

The United States government passed legislation (H.R. 3402 Violence against women and Department of Justice Reauthorization Act of 2005). A portion of this legislation requires us to collect from United States citizens or residents the following personal disclosure background information. Please fill out the information below truthfully and completely, sign and date, and send it back to us.

Full Name:

Personal Contact:

Address with Zip Code:

1. Any temporary or permanent civil protection order or restraining order issued against you? (Yes or No)

*Explain:*

2. Are you currently married? (Yes or No)

*Explain:*

3. Have you previously been married? (Yes or No)

*Explain:*

4. Any arrest or conviction? (Yes or No)

*Explain:*

5. Have you previously sponsored an alien to whom you were engaged or married? (Yes or No)

*Explain:*

6. Do you have any children under the age of 18? (Yes or No, how many?)

*Explain:*

7. Please list all states that you have resided in since the age of 18!

*Explain:*

I (Member ID: ) declare that all information given herein is true and correct, and I agree to provide this information to lady (Member ID: ) for requesting her contact detail.

Signature:

Date: