

# United States of America

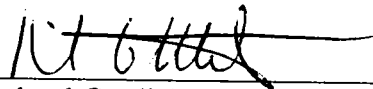
DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE

April 22, 2002

## CERTIFICATION

BY VIRTUE OF the authority vested in me by Title 8, Code of Federal Regulations, Part 103 a regulation issued by the Attorney General pursuant to Section 103 of the Immigration and Nationality Act,

I HEREBY CERTIFY that the annexed documents are originals, or copies thereof, from the records of the said Immigration and Naturalization Service, Department of Justice, relating to File No. A73 142 059, of which the Attorney General is the legal custodian by virtue of Section 103 of the Immigration and Nationality Act.



Richard Gottlieb  
Officer in Charge  
Charlotte, North Carolina



**START HERE - Please Type or Print**

**Part 1. Information about you.**

Family Name <i>Darwiche</i>	Given Name <i>Ali</i>	Middle Initial
Address - C/O		
Street Number and Name <i>6306 Kendal St.</i>	Apt. #	
City <i>Dearborn</i>	State <i>Michigan</i>	
Date of Birth (month/day/year) <i>12-18-70</i>	Country of Birth <i>Lebanon</i>	Zip Code <i>48126</i>
Social Security # <i>103-82-4370</i>	A # (if any) <i>73 142 059</i>	
Date of Last Arrival (month/day/year) <i>2-14-98</i>	I-94 # <i>482621197 04</i>	
Current INS Status <i>B-2</i>	Expires on (month/day/year) <i>N/A</i>	

**Part 2. Application Type. (check one)**

I am applying for adjustment to permanent resident status because:

- a.  an immigrant petition giving me an immediately available immigrant visa number has been approved (attach a copy of the approval notice), or a relative, special immigrant juvenile, or special immigrant military visa petition filed with this application will give me an immediately available visa number if approved.
- b.  My spouse or parent applied for adjustment of status or was granted lawful permanent residence in an immigrant visa category which allows derivative status for spouses and children.
- c.  I entered as a K-1 fiance(e) of a U.S. citizen whom I married within 90 days of entry, or I am the K-2 child of such a fiance(e) (attach a copy of the fiance(e) petition approval notice and the marriage certificate).
- d.  I was granted asylum or derivative asylum status as the spouse or child of a person granted asylum and am eligible for adjustment.
- e.  I am a native or citizen of Cuba admitted or paroled into the U.S. after January 1, 1959, and thereafter have been physically present in the U.S. for at least 1 year.
- f.  I am the husband, wife, or minor unmarried child of a Cuban described in (e) and am residing with that person, and was admitted or paroled into the U.S. after January 1, 1959, and thereafter have been physically present in the U.S. for at least 1 year.
- g.  I have continuously resided in the U.S. since before January 1, 1972.
- h.  Other-explain \_\_\_\_\_

I am already a permanent resident and am applying to have the date I was granted permanent residence adjusted to the date I originally arrived in the U.S. as a nonimmigrant or parolee, or as of May 2, 1964, whichever is later, and: (Check one)

- i.  I am a native or citizen of Cuba and meet the description in (e), above.
- j.  I am the husband, wife or minor unmarried child of a Cuban, and meet the description in (f), above.

**FOR INS USE ONLY**

Returned	Receipt
Resubmitted <i>3824 001</i>	<i>05/26/00 12:55</i> <i>1-485 220.00</i>
Reloc Sent	
Reloc Rec'd <i>3824 001</i>	<i>05/26/00 12:55</i> <i>FINGER PRINT 25.00</i>
<input type="checkbox"/> Applicant Interviewed	
<b>Section of Law</b>	
<input type="checkbox"/> Sec. 209(b), INA <input type="checkbox"/> Sec. 13, Act of 9/11/57 <input type="checkbox"/> Sec. 245, INA <input type="checkbox"/> Sec. 249, INA <input type="checkbox"/> Sec. 1 Act of 11/2/66 <input type="checkbox"/> Sec. 2 Act of 11/2/66 <input type="checkbox"/> Other _____	
<b>Country Chargeable</b>	
<b>Eligibility Under Sec. 245</b>	
<input type="checkbox"/> Approved Visa Petition <input type="checkbox"/> Dependent of Principal Alien <input type="checkbox"/> Special Immigrant <input type="checkbox"/> Other _____	
<b>Preference</b>	
<b>Action Block</b>	
<p>To Be Completed by <b>Attorney or Representative, if any</b></p> <input type="checkbox"/> Fill in box if G-28 is attached to represent the applicant	
VOLAG#	
ATTY State License #	

Non-Resident - 5/26/2000 - 9:54

**Part 3. Processing Information.**

A. City/Town/Village of birth	Sarbine	Current occupation	Cashier
Your mother's first name	Rasmie	Your father's first name	Hussein

Give your name exactly how it appears on your Arrival/Departure Record (Form I-94)  
 Ali Darwiche

Place of last entry into the U.S. (City/State)	New York, N.Y.	In what status did you last enter? (Visitor, Student, exchange alien, crewman, temporary worker, without inspection, etc.)	B-2
Were you inspected by a U.S. Immigration Officer?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Nonimmigrant Visa Number	NIA	Consulate where Visa was issued	NIA
Date Visa was Issued (month/day/year)	NIA	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed

Have you ever before applied for permanent resident status in the U.S?  No  Yes (give date and place of filing and final disposition):

B. List your present husband/wife, all of your sons and daughters (if you have none, write "none". If additional space is needed, use separate paper).

Family Name	Haynes	Given Name	Melanie	Middle Initial	L.	Date of Birth (month/day/year)	7-7-80
Country of birth	U.S.A.	Relationship	wife	A #	NIA	Applying with you?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Family Name		Given Name		Middle Initial		Date of Birth (month/day/year)	
Country of birth		Relationship		A #		Applying with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name		Given Name		Middle Initial		Date of Birth (month/day/year)	
Country of birth		Relationship		A #		Applying with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Family Name		Given Name		Middle Initial		Date of Birth (month/day/year)	
Country of birth		Relationship		A #		Applying with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No

C. List your present and past membership in or affiliation with every political organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other place since your 16th birthday. Include any foreign military service in this part. If none, write "none". Include the name of organization, location, dates of membership from and to, and the nature of the organization. If additional space is needed, use separate paper.

NONE

### Part 3. Processing Information. (Continued)

Please answer the following questions. ( If your answer is "Yes" on any one of these questions, explain on a separate piece of paper. Answering "Yes" does not necessarily mean that you are not entitled to register for permanent residence or adjust status).

1. Have you ever, in or outside the U. S.:
  - a. knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested?
  - b. been arrested, cited, charged, indicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations?
  - c. been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action?
  - d. exercised diplomatic immunity to avoid prosecution for a criminal offense in the U. S.?

Yes  No
  
2. Have you received public assistance in the U.S. from any source, including the U.S. government or any state, county, city, or municipality (other than emergency medical treatment) , or are you likely to receive public assistance in the future?

Yes  No
  
3. Have you ever:
  - a. within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future?
  - b. engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling?
  - c. knowingly encouraged, induced, assisted, abetted or aided any alien to try to enter the U.S. illegally?
  - d. illicitly trafficked in any controlled substance, or knowingly assisted, abetted or colluded in the illicit trafficking of any controlled substance?

Yes  No
  
4. Have you ever engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited membership or funds for, or have you through any means ever assisted or provided any type of material support to, any person or organization that has ever engaged or conspired to engage, in sabotage, kidnapping, political assassination, hijacking, or any other form of terrorist activity?

Yes  No
  
5. Do you intend to engage in the U.S. in:
  - a. espionage?
  - b. any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence or other unlawful means?
  - c. any activity to violate or evade any law prohibiting the export from the United States of goods, technology or sensitive information?

Yes  No
  
6. Have you ever been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?

Yes  No
  
7. Did you, during the period March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist or otherwise participate in the persecution of any person because of race, religion, national origin or political opinion?

Yes  No
  
8. Have you ever engaged in genocide, or otherwise ordered, incited, assisted or otherwise participated in the killing of any person because of race, religion, nationality, ethnic origin, or political opinion?

Yes  No
  
9. Have you ever been deported from the U.S., or removed from the U.S. at government expense, excluded within the past year, or are you now in exclusion or deportation proceedings?

Yes  No
  
10. Are you under a final order of civil penalty for violating section 274C of the Immigration Act for use of fraudulent documents, or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the U.S., or any other immigration benefit?

Yes  No
  
11. Have you ever left the U.S. to avoid being drafted into the U.S. Armed Forces?

Yes  No
  
12. Have you ever been a J nonimmigrant exchange visitor who was subject to the 2 year foreign residence requirement and not yet complied with that requirement or obtained a waiver?


Yes  No
  
13. Are you now withholding custody of a U.S. Citizen child outside the U.S. from a person granted custody of the child?

Yes  No
  
14. Do you plan to practice polygamy in the U.S.?

Yes  No

**Part 4. Signature.** (Read the information on penalties in the instructions before completing this section. You must file this application while in the United States.)

I certify under penalty of perjury under the laws of the United States of America that this application, and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking.

Signature		Print Your Name	Date	Daytime Phone Number
X		Ali H. Dawichne	5-17-00	(313) 802-8664

**Please Note:** If you do not completely fill out this form, or fail to submit required documents listed in the instructions, you may not be found eligible for the requested document and this application may be denied.

**Part 5. Signature of person preparing form if other than above. (Sign Below)**

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature	Print Your Name	Date	Day time Phone Number
-----------	-----------------	------	-----------------------

Firm Name  
and Address

ADIT WORKSHEET

A# \_\_\_\_\_  
Your file number (if known)

Darwiche                      Ali                      Hachem  
Last name                      First name                      Middle name

12, 18, 70                      Lebanon  
Date of birth                      Country of birth

Sarbine                      \_\_\_\_\_  
City/town/village of birth                      Country in which you last resided outside the U.S.

