USCIS
Attn: I-914
P.O. Box 20200
Phoenix, AZ 85036-0200

RE: Form I-914, Application for T Nonimmigrant Status
T-1 Applicant: Vinicius Ferreira da Costa
T-2 Derivative: Cynara Dos Santos
T-3 Derivative: Julia Mendanha dos Santos

Dear Officer:

I represent Vinicius Ferreira da Costa ("Mr. Ferreira da Costa"). I am writing to submit Mr. Ferreira da Costa's application for T nonimmigrant status. Mr. Ferreira da Costa, a native and citizen of Brazil, is a victim of a severe form of trafficking in persons, as defined by the Trafficking Victims Protection Act (TVPA), 22 U.S.C. § 7102(11)(B). I also respectfully request T derivative status for Mr. Ferreira da Costa's spouse, Mrs. Cynara Dos Santos, and his stepdaughter, Julia Mendanha dos Santos. As set forth below and supported by the accompanying evidence, Mr. Ferreira da Costa was subjected to forced labor through abuse of vulnerability, fraud, intimidation, and coercion, which resulted in involuntary servitude. The traffickers exploited Mr. Ferreira da Costa's undocumented immigration status, lack of knowledge of U.S. law, and economic vulnerability to maintain psychological control over him and compel him to perform dangerous and degrading labor under abusive conditions.

An applicant is eligible for T nonimmigrant status where the applicant: (1) is or has been a victim of a severe form of trafficking in persons; (2) is physically present in the United States on account of such trafficking; (3) has complied with any reasonable request for assistance in the investigation or prosecution of acts of trafficking, or qualifies for an exception; and (4) would suffer extreme hardship involving unusual and severe harm upon removal. Following the Final Rule, Classification for Victims of Severe Forms of Trafficking in Persons; Eligibility for "T" Nonimmigrant Status, 89 Fed. Reg. 34,864 (Apr. 30, 2024) (effective Aug. 28, 2024), and the updated definitions and regulations governing T nonimmigrant status, Mr. Ferreira da Costa's case clearly qualifies under the refined scope of labor trafficking, including trafficking accomplished through psychological coercion, abuse of immigration-related vulnerability, and involuntary servitude, pursuant to 8 C.F.R. § 214.206(a)(1).

I. Applicant is a Victim of a Severe Form of Trafficking

Mr. Vinicius Ferreira da Costa and his spouse entered the United States on B-2 tourist visas in 2017, together with her daughter, Júlia. After some time, Mr. Ferreira da Costa was recruited by a Brazilian man, named Gustavo, to work at a marina known as Sugar Dock under the supervision of the owner, Cris Welsh, where he became a victim of labor trafficking and involuntary servitude.

Mr. Ferreira da Costa was recruited with false promises of lawful employment, fair compensation, and assistance with his immigration status. From the outset, he was led to believe that his employer had connections with the U.S. Government and immigration authorities and that continued obedience and loyalty would result in "protection" from immigration enforcement and eventual help with documentation. Relying on these misrepresentations and fearing immigration consequences, Mr. Ferreira da Costa agreed to work under increasingly abusive and dangerous conditions.

Once employed, the owner of the marina obtained Mr. Ferreira da Costa's labor for the purpose of forced labor, using abuse of vulnerability, psychological coercion, and economic control. Mr. Ferreira da Costa was required to perform highly hazardous tasks well beyond any reasonable scope of employment, including replacing diesel fuel tanks without protective equipment, performing mechanical repairs without proper instruction, working at extreme heights without safety gear, and undertaking dangerous maintenance operations for which he lacked both preparation and training. He was expected to remain constantly available, including for sudden long-distance trips, often without time to rest or attend to basic needs.

Despite working excessive hours, frequently exceeding forty hours per week, Mr. Ferreira da Costa was paid below market rates, initially earning $15 per hour, later increased to $18 per hour, without overtime compensation. Wages were often delayed or incomplete, reinforcing his economic dependence on the employer and limiting his ability to leave the exploitative environment.

Throughout his employment, the trafficker exercised continuous psychological control over Mr. Ferreira da Costa by exploiting his undocumented status. He was repeatedly reminded of his vulnerability as an immigrant and told that, without the employer's protection, he could be reported to immigration authorities and would not find lawful employment elsewhere. The presence of immigration enforcement in the area was used to intensify fear, with workers instructed to hide and remain silent. Firearms and ammunition were frequently left visible on boats and in areas where Mr. Ferreira da Costa was required to work and sleep during overnight assignments, reinforcing an atmosphere of intimidation and implicit threat. Although Mr. Ferreira da Costa's identity documents were not physically confiscated, the constant intimidation, manipulation of his immigration fears, and environment of fear effectively deprived him of autonomy and compelled his continued labor under coercive conditions.

II. Mr. Ferreira da Costa's Case Meets the Definition of a "Severe Form of Trafficking in Persons"

The definition of a "severe form of trafficking in persons" requires that the trafficking engaged in a prohibited action by means of force, fraud, or coercion (unless subject to an exemption) for a particular end (*See* 22 U.S.C. § 7102(8); USCIS Policy Manual, vol. 3, pt. B, ch. 2).

The table below breaks down the definition of a severe form of trafficking in persons into three elements: action, purpose, and means:

Type of Trafficking	Action	Purpose	Means
Labor Trafficking	● Recruiting ● Harboring ● Transporting ● Provision ● Obtaining (of a person)	For the purpose of subjecting the victim to: ● Involuntary Servitude ● Peonage ● Debt Bondage ● Slavery	Through use of: ● Force ● Fraud ● Coercion

As demonstrated below, Mr. Ferreira da Costa's experience squarely satisfies this definition based on the totality of the circumstances:

- **Type of Trafficking:**
  - Labor Trafficking: Mr. Ferreira da Costa was subjected to labor trafficking, as his traffickers recruited, obtained, and harbored him for the purpose of exploiting his labor under coercive and abusive conditions.
- **Action:**
  - Recruiting: Mr. Ferreira da Costa was recruited and led to believe that the employer was a well-connected and influential individual with the ability to assist him with immigration-related matters, including potential help with documentation, and that continued obedience and loyalty would ensure protection from immigration enforcement and access to that assistance. He was also made to feel that the employer was "doing him a favor" by offering him stable employment despite his lack of lawful status. These misrepresentations induced Mr. Ferreira da Costa to accept and remain in employment that he otherwise would not have accepted.
  - Harboring: Although Mr. Ferreira da Costa was not physically confined, the traffickers harbored him within the meaning of the trafficking regulations by substantially restricting his agency and freedom of action. Mr. Ferreira da Costa's movement and autonomy were limited through constant psychological control, fear-based manipulation, exploitation of his undocumented status, and an environment of intimidation reinforced by verbal abuse and economic dependency. He was required to remain constantly available for work, including irregular and nighttime shifts without notice or additional compensation, often without rest or the ability to refuse. His ability to leave the employment was effectively curtailed by threats tied to his immigration status, repeated reminders that he lacked documentation and would not find employment elsewhere, and the creation of a climate of fear, satisfying the regulatory understanding of harboring in the trafficking context.
  - Obtaining: The traffickers obtained Mr. Ferreira da Costa's labor by requiring him to perform a wide range of dangerous and degrading tasks unrelated to any legitimate or

safe job description, including cleaning diesel fuel tanks without protective equipment, operating forklifts and heavy machinery without adequate training, working with toxic materials, performing physically demanding maritime repairs under unsafe conditions, driving long distances after exhausting workdays, and continuing to work despite a serious hand injury for which he was denied medical care. His labor was extracted through exploitation of his immigration vulnerability, fear, false promises of assistance with documentation and wage increases, and economic dependence.

- **Purpose:**
  - Involuntary Servitude: The purpose of the traffickers' conduct was to subject Mr. Ferreira da Costa to involuntary servitude. Although Mr. Ferreira da Costa initially agreed to work voluntarily, the conditions under which he was compelled to continue working meet the legal definition of involuntary servitude, as his continued labor was induced through a scheme, pattern, and plan intended to cause him to believe that refusal or departure would result in serious harm, including immigration consequences, financial ruin, loss of income necessary to support his spouse and three children, and the loss of potential assistance with regularization of his status.
- **Means:**
  - Fraud: Mr. Ferreira da Costa was subjected to fraud through multiple false promises and misrepresentations, including: Promises of fair wages and lawful working conditions, which were not honored; Representations that the employer would protect him from immigration enforcement and that continued loyalty would lead to assistance with immigration documentation; Assurances that his compensation would increase once he proved himself reliable. In reality, Mr. Ferreira da Costa was paid below market rates, denied overtime compensation despite excessive work hours, including nighttime shifts, and his promised salary increase did not meaningfully materialize. When he requested improved compensation, he was told that because he did not have a Social Security number, his wages could not be increased, reinforcing his financial instability and dependence on the traffickers.
  - Coercion: Mr. Ferreira da Costa was subjected to coercion, as defined by regulation, through a combination of psychological harm, fraud, abuse of legal process, and a coercive scheme or pattern. The traffickers repeatedly exploited Mr. Ferreira da Costa's undocumented immigration status, creating a reasonable belief that failure to comply would result in serious harm, including exposure to immigration enforcement and removal. He was constantly reminded of his vulnerability as an immigrant and told that only the employer's protection kept him safe and that, without documentation, he would not obtain employment elsewhere. The presence of immigration enforcement in the area was used to intensify fear, with workers instructed to hide, reinforcing the perception of imminent immigration danger (*See* USCIS Policy Manual, vol. 3, pt. B, ch. 2 (listing as a coercion factor: "Creating a belief that the employer has the power to deport, arrest, or blacklist a victim")). This conduct constitutes a scheme, pattern, or plan intended to compel continued labor by instilling fear of immigration consequences, economic harm (*see* id. (listing as a coercion factor: "Underpaying or not paying what was promised to the employee")),

and loss of stability for his spouse and three children. Although no physical restraint or confiscation of documents occurred, the regulations make clear that physical restraint is not required where coercion is established through psychological, financial, and legal threats. Considering Mr. Ferreira da Costa's vulnerabilities, including his undocumented status, limited knowledge of U.S. law, economic dependence, language barriers at the time of employment, responsibility as the primary provider for his family, and subjection to verbal abuse and harsh and dangerous working conditions, a reasonable person in his circumstances would have felt compelled to continue working under these conditions (*See* id. (listing as a coercion factor: "Subjecting the victim to verbal abuse, physical abuse, or harsh living or working conditions"))).

III. Applicant is Physically Present in the United States on Account of Trafficking

The updated T visa regulations at 8 C.F.R. § 214.207(a) provide that "…an applicant must be physically present in the United States… or at a port of entry thereto on account of such trafficking." USCIS evaluates the applicant's physical presence in the United States at the time of filing and requires that the applicant demonstrate physical presence under one of the grounds set forth in 8 C.F.R. § 214.207(a)(1)–(5).

In this case, Mr. Vinicius Ferreira da Costa qualifies under 8 C.F.R. § 214.207(a)(4), which applies to applicants who "were subject to a severe form of trafficking in persons at some point in the past and whose current presence in the United States is directly related to the original trafficking in persons, regardless of the length of time that has passed between the trafficking and the filing of the Application for T Nonimmigrant Status."

Mr. Ferreira da Costa's continued presence in the United States is directly connected to his trafficking victimization. Mr. Ferreira da Costa was induced to remain in the United States as a result of the traffickers' false promises of assistance with his immigration status, future wage increases, and protection from immigration-related consequences. During the period of exploitation, he rebuilt his life in the United States, established long-term ties, and became deeply rooted in the country. As a direct consequence of the trafficking, he is now the father of two United States citizen children **(*See* Exhibit 4)**, and his family's life is firmly anchored in the United States. In addition, his eldest daughter has obtained approved Special Immigrant Juvenile Status (SIJS) **(*See* Exhibit 14)**, further strengthening the family's stability and lawful ties in this country.

Moreover, Mr. Ferreira da Costa remains in the United States in order to cooperate with potential investigations related to his labor trafficking and has expressed his willingness to assist the U.S. Department of Labor or other appropriate authorities should an investigation or enforcement action proceed. His continued presence is also necessary for his recovery from the psychological harm caused by the trafficking. Access to mental health care, stability, and family support in the United States is essential to his rehabilitation.

IV. Mr. Ferreira da Costa has Complied with Reasonable Requests for Assistance from a Law Enforcement Agency Investigating the Trafficking Crime

Mr. Vinicius Ferreira da Costa became aware that the abusive labor conditions to which he was subjected constituted a severe form of trafficking in persons under U.S. law, and that it was safe for him to seek assistance from law enforcement authorities. Due to the significant fear instilled by his traffickers, particularly through the manipulation of his undocumented immigration status and the climate of intimidation at the marina, Mr. Ferreira da Costa did not initially report the trafficking while it was ongoing.

Specifically, Mr. Ferreira da Costa submitted online complaints detailing the hazardous working conditions and labor violations to the Occupational Safety and Health Administration (OSHA) and to the Wage and Hour Division (WHD) of the U.S. Department of Labor **(*See* exhibit 8).** These reports reflect his good-faith effort to assist in the investigation of the labor exploitation and unsafe conditions to which he was subjected.

In addition to the initial reports, counsel for Mr. Ferreira da Costa sent a follow-up inquiry to the Regional Coordinator of the Wage and Hour Division (Western Region) at Shim.Jennifer@dol.gov to confirm receipt of the complaints and to reiterate Mr. Ferreira da Costa's availability to provide any additional information or documentation necessary for an investigation. The documentation of this outreach further demonstrates Mr. Ferreira da Costa's proactive and ongoing willingness to cooperate with authorities **(*See* exhibit 8).**

Mr. Ferreira da Costa remains fully committed to complying with any reasonable request for assistance from appropriate law enforcement or investigative agencies, including providing testimony, documentation, and further information as needed in connection with the trafficking offenses committed against him. An applicant satisfies the cooperation requirement where they have complied with reasonable requests for assistance or have demonstrated a willingness to do so when such requests are made (*See* 8 C.F.R. § 214.208(a)). Mr. Ferreira da Costa's reporting to OSHA and the WHD, combined with his counsel's direct outreach and his ongoing willingness to cooperate, satisfies this statutory and regulatory requirement.

V. Evidence of Good Moral Character

Mr. Vinicius Ferreira da Costa has demonstrated good moral character throughout his time in the United States. As evidence of his character and law-abiding conduct, Mr. Ferreira da Costa submitted an FBI Background Check **(*See* exhibit 11)**, which confirms that he has no criminal record or history of unlawful conduct.

In addition to the FBI background check, Mr. Ferreira da Costa has submitted multiple letters of support from individuals who have personal knowledge of his character, integrity, and conduct**.** These letters consistently describe him as a responsible, honest, and hardworking individual who contributes positively to his community and family **(*See* exhibit 13).**

Taken together, this evidence demonstrates that Mr. Ferreira da Costa is a person of good moral character and supports the favorable exercise of discretion in adjudicating his application for T nonimmigrant status.

VI. Mr. Ferreira da Costa would Suffer Extreme Hardship Upon Removal to from the United States

Mr. Vinicius Ferreira da Costa would suffer "extreme hardship involving unusual and severe harm upon removal" from the United States.

In evaluating whether removal would result in extreme hardship, USCIS considers both traditional hardship factors and hardship factors specific to victims of trafficking, including the long-term psychological impact of the exploitation, the likelihood of retraumatization, family separation, and the availability of adequate support services upon return.

As a direct result of the trafficking, Mr. Ferreira da Costa has suffered significant psychological harm, including clinically significant trauma-related symptoms consistent with a diagnosis of Unspecified Trauma- and Stressor-Related Disorder (F43.9) under the DSM-5. These symptoms are documented in the psychological evaluation (*See* Exhibit 9) prepared by a licensed mental health professional, which confirms that Mr. Ferreira da Costa continues to experience trauma-related symptoms directly tied to his trafficking experience in the United States. Removal from the United States would severely disrupt his access to stability, continuity of mental health care, and recovery resources essential to his rehabilitation as a trafficking survivor, would trigger heightened anxiety associated with the immigration process, and would significantly increase the risk of retraumatization and psychological deterioration.

Furthermore, Mr. Ferreira da Costa is the father of two United States citizen children, Olivia and Caio **(*See* Exhibit 4)**, both of whom are of tender age. He is also the stepfather and primary parental figure to Júlia Dos Santos, who has been granted Special Immigrant Juvenile Status (SIJS) **(*See* Exhibit 14)**. Removal would result in profound family separation or force his United States citizen children to relocate to a country where they lack social, cultural, and linguistic ties, while disrupting the lawful stability and protection afforded to Júlia in the United States. Such disruption would cause exceptional harm not only to Mr. Ferreira da Costa, but also to his United States citizen children, his stepdaughter, and his spouse.

Mr. Ferreira da Costa plays a critical role in providing emotional, financial, and practical support to his spouse and children. His removal at this stage would leave his family without essential assistance during a period of significant vulnerability, increasing the risk of severe emotional distress and instability. The disruption of family unity, including the potential separation from his two United States citizen children or relocation to a country where they lack social, cultural, and linguistic ties, as well as the destabilization of the lawful protection afforded to his stepdaughter under her Special Immigrant Juvenile Status (SIJS) **(*See* Exhibit 14)**, would impose additional and exceptional hardship on the family unit. Such relocation

would directly contradict the protective findings underlying her SIJS status. If she remained in the United States, she would be separated from a primary parental figure who has provided consistent support and security for years. Either scenario would result in substantial emotional disruption and undermine the stable environment that her SIJS determination was designed to safeguard, further satisfying the statutory requirement of unusual and severe harm upon removal **(*See* Exhibit 4)**.

Additionally, returning to Brazil would expose Mr. Ferreira da Costa to economic instability, lack of adequate victim support services, and potential retaliation or retraumatization linked to the same vulnerabilities that enabled his exploitation in the United States **(*See* exhibit 16)**. The cumulative effect of psychological trauma, family disruption, and lack of protection and support upon return constitutes unusual and severe harm well beyond the consequences ordinarily associated with removal.

Accordingly, Mr. Ferreira da Costa meets the extreme hardship requirement under the T nonimmigrant classification.

Please, find enclosed:

- Forms G-28, Notice of Entry of Appearance as Attorney or Accredited Representative
- Form I-914, Application for T Nonimmigrant Status
- Form I-914, Supplement A to Form I-914, Application for Derivative T Nonimmigrant Status
- Forms I-192, Application for Advance Permission to Enter as a Nonimmigrant
- Forms I-765, Application For Employment Authorization

Vinicius Ferreira da Costa's Identification Documents:

- Vinicius Ferreira da Costa's Passport;
- Vinicius Ferreira da Costa's Birth Certificate with English Translation;
- Vinicius Ferreira da Costa's I-94;

Cynara dos Santos' Identification Documents:

- Cynara dos Santos' Passport;
- Cynara dos Santos' Birth Certificate with English Translation;
- Cynara dos Santos' I-94;

Julia Mendanha dos Santos' Identification Documents:

- Julia Mendanha dos Santos' Current Passport;
- Julia Mendanha dos Santos' Expired Passport;
- Julia Mendanha dos Santos' Birth Certificate with English Translation;
- Julia Mendanha dos Santos' I-94;

Vinicius Ferreira da Costa and Cynara dos Santos' Marriage Certificate:

- Vinicius Ferreira da Costa and Cynara dos Santos' Marriage Certificate;

Cynara dos Santos' Divorce Certificate:

- Cynara dos Santos' Divorce Certificate with English Translation

Vinicius Ferreira da Costa's Declaration:

- Vinicius Ferreira da Costa's Declaration;

Eligibility Requirement: Compliance with Reasonable Requests for Assistance from Law Enforcement:

- Vinicius Ferreira da Costa's OSHA Online Complaint Print Screen;
- Vinicius Ferreira da Costa's OSHA Complaint Email Confirming Submission;
- Vinicius Ferreira da Costa's WHD Online Complaint Print Screen;
- Vinicius Ferreira da Costa's WHD Complaint Email Confirming Submission
- Follow-Up Email to WHD Regional Coordinator

Evidence of Trauma and Severe Form of Trafficking:

- Vinicius Ferreira da Costa's Psychological Evaluation
- Vinicius Ferreira da Costa's Photographic Evidence;

Vinicius Ferreira da Costa's Evidence of Good Moral Character:

- Vinicius Ferreira da Costa's FBI Background;

Vinicius Ferreira da Costa's Bank Transfer Records Reflecting Wages Received:

- Bank Transfers from May to June 2019;
- Bank Transfers from June to July 2019;
- Bank Transfers from July to August 2019;
- Bank Transfers from September to October 2019;
- Bank Transfers from October to November 2019;
- Bank Transfers from November to December 2019;
- Bank Transfers from December 2019 to January 2020;
- Bank Transfers from January to February 2020;
- Bank Transfers from February to March 2020;

Eligibility Requirement: Evidence of Severe Form of Trafficking / Physical Presence / Community Ties / Good Moral Character: Letters of Support:

- Letter of Support Delivered by Cynara with English Translation (Wife);
- Letter of Support Delivered by Brener with English Translation;
- Letter of Support Delivered by Adam;
- Letter of Support Delivered by Jair;
- Letter of Support Delivered by Gabriel;
- Letter of Support Delivered by Santiago;
- Letter of Support Delivered by Ramiro with English Translation;

Julia Mendanha dos Santos' SIJS Approval with Deferred Action Granted:

- Julia Mendanha dos Santos' SIJS Approval with Deferred Action Granted;

Evidence of the Strong Ties to the United States - Children's School Attendance:

- Julia's School Grades and Attendance;
- Olivia's School Grades and Attendance ;

Evidence of Strong Ties to the United States - U.S. Citizen Children:

- Olivia's Birth Certificate;
- Caio's Birth Certificate;

Country Conditions: Brazil

- U.S Department of State 2025 Trafficking in Person Report: Brazil
- Brazil 2024 Human Rights Report

Thank you very much for your attention and consideration.

Sincerely,

_____ February 24, 2026

Natalia Vieira Santanna
SBN#337502
P.O. Box 7528
Oakland, CA 94601
(510) 922-0154

VINICIUS FERREIRA DA COSTA'S SIGNED FORMS

Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

DHS Form G-28
OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 6 3 4 6 0 3 2 7 9 7 4

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name): VIEIRA SANTANNA

2.b. Given Name (First Name): Natalia

2.c. Middle Name: N/A

Address of Attorney or Accredited Representative

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601 (USPS ZIP Code Lookup)

3.f. Province:

3.g. Postal Code:

3.h. Country: USA

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number: 5109220154

5. Mobile Telephone Number (if any): 5109220154

6. Email Address (if any): natalia@santannalaw.com

7. Fax Number (if any): N/A

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all applicable** items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority: CA

1.b. Bar Number (if applicable): 337502

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable): Santanna Law Offices

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization: N/A

2.c. Date of Accreditation (mm/dd/yyyy): N/A

3. ☐ I am associated with N/A, the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate: N/A

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

I-914, I-192, I-765

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

4. Receipt Number (if any)

►

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

☒ Applicant ☐ Petitioner ☐ Requestor

☐ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

6.a. Family Name (Last Name): FERREIRA DA COSTA

6.b. Given Name (First Name): Vinicius

6.c. Middle Name: N/A

7.a. Name of Entity (if applicable)

N/A

7.b. Title of Authorized Signatory for Entity (if applicable)

N/A

8. Client's USCIS Online Account Number (if any)

► N / A

9. Client's Alien Registration Number (A-Number) (if any)

► A- N / A

Client's Contact Information

10. Daytime Telephone Number

+1(510)253-9457

11. Mobile Telephone Number (if any)

+1(510)253-9457

12. Email Address (if any)

viniciusferreiracosta.vfc@gmail.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name: PO Box 7528

13.b. ☐ Apt. ☐ Ste. ☐ Flr.

13.c. City or Town: Oakland

13.d. State: CA **13.e.** ZIP Code: 94601

13.f. Province

13.g. Postal Code

13.h. Country

USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

1.a. ☒ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

1.b. ☒ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

2.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative

1.b. Date of Signature (mm/dd/yyyy) 02/06/2026

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name): FERREIRA DA COSTA

1.b. Given Name (First Name): Vinicius

1.c. Middle Name: N/A

2.a. Page Number **2.b.** Part Number **2.c.** Item Number

2.d. N/A

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d. N/A

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A

Application for T Nonimmigrant Status

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS Form I-914
OMB No. 1615-0099
Expires 08/31/2026

START HERE - Type or print in ink.

Part 1. Purpose for Filing This Application

Select **all applicable** boxes.

1. A. ☒ I am filing for T-1 nonimmigrant status and have not previously filed for such status.

B. ☐ I am filing for T-1 nonimmigrant status and have previously filed for such status. (Provide receipt number below.)

(1) Receipt Number **EAC**

Part 2. General Information About You (Person filing this application as a victim)

1. Your Full Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
FERREIRA DA COSTA	Vinicius	N/A

2. Other Names Used

Provide any other names you have used since birth, including aliases, maiden names, and nicknames. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
N/A	N/A	N/A
N/A	N/A	N/A

3. Physical Address *(USPS ZIP Code Lookup)*

Street Number and Name	Apt. ☒ Ste. ☐ Flr. ☐	Number
893 4th Ave		#A

City or Town	State	ZIP Code
Pinole	CA	94564

4. Safe Mailing Address

If you do not want U.S. Citizenship and Immigration Services (USCIS) to send notices about this application to your home address, you may provide an alternate safe mailing address.

In Care Of Name: Santanna Law Offices PC

Street Number and Name	Apt. ☐ Ste. ☐ Flr. ☐	Number
PO Box 7528		N/A

City or Town	State	ZIP Code
Oakland	CA	94601

For USCIS Use Only

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

Validity Dates
From: _____
To: _____

Remarks

Waitlisted
Stamp # _____ Date _____

Action Block

To be fully completed by an attorney or accredited representative, if any.

☒ **Select this box if Form G-28 is attached.**

Attorney State License Bar Number
337502

Attorney or Accredited Representative USCIS Online Account Number
063460327974

Part 2. General Information About You (Person filing this application as a victim) (continued)

5. Alien Registration Number (A-Number) (if any)
► A- N / A

6. USCIS Online Account Number (if any)
► N / A

7. U.S. Social Security Number (SSN) (if any)
► N / A

8. Sex
☒ Male ☐ Female

9. Marital Status
☐ Single/Never Married ☒ Married ☐ Divorced ☐ Widowed

10. Date of Birth (mm/dd/yyyy)
09/25/1988

11. Place of Birth

City or Town
Itapuranga

State or Province
Goiás

Country
Brazil

12. Country of Citizenship or Nationality
Brazil

13. Passport or Travel Document Number (if any)
FR051007

14. Country That Issued Your Passport or Travel Document (if any)
Brazil

15. Issue Date for Passport or Travel Document (if any)
(mm/dd/yyyy) 06/24/2016

16. Expiration Date for Passport or Travel Document (if any)
(mm/dd/yyyy) 06/23/2026

17. Place of Your Last Entry Into the United States

City or Town
San Francisco

State
CA

18. Date of Your Last Entry Into the United States, On or About
(mm/dd/yyyy) 06/21/2017

19. Form I-94 Arrival-Departure Record Number (if any)
► 45133365985

20. Your Current Nonimmigrant Status
No status

Part 3. Additional Information About Your Application

Answers to the following questions about your claim require explanation and supporting documentation. You should attach documents in support of your claim that you are a victim of a severe form of trafficking in persons and the specific facts on which you are relying to support your claim. If you answer "Yes" to **Item Numbers 1. - 4.**, attach evidence and documents to support your claim. **You must** attach a signed personal narrative statement addressing the eligibility requirements for T nonimmigrant status as listed in the regulations, including a description of the trafficking you experienced. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

1. I am or have been a victim of a severe form of trafficking in persons. ☒ Yes ☐ No

2. **A.** I have cooperated with reasonable requests for assistance from law enforcement. ☒ Yes ☐ No

B. Due to my age or the trauma I have suffered, I am exempt from the requirement to cooperate with reasonable requests for assistance from law enforcement. ☐ Yes ☒ No

Part 3. Additional Information About Your Application (continued)

3. I am physically present in the United States, American Samoa, or the Commonwealth of the Northern Mariana Islands, or at a port of entry, on account of trafficking, or have been allowed entry into the United States to participate in investigative or judicial processes associated with an act or perpetrator of trafficking. ☒ Yes ☐ No

4. I fear that I will suffer extreme hardship involving unusual and severe harm upon removal. ☒ Yes ☐ No

5. I have reported the trafficking crime of which I am claiming to be a victim. (If you selected "Yes," indicate to which law enforcement agency and office you have made the report, the address and phone number of that office, and the case number assigned, if any. If you selected "No," explain the circumstances below.) ☒ Yes ☐ No

Law Enforcement Agency and Office

Street Number and Name: `200 Constitution Ave NW, U.S. DEPARTMENT OF LABOR`

Apt. Ste. Flr. Number: ☐ ☐ ☐ `N/A`

City or Town: `Washington, DC.`

State: `DC`

ZIP Code: `20210`

Daytime Telephone Number: `N/A`

Case Number: `N/A`

Circumstances

`The applicant reported the trafficking-related labor exploitation to the U.S. Department of Labor, specifically to WHD and OSHA. He explained the circumstances of his employment, including coercion, threats, unsafe working conditions, and violations of labor laws. The report was made in good faith after he realized that he was being subjected to severe labor abuse consistent with trafficking indicators.`

6. I was under 18 years of age at the time at least one of the acts of trafficking occurred. ☐ Yes ☒ No

7. I have complied with reasonable requests from Federal, State, Tribal, or local law enforcement authorities for assistance in the investigation or prosecution of acts of trafficking, or am unable to cooperate with such requests due to physical or psychological trauma. (If you selected "No," and were over 18 years of age at the time one of the acts of trafficking occurred, explain the circumstances.) ☒ Yes ☐ No

8. This is the first time I have entered the United States. (If you selected "No," list each date, place of entry, and under which status you entered the United States for the past five years, and explain the circumstances of your most recent arrival.) If you need extra space, use the space provided in **Part 9. Additional Information**. ☒ Yes ☐ No

(1) Date of Entry (mm/dd/yyyy)

(2) Place of Entry

City or Town

State

(3) Status

9. My most recent entry was on account of the trafficking that forms the basis for my claim. *(Explain the circumstances of your most recent arrival.)* ☐ Yes ☒ No

10. I am requesting an Employment Authorization Document (EAD) when I am granted T nonimmigrant status. ☒ Yes ☐ No

11. I am now applying for one or more eligible family members. (If you selected "Yes," complete and include a Form I-914, Supplement A, Application for Derivative T Nonimmigrant Status, for each family member for whom you are now applying. You may also apply to bring eligible family members to the United States at a later date.) ☒ Yes ☐ No

Part 4. Processing Information

Answer the following questions about yourself. Responses are intended to cover any activity you have committed under your legal name or any aliases. For purposes of this application, you must answer "Yes" to the following questions, even if your records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. (If your answer is "Yes" to any one of these questions, explain in the space provided in **Part 9. Additional Information**. Additionally, explain if any of the acts or circumstances below are related to you having been a victim of a severe form of trafficking. Answering "Yes" does not necessarily mean that you will be denied T nonimmigrant status or are not entitled to adjust your status or register for permanent residence.)

1. Have you **EVER**:

A. Committed a crime or offense for which you have not been arrested? ☐ Yes ☒ No

B. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? ☐ Yes ☒ No

C. Been charged with committing any crime or offense? ☐ Yes ☒ No

D. Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)? ☐ Yes ☒ No

E. Been placed in an alternative sentencing or a rehabilitative program (for example: diversion, deferred prosecution, withheld adjudication, deferred adjudication)? ☐ Yes ☒ No

F. Received a suspended sentence, been placed on probation, or been paroled? ☐ Yes ☒ No

G. Been in jail or prison? ☐ Yes ☒ No

H. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? ☐ Yes ☒ No

I. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? ☐ Yes ☒ No

If you answered "Yes" to any of the above questions, complete the following table. If you need extra space, use the space provided in **Part 9. Additional Information**.

Why were you arrested, cited, detained, or charged?	**Date of arrest, citation, detention, charge** (mm/dd/yyyy)	**Where were you arrested, cited, detained, or charged?** (City or Town, State, Country)	**Outcome or disposition** (for example, no charges filed, charges dismissed, jail, probation, etc.)

2. Have you:

A. Engaged in prostitution or procurement of prostitution or do you intend to engage in prostitution or procurement of prostitution? ☐ Yes ☒ No

B. **EVER** engaged in any unlawful commercialized vice, including, but not limited to illegal gambling? ☐ Yes ☒ No

C. **EVER** knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? ☐ Yes ☒ No

D. **EVER** illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance? ☐ Yes ☒ No

Part 4. Processing Information (continued)

3. Have you **EVER** committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, or solicited funds for any of the following:

A. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

B. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

C. Assassination? ☐ Yes ☒ No

D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

E. The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

4. Have you **EVER** been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:

A. Designated as a terrorist organization under the Immigration and Nationality Act section 219? ☐ Yes ☒ No

B. Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in:

(1) Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

(2) Seizing or detaining, and threatening to kill, injure, or continue to detain another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

(3) Assassination? ☐ Yes ☒ No

(4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

(5) Soliciting money or members or otherwise providing material support to a terrorist organization? ☐ Yes ☒ No

(6) The use of any biological agent; chemical agent; or nuclear weapon or device; explosive, or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

5. Do you intend to engage in the United States in:

A. Espionage? ☐ Yes ☒ No

B. Any unlawful activity, or any activity the purpose of which is in opposition, to control, or overthrow of the government of the United States? ☐ Yes ☒ No

C. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? ☐ Yes ☒ No

6. Have you ever been or do you continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? ☐ Yes ☒ No

7. Have you, during the period of 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 ordered, incited, assisted, or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion? ☐ Yes ☒ No

Part 4. Processing Information (continued)

8. Have you **EVER** been present or nearby when any person was:

A. Intentionally killed, tortured, beaten, or injured? ☐ Yes ☒ No

B. Displaced or moved from their residence by force, compulsion, or duress? ☐ Yes ☒ No

C. In any way compelled or forced to engage in any kind of sexual contact or relations? ☐ Yes ☒ No

9. A. Are removal, exclusion, rescission, or deportation proceedings pending against you? ☐ Yes ☒ No

B. Have removal, exclusion, rescission, or deportation proceedings **EVER** been initiated against you? ☐ Yes ☒ No

C. Have you **EVER** been removed, excluded, or deported from the United States? ☐ Yes ☒ No

D. Have you **EVER** been ordered to be removed, excluded, or deported from the United States? ☐ Yes ☒ No

E. Have you **EVER** been denied a visa or denied admission to the United States? (If a visa was denied, use the space provided in **Part 9. Additional Information**.) ☒ Yes ☐ No

F. Have you **EVER** been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? ☐ Yes ☒ No

10. Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

A. Acts involving torture or genocide? ☐ Yes ☒ No

B. Killing any person? ☐ Yes ☒ No

C. Intentionally and severely injuring any person? ☐ Yes ☒ No

D. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? ☐ Yes ☒ No

E. Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☒ No

11. Have you **EVER**:

A. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization? ☐ Yes ☒ No

B. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? ☐ Yes ☒ No

12. Have you **EVER** been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? ☐ Yes ☒ No

13. Have you **EVER** assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person? ☐ Yes ☒ No

14. Have you **EVER** received any type of military, paramilitary, or weapons training? ☐ Yes ☒ No

15. Are you under a final order or civil penalty for violating section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the Immigration and Nationality Act)? ☐ Yes ☒ No

16. Have you **EVER**, by fraud or willful misrepresentation of a material fact, sought to procure, or procured, a visa or other documentation, for entry into the United States or any immigration benefit? ☐ Yes ☒ No

17. Have you **EVE**R left the United States to avoid being drafted into the U.S. Armed Forces? ☐ Yes ☒ No

18. Have you **EVER** detained, retained, or withheld the custody of a child, having a lawful claim to U.S. citizenship, outside the United States from a U.S. citizen granted custody? ☐ Yes ☒ No

19. Do you plan to practice polygamy in the United States? ☐ Yes ☒ No

20. Have you entered the United States as a stowaway? ☐ Yes ☒ No

Part 4. Processing Information (continued)

21. A. Do you have a communicable disease of public health significance? ☐ Yes ☒ No

B. Do you have or have you had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of yourself or others? ☐ Yes ☒ No

C. Are you now or have you been a drug abuser or drug addict? ☐ Yes ☒ No

Part 5. Information About Your Family Members

Provide the following information about your spouse and all of your children, if applicable. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

1. Information About your Spouse

A. Family Name (Last Name): DOS SANTOS | Given Name (First Name): Cynara | Middle Name (if any): N/A

B. Date of Birth (mm/dd/yyyy): 10/14/1987 **C.** Country of Birth: Brazil

D. Current Location

City or Town of Residence: Pinole, CA | Country of Residence: USA

2. Information About Your Children

A. Child 1

Family Name (Last Name): MENDANHA DOS SANTOS | Given Name (First Name): Julia | Middle Name (if any): N/A

Date of Birth (mm/dd/yyyy): 07/18/2008 | Country of Birth: Brazil

Current Location

City or Town: Pinole | State: CA | Country: USA

B. Child 2

Family Name (Last Name): DA COSTA | Given Name (First Name): Olivia | Middle Name (if any): Santos

Date of Birth (mm/dd/yyyy): 06/03/2020 | Country of Birth: USA

Current Location

City or Town: Pinole | State: CA | Country: USA

Part 5. Information About Your Family Members (continued)

C. Child 3

Family Name (Last Name): DA COSTA

Given Name (First Name): Caio

Middle Name (if any): Santos

Date of Birth (mm/dd/yyyy): 11/22/2023

Country of Birth: USA

Current Location

City or Town: Pinole

State: CA

Country: USA

Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-914 Instructions before completing this section.

Applicant's Statement

NOTE: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

1. Applicant's Statement Regarding the Interpreter

A. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

B. ☒ The interpreter named in **Part 7.** read to me every question and instruction on this application and my answer to every question in Portuguese, a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer

☒ At my request, the preparer named in **Part 8.**, Natalia Vieira Santanna, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number: +1(510)253-9457

4. Applicant's Safe Daytime Telephone Number: +1(510)253-9457

5. Applicant's Email Address (if any): viniciusferreiracosta.vfc@gmail.com

Part 6. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in making determinations of eligibility for benefits pursuant to 8 U.S.C. 1641(c).

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law. Any disclosure will be in accordance with the confidentiality provisions at 8 U.S.C. section 1367 and 8 CFR 214.216.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and understood all the information contained in, and submitted with, my application; and

2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all the information contained in, and submitted with, my application and that all this information is complete, true, and correct.

Applicant's Signature

6. Applicant's Signature



Date of Signature (mm/dd/yyyy): 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 7. Interpreter's Contact Information, Certification, and Signature (if any)

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name): INACIO PENNA MELLO

   Interpreter's Given Name (First Name): Andre Vinicius

2. Interpreter's Business or Organization Name (if any): HS Law Corp

Part 7. Interpreter's Contact Information, Certification, and Signature (if any) (continued)

Interpreter's Mailing Address

3. Street Number and Name: PO Box 90487

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: San Diego

State: CA

ZIP Code: 92169

Province:

Postal Code:

Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

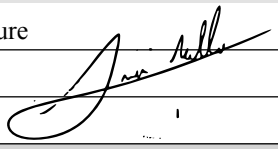
Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and Portuguese, which is the same language specified in **Part 6.**, **Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and their answer to every question. The applicant informed me that he or she understood every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature



Date of Signature (mm/dd/yyyy): 02/06/2026

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1. Preparer's Family Name (Last Name): VIEIRA SANTANNA

Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Mailing Address

3. Street Number and Name: PO Box 7528

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: Oakland

State: CA

ZIP Code: 94601

Province:

Postal Code:

Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Preparer's Statement

7. **A.** ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

B. ☒ I am an attorney or accredited representative and my representation of the applicant in this case

☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature:

Date of Signature (mm/dd/yyyy): 02/06/2026

Part 9. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): **FERREIRA DA COSTA** | Given Name (First Name): **Vinicius** | Middle Name: **N/A**

2. A-Number ► **A-** **N / A**

3. **A.** Page Number: **6** **B.** Part Number: **4** **C.** Item Number: **9.E**

D. **The applicant had a B-2 Visa denied in 2016 by a U.S. Consulate in Brazil. After correcting the form DS-160, a second application was submitted and approved in 2017.**

4. **A.** Page Number **B.** Part Number **C.** Item Number

D.

5. **A.** Page Number **B.** Part Number **C.** Item Number

D.

6. **A.** Page Number **B.** Part Number **C.** Item Number

D.

Supplement A to Form I-914, Application for Derivative T Nonimmigrant Status

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-914
OMB No. 1615-0099
Expires 08/31/2026

START HERE - Type or print in ink. See Instructions for information about eligibility and how to complete and file this application. The recipient of the T nonimmigrant classification is referred to as the principal applicant. Their family member(s) is referred to as a derivative applicant. **Form I-914, Supplement A, is to be completed by the principal applicant.**

PART 1. Family Member For Whom You are Filing

1. The family member that I am filing for is my (select **only one** box):

- ☒ Spouse
- ☐ Child
- ☐ Parent
- ☐ Unmarried Sibling Under 18 Years of Age

2. The family member I am filing for is the adult or minor child of one of the family members listed in **Item Number 1.** who faces a present danger of retaliation as a result of my escape from the severe form of trafficking in persons or my cooperation with law enforcement and is the adult or minor (select **only one** box.)

- ☐ Child of my spouse
- ☐ Child of my child (my grandchild)
- ☐ Child of my parent (my sibling over 18 years of age)
- ☐ Child of my unmarried sibling under 18 years of age (my niece or nephew)

PART 2. General Information About You (the principal)

1. Your Full Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
FERREIRA DA COSTA	Vinicius	N/A

2. Date of Birth (mm/dd/yyyy)
09/25/1988

3. Alien Registration Number (A-Number)
► A- N / A

4. Status of your Form I-914, Application for T Nonimmigrant Status: (Select one)

- ☒ Filing this Form I-914, Supplement A, together
- ☐ Pending
- ☐ Approved

PART 3. Information About Your Family Member (the derivative)

1. Your Full Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
DOS SANTOS	Cynara	N/A

For USCIS Use Only

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

Validity Dates
From _____
To _____

Remarks

Waitlisted
Stamp # _____ Date _____

Action Block

To be fully completed by an attorney or accredited representative, if any.

☒ **Select this box if Form G-28 is attached.**

Attorney State License Bar Number
337502

Attorney or Accredited Representative USCIS Online Account Number
063460327974

PART 3. Information About Your Family Member (the derivative) (continued)

2. Other Names Used

Provide any other names your family member has used since birth, including aliases, maiden names, and nicknames. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
DOS SANTOS MENDANHA	Cynara	N/A
N/A	N/A	N/A

3. U.S. Physical Address or Intended Physical Address *(USCIS ZIP Code Lookup)*

Street Number and Name	Apt. Ste. Flr.	Number
893 4th Ave	☐ ☐ ☐	#A

City or Town	State	ZIP Code
Pinole	CA	94564

4. Safe U.S. Mailing Address

If you do not want U.S. Citizenship and Immigration Services (USCIS) to send notices about this application to your home address, you may provide an alternate safe mailing address.

In Care Of Name: Santanna Law Offices PC

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 7528	☐ ☐ ☐	

City or Town	State	ZIP Code
Oakland	CA	94601

5. Alien Registration Number (A-Number) (if any)

► A- N / A

6. USCIS Online Account Number

► N / A

7. U.S. Social Security Number (SSN) (if any)

► N / A

8. Sex

☐ Male ☒ Female

9. Marital Status

☐ Single/Never Married ☒ Married ☐ Divorced ☐ Widowed ☐ Annulled

10. If your family member was previously married, list names of prior spouses and dates of termination of marriage. Documents such as divorce decrees or death certificates must be attached. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

A. Name of Former Spouse

Family Name (Last Name)	Given Name (First Name)	Middle Name
MENDANHA JUNIOR	Edson Antonio	N/A

B. Date Marriage Ended (mm/dd/yyyy)

01/08/2013

PART 3. Information About Your Family Member (the derivative) (continued)

C. Where Marriage Ended

City or Town	State or Province	Country
Goiânia	Goiás	Brazil

D. How Marriage Ended

☐ Annulled ☒ Divorced ☐ Separated ☐ Widowed

11. Date of Birth (mm/dd/yyyy)
10/14/1987

12. Place of Birth

City or Town	State or Province	Country
Goiânia	Goiás	Brazil

13. Country of Citizenship or Nationality
Brazil

14. Passport or Travel Document Number
FR051008

15. Country That Issued Passport or Travel Document
Brazil

16. Issued Date for Passport or Travel Document (mm/dd/yyyy)
06/23/2016

17. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
06/24/2026

18. Current Immigration Status
No status

19. Is your family member currently living in the United States? ☒ Yes ☐ No

20. If you answered "Yes" to **Item Number 19.**, give the following information about your family member if he or she is currently in the United States.

A. Place of Last Entry

City or Town	State
San Francisco	CA

B. Date of Last Entry (mm/dd/yyyy)
06/21/2017

C. Form I-94 Arrival-Departure Record Number
► 45133431985

21. If your family member is outside the United States, indicate the U.S. Consulate or inspection facility you want notified if this application is approved.

A. Type of Office (Select one):

☐ Consulate ☐ Pre-flight Inspection Facility ☐ Port of Entry

B. City or Town
N/A

C. U.S. State or Foreign Country
N/A

PART 3. Information About Your Family Member (the derivative) (continued)

D. Foreign Address Where You Want Notification Sent

Street Number and Name: N/A

Apt. Ste. Flr. Number: ☐ ☐ ☐ N/A

City or Town: N/A

State: ▼ ZIP Code: N/A

Province: N/A

Postal Code: N/A

Country: N/A

22. Give the following information about your family member if he or she has previously traveled to the United States.

A. Place of Entry

City or Town: San Francisco

State: CA

B. Date of Entry (mm/dd/yyyy): 06/21/2017

C. Date Authorized Stay Expired (mm/dd/yyyy): 12/20/2017

D. Immigration Status: B2 - TEMPORARY VISITOR FOR PLEASURE

23. Has your family member ever been in immigration court proceedings? ☐ Yes ☒ No

24. If you answered "Yes" to **Item Number 23.**, what type of proceedings? (Select **all** that apply)

A. ☐ Removal Date (mm/dd/yyyy)

B. ☐ Exclusion Date (mm/dd/yyyy)

C. ☐ Deportation Date (mm/dd/yyyy)

D. ☐ Recission Date (mm/dd/yyyy)

E. ☐ Next Hearing Date (mm/dd/yyyy)

25. Is your family member requesting an Employment Authorization Document? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 25.**, submit Form I-765, Application for Employment Authorization Document, with Form I-914, Supplement A, or separately.

NOTE: If your family member is living outside the United States, he or she is not eligible to receive employment authorization until he or she is lawfully admitted to the United States. Do not file Form I-765 for a family member living outside the United States.

PART 4. Processing Information

Answer the following questions about your family member for whom you are filing. You must answer "Yes" to the following questions even if the records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney told you that your family member no longer has a record. (If your answer is "Yes" to any one of these questions, use the space provided in **Part 8. Additional Information** to explain your answer. Answering "Yes" does not necessarily mean that your family member will be denied T nonimmigrant status.)

1. Has the family member for whom you are filing **EVER**:

A. Committed a crime or offense for which they have not been arrested? ☐ Yes ☒ No

B. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? ☐ Yes ☒ No

C. Been charged with committing any crime or offense? ☐ Yes ☒ No

D. Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)? ☐ Yes ☒ No

E. Been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)? ☐ Yes ☒ No

F. Received a suspended sentence, been placed on probation, or been paroled? ☐ Yes ☒ No

G. Been in jail or prison? ☐ Yes ☒ No

H. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? ☐ Yes ☒ No

I. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? ☐ Yes ☒ No

If you answered "Yes" to any part of **Item Number 1.**, complete the following table. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information** to explain your answer.

Why was the family member for whom you are filing arrested, cited, detained, or charged?	**Date of arrest, citation, detention, charge** (mm/dd/yyyy)	**Where was the family member for whom you are filing arrested, cited, detained, or charged?** (City or Town, State, Country)	**Outcome or disposition** (for example, no charges filed, charges dismissed, jail, probation, etc.)

2. Has the family member for whom you are filing:

A. Engaged in prostitution or procurement of prostitution or does he or she intend to engage in prostitution or procurement of prostitution? ☐ Yes ☒ No

B. **EVER** engaged in any unlawful commercialized vice, including but not limited to illegal gambling? ☐ Yes ☒ No

C. **EVER** knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? ☐ Yes ☒ No

D. **EVER** illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance? ☐ Yes ☒ No

PART 4. Processing Information (continued)

3. Has the family member for whom you are filing **EVER** committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, or solicited funds for any of the following:

A. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

B. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

C. Assassination? ☐ Yes ☒ No

D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No

E. The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

4. Has the family member for whom you are filing **EVER** been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:

A. Designated as a terrorist organization under the Immigration and Nationality Act section 219? ☐ Yes ☒ No

B. Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in:

(1) Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

(2) Seizing or detaining, and threatening to kill, injure, or continue to detain another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

(3) Assassination? ☐ Yes ☒ No

(4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No

(5) Soliciting money or members or otherwise providing material support to a terrorist organization? ☐ Yes ☒ No

(6) The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

5. Does the family member for whom you are filing intend to engage in the United States in:

A. Espionage? ☐ Yes ☒ No

B. Any unlawful activity, or any activity the purpose of which is in opposition, to control or overthrow of the Government of the United States? ☐ Yes ☒ No

C. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? ☐ Yes ☒ No

6. Has the family member for whom you are filing **EVER** been or do they continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? ☐ Yes ☒ No

7. Has the family member for whom you are filing, during the period of 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 ordered, incited, assisted, or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion? ☐ Yes ☒ No

PART 4. Processing Information (continued)

8. Has the family member for whom you are filing **EVER** been present or nearby when any person was:

A. Intentionally killed, tortured, beaten, or injured? ☐ Yes ☒ No

B. Displaced or moved from their residence by force, compulsion, or duress? ☐ Yes ☒ No

C. In any way compelled or forced to engage in any kind of sexual contact or relations? ☐ Yes ☒ No

9. A. Are removal, exclusion, rescission, or deportation proceedings pending against the family member for whom you are filing? ☐ Yes ☒ No

B. Have removal, exclusion, rescission, or deportation proceedings **EVER** been initiated against the family member for whom you are filing? ☐ Yes ☒ No

C. Has the family member for whom you are filing **EVER** been removed, excluded, or deported from the United States? ☐ Yes ☒ No

D. Has the family member for whom you are filing **EVER** been ordered to be removed, excluded, or deported from the United States? ☐ Yes ☒ No

E. Has the family member for whom you are filing **EVER** been denied a visa or denied admission to the United States? (If a visa was denied, use the space provided in **Part 8. Additional Information** to explain your answer.) ☒ Yes ☐ No

F. Has the family member for whom you are filing **EVER** been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? ☐ Yes ☒ No

10. Has the family member for whom you are filing (or has any member of their family) **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

A. Acts involving torture or genocide? ☐ Yes ☒ No

B. Killing any person? ☐ Yes ☒ No

C. Intentionally and severely injuring any person? ☐ Yes ☒ No

D. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? ☐ Yes ☒ No

E. Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☒ No

11. Has the family member for whom you are filing **EVER**:

A. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization? ☐ Yes ☒ No

B. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? ☐ Yes ☒ No

12. Has the family member for whom you are filing **EVER** been a member of, assisted in, or participated in any group, unit, or organization of any kind in which they or any other persons used any type of weapon against any person or threatened to do so? ☐ Yes ☒ No

13. Has the family member for whom you are filing **EVER** assisted or participated in selling or providing weapons to any person who to their knowledge used them against another person, or in transporting weapons to any person who to their knowledge used them against another person? ☐ Yes ☒ No

14. Has the family member for whom you are filing **EVER** received any type of military, paramilitary, or weapons training? ☐ Yes ☒ No

15. Is the family member for whom you are filing under a final order or civil penalty for violating INA section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the INA)? ☐ Yes ☒ No

16. Has the family member for whom you are filing **EVER**, by fraud or willful misrepresentation of a material fact, sought to procure, or procured, a visa or other documentation, for entry into the United States or any immigration benefit? ☐ Yes ☒ No

PART 4. Processing Information (continued)

17. Has the family member for whom you are filing **EVER** left the United States to avoid being drafted into the U.S. Armed Forces? ☐ Yes ☒ No

18. Has the family member for whom you are filing **EVER** detained, retained, or withheld the custody of a child, having a lawful claim to U.S. citizenship, outside the United States from a U.S. citizen granted custody? ☐ Yes ☒ No

19. Does the family member for whom you are filing plan to practice polygamy in the United States? ☐ Yes ☒ No

20. Did the family member for whom you are filing enter the United States as a stowaway? ☐ Yes ☒ No

21. A. Does the family member for whom you are filing have a communicable disease of public health significance? ☐ Yes ☒ No

B. Does the family member for whom you are filing have or have they had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of themselves or others? ☐ Yes ☒ No

C. Is the family member for whom you are filing now or have they been a drug abuser or drug addict? ☐ Yes ☒ No

PART 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-914 Instructions before completing this part.

