes provide de	ataile):		
o) has anyone been arrested, charged, or had	a arry dealings with por	ice of flad officer	chiminal problems	(ii yes provide de	rians).		
4) Has anyone been previously employed	in the US? (If yes,	please provide	information):				
5) Please list all previously issued visas:							
6) Please list all previously refused visas:							
b) i louse list all previously relused visus.							
7) Has anyone previously applied for employment authorization? If so, when and where? Was it approved?							
8) List all organizations, clubs, that anyone has belonged to in the past or belongs to currently.							
9) Has anyone served in a military? (if yes, provide, name of military (army, navy), dates location and nature of service).							
o, riad arryond dorved in a military: (ii yed, provide, riame or military (army, navy), dates location and nature of service).							

	E) Ir	nformation about the	he US Petitioning Company				
1) Name of t	the Company		2) Company Address				
3) Manager/Officer's Name and Title (contact person)		4) Type of Business					
E) Company Phone	6) Company Fay		7) Company Contact Person's E-mail Address				
5) Company Phone	6) Company Fax		7) Company Contact Persons	z-maii Address			
8) Year Established	9) Gross Income	10) Net Income	11 Website Address	12) EIN#	13) # of Workers		
	<i> </i>	,		,	,		
		14) Company O	wnership Information		,		
	Name of Owner(s)	, ·	% of ownership	Immi. Status	Nationality		
	E\ Info	rmation about Affil	l liated Company outside of US				
1) Name of t	the Company	mation about Am	2) Company Addre				
1) Name of	ine Company		2) Company Addre	33			
3) Manager/Offic	cer's Name and Title (	contact person)	4) Type	4) Type of Business			
2, 33 3.5		, ,	1) Type of Edelinood				
5) Company Phone	6) Company Fax		7) Company Contact Person's	E-mail Address			
8) Year Established	9) Gross Income	10) Net Income	11 Website Address	12) EIN#	13) # of Workers		
	Name of Own and a	14) Company O	wnership Information	Image: Otatus	Nietienelite.		
Name of Owner(s) % of ownership Immi. Status					Nationality		
					<del> </del>		
		G) Needed Docum	nents:		Check List		
		Beneficia	ry and Family:				
	Passports for all indiv						
	2. Copy of Government Document proving family relationship (Birth Certificate, Marriage Certificates)						
,	ails of prior experience	<u> </u>	,				
	e Degrees and Transo		orior work with affiliated compan	<u>y</u>			
	mits (if job requires su				<del> </del>		
	, ,		enial notices, I-20, etc.				
8. Criminal Docume							
		al beneficiary and a	II accompanying family member	S.			
10. Medical Examina	ation from a Physiciar	designated by US	CIS				
11. Copy of Prior En	nployment Authorizati	on Card(s) (if any).					
			Company:				
			etitioner is a corporation or LLC	)			
13. Share Certificate or Unit Certificate (if Petitioner is a corporation or LLC)							
14. Partnership Agreement (if Petitioner is a partnership)							
15. Assumed Name Certificate (if any) 16. Copies of Lease Agreement and Assignment of Lease							
17. Organizational Chart							
18. Pictures of the Business/Office/Factory							
	Statements (last three	•					
•	`	,		•	<u> </u>		

20. Copies of Employer's Quarterly Reports				
21. Copies of Receipts and Invoices				
22. Copies of Advertisements (if any)				
23. Tax Returns				
24. Latest Company Financial Statements (Income Statement/Balance Sheet)				
25. Business Plan or Company Brochure (if any - three copies)				
Foreign Affiliated Company:				
26. Company Registration;				
27. Tax Documents;				
28. Financial Statement (Income Statement and Balance Sheet);				
29. Organizational Chart;				
30. Pictures of the Business/Office/Factory				
31. Lease;				
32. Pictures of Business/Office/Factory;				
33. Copies of Receipts and Invoices;				
34. Company Brochure (three copies)				