Dearborn                      New York  
City in which you now reside                      City of destination when admitted to the U.S.

New York, N.Y.  
Port of admission

Your current address:

6306 Kendal St.  
Number and street                      Apartment number

Dearborn                      MI                      48126  
City                      State                      Zip Code

Rasmie                      Hussein  
Mother's first name                      Father's first name

Cashier                      N<sup>o</sup> 48262119704  
Your occupation (or indicate unemployed)                      Your admission number on Form I-94

N/A                      1051697, Lebanon  
Visa number and city of issue                      Passport number and country

Departure Number

482621197 04

Immigration and  
Naturalization Service

I-94  
Departure Record

DA

ISSUED PURSUANT TO SEC. 212(d) (9) OF THE INA ACT TO		
Feb-13, 1999		
PURPOSE:		
Relief of J. H. H. H.		
(Port)	(Date)	(Office)
MEA	2/14/98	132

14. Family Name	DARWICHE	16. Birth Date (Day/Mo/Yr)
15. First (Given) Name	ALI	18.12.70
17. Country of Citizenship	LEBANON	

See Other Side

STAPLE HERE

٧٥٤٤٥١

VISAS التأشيرات

PAROLED PURSUANT TO SEC. 212(d) (3) OF THE I & N ACT TO:		
FEB-13, 1999		
PURPOSE:		
admission to States		
(Port)	(Date)	(Officer)
MEA 21/4/98 1321		

VISAS التأشيرات

PAROLED until 04 Feb 96		
PURPOSE:		
I-485 Pending		
AS per I-512		
NYC 09/09/05 2495		
(Port)	(Date)	(Officer)

A# 73142059

PAROLED until: APR 26 1998		
PURPOSE:		
I-486 Pending		
APR 27 1997 - NYC 16313		
(Port)	(Date)	(Officer)



(Family name) Darwiche	(First name) Ali	(Middle name) Hussein	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.) 12-18-70	NATIONALITY Lebanese	FILE NUMBER A-73 142 059
ALL OTHER NAMES USED (Including names by previous marriages) None			CITY AND COUNTRY OF BIRTH Sarbine Lebanon		SOCIAL SECURITY NO. (If any) 103-82-9370	
FATHER MOTHER (Maiden name) Darwiche Rasmie	FAMILY NAME Darwiche Hussein	DATE, CITY AND COUNTRY OF BIRTH (If known) Lebanon	CITY AND COUNTRY OF RESIDENCE (deceased) Lebanon (deceased)			
HUSBAND (If none, so state) OR WIFE Wife	FAMILY NAME (For wife, give maiden name) Haynes	FIRST NAME Melanie	BIRTHDATE 7-7-80	CITY & COUNTRY OF BIRTH Charlotte, N.C. U.S.A.	DATE OF MARRIAGE 11-9-99	PLACE OF MARRIAGE Charlotte, N.C./USA
FORMER HUSBANDS OR WIVES (if none, so state)						
FAMILY NAME (For wife, give maiden name) Martinez	FIRST NAME Diane	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE 1-22-99 Queens N.Y.		

APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR
6306 Kendal St.	Dearborn	Michigan	U.S.A.	11	99	PRESENT TIME	
5425 Bonnetfield Dr.	Charlotte	North Carolina	U.S.A.	4	99	11	99
1206 Kelston Pl. # 201	Charlotte	North Carolina	U.S.A.	2	97	4	99
35th st.	Queens	New York	U.S.A.	1	95	2	97

APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR

APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST

FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION (SPECIFY)	FROM		TO	
		MONTH	YEAR	MONTH	YEAR
Ron's Gas & Mart 12340 Dexter, Detroit, MI	Cashier	11	99	PRESENT TIME	
Cedarland Charlotte, N.C.	Cook	10	98	4	99
Domino's Charlotte, N.C.	Cook	19	96	10	98
Flea Market Queens N.Y.	Sales	1	95	1	96

Show below last occupation abroad if not shown above. (Include all information requested above.)

THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR:	SIGNATURE OF APPLICANT	DATE
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER (SPECIFY): <input checked="" type="checkbox"/> STATUS AS PERMANENT RESIDENT	X	5-17-00
Are all copies legible? <input checked="" type="checkbox"/> Yes	IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE:	

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

**APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.**

COMPLETE THIS BOX (Family name)	(Given name)	(Middle name)	(Alien registration number)
Darwiche	Ali	Hussein	A73142059

Form 9003  
(October 1994)

## Additional Questions to be Completed by All Applicants for Permanent Residence in the United States

**This form must accompany your application for permanent residence in the United States**

**Privacy Act Notice:** Your responses to the following questions will be provided to the Internal Revenue Service pursuant to Section 6039E of the Internal Revenue Code of 1986. Use of this information is limited to that needed for tax administration purposes. Failure to provide this information may result in a \$500 penalty unless failure is due to reasonable cause.