Applicant's Statement

NOTE: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

1. Applicant's Statement Regarding the Interpreter

A. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

B. ☒ The interpreter named in **Part 6.** read to me every question and instruction on this application and my answer to every question in Portuguese, a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer

☒ At my request, the preparer named in **Part 7.**, Santanna Law Offices, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number
(510) 253-5992

4. Applicant's Mobile Telephone Number (if any)
(510) 253-5992

5. Applicant's Email Address (if any)
cynara.santos.cs@gmail.com

PART 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. Citizenship and Immigration Services (USCIS) may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking for the family member for whom I am applying, to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating or prosecuting crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in making determinations of eligibility for benefits pursuant to 8 U.S.C. 1641(c).

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law. Any disclosure shall be in accordance with the confidentiality provisions at 8 U.S.C. section 1367 and 8 CFR 214.216.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and understood all of the information contained in, and submitted with, my application; and

2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

NOTE: If your family member is in the United States, he or she must verify the accuracy of the information recorded on this supplement and must also complete this section of the supplement.

Applicant's Signature

6. Applicant's Signature

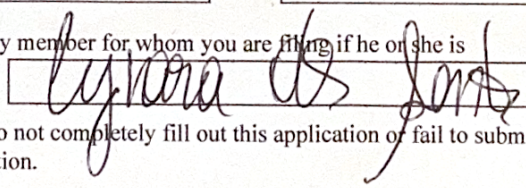


Date of Signature (mm/dd/yyyy): 02/06/2026

Applicant's Phone Number (if any): +1(510)253-9457

Applicant's Safe Phone Number (if any): +1(510)253-9457

7. Signature of Family Member (the family member for whom you are filing if he or she is physically present in the United States)



Date of Signature (mm/dd/yyyy): 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

PART 6. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name): INACIO PENNA MELLO

   Interpreter's Given Name (First Name): Andre Vinicius

2. Interpreter's Business or Organization Name (if any): HS Law Corp

PART 6. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Mailing Address

3. Street Number and Name: PO Box 90487

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: San Diego

State:

ZIP Code: 92169

Province:

Postal Code:

Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

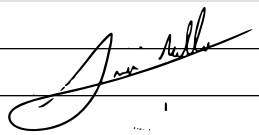
Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and Portuguese, which is the same language specified in **Part 5.**, **Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and their answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature



Date of Signature (mm/dd/yyyy): 02/06/2026

PART 7. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1. Preparer's Family Name (Last Name): VIEIRA SANTANNA

Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

PART 7. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Mailing Address

3. Street Number and Name: PO Box 7528

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: Oakland

State: CA

ZIP Code: 94601

Province:

Postal Code:

Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Preparer's Statement

7. **A.** ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

B. ☒ I am an attorney or accredited representative and my representation of the applicant in this case ☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature:

Date of Signature (mm/dd/yyyy): 02/06/2026

Part 8. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): FERREIRA DA COSTA | Given Name (First Name): Vinicius | Middle Name: N/A

2. A-Number ► A- N / A

3. **A.** Page Number: 7 **B.** Part Number: 4 **C.** Item Number: 9.E

D. The derivative had a B-2 Visa denied in 2016 by a U.S. Consulate in Brazil. After correcting the form DS-160, a second application was submitted and approved in 2017.

4. **A.** Page Number **B.** Part Number **C.** Item Number

D.

5. **A.** Page Number **B.** Part Number **C.** Item Number

D.

6. **A.** Page Number **B.** Part Number **C.** Item Number

D.

Supplement A to Form I-914, Application for Derivative T Nonimmigrant Status

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-914
OMB No. 1615-0099
Expires 08/31/2026

START HERE - Type or print in ink. See Instructions for information about eligibility and how to complete and file this application. The recipient of the T nonimmigrant classification is referred to as the principal applicant. Their family member(s) is referred to as a derivative applicant. **Form I-914, Supplement A, is to be completed by the principal applicant.**

PART 1. Family Member For Whom You are Filing

1. The family member that I am filing for is my (select **only one** box):

- ☐ Spouse
- ☒ Child
- ☐ Parent
- ☐ Unmarried Sibling Under 18 Years of Age

2. The family member I am filing for is the adult or minor child of one of the family members listed in **Item Number 1.** who faces a present danger of retaliation as a result of my escape from the severe form of trafficking in persons or my cooperation with law enforcement and is the adult or minor (select **only one** box.)

- ☐ Child of my spouse
- ☐ Child of my child (my grandchild)
- ☐ Child of my parent (my sibling over 18 years of age)
- ☐ Child of my unmarried sibling under 18 years of age (my niece or nephew)

PART 2. General Information About You (the principal)

1. Your Full Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
FERREIRA DA COSTA	Vinicius	N/A

2. Date of Birth (mm/dd/yyyy): 09/25/1988

3. Alien Registration Number (A-Number): ► A- N / A

4. Status of your Form I-914, Application for T Nonimmigrant Status: (Select one)

- ☒ Filing this Form I-914, Supplement A, together
- ☐ Pending
- ☐ Approved

PART 3. Information About Your Family Member (the derivative)

1. Your Full Legal Name

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
MENDANHA DOS SANTOS	Julia	N/A

For USCIS Use Only

Returned	Receipt
Date	
Date	
Resubmitted	
Date	
Date	
Reloc Sent	
Date	
Date	
Reloc Rec'd	
Date	
Date	

Validity Dates
From _____
To _____

Remarks

Waitlisted
Stamp # _____ Date _____

Action Block

To be fully completed by an attorney or accredited representative, if any.

☒ **Select this box if Form G-28 is attached.**

Attorney State License Bar Number
337502

Attorney or Accredited Representative USCIS Online Account Number
063460327974

PART 3. Information About Your Family Member (the derivative) (continued)

2. Other Names Used

Provide any other names your family member has used since birth, including aliases, maiden names, and nicknames. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if any)
N/A	N/A	N/A
N/A	N/A	N/A

3. U.S. Physical Address or Intended Physical Address *(USCIS ZIP Code Lookup)*

Street Number and Name	Apt. Ste. Flr.	Number
893 4th Ave	☐ ☐ ☐	#A

City or Town	State	ZIP Code
Pinole	CA	94564

4. Safe U.S. Mailing Address

If you do not want U.S. Citizenship and Immigration Services (USCIS) to send notices about this application to your home address, you may provide an alternate safe mailing address.

In Care Of Name: Santanna Law Offices PC

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 7528	☐ ☐ ☐	

City or Town	State	ZIP Code
Oakland	CA	94601

5. Alien Registration Number (A-Number) (if any)

► A- 2 0 1 8 3 1 0 6 6

6. USCIS Online Account Number

► N / A

7. U.S. Social Security Number (SSN) (if any)

► 7 5 0 3 8 7 9 6 2

8. Sex

☐ Male ☒ Female

9. Marital Status

☒ Single/Never Married ☐ Married ☐ Divorced ☐ Widowed ☐ Annulled

10. If your family member was previously married, list names of prior spouses and dates of termination of marriage. Documents such as divorce decrees or death certificates must be attached. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information**.

A. Name of Former Spouse

Family Name (Last Name)	Given Name (First Name)	Middle Name
N/A	N/A	N/A

B. Date Marriage Ended (mm/dd/yyyy)

N/A

PART 3. Information About Your Family Member (the derivative) (continued)

C. Where Marriage Ended

City or Town	State or Province	Country
N/A	N/A	N/A

D. How Marriage Ended

☐ Annulled ☐ Divorced ☐ Separated ☐ Widowed

11. Date of Birth (mm/dd/yyyy)
07/18/2008

12. Place of Birth

City or Town	State or Province	Country
Goiânia	Goiás	Brazil

13. Country of Citizenship or Nationality
Brazil

14. Passport or Travel Document Number
YE343657

15. Country That Issued Passport or Travel Document
Brazil

16. Issued Date for Passport or Travel Document (mm/dd/yyyy)
09/02/2021

17. Expiration Date for Passport or Travel Document (mm/dd/yyyy)
09/01/2026

18. Current Immigration Status
No status (see additional information)

19. Is your family member currently living in the United States? ☒ Yes ☐ No

20. If you answered "Yes" to **Item Number 19.**, give the following information about your family member if he or she is currently in the United States.

A. Place of Last Entry

City or Town	State
San Francisco	CA

B. Date of Last Entry (mm/dd/yyyy)
06/21/2017

C. Form I-94 Arrival-Departure Record Number
► 45133465885

21. If your family member is outside the United States, indicate the U.S. Consulate or inspection facility you want notified if this application is approved.

A. Type of Office (Select one):

☐ Consulate ☐ Pre-flight Inspection Facility ☐ Port of Entry

B. City or Town
N/A

C. U.S. State or Foreign Country
N/A

PART 3. Information About Your Family Member (the derivative) (continued)

D. Foreign Address Where You Want Notification Sent

Street Number and Name: N/A

Apt. Ste. Flr. Number: ☐ ☐ ☐ N/A

City or Town: N/A

State: ▼ ZIP Code: N/A

Province: N/A

Postal Code: N/A

Country: N/A

22. Give the following information about your family member if he or she has previously traveled to the United States.

A. Place of Entry

City or Town: San Francisco

State: CA

B. Date of Entry (mm/dd/yyyy): 06/21/2017

C. Date Authorized Stay Expired (mm/dd/yyyy): 12/20/2017

D. Immigration Status: B2 - TEMPORARY VISITOR FOR PLEASURE

23. Has your family member ever been in immigration court proceedings? ☐ Yes ☒ No

24. If you answered "Yes" to **Item Number 23.**, what type of proceedings? (Select **all** that apply)

A. ☐ Removal Date (mm/dd/yyyy)

B. ☐ Exclusion Date (mm/dd/yyyy)

C. ☐ Deportation Date (mm/dd/yyyy)

D. ☐ Recission Date (mm/dd/yyyy)

E. ☐ Next Hearing Date (mm/dd/yyyy)

25. Is your family member requesting an Employment Authorization Document? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 25.**, submit Form I-765, Application for Employment Authorization Document, with Form I-914, Supplement A, or separately.

NOTE: If your family member is living outside the United States, he or she is not eligible to receive employment authorization until he or she is lawfully admitted to the United States. Do not file Form I-765 for a family member living outside the United States.

PART 4. Processing Information

Answer the following questions about your family member for whom you are filing. You must answer "Yes" to the following questions even if the records were sealed or otherwise cleared or if anyone, including a judge, law enforcement officer, or attorney told you that your family member no longer has a record. (If your answer is "Yes" to any one of these questions, use the space provided in **Part 8. Additional Information** to explain your answer. Answering "Yes" does not necessarily mean that your family member will be denied T nonimmigrant status.)

1. Has the family member for whom you are filing **EVER**:

A. Committed a crime or offense for which they have not been arrested? ☐ Yes ☒ No

B. Been arrested, cited, or detained by any law enforcement officer (including Department of Homeland Security (DHS), former Immigration and Naturalization Service (INS), and military officers) for any reason? ☐ Yes ☒ No

C. Been charged with committing any crime or offense? ☐ Yes ☒ No

D. Been convicted of a crime or offense (even if violation was subsequently expunged or pardoned)? ☐ Yes ☒ No

E. Been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)? ☐ Yes ☒ No

F. Received a suspended sentence, been placed on probation, or been paroled? ☐ Yes ☒ No

G. Been in jail or prison? ☐ Yes ☒ No

H. Been the beneficiary of a pardon, amnesty, rehabilitation, or other act of clemency or similar action? ☐ Yes ☒ No

I. Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States? ☐ Yes ☒ No

If you answered "Yes" to any part of **Item Number 1.**, complete the following table. If you need extra space to complete this section, use the space provided in **Part 8. Additional Information** to explain your answer.

Why was the family member for whom you are filing arrested, cited, detained, or charged?	**Date of arrest, citation, detention, charge** (mm/dd/yyyy)	**Where was the family member for whom you are filing arrested, cited, detained, or charged?** (City or Town, State, Country)	**Outcome or disposition** (for example, no charges filed, charges dismissed, jail, probation, etc.)

2. Has the family member for whom you are filing:

A. Engaged in prostitution or procurement of prostitution or does he or she intend to engage in prostitution or procurement of prostitution? ☐ Yes ☒ No

B. **EVER** engaged in any unlawful commercialized vice, including but not limited to illegal gambling? ☐ Yes ☒ No

C. **EVER** knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally? ☐ Yes ☒ No

D. **EVER** illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance? ☐ Yes ☒ No

PART 4. Processing Information (continued)

3. Has the family member for whom you are filing **EVER** committed, planned or prepared, participated in, threatened to, attempted to, or conspired to commit, gathered information for, or solicited funds for any of the following:

A. Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

B. Seizing or detaining, and threatening to kill, injure, or continue to detain, another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

C. Assassination? ☐ Yes ☒ No

D. The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No

E. The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

4. Has the family member for whom you are filing **EVER** been a member of, solicited money or members for, provided support for, attended military training (as defined in section 2339D(c)(1) of title 18, United States Code) by or on behalf of, or been associated with an organization that is:

A. Designated as a terrorist organization under the Immigration and Nationality Act section 219? ☐ Yes ☒ No

B. Any other group of two or more individuals, whether organized or not, which has engaged in or has a subgroup which has engaged in:

(1) Hijacking or sabotage of any conveyance (including an aircraft, vessel, or vehicle)? ☐ Yes ☒ No

(2) Seizing or detaining, and threatening to kill, injure, or continue to detain another individual in order to compel a third person (including a governmental organization) to do or abstain from doing any act as an explicit or implicit condition for the release of the individual seized or detained? ☐ Yes ☒ No

(3) Assassination? ☐ Yes ☒ No

(4) The use of any firearm with intent to endanger, directly or indirectly, the safety of one or more individual or to cause substantial damage to property? ☐ Yes ☒ No

(5) Soliciting money or members or otherwise providing material support to a terrorist organization? ☐ Yes ☒ No

(6) The use of any biological agent; chemical agent; or nuclear weapon or device; explosive; or other weapon or dangerous device, with intent to endanger, directly or indirectly, the safety of one or more individuals or to cause substantial damage to property? ☐ Yes ☒ No

5. Does the family member for whom you are filing intend to engage in the United States in:

A. Espionage? ☐ Yes ☒ No

B. Any unlawful activity, or any activity the purpose of which is in opposition, to control or overthrow of the Government of the United States? ☐ Yes ☒ No

C. Solely, principally, or incidentally in any activity related to espionage or sabotage or to violate any law involving the export of goods, technology, or sensitive information? ☐ Yes ☒ No

6. Has the family member for whom you are filing **EVER** been or do they continue to be a member of the Communist or other totalitarian party, except when membership was involuntary? ☐ Yes ☒ No

7. Has the family member for whom you are filing, during the period of 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 ordered, incited, assisted, or otherwise participated in the persecution of any person because of race, religion, nationality, membership in a particular social group, or political opinion? ☐ Yes ☒ No

PART 4. Processing Information (continued)

8. Has the family member for whom you are filing **EVER** been present or nearby when any person was:

A. Intentionally killed, tortured, beaten, or injured? ☐ Yes ☒ No

B. Displaced or moved from their residence by force, compulsion, or duress? ☐ Yes ☒ No

C. In any way compelled or forced to engage in any kind of sexual contact or relations? ☐ Yes ☒ No

9. A. Are removal, exclusion, rescission, or deportation proceedings pending against the family member for whom you are filing? ☐ Yes ☒ No

B. Have removal, exclusion, rescission, or deportation proceedings **EVER** been initiated against the family member for whom you are filing? ☐ Yes ☒ No

C. Has the family member for whom you are filing **EVER** been removed, excluded, or deported from the United States? ☐ Yes ☒ No

D. Has the family member for whom you are filing **EVER** been ordered to be removed, excluded, or deported from the United States? ☐ Yes ☒ No