On the date of issuance of the Alien Registration Receipt Card, the Immigration and Naturalization Service will send the following information to the Internal Revenue Service: your name, social security number, address, date of birth, alien identification number, occupation, class of admission, and answers to IRS Form 9003.

Name (Last—Surname—Family) (First—Given) (Middle Initial)

Darwiche Ali Hussein

Taxpayer Identification Number . . . . .

Enter your Social Security Number (SSN) if you have one. If you do not have an SSN but have used a Taxpayer Identification Number issued to you by the Internal Revenue Service, enter that number. Otherwise, write "NONE" in the space provided; i.e., "\_\_\_\_\_|N|O|N|E|".

	Mark appropriate column	
	Yes	No
1. Are you self-employed? Mark "yes" if you own and actively operate a business in which you share in the profits other than as an investor.		X
2. Have you been in the United States for 183 days or more during any one of the three calendar years immediately preceding the current calendar year? Mark "yes" if you spent 183 days or more (not necessarily consecutive) in the United States during any one of the three prior calendar years whether or not you worked in the United States.	X	
3. During the last three years did you receive income from sources in the United States? Mark "yes" if you received income paid by individuals or institutions located in the United States. Income includes, but is not limited to, compensation for services provided by you, interest, dividends, rents, and royalties.		X
4. Did you file a United States Individual Income Tax Return (Forms 1040, 1040A, 1040EZ or 1040NR) in any of the last three years?		X

If you answered yes to question 4, for which tax year was the last return filed? . . . . . 19 ~~X~~ ~~X~~

**Paperwork Reduction Act Notice**—We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws and to allow us to figure and collect the right amount of tax.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 5 minutes. If you have comments concerning the accuracy of this time estimate or suggestions for making this form more simple, we would be happy to hear from you. You can write to both the **Internal Revenue Service**, Attention: Reports Clearance Officer, PC:FP, Washington, DC 20224, and the **Office of Management and Budget**, Paperwork Reduction Project (1545-1065), Washington, DC 20503. **DO NOT send this form to either of these offices. Instead, return it to the appropriate office of the Department of State or the Immigration and Naturalization Service.**

Remarks

**DO NOT WRITE IN THIS BLOCK - FOR EXAMINING OFFICE ONLY**

Case ID#	Action Stamp	Fee Stamp 8824 001 05/26/00 12:55 I-130 110.00
A#		
G-28 or Volag #		
Section of Law: <input type="checkbox"/> 201 (b) spouse <input type="checkbox"/> 203 (a)(1) <input type="checkbox"/> 201 (b) child <input type="checkbox"/> 203 (a)(2) <input type="checkbox"/> 201 (b) parent <input type="checkbox"/> 203 (a)(4) <input type="checkbox"/> 203 (a)(5)	Petition was filed on: _____ (priority date) <input type="checkbox"/> Personal Interview <input type="checkbox"/> Previously Forwarded <input type="checkbox"/> Pet. <input type="checkbox"/> Ben. "A" File Reviewed <input type="checkbox"/> Stateside Criteria <input type="checkbox"/> Field Investigations <input type="checkbox"/> I-485 Simultaneously <input type="checkbox"/> 204 (a)(2)(A) Resolved <input type="checkbox"/> 204 (h) Resolved	
Remarks:		

**A. Relationship**

1. The alien relative is my  Husband/Wife     Parent     Brother/Sister     Child     Yes

2. Are you related by adoption?     No     Yes

3. Did you gain permanent residence through adoption?     Yes     No

**B. Information about you**

1. Name (Family name in CAPS) (First) (Middle)  
 HAYNES Melanie Lynn

2. Address (Number and Street) (Apartment Number)  
 6306 Kendal St.  
 (Town or City) (State/Country) (ZIP/Postal Code)  
 Dearborn MI/USA 48126

3. Place of Birth (Town or City) (State/Country)  
 Charlotte North Carolina/USA

4. Date of Birth (Mo/Day/Yr) 5. Sex 6. Marital Status  
 7-7-80     Male     Married     Single  
 Female     Widowed     Divorced

7. Other Names Used (including maiden name)  
 None

8. Date and Place of Present Marriage (if married)  
 11-9-99, Charlotte, N.C.

9. Social Security Number 10. Alien Registration Number (if any)  
 237-69-8115    N/A

11. Names of Prior Husbands/Wives 12. Date(s) Marriages(s) Ended  
 None    None

**C. Information about your alien relative**

1. Name (Family name in CAPS) (First) (Middle)  
 DARWICHE Ali Hussein

2. Address (Number and Street) (Apartment Number)  
 6306 Kendal St.  
 (Town or City) (State/Country) (ZIP/Postal Code)  
 Dearborn MI/USA 48126

3. Place of Birth (Town or City) (State/Country)  
 Sarbine Lebanon

4. Date of Birth (Mo/Day/Yr) 5. Sex 6. Marital Status  
 12-18-70     Male     Married     Single  
 Female     Widowed     Divorced

7. Other Names Used (including maiden name)  
 None

8. Date and Place of Present Marriage (if married)  
 11-9-99 Charlotte, N.C.

9. Social Security Number 10. Alien Registration Number (if any)  
 103-82-9370    A73142059

11. Names of Prior Husbands/Wives 12. Date(s) Marriages(s) Ended  
 Diane Martinez    1-22-99

**13. If you are a U.S. citizen, complete the following:**

My citizenship was acquired through (check one)  
 Birth in the U.S.  
 Naturalization (Give number of certificate, date and place it was issued)  
 N/A

Parents  
 Have you obtained a certificate of citizenship in your own name?  
 Yes     No  
 If "Yes", give number of certificate, date and place it was issued  
 N/A

**14a. If you are a lawful permanent resident alien, complete the following:**

Date and place of admission for, or adjustment to, lawful permanent residence, and class of admission:  
 N/A

**14b. Did you gain permanent resident status through marriage to a United States citizen or lawful permanent resident?**

Yes     No

**13. Has your relative ever been in the U.S.?**

Yes     No

**14. If your relative is currently in the U.S., complete the following: He or she last arrived as a** (visitor, student, stowaway, without inspection, etc.)

B-2  
 Arrival/Departure Record (I-94) Number    Date arrived (Month/Day/Year)  
 4812 62111917014    2/14/98  
 Date authorized stay expired, or will expire, as shown on Form I-94 or I-95  
 N/A

**15. Name and address of present employer (if any)**

N/A  
 Date this employment began (Month/Day/Year)  
 N/A

**16. Has your relative ever been under immigration proceedings?**

Yes     No    Where \_\_\_\_\_ When \_\_\_\_\_  
 Exclusion     Deportation     Recission     Judicial Proceedings

INITIAL RECEIPT	RESUBMITTED	RELOCATED		COMPLETED		
		Rec'd	Sent	Approved	Denied	Returned

Non-Resident - Spouse - 9/24/98 - 9/24/98

**C. (continued) Information about your alien relative**

16 List husband/wife and all children of your relative (if your relative is your husband/wife, list only his or her children).

(Name) (Relationship) (Date of Birth) (Country of Birth)

None

17. Address in the United States where your relative intends to live

(Number and Street) (Town or City) (State)  
6306 Kendal St. Dearborn Michigan

18. Your relative's address abroad

(Number and Street) (Town or City) (Province) (Country) (Phone Number)  
N/A

19. If your relative's native alphabet is other than Roman letters, write his or her name and address abroad in the native alphabet:

(Name) (Number and Street) (Town or City) (Province) (Country)

20. If filing for your husband/wife, give last address at which you both lived together:

(Name) (Number and Street) (Town or City) (Province) (Country) From To  
(Month) (Year) (Month) (Year)  
Al: Darwicke 6306 Kendal Dearborn, MI, USA 11 99 Present

21. Check the appropriate box below and give the information required for the box you checked:

Your relative will apply for a visa abroad at the American Consulate in \_\_\_\_\_  
(City) (Country)

Your relative is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Naturalization Service at Detroit, Michigan If your relative is not eligible for adjustment of status, he or she will  
(City) (State)

apply for a visa abroad at the American Consulate in \_\_\_\_\_  
(City) (Country)

(Designation of a consulate outside the country of your relative's last residence does not guarantee acceptance for processing by that consulate. Acceptance is at the discretion of the designated consulate.)

**D. Other Information**

1. If separate petitions are also being submitted for other relatives, give names of each and relationship.

None

2. Have you ever filed a petition for this or any other alien before?  Yes  No

If "Yes," give name, place and date of filing, and result.

N/A

**Warning:** The INS investigates claimed relationships and verifies the validity of documents. The INS seeks criminal prosecutions when family relationships are falsified to obtain visas.

**Penalties:** You may, by law be imprisoned for not more than five years, or fined \$250,000, or both, for entering into a marriage contract for the purpose of evading any provision of the immigration laws and you may be fined up to \$10,000 or imprisoned up to five years or both, for knowingly and willfully falsifying or concealing a material fact or using any false document in submitting this petition.

**Your Certification:** I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit that I am seeking.

Signature x Melanie Hughes Date 5-17-00 Phone Number (313) 802-8664

Signature of Person Preparing Form if Other than Above

I declare that I prepared this document at the request of the person above and that it is based on all information of which I have any knowledge.

Print Name \_\_\_\_\_ (Address) \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date) \_\_\_\_\_

G-28 ID Number \_\_\_\_\_

Volag Number \_\_\_\_\_

**NOTICE TO PERSONS FILING FOR SPOUSES IF MARRIED LESS THAN TWO YEARS**

Pursuant to section 216 of the Immigration and Nationality Act, your alien spouse may be granted conditional permanent resident status in the United States as of the date he or she is admitted or adjusted to conditional status by an officer of the Immigration and Naturalization Service. Both you and your conditional permanent resident spouse are required to file a petition, Form I-751, Joint Petition to Remove Conditional Basis of Alien's Permanent Resident Status, during the ninety day period immediately before the second anniversary of the date your alien spouse was granted conditional permanent residence.