E. Has the family member for whom you are filing **EVER** been denied a visa or denied admission to the United States? (If a visa was denied, use the space provided in **Part 8. Additional Information** to explain your answer.) ☒ Yes ☐ No

F. Has the family member for whom you are filing **EVER** been granted voluntary departure by an immigration officer or an immigration judge and failed to depart within the allotted time? ☐ Yes ☒ No

10. Has the family member for whom you are filing (or has any member of their family) **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

A. Acts involving torture or genocide? ☐ Yes ☒ No

B. Killing any person? ☐ Yes ☒ No

C. Intentionally and severely injuring any person? ☐ Yes ☒ No

D. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened? ☐ Yes ☒ No

E. Limiting or denying any person's ability to exercise religious beliefs? ☐ Yes ☒ No

11. Has the family member for whom you are filing **EVER**:

A. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization? ☐ Yes ☒ No

B. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? ☐ Yes ☒ No

12. Has the family member for whom you are filing **EVER** been a member of, assisted in, or participated in any group, unit, or organization of any kind in which they or any other persons used any type of weapon against any person or threatened to do so? ☐ Yes ☒ No

13. Has the family member for whom you are filing **EVER** assisted or participated in selling or providing weapons to any person who to their knowledge used them against another person, or in transporting weapons to any person who to their knowledge used them against another person? ☐ Yes ☒ No

14. Has the family member for whom you are filing **EVER** received any type of military, paramilitary, or weapons training? ☐ Yes ☒ No

15. Is the family member for whom you are filing under a final order or civil penalty for violating INA section 274C (producing and/or using false documentation to unlawfully satisfy a requirement of the INA)? ☐ Yes ☒ No

16. Has the family member for whom you are filing **EVER**, by fraud or willful misrepresentation of a material fact, sought to procure, or procured, a visa or other documentation, for entry into the United States or any immigration benefit? ☐ Yes ☒ No

PART 4. Processing Information (continued)

17. Has the family member for whom you are filing **EVER** left the United States to avoid being drafted into the U.S. Armed Forces? ☐ Yes ☒ No

18. Has the family member for whom you are filing **EVER** detained, retained, or withheld the custody of a child, having a lawful claim to U.S. citizenship, outside the United States from a U.S. citizen granted custody? ☐ Yes ☒ No

19. Does the family member for whom you are filing plan to practice polygamy in the United States? ☐ Yes ☒ No

20. Did the family member for whom you are filing enter the United States as a stowaway? ☐ Yes ☒ No

21. A. Does the family member for whom you are filing have a communicable disease of public health significance? ☐ Yes ☒ No

B. Does the family member for whom you are filing have or have they had a physical or mental disorder and behavior (or a history of behavior that is likely to recur) associated with the disorder which has posed or may pose a threat to the property, safety, or welfare of themselves or others? ☐ Yes ☒ No

C. Is the family member for whom you are filing now or have they been a drug abuser or drug addict? ☐ Yes ☒ No

PART 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-914 Instructions before completing this part.

Applicant's Statement

NOTE: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**

1. Applicant's Statement Regarding the Interpreter

A. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

B. ☒ The interpreter named in **Part 6.** read to me every question and instruction on this application and my answer to every question in `Portuguese`, a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer

☒ At my request, the preparer named in **Part 7.**, `Santanna Law Offices`, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number

`(510) 253-8612`

4. Applicant's Mobile Telephone Number (if any)

`(510) 253-8612`

5. Applicant's Email Address (if any)

`julia.santosdos.jds@gmail.com`

PART 5. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that U.S. Citizenship and Immigration Services (USCIS) may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I authorize the release of any information from my record that USCIS needs to determine eligibility for the benefit I am seeking for the family member for whom I am applying, to investigate my claim, and to investigate fraudulent claims. I further authorize USCIS to release information to law enforcement agencies and prosecutors investigating or prosecuting crimes of trafficking or related crimes. I further authorize USCIS to release information to Federal, State, and local public and private agencies providing benefits, to be used solely in making determinations of eligibility for benefits pursuant to 8 U.S.C. 1641(c).

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law. Any disclosure shall be in accordance with the confidentiality provisions at 8 U.S.C. section 1367 and 8 CFR 214.216.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and understood all of the information contained in, and submitted with, my application; and

2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

NOTE: If your family member is in the United States, he or she must verify the accuracy of the information recorded on this supplement and must also complete this section of the supplement.

Applicant's Signature

6. Applicant's Signature — Date of Signature (mm/dd/yyyy): 02/06/2026

Applicant's Phone Number (if any): +1(510)253-9457

Applicant's Safe Phone Number (if any): +1(510)253-9457

7. Signature of Family Member (the family member for whom you are filing if he or she is physically present in the United States): Julia M Dos Santos — Date of Signature (mm/dd/yyyy): 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

PART 6. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name): INACIO PENNA MELLO — Interpreter's Given Name (First Name): Andre Vinicius

2. Interpreter's Business or Organization Name (if any): HS Law Corp

PART 6. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Mailing Address

3. Street Number and Name: PO Box 90487

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: San Diego

State:

ZIP Code: 92169

Province:

Postal Code:

Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

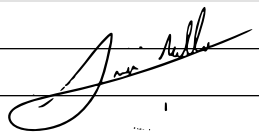
Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and Portuguese, which is the same language specified in **Part 5.**, **Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and their answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature



Date of Signature (mm/dd/yyyy): 02/06/2026

PART 7. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1. Preparer's Family Name (Last Name): VIEIRA SANTANNA

Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

PART 7. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

Preparer's Mailing Address

3. Street Number and Name: PO Box 7528

Apt. Ste. Flr. Number: ☐ ☐ ☐

City or Town: Oakland

State: CA

ZIP Code: 94601

Province:

Postal Code:

Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Preparer's Statement

7. **A.** ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

B. ☒ I am an attorney or accredited representative and my representation of the applicant in this case ☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature:

Date of Signature (mm/dd/yyyy): 02/06/2026

Part 8. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): FERREIRA DA COSTA | Given Name (First Name): Vinicius | Middle Name: N/A

2. A-Number ► A- N / A

3. **A.** Page Number: 3 **B.** Part Number: 3 **C.** Item Number: 18

D. The derivative child has held approved Special Immigrant Juvenile Status (SIJS) since January 2024, having also been granted deferred action for a four-year period

4. **A.** Page Number: 7 **B.** Part Number: 4 **C.** Item Number: 9.E

D. The derivative had a B-2 Visa denied in 2016 by a U.S. Consulate in Brazil. After correcting the form DS-160, a second application was submitted and approved in 2017.

5. **A.** Page Number **B.** Part Number **C.** Item Number

D.

6. **A.** Page Number **B.** Part Number **C.** Item Number

D.

Application for Advance Permission to Enter as a Nonimmigrant

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-192
OMB No. 1615-0017
Expires 03/31/2027

For DHS Use Only		
Received	**Returned Trans. Out**	**Fee Stamp**
Trans. In	**Completed**	

Action by the Department of Homeland Security

Ground of Inadmissibility

- ☐ INA 212(a)(1) _____
- ☐ INA 212(a)(2) _____
- ☐ INA 212(a)(3) _____
- ☐ INA 212(a)(4) _____
- ☐ INA 212(a)(6) _____
- ☐ INA 212(a)(7) _____
- ☐ INA 212(a)(8) _____
- ☐ INA 212(a)(9) _____
- ☐ INA 212(a)(10) _____
- ☐ Other: _____
- ☐ Granted, subject to revocation at any time, upon the following terms and conditions

Action Stamp

Benefits Category:

- ☐ T Nonimmigrant/Advance Permission under INA 212(d)(3) and 8 CFR 212.16
- ☐ T Nonimmigrant/Waiver under INA 212(d)(13) and 8 CFR 212.16
- ☐ U Nonimmigrant/Waiver under INA 212(d)(14) and 8 CFR 212.17
- ☐ U Nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.17
- ☐ Nonimmigrant other than T or U nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.4

Date of Action (mm/dd/yyyy) _____ **DD or OIC** _____ **Office** _____

To be completed by an attorney or accredited representative (if any).

☒ **Select this box if Form G-28 or Form G-28I is attached.**	**Volag Number** (if any)	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Application Type

I am applying to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of the Immigration and Nationality Act (INA) section 212(d)(3)(A)(ii), 212(d)(13), or 212(d)(14).

1. I am seeking this permission so that I may obtain (select **only one** box):

- ☒ Status as a victim of trafficking (T nonimmigrant status) or a victim of qualifying criminal activity (U nonimmigrant status).
- ☐ Admission as a nonimmigrant (other than as a T or U nonimmigrant).

If filing this form concurrently with a USCIS Form I-914/I-914A or Form I-918/I-918A (T or U nonimmigrant, respectively) or in relation to one that you previously filed, you should complete **Item Numbers 1. - 10.** and then skip to **Item Number 26.**

Part 2. Information About You

1. Your Full Legal Name (Do not provide a nickname)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
FERREIRA DA COSTA	Vinicius	N/A

2. Other Names Used (if any)

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
N/A	N/A	N/A
N/A	N/A	N/A

Other Information

3. Alien Registration Number (A-Number) (if any)

► A- N / A

4. USCIS Online Account Number (if any)

► N / A

5. Date of Birth (mm/dd/yyyy)

09/25/1988

6. Place of Birth

City or Town	State or Province
Itapuranga	Goiás

Country

Brazil

7. Country of Citizenship or Nationality

Brazil

8. Sex

☒ Male ☐ Female

9. Mailing Address (Safe address, if applicable)
Please provide an address where you can safely receive correspondence from USCIS.

In Care Of Name (if any)

Santanna Law Offices PC

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 7528	☐ ☐ ☐	N/A

City or Town	State	ZIP Code
Oakland	CA	94601

Province	Postal Code	Country
N/A	N/A	USA

Part 2. Information About You (continued)

Address History

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

10. Physical Address 1 (current address)

Street Number and Name: 893 4th Ave
Apt. Ste. Flr. Number: #A
City or Town: Pinole
State:
ZIP Code: 94564
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 05/01/2021
To (mm/dd/yyyy): PRESENT

11. Physical Address 2

Street Number and Name: 10944 San Pablo Ave
Apt. Ste. Flr. Number: #212
City or Town: El Cerrito
State: CA
ZIP Code: 94530
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 10/14/2017
To (mm/dd/yyyy): 05/01/2021

Information About Your Marital History

12. What is your current marital status?

☐ Single, Never Married ☒ Married ☐ Divorced ☐ Widowed ☐ Legally Separated ☐ Marriage Annulled

☐ Other

13. How many times have you been married (including annulled marriages and marriages to the same person)? 1

Information About Your Current Marriage (including if you are legally separated)

If you are currently married, provide the following information about your **current spouse**.

14. Current Spouse's Legal Name

Family Name (Last Name): DOS SANTOS
Given Name (First Name): Cynara
Middle Name (if applicable): N/A

15. Spouse's Alien Registration Number (A-Number) (if any) ► A- N / A

Part 2. Information About You (continued)

16. Date of Birth (mm/dd/yyyy) 10/14/1987

17. Date of Marriage (mm/dd/yyyy) 02/23/2023

18. Place of Birth

City or Town: Goiânia

State or Province: Goiás

Country: Brazil

19. Place of Marriage

City or Town: Las Vegas

State or Province: Nevada

Country: USA

Information About Prior Marriages (if any)

If you have been married before, anywhere in the world, provide the information requested in **Item Numbers 20. - 25.** about your prior marriage. If you have had more than one previous marriage, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 20. - 25.** for each additional marriage.

20. Prior Spouse's Legal Name (provide family name before marriage)

Family Name (Last Name): N/A

Given Name (First Name): N/A

Middle Name (if applicable): N/A

21. Date of Birth (mm/dd/yyyy) N/A

22. Date of Marriage (mm/dd/yyyy) N/A

23. Place of Marriage

City or Town: N/A

State or Province: N/A

Country: N/A

24. Date Marriage Legally Ended (mm/dd/yyyy) N/A

25. Place Where Marriage Legally Ended

City or Town: N/A

State or Province: N/A

Country: N/A

Immigration and Criminal History

26. Explain the grounds of inadmissibility that may apply in your case.

The applicant entered the United States on a B-2 visa and remained beyond the authorized period of admission, accruing unlawful presence under INA § 212(a)(9)(B)(i)(II) and worked without authorization.

Part 2. Information About You (continued)

27. Have you previously filed an application for advance permission to enter the United States as a nonimmigrant? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 27.**, provide the details in **Item Numbers 28. - 29.**
If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

28. Date Application Filed (mm/dd/yyyy) **N/A**

29. Location where you filed your application (for example, USCIS Office or Port of Entry).

USCIS Office or U.S. Port-of-Entry: **N/A**

City or Town: **N/A**

State or Province: **N/A**

Country: **N/A**

Receipt Number (if available) ► **N / A**

30. Have you **EVER** been in the United States for a period of six months or more? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 30.**, provide the dates you were in the United States (from and to) and your immigration status at the time of entry into the United States in the space provided in **Part 6. Additional Information**.

31. Have you **EVER** filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 31.**, provide the information requested in **Item Numbers 32. - 34.**

If you have (or somebody else on your behalf has) filed multiple applications or petitions for immigration benefits with the U.S. Government, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 32. - 34.** for each of your additional applications or petitions.

32. Type of application or petition filed

N/A

33. Location the application or petition was filed (for example, USCIS office or Port of Entry)

N/A

34. Outcome of the application or petition (for example, approved, denied, or pending).

N/A

35. Have you **EVER** been denied or refused an immigration benefit by the U.S. Government, or had a benefit revoked or terminated (including but not limited to visas)? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 35.**, provide an explanation the information in the space provided in **Part 6. Additional Information**.

36. Have you **EVER**, in or outside the United States, been arrested, cited, charged, indicted, fined, convicted, or imprisoned for breaking or violating any law or ordinance, excluding minor traffic violations? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 36.**, describe the incidents in detail and include all offenses where impaired driving may have been an issue in the space provided in **Part 6. Additional Information**.

Part 2. Information About You (continued)

Travel Information

NOTE: If you are applying for T or U nonimmigrant status and are in the United States, you may skip **Item Numbers 37. - 43.**

Location at Which you Plan to Enter the United States (desired Port of Entry)

37. City
N/A

38. State

39. Name of Port of Entry
N/A

40. How do you plan to travel to the United States? (For example, by plane, ship, car)
N/A

41. When do you plan to enter the United States? (mm/dd/yyyy)
N/A

42. Approximate Length of Stay in the United States
N/A

43. What is the purpose of your stay in the United States? Explain fully below.
N/A

Employment History

Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

44. Employer 1 (current or most recent)

Name of Employer or Company
AK Construction

Address of Employer or Company

Street Number and Name
524 Arreba St

Apt. Ste. Flr. ☐ ☐ ☐

Number
N/A

City or Town
Martinez

State
CA

ZIP Code
94553

Province
N/A

Postal Code
N/A

Country
USA

Your Occupation
Construction Worker

Dates of Employment

From (mm/dd/yyyy)
03/22/2021

To (mm/dd/yyyy)
PRESENT

Part 2. Information About You (continued)

45. Employer 2

Name of Employer or Company

N/A

Address of Employer or Company

Street Number and Name

N/A

Apt. Ste. Flr. ☐ ☐ ☐

Number

N/A

City or Town

N/A

State

ZIP Code

N/A

Province

N/A

Postal Code

N/A

Country

N/A

Your Occupation

N/A

Dates of Employment

From (mm/dd/yyyy)

N/A

To (mm/dd/yyyy)

N/A

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

Applicant's Contact Information

Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

1. Applicant's Daytime Telephone Number

+1(510)253-9457

2. Applicant's Mobile Telephone Number (if any)

+1(510)253-9457

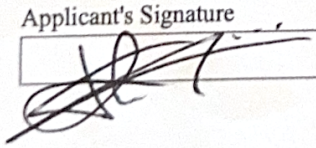
3. Applicant's Email Address (if any)

viniciusferreiracosta.vfc@gmail.com

Applicant's Certification and Signature

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 4.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information is complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

4. Applicant's Signature



Date of Signature (mm/dd/yyyy)

02/06/2026

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Full Name

1. Interpreter's Family Name (Last Name)

INACIO PENNA MELLO

Interpreter's Given Name (First Name)

Andre Vinicius

2. Interpreter's Business or Organization Name

HS Law Corp

Interpreter's Contact Information

3. Interpreter's Daytime Telephone Number

(415) 425-2508

4. Interpreter's Mobile Telephone Number (if any)

(415) 425-2508

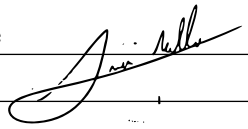
5. Interpreter's Email Address (if any)

andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that I am fluent in English and Portuguese, and I have interpreted every question on the application and instructions and interpreted the applicant's answers to the questions in that language, and the applicant informed me that he or she understood every instruction, question, and answer on the application.

6. Interpreter's Signature



Date of Signature (mm/dd/yyyy)

02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Preparer's Full Name

1. Preparer's Family Name (Last Name)

VIEIRA SANTANNA

Preparer's Given Name (First Name)

Natalia

2. Preparer's Business or Organization Name

Santanna Law Offices

Preparer's Contact Information

3. Preparer's Daytime Telephone Number

(510) 922-0154

4. Preparer's Mobile Telephone Number (if any)

(510) 922-0154

5. Preparer's Email Address (if any)

natalia@santannalaw.com

Preparer's Certification

I certify, under penalty of perjury, that I prepared this application for the applicant at his or her request and with express consent and that all of the responses and information contained in and submitted with the application is complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that he or she understands the responses and information in or submitted with the application.