Otherwise, the rights, privileges, responsibilities and duties which apply to all other permanent residents apply equally to a conditional permanent resident. A conditional permanent resident is not limited to the right to apply for naturalization, to file petitions in behalf of qualifying relatives, or to reside permanently in the United States as an immigrant in accordance with the immigration laws.

**Failure to file Form I-751, Joint Petition to Remove the Conditional Basis of Alien's Permanent Resident Status, will result in termination of permanent residence status and initiation of deportation proceedings.**

**NOTE: You must complete Items 1 through 6 to assure that petition approval is recorded. Do not write in the section below item 6.**

1. Name of relative (Family name in CAPS) (First) (Middle)  
DARWICHE Air Hussein

2. Other names used by relative (Including maiden name)  
None

3. Country of relative's birth      4. Date of relative's birth (Month/Day/Year)  
Lebanon      12-18-70

5. Your name (Last name in CAPS) (First) (Middle)      6. Your phone number  
HAYNES Melanie Lynn (313) 802-8664

Action Stamp	SECTION	DATE PETITION FILED
	<input type="checkbox"/> 201 (b)(spouse)	
	<input type="checkbox"/> 201 (b)(child)	
	<input type="checkbox"/> 201 (b)(parent)	
	<input type="checkbox"/> 203 (a)(1)	<input type="checkbox"/> STATESIDE
	<input type="checkbox"/> 203 (a)(2)	<input type="checkbox"/> CRITERIA GRANTED
<input type="checkbox"/> 203 (a)(4)		
<input type="checkbox"/> 203 (a)(5)	SENT TO CONSUL AT;	

**CHECKLIST**

- Have you answered each question?**
- Have you signed the petition?**
- Have you enclosed:**
  - The filing fee for each petition?
  - Proof of your citizenship or lawful permanent residence?
  - All required supporting documents for each petition?

**If you are filing for your husband or wife have you included:**

- Your picture?
- His or her picture?
- Your G-325A?
- His or her G-325A?

(Family name) <b>Haynes</b>	(First name) <b>Melanie</b>	(Middle name) <b>Lynn</b>	<input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.) <b>7-7-80</b>	NATIONALITY <b>American</b>	FILE NUMBER <b>A- N/A</b>
ALL OTHER NAMES USED (Including names by previous marriages) <b>NONE</b>			CITY AND COUNTRY OF BIRTH <b>Charlotte, N.C., U.S.A.</b>		SOCIAL SECURITY NO. (If any) <b>237-69-8115</b>	
FATHER MOTHER (Maiden name)	FAMILY NAME <b>Haynes</b> <b>Linberger</b>	FIRST NAME <b>Edward</b> <b>Lisa</b>	DATE, CITY AND COUNTRY OF BIRTH (if known) <b>North Carolina, USA</b> <b>North Carolina, USA</b>		CITY AND COUNTRY OF RESIDENCE <b>unknown</b> <b>Methill, N.C. USA</b>	
HUSBAND (if none, so state) OR WIFE <b>Husband</b>	FAMILY NAME (For wife, give maiden name) <b>Darwiche</b>	FIRST NAME <b>Ali</b>	BIRTHDATE <b>12-8-70</b>	CITY & COUNTRY OF BIRTH <b>Sarbine, Lebanon</b>	DATE OF MARRIAGE <b>11-9-99</b>	PLACE OF MARRIAGE <b>Charlotte, N.C.</b>
FORMER HUSBANDS OR WIVES (if none, so state)						
FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE		DATE AND PLACE OF TERMINATION OF MARRIAGE	
<b>NONE</b>						

APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR
<b>6306 Kendall</b>	<b>Dearborn</b>	<b>Michigan</b>	<b>U.S.A.</b>	<b>11</b>	<b>99</b>		
<b>5425 Donnellfield Dr.</b>	<b>Charlotte</b>	<b>North Carolina</b>	<b>U.S.A.</b>	<b>4</b>	<b>99</b>	<b>11</b>	<b>99</b>
<b>--- Field Mark</b>	<b>Charlotte</b>	<b>North Carolina</b>	<b>U.S.A.</b>	<b>1986</b>		<b>4</b>	<b>99</b>

APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR

APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST

FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION (SPECIFY)	FROM		TO	
		MONTH	YEAR	MONTH	YEAR

Show below last occupation abroad if not shown above. (Include all information requested above.)

THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR:	SIGNATURE OF APPLICANT	DATE
<input type="checkbox"/> NATURALIZATION <input checked="" type="checkbox"/> STATUS AS PERMANENT RESIDENT <input type="checkbox"/> OTHER (SPECIFY):	<b>X Melanie Haynes</b>	<b>5/17/00</b>
Are all copies legible? <input checked="" type="checkbox"/> Yes	IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE <b>N/A</b>	

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

**APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.**

COMPLETE THIS BOX (Family name)	(Given name)	(Middle name)	(Alien registration number)
<b>Haynes</b>	<b>Melanie</b>	<b>Lynn</b>	<b>N/A</b>



(1) Ident.

(Family name) <b>Darwiche</b>	(First name) <b>Ali</b>	(Middle name) <b>Hussein</b>	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.) <b>12-18-70</b>	NATIONALITY <b>Lebanese</b>	FILE NUMBER <b>A-73142059</b>
ALL OTHER NAMES USED (Including names by previous marriages) <b>None</b>			CITY AND COUNTRY OF BIRTH <b>Sarbine, Lebanon</b>		SOCIAL SECURITY NO. (if any) <b>103-82-9370</b>	
FATHER MOTHER (Maiden name) <b>Darwiche Rasmie</b>	FAMILY NAME FIRST NAME <b>Darwiche Hussein</b>	DATE, CITY AND COUNTRY OF BIRTH (if known) <b>Lebanon</b>	CITY AND COUNTRY OF RESIDENCE <b>(deceased)</b>			
HUSBAND (If none, so state) OR WIFE <b>Wife Haynes</b>	FAMILY NAME FIRST NAME <b>Haynes Melanie</b>	BIRTHDATE <b>7-7-80</b>	CITY & COUNTRY OF BIRTH <b>Charlotte N.C. U.S.A.</b>	DATE OF MARRIAGE <b>11-9-99</b>	PLACE OF MARRIAGE <b>Charlotte N.C. U.S.A.</b>	
FORMER HUSBANDS OR WIVES (if none, so state)						
FAMILY NAME (For wife, give maiden name) <b>Martinez</b>	FIRST NAME <b>Diane</b>	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE <b>1-22-99, Queens, N.Y.</b>		

APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR
<b>6306 Kendal St.</b>	<b>Dearborn</b>	<b>Michigan</b>	<b>U.S.A.</b>	<b>11</b>	<b>99</b>	<b>PRESENT TIME</b>	
<b>5425 Donnefield Dr.</b>	<b>Charlotte</b>	<b>North Carolina</b>	<b>U.S.A.</b>	<b>4</b>	<b>99</b>	<b>11</b>	<b>99</b>
<b>1206 Kelston Pl. #201</b>	<b>Charlotte</b>	<b>North Carolina</b>	<b>U.S.A.</b>	<b>2</b>	<b>97</b>	<b>4</b>	<b>99</b>
<b>35th St.</b>	<b>Queens</b>	<b>New York</b>	<b>U.S.A.</b>	<b>1</b>	<b>95</b>	<b>2</b>	<b>97</b>

APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR

STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	FROM		TO	
				MONTH	YEAR	MONTH	YEAR

APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST

FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION (SPECIFY)	FROM		TO	
		MONTH	YEAR	MONTH	YEAR
<b>Ron's Gas &amp; Mart 12340 Dexter, Detroit, MI</b>	<b>Cashier</b>	<b>11</b>	<b>99</b>	<b>PRESENT TIME</b>	
<b>Cedarland Charlotte N.C.</b>	<b>Cook</b>	<b>10</b>	<b>98</b>	<b>4</b>	<b>99</b>
<b>Domino's Charlotte N.C.</b>	<b>Cook</b>	<b>19</b>	<b>96</b>	<b>10</b>	<b>98</b>
<b>Flea Market Queens N.Y.</b>	<b>Sales</b>	<b>1</b>	<b>95</b>	<b>1</b>	<b>96</b>

Show below last occupation abroad if not shown above. (Include all information requested above.)

THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR: <input type="checkbox"/> NATURALIZATION <input type="checkbox"/> OTHER (SPECIFY):	<input checked="" type="checkbox"/> STATUS AS PERMANENT RESIDENT	SIGNATURE OF APPLICANT <b>X [Signature]</b>	DATE <b>5-17-00</b>
Are all copies legible? <input checked="" type="checkbox"/> Yes	IF YOUR NATIVE ALPHABET IS IN OTHER THAN ROMAN LETTERS, WRITE YOUR NAME IN YOUR NATIVE ALPHABET IN THIS SPACE.		

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

**APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.**

COMPLETE THIS BOX (Family name)	(Given name)	(Middle name)	(Alien registration number)
<b>Darwiche</b>	<b>Ali</b>	<b>Hussein</b>	<b>A73142059</b>



(1) Ident.

CERTIFICATION OF VITAL RECORD

STATE OF NORTH CAROLINA  
MECKLENBURG COUNTY  
OFFICE OF REGISTER OF DEEDS

COUNTY HEALTH DEPARTMENT  
CHARLOTTE, NORTH CAROLINA

CERTIFICATE OF BIRTH

Name of Child *MELANIE LYNN HAYNES*  
Date of Birth *JULY 07, 1980* Sex *FEMALE*  
Place of Birth *CHARLOTTE CITY LIMITS* *MECKLENBURG* *NC*

Parentage

Father

Mother

Name *EDWARD KEITH HAYNES* Maiden Name *LISA VIRGINIA LINEBERGER*  
Age at time of this birth *20* Age at time of this birth *19*  
Place of birth *NORTH CAROLINA* Place of birth *NORTH CAROLINA*  
Date Filed *JULY 14, 1980* Reg. Dist. # *060-95* Cert. # *3840*

Peter E. Safir

Health Director and Registrar

Volume \_\_\_\_\_ Page \_\_\_\_\_

This is to certify that this is a true and correct reproduction or abstract of the official record filed in this office.