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): **FERREIRA DA COSTA** | Given Name (First Name): **Vinicius** | Middle Name (if applicable): **N/A**

2. A-Number (if any) ► **A-** **N / A**

3. Page Number: **5** | Part Number: **2** | Item Number: **30**

The applicant entered the United States on June 21, 2017, with a B-2 visa and has remained in the country since then.

4. Page Number: | Part Number: | Item Number:

N/A

5. Page Number: | Part Number: | Item Number:

N/A

6. Page Number: | Part Number: | Item Number:

N/A

Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765
OMB No. 1615-0040
Expires 08/31/2027

For USCIS Use Only			
	☐ **Authorization/Extension Valid From** _____	**Fee Stamp**	**Action Block**
	☐ **Authorization/Extension Valid Through** _____		
	Alien Registration Number A-		
	Remarks		

To be completed by an Attorney or Accredited Representative (if any).	☒ **Select this box if Form G-28 is attached.**	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Reason for Applying

I am applying for (select **only one** box):

1.a. ☒ Initial permission to accept employment.

1.b. ☐ Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to www.uscis.gov/i-765 for further details.

1.c. ☐ Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name): FERREIRA DA COSTA

1.b. Given Name (First Name): Vinicius

1.c. Middle Name: N/A

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

2.a. Family Name (Last Name): N/A

2.b. Given Name (First Name): N/A

2.c. Middle Name: N/A

3.a. Family Name (Last Name): N/A

3.b. Given Name (First Name): N/A

3.c. Middle Name: N/A

4.a. Family Name (Last Name): N/A

4.b. Given Name (First Name): N/A

4.c. Middle Name: N/A

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)
Santanna Law Offices PC

5.b. Street Number and Name: PO Box 7528

5.c. ☐ Apt. ☐ Ste. ☐ Flr. N/A

5.d. City or Town: Oakland

5.e. State: CA **5.f.** ZIP Code: 94601

(USPS ZIP Code Lookup)

6. Is your current mailing address the same as your physical address? ☐ Yes ☒ No

NOTE: If you answered "No" to **Item Number 6.**, provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name: 893 4th Ave

7.b. ☐ Apt. ☐ Ste. ☐ Flr. #A

7.c. City or Town: Pinole

7.d. State: CA **7.e.** ZIP Code: 94564

Other Information

8. Alien Registration Number (A-Number) (if any)
▶ A- N / A

9. USCIS Online Account Number (if any)
▶ N / A

10. Sex ☒ Male ☐ Female

11. Marital Status
☐ Single ☒ Married ☐ Divorced ☐ Widowed

12. Have you previously filed Form I-765?
☐ Yes ☒ No

13. Provide your Social Security number (SSN) (if known).
▶ N / A

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information**.

14.a. Country
Brazil

14.b. Country
N/A

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

15.a. City/Town/Village of Birth

Itapuranga

15.b. State/Province of Birth

Goiás

15.c. Country of Birth

Brazil

16. Date of Birth (mm/dd/yyyy) 09/25/1988

Information About Your Last Arrival in the United States

17. Form I-94 Arrival-Departure Record Number (if any)

► 45133365985

18. Passport Number of Your Most Recently Issued Passport

FR051007

19. Travel Document Number (if any)

N/A

20. Country That Issued Your Passport or Travel Document

Brazil

21. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 06/23/2026

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy) 06/21/2017

23. Place of Your Last Arrival Into the United States

San Francisco

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

B2 - TEMPORARY VISITOR FOR PLEASURE

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

Deferred action

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

► N- N/A

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (40) ( )

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category **(c)(3)(C)** in **Item Number 27.**, provide the information requested in **Item Numbers 28.a - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

►

30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?

☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** in the **Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

►

31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime? ☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories**, **Items 8. - 9.**, in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. ☒ The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in portuguese, a language in which I am fluent, and I understood everything.

2. ☒ At my request, the preparer named in **Part 5.**, Santanna Law Offices PC, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number
+1(510)253-9457

4. Applicant's Mobile Telephone Number (if any)
+1(510)253-9457

5. Applicant's Email Address (if any)
viniciusferreiracosta.vfc@gmail.com

6. ☐ Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and provided or authorized all of the information in my application; and

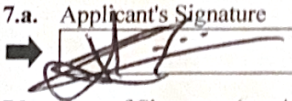
2) I understood all of the information contained in, and submitted with, my application; and

3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

7.a. Applicant's Signature



7.b. Date of Signature (mm/dd/yyyy) 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)
INACIO PENNA MELLO

1.b. Interpreter's Given Name (First Name)
Andre Vinicius

2. Interpreter's Business or Organization Name (if any)
HS Law Corp

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and portuguese, which is the same language specified in **Part 3.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy): 02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name): VIEIRA SANTANNA

1.b. Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

Preparer's Mailing Address

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the applicant in this case ☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name): FERREIRA DA COSTA

1.b. Given Name (First Name): Vinicius

1.c. Middle Name: N/A

2. A-Number (if any) ► A-: N / A

3.a. Page Number: N/A **3.b.** Part Number: N/A **3.c.** Item Number: N/A

3.d.

N/A

4.a. Page Number: N/A **4.b.** Part Number: N/A **4.c.** Item Number: N/A

4.d.

N/A

5.a. Page Number: N/A **5.b.** Part Number: N/A **5.c.** Item Number: N/A

5.d.

N/A

6.a. Page Number: N/A **6.b.** Part Number: N/A **6.c.** Item Number: N/A

6.d.

N/A

7.a. Page Number: N/A **7.b.** Part Number: N/A **7.c.** Item Number: N/A

7.d.

N/A

CYNARA DOS SANTOS' SIGNED FORMS

Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

DHS Form G-28
OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 6 3 4 6 0 3 2 7 9 7 4

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name): VIEIRA SANTANNA

2.b. Given Name (First Name): Natalia

2.c. Middle Name: N/A

Address of Attorney or Accredited Representative

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601 (USPS ZIP Code Lookup)

3.f. Province:

3.g. Postal Code:

3.h. Country: USA

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number: 5109220154

5. Mobile Telephone Number (if any): 5109220154

6. Email Address (if any): natalia@santannalaw.com

7. Fax Number (if any): N/A

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all applicable** items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority: CA

1.b. Bar Number (if applicable): 337502

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable): Santanna Law Offices

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization: N/A

2.c. Date of Accreditation (mm/dd/yyyy): N/A

3. ☐ I am associated with N/A, the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate: N/A

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

I-914A, I-192, I-765

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

4. Receipt Number (if any)

►

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

☐ Applicant ☐ Petitioner ☐ Requestor

☒ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

6.a. Family Name (Last Name): DOS SANTOS

6.b. Given Name (First Name): Cynara

6.c. Middle Name: N/A

7.a. Name of Entity (if applicable)

N/A

7.b. Title of Authorized Signatory for Entity (if applicable)

N/A

8. Client's USCIS Online Account Number (if any)

► N / A

9. Client's Alien Registration Number (A-Number) (if any)

► A- N / A

Client's Contact Information

10. Daytime Telephone Number

(510)253-5992

11. Mobile Telephone Number (if any)

(510)253-5992

12. Email Address (if any)

cynara.santos.cs@gmail.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name: PO Box 7528

13.b. ☐ Apt. ☐ Ste. ☐ Flr.

13.c. City or Town: Oakland

13.d. State: CA **13.e.** ZIP Code: 94601

13.f. Province

13.g. Postal Code

13.h. Country

USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

1.a. ☒ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

1.b. ☒ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

➡ [signature]

2.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative

1.b. Date of Signature (mm/dd/yyyy) 02/06/2026

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name): DOS SANTOS

1.b. Given Name (First Name): Cynara

1.c. Middle Name: N/A

2.a. Page Number **2.b.** Part Number **2.c.** Item Number

2.d. N/A

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d. N/A

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A

Application for Advance Permission to Enter as a Nonimmigrant

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-192
OMB No. 1615-0017
Expires 03/31/2027

For DHS Use Only		
Received	**Returned Trans. Out**	**Fee Stamp**
Trans. In	**Completed**	

Action by the Department of Homeland Security

Ground of Inadmissibility

- ☐ INA 212(a)(1) _____
- ☐ INA 212(a)(2) _____
- ☐ INA 212(a)(3) _____
- ☐ INA 212(a)(4) _____
- ☐ INA 212(a)(6) _____
- ☐ INA 212(a)(7) _____
- ☐ INA 212(a)(8) _____
- ☐ INA 212(a)(9) _____
- ☐ INA 212(a)(10) _____
- ☐ Other: _____
- ☐ Granted, subject to revocation at any time, upon the following terms and conditions

Action Stamp

Benefits Category:

- ☐ T Nonimmigrant/Advance Permission under INA 212(d)(3) and 8 CFR 212.16
- ☐ T Nonimmigrant/Waiver under INA 212(d)(13) and 8 CFR 212.16
- ☐ U Nonimmigrant/Waiver under INA 212(d)(14) and 8 CFR 212.17
- ☐ U Nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.17
- ☐ Nonimmigrant other than T or U nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.4

Date of Action (mm/dd/yyyy) _____ **DD or OIC** _____ **Office** _____

To be completed by an attorney or accredited representative (if any).

☒ **Select this box if Form G-28 or Form G-28I is attached.**	**Volag Number** (if any)	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Application Type

I am applying to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of the Immigration and Nationality Act (INA) section 212(d)(3)(A)(ii), 212(d)(13), or 212(d)(14).

1. I am seeking this permission so that I may obtain (select **only one** box):

- ☒ Status as a victim of trafficking (T nonimmigrant status) or a victim of qualifying criminal activity (U nonimmigrant status).
- ☐ Admission as a nonimmigrant (other than as a T or U nonimmigrant).

If filing this form concurrently with a USCIS Form I-914/I-914A or Form I-918/I-918A (T or U nonimmigrant, respectively) or in relation to one that you previously filed, you should complete **Item Numbers 1. - 10.** and then skip to **Item Number 26.**

Part 2. Information About You

1. Your Full Legal Name (Do not provide a nickname)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
DOS SANTOS	Cynara	N/A

2. Other Names Used (if any)

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
DOS SANTOS MENDANHA	Cynara	N/A
N/A	N/A	N/A

Other Information

3. Alien Registration Number (A-Number) (if any)

► A- N / A

4. USCIS Online Account Number (if any)

► N / A

5. Date of Birth (mm/dd/yyyy)

10/14/1987

6. Place of Birth

City or Town	State or Province
Goiânia	Goiás

Country

Brazil

7. Country of Citizenship or Nationality

Brazil

8. Sex

☐ Male ☒ Female

9. Mailing Address (Safe address, if applicable)
Please provide an address where you can safely receive correspondence from USCIS.

In Care Of Name (if any)

Santanna Law Offices PC

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 7528	☐ ☐ ☐	N/A

City or Town	State	ZIP Code
Oakland	CA	94601

Province	Postal Code	Country
N/A	N/A	USA

Part 2. Information About You (continued)

Address History

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

10. Physical Address 1 (current address)

Street Number and Name: 893 4th Ave
Apt. Ste. Flr. Number: #A
City or Town: Pinole
State:
ZIP Code: 94564
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 05/01/2021
To (mm/dd/yyyy): PRESENT

11. Physical Address 2

Street Number and Name: 10944 San Pablo Ave
Apt. Ste. Flr. Number: #212
City or Town: El Cerrito
State: CA
ZIP Code: 94530
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 10/14/2017
To (mm/dd/yyyy): 05/01/2021

Information About Your Marital History

12. What is your current marital status?

☐ Single, Never Married ☒ Married ☐ Divorced ☐ Widowed ☐ Legally Separated ☐ Marriage Annulled

☐ Other

13. How many times have you been married (including annulled marriages and marriages to the same person)? 2

Information About Your Current Marriage (including if you are legally separated)

If you are currently married, provide the following information about your **current spouse**.

14. Current Spouse's Legal Name

Family Name (Last Name): FERREIRA DA COSTA
Given Name (First Name): Vinicius
Middle Name (if applicable): N/A

15. Spouse's Alien Registration Number (A-Number) (if any) ► A- N / A

Part 2. Information About You (continued)

16. Date of Birth (mm/dd/yyyy) 09/25/1988

17. Date of Marriage (mm/dd/yyyy) 02/23/2023

18. Place of Birth

City or Town: Itapuranga

State or Province: Goiás

Country: Brazil

19. Place of Marriage

City or Town: Las Vegas

State or Province: Nevada

Country: USA

Information About Prior Marriages (if any)

If you have been married before, anywhere in the world, provide the information requested in **Item Numbers 20. - 25.** about your prior marriage. If you have had more than one previous marriage, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 20. - 25.** for each additional marriage.

20. Prior Spouse's Legal Name (provide family name before marriage)

Family Name (Last Name): MENDANHA JUNIOR

Given Name (First Name): Edson Antonio

Middle Name (if applicable): N/A

21. Date of Birth (mm/dd/yyyy) 05/21/1985

22. Date of Marriage (mm/dd/yyyy) 03/18/2006

23. Place of Marriage

City or Town: Goiânia

State or Province: Goiás

Country: Brazil

24. Date Marriage Legally Ended (mm/dd/yyyy) 01/08/2013

25. Place Where Marriage Legally Ended

City or Town: Goianira

State or Province: Goiás

Country: Brazil

Immigration and Criminal History

26. Explain the grounds of inadmissibility that may apply in your case.

The applicant entered the United States on a B-2 visa and remained beyond the authorized period of admission, accruing unlawful presence under INA § 212(a)(9)(B)(i)(II) and worked without authorization.

Part 2. Information About You (continued)

27. Have you previously filed an application for advance permission to enter the United States as a nonimmigrant? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 27.**, provide the details in **Item Numbers 28. - 29.**
If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

28. Date Application Filed (mm/dd/yyyy) **N/A**

29. Location where you filed your application (for example, USCIS Office or Port of Entry).

USCIS Office or U.S. Port-of-Entry: **N/A**

City or Town: **N/A**

State or Province: **N/A**

Country: **N/A**

Receipt Number (if available) ► **N / A**

30. Have you **EVER** been in the United States for a period of six months or more? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 30.**, provide the dates you were in the United States (from and to) and your immigration status at the time of entry into the United States in the space provided in **Part 6. Additional Information**.

31. Have you **EVER** filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 31.**, provide the information requested in **Item Numbers 32. - 34.**

If you have (or somebody else on your behalf has) filed multiple applications or petitions for immigration benefits with the U.S. Government, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 32. - 34.** for each of your additional applications or petitions.

32. Type of application or petition filed

N/A

33. Location the application or petition was filed (for example, USCIS office or Port of Entry)

N/A

34. Outcome of the application or petition (for example, approved, denied, or pending).

N/A

35. Have you **EVER** been denied or refused an immigration benefit by the U.S. Government, or had a benefit revoked or terminated (including but not limited to visas)? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 35.**, provide an explanation the information in the space provided in **Part 6. Additional Information**.

36. Have you **EVER**, in or outside the United States, been arrested, cited, charged, indicted, fined, convicted, or imprisoned for breaking or violating any law or ordinance, excluding minor traffic violations? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 36.**, describe the incidents in detail and include all offenses where impaired driving may have been an issue in the space provided in **Part 6. Additional Information**.

Part 2. Information About You (continued)

Travel Information

NOTE: If you are applying for T or U nonimmigrant status and are in the United States, you may skip **Item Numbers 37. - 43.**

Location at Which you Plan to Enter the United States (desired Port of Entry)

37. City
N/A

38. State

39. Name of Port of Entry
N/A

40. How do you plan to travel to the United States? (For example, by plane, ship, car)
N/A

41. When do you plan to enter the United States? (mm/dd/yyyy)
N/A

42. Approximate Length of Stay in the United States
N/A

43. What is the purpose of your stay in the United States? Explain fully below.
N/A

Employment History

Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

44. Employer 1 (current or most recent)

Name of Employer or Company
Self-Employed

Address of Employer or Company

Street Number and Name
893 4th Ave

Apt. Ste. Flr. ☐ ☐ ☐

Number
#A

City or Town
Pinole

State
CA

ZIP Code
94564

Province
N/A

Postal Code
N/A

Country
USA

Your Occupation
Photographer

Dates of Employment

From (mm/dd/yyyy)
09/01/2018

To (mm/dd/yyyy)
PRESENT

Part 2. Information About You (continued)

45. Employer 2

Name of Employer or Company

N/A

Address of Employer or Company

Street Number and Name

N/A

Apt. Ste. Flr. ☐ ☐ ☐

Number

N/A

City or Town

N/A

State

ZIP Code

N/A

Province

N/A

Postal Code

N/A

Country

N/A

Your Occupation

N/A

Dates of Employment

From (mm/dd/yyyy)

N/A

To (mm/dd/yyyy)

N/A

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

Applicant's Contact Information

Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

1. Applicant's Daytime Telephone Number

(510) 253-5992

2. Applicant's Mobile Telephone Number (if any)

(510) 253-5992

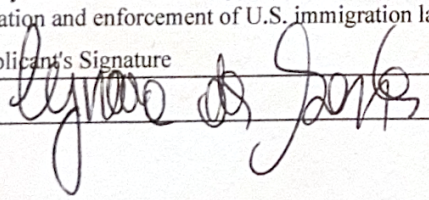
3. Applicant's Email Address (if any)

cynara.santos.cs@gmail.com

Applicant's Certification and Signature

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 4.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information is complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

4. Applicant's Signature



Date of Signature (mm/dd/yyyy)

02/06/2026

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Full Name

1. Interpreter's Family Name (Last Name)

INACIO PENNA MELLO

Interpreter's Given Name (First Name)

Andre Vinicius

2. Interpreter's Business or Organization Name

HS Law Corp

Interpreter's Contact Information

3. Interpreter's Daytime Telephone Number

(415) 425-2508

4. Interpreter's Mobile Telephone Number (if any)

(415) 425-2508

5. Interpreter's Email Address (if any)

andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that I am fluent in English and Portuguese, and I have interpreted every question on the application and instructions and interpreted the applicant's answers to the questions in that language, and the applicant informed me that he or she understood every instruction, question, and answer on the application.

6. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Preparer's Full Name

1. Preparer's Family Name (Last Name)

VIEIRA SANTANNA

Preparer's Given Name (First Name)

Natalia

2. Preparer's Business or Organization Name

Santanna Law Offices

Preparer's Contact Information

3. Preparer's Daytime Telephone Number

(510) 922-0154

4. Preparer's Mobile Telephone Number (if any)

(510) 922-0154

5. Preparer's Email Address (if any)

natalia@santannalaw.com

Preparer's Certification

I certify, under penalty of perjury, that I prepared this application for the applicant at his or her request and with express consent and that all of the responses and information contained in and submitted with the application is complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that he or she understands the responses and information in or submitted with the application.

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): DOS SANTOS | Given Name (First Name): Cynara | Middle Name (if applicable): N/A

2. A-Number (if any) ► A- N / A

3. Page Number: 5 | Part Number: 2 | Item Number: 30

The applicant entered the United States on June 21, 2017, with a B-2 visa and has remained in the country since then.

4. Page Number: | Part Number: | Item Number:

N/A

5. Page Number: | Part Number: | Item Number:

N/A

6. Page Number: | Part Number: | Item Number:

N/A

Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765
OMB No. 1615-0040
Expires 08/31/2027

For USCIS Use Only			
	☐ **Authorization/Extension Valid From** _____	**Fee Stamp**	**Action Block**
	☐ **Authorization/Extension Valid Through** _____		
	Alien Registration Number A-		
	Remarks		

To be completed by an Attorney or Accredited Representative (if any).	☒ **Select this box if Form G-28 is attached.**	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Reason for Applying

I am applying for (select **only one** box):

1.a. ☒ Initial permission to accept employment.

1.b. ☐ Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to www.uscis.gov/i-765 for further details.

1.c. ☐ Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name): DOS SANTOS

1.b. Given Name (First Name): Cynara

1.c. Middle Name: N/A

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

2.a. Family Name (Last Name): DOS SANTOS MENDANHA

2.b. Given Name (First Name): Cynara

2.c. Middle Name: N/A

3.a. Family Name (Last Name): N/A

3.b. Given Name (First Name): N/A

3.c. Middle Name: N/A

4.a. Family Name (Last Name): N/A

4.b. Given Name (First Name): N/A

4.c. Middle Name: N/A

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)
Santanna Law Offices PC

5.b. Street Number and Name: PO Box 7528

5.c. ☐ Apt. ☐ Ste. ☐ Flr.

5.d. City or Town: Oakland

5.e. State: CA **5.f.** ZIP Code: 94601

(USPS ZIP Code Lookup)

6. Is your current mailing address the same as your physical address? ☐ Yes ☒ No

NOTE: If you answered "No" to **Item Number 6.**, provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name: 893 4th Ave

7.b. ☐ Apt. ☐ Ste. ☐ Flr. #A

7.c. City or Town: Pinole

7.d. State: CA **7.e.** ZIP Code: 94564

Other Information

8. Alien Registration Number (A-Number) (if any)
▶ A- N / A

9. USCIS Online Account Number (if any)
▶ N / A

10. Sex ☐ Male ☒ Female

11. Marital Status
☐ Single ☒ Married ☐ Divorced ☐ Widowed

12. Have you previously filed Form I-765?
☐ Yes ☒ No

13. Provide your Social Security number (SSN) (if known).
▶ N / A

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information**.

14.a. Country
Brazil

14.b. Country
N/A

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

15.a. City/Town/Village of Birth

Goiânia

15.b. State/Province of Birth

Goiás

15.c. Country of Birth

Brazil

16. Date of Birth (mm/dd/yyyy) 10/14/1987

Information About Your Last Arrival in the United States

17. Form I-94 Arrival-Departure Record Number (if any)

► 45133431985

18. Passport Number of Your Most Recently Issued Passport

FR051008

19. Travel Document Number (if any)

N/A

20. Country That Issued Your Passport or Travel Document

Brazil

21. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 06/23/2026

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy) 06/21/2017

23. Place of Your Last Arrival Into the United States

San Francisco

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

B2 - TEMPORARY VISITOR FOR PLEASURE

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

Deferred action

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

► N- N/A

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (25) ( )

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category **(c)(3)(C)** in **Item Number 27.**, provide the information requested in **Item Numbers 28.a - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

►

30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?

☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** in the **Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

►

31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime? ☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories**, **Items 8. - 9.**, in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. ☒ The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in portuguese, a language in which I am fluent, and I understood everything.

2. ☒ At my request, the preparer named in **Part 5.,** Santanna Law Offices, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number
(510) 253-5992

4. Applicant's Mobile Telephone Number (if any)
(510) 253-5992

5. Applicant's Email Address (if any)
cynara.santos.cs@gmail.com

6. ☐ Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and provided or authorized all of the information in my application; and

2) I understood all of the information contained in, and submitted with, my application; and

3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

7.a. Applicant's Signature ➡ 

7.b. Date of Signature (mm/dd/yyyy) 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)
INACIO PENNA MELLO

1.b. Interpreter's Given Name (First Name)
Andre Vinicius

2. Interpreter's Business or Organization Name (if any)
HS Law Corp

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and portuguese, which is the same language specified in **Part 3.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy): 02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name): VIEIRA SANTANNA

1.b. Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

Preparer's Mailing Address

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the applicant in this case ☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name): DOS SANTOS

1.b. Given Name (First Name): Cynara

1.c. Middle Name: N/A

2. A-Number (if any) ► A- N / A

3.a. Page Number: N/A **3.b.** Part Number: N/A **3.c.** Item Number: N/A

3.d. N/A

4.a. Page Number: N/A **4.b.** Part Number: N/A **4.c.** Item Number: N/A

4.d. N/A

5.a. Page Number: N/A **5.b.** Part Number: N/A **5.c.** Item Number: N/A

5.d. N/A

6.a. Page Number: N/A **6.b.** Part Number: N/A **6.c.** Item Number: N/A

6.d. N/A

7.a. Page Number: N/A **7.b.** Part Number: N/A **7.c.** Item Number: N/A

7.d. N/A

JULIA MENDANHA DOS SANTOS' SIGNED FORMS

Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

DHS Form G-28
OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 6 3 4 6 0 3 2 7 9 7 4

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name): VIEIRA SANTANNA

2.b. Given Name (First Name): Natalia

2.c. Middle Name: N/A

Address of Attorney or Accredited Representative

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601 (USPS ZIP Code Lookup)

3.f. Province:

3.g. Postal Code:

3.h. Country: USA

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number: 5109220154

5. Mobile Telephone Number (if any): 5109220154

6. Email Address (if any): natalia@santannalaw.com

7. Fax Number (if any): N/A

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all applicable** items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority: CA

1.b. Bar Number (if applicable): 337502

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable): Santanna Law Offices

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization: N/A

2.c. Date of Accreditation (mm/dd/yyyy): N/A

3. ☐ I am associated with N/A, the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate: N/A

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

I-914A, I-192, I-765

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

4. Receipt Number (if any)

►

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

☐ Applicant ☐ Petitioner ☐ Requestor

☒ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

6.a. Family Name (Last Name): MENDANHA DOS SANTOS

6.b. Given Name (First Name): Julia

6.c. Middle Name: N/A

7.a. Name of Entity (if applicable)

N/A

7.b. Title of Authorized Signatory for Entity (if applicable)

N/A

8. Client's USCIS Online Account Number (if any)

► N / A

9. Client's Alien Registration Number (A-Number) (if any)

► A- 2 0 1 8 3 1 0 6 6

Client's Contact Information

10. Daytime Telephone Number

+1 (510) 253-8612

11. Mobile Telephone Number (if any)

+1 (510) 253-8612

12. Email Address (if any)

julia.santosdos.jds@gmail.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name: PO Box 7528

13.b. ☐ Apt. ☐ Ste. ☐ Flr.

13.c. City or Town: Oakland

13.d. State: CA **13.e.** ZIP Code: 94601

13.f. Province

13.g. Postal Code

13.h. Country

USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

1.a. ☒ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

1.b. ☒ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

➡ Julia M. Dos Santos

2.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative

1.b. Date of Signature (mm/dd/yyyy) 02/06/2026

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name): MENDANHA DOS SANTOS

1.b. Given Name (First Name): Julia

1.c. Middle Name: N/A

2.a. Page Number **2.b.** Part Number **2.c.** Item Number

2.d. N/A

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d. N/A

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A



Application for Advance Permission to Enter as a Nonimmigrant

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-192
OMB No. 1615-0017
Expires 03/31/2027

For DHS Use Only		
Received	**Returned Trans. Out**	**Fee Stamp**
Trans. In	**Completed**	

Action by the Department of Homeland Security

Ground of Inadmissibility

- ☐ INA 212(a)(1) _____
- ☐ INA 212(a)(2) _____
- ☐ INA 212(a)(3) _____
- ☐ INA 212(a)(4) _____
- ☐ INA 212(a)(6) _____
- ☐ INA 212(a)(7) _____
- ☐ INA 212(a)(8) _____
- ☐ INA 212(a)(9) _____
- ☐ INA 212(a)(10) _____
- ☐ Other: _____
- ☐ Granted, subject to revocation at any time, upon the following terms and conditions

Action Stamp

Benefits Category:

- ☐ T Nonimmigrant/Advance Permission under INA 212(d)(3) and 8 CFR 212.16
- ☐ T Nonimmigrant/Waiver under INA 212(d)(13) and 8 CFR 212.16
- ☐ U Nonimmigrant/Waiver under INA 212(d)(14) and 8 CFR 212.17
- ☐ U Nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.17
- ☐ Nonimmigrant other than T or U nonimmigrant/Advance Permission under INA 212(d)(3)(A) and 8 CFR 212.4

Date of Action (mm/dd/yyyy) _____ **DD or OIC** _____ **Office** _____

To be completed by an attorney or accredited representative (if any).

☒ **Select this box if Form G-28 or Form G-28I is attached.**	**Volag Number** (if any)	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Application Type

I am applying to the Secretary of Homeland Security for permission to enter the United States temporarily under the provisions of the Immigration and Nationality Act (INA) section 212(d)(3)(A)(ii), 212(d)(13), or 212(d)(14).

1. I am seeking this permission so that I may obtain (select **only one** box):

- ☒ Status as a victim of trafficking (T nonimmigrant status) or a victim of qualifying criminal activity (U nonimmigrant status).
- ☐ Admission as a nonimmigrant (other than as a T or U nonimmigrant).

If filing this form concurrently with a USCIS Form I-914/I-914A or Form I-918/I-918A (T or U nonimmigrant, respectively) or in relation to one that you previously filed, you should complete **Item Numbers 1. - 10.** and then skip to **Item Number 26.**

Part 2. Information About You

1. Your Full Legal Name (Do not provide a nickname)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
MENDANHA DOS SANTOS	Julia	N/A

2. Other Names Used (if any)

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
N/A	N/A	N/A
N/A	N/A	N/A

Other Information

3. Alien Registration Number (A-Number) (if any)

► A- 2 0 1 8 3 1 0 6 6

4. USCIS Online Account Number (if any)

► N / A

5. Date of Birth (mm/dd/yyyy)

07/18/2008

6. Place of Birth

City or Town	State or Province
Goiânia	Goiás

Country

Brazil

7. Country of Citizenship or Nationality

Brazil

8. Sex

☐ Male ☒ Female

9. Mailing Address (Safe address, if applicable)
Please provide an address where you can safely receive correspondence from USCIS.

In Care Of Name (if any)

Santanna Law Offices PC

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 7528	☐ ☐ ☐	N/A

City or Town	State	ZIP Code
Oakland	CA	94601

Province	Postal Code	Country
N/A	N/A	USA

Part 2. Information About You (continued)

Address History

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

10. Physical Address 1 (current address)

Street Number and Name: 893 4th Ave
Apt. Ste. Flr. Number: ☐ ☐ ☐ #A
City or Town: Pinole
State:
ZIP Code: 94564
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 05/01/2021
To (mm/dd/yyyy): PRESENT

11. Physical Address 2

Street Number and Name: 10944 San Pablo Ave
Apt. Ste. Flr. Number: ☐ ☐ ☐ #212
City or Town: El Cerrito
State: CA
ZIP Code: 94530
Province: N/A
Postal Code: N/A
Country: USA

Dates of Residence

From (mm/dd/yyyy): 10/14/2017
To (mm/dd/yyyy): 05/01/2021

Information About Your Marital History

12. What is your current marital status?

☒ Single, Never Married ☐ Married ☐ Divorced ☐ Widowed ☐ Legally Separated ☐ Marriage Annulled

☐ Other

13. How many times have you been married (including annulled marriages and marriages to the same person)? N/A

Information About Your Current Marriage (including if you are legally separated)

If you are currently married, provide the following information about your **current spouse**.

14. Current Spouse's Legal Name

Family Name (Last Name): N/A
Given Name (First Name): N/A
Middle Name (if applicable): N/A

15. Spouse's Alien Registration Number (A-Number) (if any) ► A- N / A

Part 2. Information About You (continued)

16. Date of Birth (mm/dd/yyyy) N/A

17. Date of Marriage (mm/dd/yyyy) N/A

18. Place of Birth

City or Town: N/A

State or Province: N/A

Country: N/A

19. Place of Marriage

City or Town: N/A

State or Province: N/A

Country: N/A

Information About Prior Marriages (if any)

If you have been married before, anywhere in the world, provide the information requested in **Item Numbers 20. - 25.** about your prior marriage. If you have had more than one previous marriage, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 20. - 25.** for each additional marriage.

20. Prior Spouse's Legal Name (provide family name before marriage)

Family Name (Last Name): N/A

Given Name (First Name): N/A

Middle Name (if applicable): N/A

21. Date of Birth (mm/dd/yyyy) N/A

22. Date of Marriage (mm/dd/yyyy) N/A

23. Place of Marriage

City or Town: N/A

State or Province: N/A

Country: N/A

24. Date Marriage Legally Ended (mm/dd/yyyy) N/A

25. Place Where Marriage Legally Ended

City or Town: N/A

State or Province: N/A

Country: N/A

Immigration and Criminal History

26. Explain the grounds of inadmissibility that may apply in your case.

The applicant entered the United States on a B-2 visa and remained beyond the authorized period of admission

Part 2. Information About You (continued)

27. Have you previously filed an application for advance permission to enter the United States as a nonimmigrant? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 27.**, provide the details in **Item Numbers 28. - 29.**
If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

28. Date Application Filed (mm/dd/yyyy) **N/A**

29. Location where you filed your application (for example, USCIS Office or Port of Entry).

USCIS Office or U.S. Port-of-Entry: **N/A**

City or Town: **N/A**

State or Province: **N/A**

Country: **N/A**

Receipt Number (if available) ► **N / A**

30. Have you **EVER** been in the United States for a period of six months or more? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 30.**, provide the dates you were in the United States (from and to) and your immigration status at the time of entry into the United States in the space provided in **Part 6. Additional Information**.

31. Have you **EVER** filed an application or petition for immigration benefits with the U.S. Government, or has one ever been filed on your behalf? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 31.**, provide the information requested in **Item Numbers 32. - 34.**

If you have (or somebody else on your behalf has) filed multiple applications or petitions for immigration benefits with the U.S. Government, use the space provided in **Part 6. Additional Information** to provide the answers to **Item Numbers 32. - 34.** for each of your additional applications or petitions.

32. Type of application or petition filed

N/A

33. Location the application or petition was filed (for example, USCIS office or Port of Entry)

N/A

34. Outcome of the application or petition (for example, approved, denied, or pending).

N/A

35. Have you **EVER** been denied or refused an immigration benefit by the U.S. Government, or had a benefit revoked or terminated (including but not limited to visas)? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 35.**, provide an explanation the information in the space provided in **Part 6. Additional Information**.

36. Have you **EVER**, in or outside the United States, been arrested, cited, charged, indicted, fined, convicted, or imprisoned for breaking or violating any law or ordinance, excluding minor traffic violations? ☐ Yes ☒ No

If you answered "Yes" to **Item Number 36.**, describe the incidents in detail and include all offenses where impaired driving may have been an issue in the space provided in **Part 6. Additional Information**.