370002

Judith A. Gibson  
Register of Deeds  
Mecklenburg County

Witness my hand and official seal  
this the *8th* day of *November* *1999*

By *Peter J. McClure*  
Deputy/Assistant Register of Deeds

DHHS 3914 (REVISED 6/98) NC VITAL RECORDS

Any alteration or erasure voids this certificate. Do not accept unless on security paper with Vital Records seal clearly embossed in left corner.



MECKLENBURG COUNTY  
CHARLOTTE, NORTH CAROLINA

REGISTER OF DEEDS

MARRIAGE CERTIFICATE

GREETINGS:

I, JUDITH A. GIBSON, REGISTER OF DEEDS FOR THE ABOVE NAMED  
STATE AND COUNTY, DO HEREBY CERTIFY THAT

ALI HUSSEIN DARWICHE

AND

MELANIE LYNN HAYNES

WERE MARRIED BY ULYSSES LEE

ON THE 9<sup>TH</sup> DAY OF NOVEMBER, 1999

AS APPEARS OF RECORD IN THE OFFICE OF THE REGISTER OF DEEDS FOR SAID  
COUNTY AND STATE.

WITNESS MY HAND AND OFFICIAL SEAL, THIS 9<sup>TH</sup> DAY OF MAY, 2000.

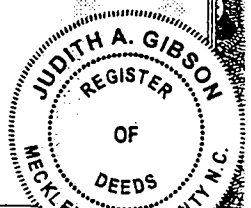
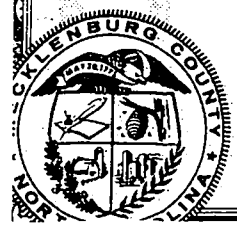
JUDITH A. GIBSON  
REGISTER OF DEEDS

BY:

*Rakia Maddy*

ASSISTANT/DEPUTY REGISTER OF DEEDS

022017



الجمهورية اللبنانية  
وزارة الداخلية  
ال مديرية العامة للأحوال الشخصية

بيان قيد افرادي

عن سجلات المقيمين لاحصاء ١٩٣٢

رقم ٤٠١٤٩١٤ /

القضاء كحل محل ورقم القيد ١٩

الاسم عبد  
 الشهرة دروسي  
 اسم الاب محمد  
 اسم الام سليمة  
 محل الميلاد كحل  
 المذهب سني  
 الصنف سني  
 الوضع العائلي  ذكر  انثى  
 ملاحظات صالح اعتراف



مأمور نفوس سليم  
 التوقيع سليم  
 مقدم الطلب سليم  
 المعرف عنه سليم  
 تاريخ تقديم الطلب ١٩١٢

بشارة x في المربع المناسب \* \* إذا كان صاحب العلاقة لبنانياً منذ عشر سنوات يقتضى أن يذكر ذلك خطياً وهذا الحقل ، كما يذكر تاريخ تدوين القيد وكيف

At the IAS Part 07UNC the New York State Supreme Court at 88-11 Sutphin Boulevard, Queens, New York in the County Courthouse, Queens County, on 01-22- 1998.

Present: LUTHER V. DYE

-----X  
ALI H. DARWICHE,  
Plaintiff,

*Ali H. Darwiche*  
Index No.: 18583/98

-against-

DIANE MARTINEZ,  
Defendant.

JUDGMENT OF DIVORCE

-----X  
The plaintiff having brought this action for a judgment of absolute divorce by reason of the abandonment of the plaintiff by the defendant for a period of one or more years;

and the summons bearing the notation "Action for Divorce" and a verified complaint having been duly served upon the defendant personally within this State;

and the defendant having appeared pro se and plaintiff's verified complaint having been duly served upon the defendant and the defendant not having answered although the time to do so has fully expired;

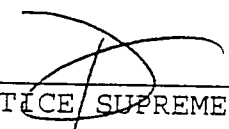
NOW, on the motion of Richard La Salle, Esq., attorney for the plaintiff, it is Adjudged that the marriage between Ali H. Darwiche, plaintiff, and Diane Martinez, defendant, is dissolved by reason of the abandonment of the plaintiff by the defendant for a

3

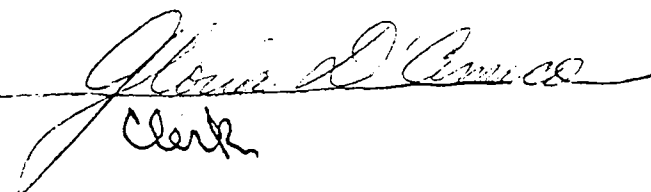
period of one or more years; and it is further

Ordered and Adjudged that defendant is authorized to resume the use of her maiden name or other former surname, to wit: Martinez.

ENTER (IN QUEENS COUNTY)

  
JUSTICE SUPREME COURT

HON. LUTHER V. DIAZ

  
Clerk

3