Part 2. Information About You (continued)

Travel Information

NOTE: If you are applying for T or U nonimmigrant status and are in the United States, you may skip **Item Numbers 37. - 43.**

Location at Which you Plan to Enter the United States (desired Port of Entry)

37. City
N/A

38. State

39. Name of Port of Entry
N/A

40. How do you plan to travel to the United States? (For example, by plane, ship, car)
N/A

41. When do you plan to enter the United States? (mm/dd/yyyy)
N/A

42. Approximate Length of Stay in the United States
N/A

43. What is the purpose of your stay in the United States? Explain fully below.
N/A

Employment History

Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

44. Employer 1 (current or most recent)

Name of Employer or Company
N/A

Address of Employer or Company

Street Number and Name
N/A

Apt. Ste. Flr. ☐ ☐ ☐

Number
N/A

City or Town
N/A

State

ZIP Code
N/A

Province
N/A

Postal Code
N/A

Country
USA

Your Occupation
N/A

Dates of Employment

From (mm/dd/yyyy)
N/A

To (mm/dd/yyyy)
N/A

Part 2. Information About You (continued)

45. Employer 2

Name of Employer or Company

N/A

Address of Employer or Company

Street Number and Name

N/A

Apt. Ste. Flr. ☐ ☐ ☐

Number

N/A

City or Town

N/A

State

ZIP Code

N/A

Province

N/A

Postal Code

N/A

Country

N/A

Your Occupation

N/A

Dates of Employment

From (mm/dd/yyyy)

N/A

To (mm/dd/yyyy)

N/A

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

Applicant's Contact Information

Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).

1. Applicant's Daytime Telephone Number

(510) 253-8612

2. Applicant's Mobile Telephone Number (if any)

(510) 253-8612

3. Applicant's Email Address (if any)

julia.santosdos.jds@gmail.com

Applicant's Certification and Signature

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 4.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information is complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

4. Applicant's Signature

Julia M Dos Santos

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Full Name

1. Interpreter's Family Name (Last Name)

INACIO PENNA MELLO

Interpreter's Given Name (First Name)

Andre Vinicius

2. Interpreter's Business or Organization Name

HS Law Corp

Interpreter's Contact Information

3. Interpreter's Daytime Telephone Number

(415) 425-2508

4. Interpreter's Mobile Telephone Number (if any)

(415) 425-2508

5. Interpreter's Email Address (if any)

andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that I am fluent in English and Portuguese, and I have interpreted every question on the application and instructions and interpreted the applicant's answers to the questions in that language, and the applicant informed me that he or she understood every instruction, question, and answer on the application.

6. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Preparer's Full Name

1. Preparer's Family Name (Last Name)

VIEIRA SANTANNA

Preparer's Given Name (First Name)

Natalia

2. Preparer's Business or Organization Name

Santanna Law Offices

Preparer's Contact Information

3. Preparer's Daytime Telephone Number

(510) 922-0154

4. Preparer's Mobile Telephone Number (if any)

(510) 922-0154

5. Preparer's Email Address (if any)

natalia@santannalaw.com

Preparer's Certification

I certify, under penalty of perjury, that I prepared this application for the applicant at his or her request and with express consent and that all of the responses and information contained in and submitted with the application is complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that he or she understands the responses and information in or submitted with the application.

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)

02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1. Family Name (Last Name): **MENDANHA DOS SANTOS** | Given Name (First Name): **Julia** | Middle Name (if applicable): **N/A**

2. A-Number (if any) ► **A-** 2 0 1 8 3 1 0 6 6

3. Page Number: **5** | Part Number: **2** | Item Number: **30**

The applicant entered the United States on June 21, 2017, with a B-2 visa and has remained in the country since then.

4. Page Number: | Part Number: | Item Number:

N/A

5. Page Number: | Part Number: | Item Number:

N/A

6. Page Number: | Part Number: | Item Number:

N/A

Application For Employment Authorization

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-765
OMB No. 1615-0040
Expires 08/31/2027

For USCIS Use Only			
	☐ **Authorization/Extension Valid From** _____	**Fee Stamp**	**Action Block**
	☐ **Authorization/Extension Valid Through** _____		
	Alien Registration Number A-		
	Remarks		

To be completed by an Attorney or Accredited Representative (if any).	☒ **Select this box if Form G-28 is attached.**	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
		337502	0 6 3 4 6 0 3 2 7 9 7 4

► **START HERE - Type or print in black ink.**

Part 1. Reason for Applying

I am applying for (select **only one** box):

1.a. ☒ Initial permission to accept employment.

1.b. ☐ Replacement of lost, stolen, or damaged employment authorization document, or correction of my employment authorization document NOT DUE to U.S. Citizenship and Immigration Services (USCIS) error.

NOTE: Replacement (correction) of an employment authorization document due to USCIS error does not require a new Form I-765 and filing fee. Refer to www.uscis.gov/i-765 for further details.

1.c. ☐ Renewal of my permission to accept employment. (Attach a copy of your previous employment authorization document.)

Part 2. Information About You

Your Full Legal Name

1.a. Family Name (Last Name): MENDANHA DOS SANTOS

1.b. Given Name (First Name): Julia

1.c. Middle Name: N/A

Other Names Used

Provide all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

2.a. Family Name (Last Name): N/A

2.b. Given Name (First Name): N/A

2.c. Middle Name: N/A

3.a. Family Name (Last Name): N/A

3.b. Given Name (First Name): N/A

3.c. Middle Name: N/A

4.a. Family Name (Last Name): N/A

4.b. Given Name (First Name): N/A

4.c. Middle Name: N/A

Part 2. Information About You (continued)

Your U.S. Mailing Address

5.a. In Care Of Name (if any)
Santanna Law Offices PC

5.b. Street Number and Name: PO Box 7528

5.c. ☐ Apt. ☐ Ste. ☐ Flr.

5.d. City or Town: Oakland

5.e. State: CA **5.f.** ZIP Code: 94601

(USPS ZIP Code Lookup)

6. Is your current mailing address the same as your physical address? ☐ Yes ☒ No

NOTE: If you answered "No" to **Item Number 6.**, provide your physical address below.

U.S. Physical Address

7.a. Street Number and Name: 893 4th Ave

7.b. ☐ Apt. ☐ Ste. ☐ Flr. #A

7.c. City or Town: Pinole

7.d. State: CA **7.e.** ZIP Code: 94564

Other Information

8. Alien Registration Number (A-Number) (if any)
▶ A- 201831066

9. USCIS Online Account Number (if any)
▶ N / A

10. Sex ☐ Male ☒ Female

11. Marital Status
☒ Single ☐ Married ☐ Divorced ☐ Widowed

12. Have you previously filed Form I-765?
☒ Yes ☐ No

13. Provide your Social Security number (SSN) (if known).
▶ 750387962

Your Country or Countries of Citizenship or Nationality

List all countries where you are currently a citizen or national. If you need extra space to complete this item, use the space provided in **Part 6. Additional Information**.

14.a. Country
Brazil

14.b. Country
N/A

Part 2. Information About You (continued)

Place of Birth

List the city/town/village, state/province, and country where you were born.

15.a. City/Town/Village of Birth

Goiânia

15.b. State/Province of Birth

Goiás

15.c. Country of Birth

Brazil

16. Date of Birth (mm/dd/yyyy) 07/18/2008

Information About Your Last Arrival in the United States

17. Form I-94 Arrival-Departure Record Number (if any)

► 45133465885

18. Passport Number of Your Most Recently Issued Passport

YE343657

19. Travel Document Number (if any)

N/A

20. Country That Issued Your Passport or Travel Document

Brazil

21. Expiration Date for Passport or Travel Document (mm/dd/yyyy) 09/01/2026

22. Date of Your Last Arrival Into the United States, On or About (mm/dd/yyyy) 06/21/2017

23. Place of Your Last Arrival Into the United States

San Francisco

24. Immigration Status at Your Last Arrival (for example, B-2 visitor, F-1 student, or no status)

B2 - TEMPORARY VISITOR FOR PLEASURE

25. Your Current Immigration Status or Category (for example, B-2 visitor, F-1 student, parolee, deferred action, or no status or category)

Deferred action

26. Student and Exchange Visitor Information System (SEVIS) Number (if any)

► N- N/A

Information About Your Eligibility Category

27. **Eligibility Category.** Refer to the **Who May File Form I-765** section of the Form I-765 Instructions to determine the appropriate eligibility category for this application. Enter the appropriate letter and number for your eligibility category below (for example, (a)(8), (c)(17)(iii)).

(c) (25) ( )

28. **(c)(3)(C) STEM OPT Eligibility Category.** If you entered the eligibility category **(c)(3)(C)** in **Item Number 27.**, provide the information requested in **Item Numbers 28.a - 28.c.**

28.a. Degree

28.b. Employer's Name as Listed in E-Verify

28.c. Employer's E-Verify Company Identification Number or a Valid E-Verify Client Company Identification Number

29. **(c)(26) Eligibility Category.** If you entered the eligibility category (c)(26) in **Item Number 27.**, provide the receipt number of your H-1B spouse's most recent Form I-797 Notice for Form I-129, Petition for a Nonimmigrant Worker.

►

30. **(c)(8) Eligibility Category.** If you entered the eligibility category (c)(8) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime?

☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 30.**, refer to **Special Filing Instructions for Those With Pending Asylum Applications (c)(8)** in the **Required Documentation** section of the Form I-765 Instructions for information about providing court dispositions.

31.a. **(c)(35) and (c)(36) Eligibility Category.** If you entered the eligibility category (c)(35) in **Item Number 27.**, please provide the receipt number of your Form I-797 Notice for Form I-140, Immigrant Petition for Alien Worker. If you entered the eligibility category (c)(36) in **Item Number 27.**, please provide the receipt number of your spouse's or parent's Form I-797 Notice for Form I-140.

►

31.b. If you entered the eligibility category (c)(35) or (c)(36) in **Item Number 27.**, have you **EVER** been arrested for and/or convicted of any crime? ☐ Yes ☐ No

NOTE: If you answered "Yes" to **Item Number 31.b.**, refer to **Employment-Based Nonimmigrant Categories**, **Items 8. - 9.**, in the **Who May File Form I-765** section of the Form I-765 Instructions for information about providing court dispositions.

Part 3. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-765 Instructions before completing this section. You must file Form I-765 while in the United States.

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. ☐ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

1.b. ☒ The interpreter named in **Part 4.** read to me every question and instruction on this application and my answer to every question in portuguese, a language in which I am fluent, and I understood everything.

2. ☒ At my request, the preparer named in **Part 5.**, Santanna Law Offices PC, prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

3. Applicant's Daytime Telephone Number
(510) 253-8612

4. Applicant's Mobile Telephone Number (if any)
(510) 253-8612

5. Applicant's Email Address (if any)
julia.santosdos.jds@gmail.com

6. ☐ Select this box if you are a Salvadoran or Guatemalan national eligible for benefits under the ABC settlement agreement.

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I reviewed and provided or authorized all of the information in my application; and
2) I understood all of the information contained in, and submitted with, my application; and
3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

7.a. Applicant's Signature
➡ Julia M. Dos Santos

7.b. Date of Signature (mm/dd/yyyy) 02/06/2026

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 4. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)
INACIO PENNA MELLO

1.b. Interpreter's Given Name (First Name)
Andre Vinicius

2. Interpreter's Business or Organization Name (if any)
HS Law Corp

Part 4. Interpreter's Contact Information, Certification, and Signature

Interpreter's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number: (415) 425-2508

5. Interpreter's Mobile Telephone Number (if any): (415) 425-2508

6. Interpreter's Email Address (if any): andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and portuguese, which is the same language specified in **Part 3.**, **Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature

7.b. Date of Signature (mm/dd/yyyy): 02/06/2026

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name): VIEIRA SANTANNA

1.b. Preparer's Given Name (First Name): Natalia

2. Preparer's Business or Organization Name (if any): Santanna Law Offices

Preparer's Mailing Address

3.a. Street Number and Name: PO Box 7528

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: Oakland

3.d. State: CA **3.e.** ZIP Code: 94601

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number: (510) 922-0154

5. Preparer's Mobile Telephone Number (if any): (510) 922-0154

6. Preparer's Email Address (if any): natalia@santannalaw.com

Part 5. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other Than the Applicant (continued)

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the applicant in this case ☒ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy) 02/06/2026

Part 6. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name): MENDANHA DOS SANTOS

1.b. Given Name (First Name): Julia

1.c. Middle Name: N/A

2. A-Number (if any) ► A- 2 0 1 8 3 1 0 6 6

3.a. Page Number: N/A **3.b.** Part Number: N/A **3.c.** Item Number: N/A

3.d. N/A

4.a. Page Number: N/A **4.b.** Part Number: N/A **4.c.** Item Number: N/A

4.d. N/A

5.a. Page Number: N/A **5.b.** Part Number: N/A **5.c.** Item Number: N/A

5.d. N/A

6.a. Page Number: N/A **6.b.** Part Number: N/A **6.c.** Item Number: N/A

6.d. N/A

7.a. Page Number: N/A **7.b.** Part Number: N/A **7.c.** Item Number: N/A

7.d. N/A

Exhibit list

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Exhibit 4 - Vinicius Ferreira da Costa and Cynara dos Santos's Marriage Certificate	
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Exhibit 6 - Vinicius Ferreira da Costa's Declaration with English translation

Vinicius Ferreira da Costa's Declaration 87-95

Exhibit 7 - Eligibility Requirement: Compliance with Reasonable Requests for Assistance from Law Enforcement

Vinicius Ferreira da Costa's OSHA Online Complaint Print Screen 96

Vinicius Ferreira da Costa's OSHA Complaint Email Confirming Submission 97

Vinicius Ferreira da Costa's WHD Online Complaint Print Screen 98

Vinicius Ferreira da Costa's WHD Complaint Email Confirming Submission 99

Follow-Up Email to WHD Regional Coordinator 100-106

Exhibit 8 - Evidence of Trauma and Severe Form of Trafficking - Vinicius Ferreira da Costa's Psychological Evaluation

Vinicius Ferreira da Costa's Psychological Evaluation 107-112

Exhibit 9 - Evidence of Trauma and Severe Form of Trafficking - Photographic Evidence

Vinicius Ferreira da Costa's Photographic Evidence 113-130

Exhibit 10 - Vinicius Ferreira da Costa's Evidence of Good Moral Character - FBI Background Check

Vinicius Ferreira da Costa's FBI Background 131-132

Exhibit 11 – Vinicius Ferreira da Costa's Bank Transfer Records Reflecting Wages Received

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Exhibit 12 - Eligibility Requirement: Evidence of Severe Form of Trafficking / Physical Presence / Community Ties / Good Moral Character: Letters of Support

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Exhibit 13 - Julia Mendanha dos Santos's SIJS Approval with Deferred Action Granted

Julia Mendanha dos Santos' SIJS Approval with Deferred Action Granted	231

Exhibit 14 – Evidence Strong Ties to the United States - Children's School Attendance

Julia's School Grades and Attendance	232-233
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Exhibit 15 – Evidence Strong Ties to the United States - U.S. Citizen Children.

Olivia's Birth Certificate	235
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Exhibit 16 - Country Conditions: Brazil

U.S Department of State 2025 Trafficking in Person Report: Brazil	237-249
Brazil 2024 Human Rights Report	250-263

Exhibit 1 - Vinicius Ferreira da Costa's Identification Documents

Este passaporte contém 32 páginas numeradas.
Ce passeport contient 32 pages numérotées.
This passport contains 32 numbered pages.
Este pasaporte contiene 32 páginas numeradas.

Roga-se às autoridades estrangeiras que prestem ao titular deste passaporte auxílio e assistência em caso de necessidade.

Les autorités des Etats étrangers sont priées de bien vouloir prêter au titulaire de ce passeport aide et assistance au besoin.

Foreign authorities are requested to afford the bearer such assistance and protection as may be necessary.

Se ruega a las autoridades extranjeras que presten al titular de este pasaporte auxilio y asistencia en caso de necesidad.

Este passaporte é válido para todos os países com os quais o Brasil mantém relações diplomáticas.

Ce passeport est valable dans tous les pays avec lesquels le Brésil maintient des relations diplomatiques.

This passport is valid for all countries with which Brazil maintains diplomatic relations.

Este pasaporte es válido para todos los países con los que Brasil mantiene relaciones diplomáticas.

BRA

Este documento pertence à
Ce document appartient à la
This document is the property of the
Este documento pertenece a la

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSEPORT
PASSPORT
PASAPORTE

1


FR051007
Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular
Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.
Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.
This passport must be signed, except where the bearer is unable to do so.
Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.
REPÚBLICA FEDERATIVA DO BRASIL
PASSAPORTE
PASSPORT
TIPO / TYPE
P
PAÍS EMISSOR / ISSUING COUNTRY
BRA
PASSAPORTE Nº / PASSPORT No
FR051007
SOBRENOME / SURNAME
FERREIRA DA COSTA
NOME / GIVEN NAMES
VINICIUS
NACIONALIDADE / NATIONALITY
BRASILEIRO(A)
DATA DO NASCIMENTO / DATE OF BIRTH
25 SET/SEP 1988
IDENTIDADE Nº / PERSONAL No
SEXO / SEX
M
NATURALIDADE / PLACE OF BIRTH
ITAPURANGA/GO
FILIAÇÃO / FILIATION
AFRANIO CARDOSO DA COSTA
MARLENE RODRIGUES FERREIRA
DATA DE EXPEDIÇÃO / DATE OF ISSUE
24 JUN/JUN 2016
AUTORIDADE / AUTHORITY
SR/DPF/GO
VÁLIDO ATÉ / DATE OF EXPIRY
23 JUN/JUN 2026
P<BRAFERREIRA<DA<COSTA<<VINICIUS<<<<<<<<<<<<
FR051007<5BRA8809254M2606233<<<<<<<<<<<<<<04


Para uso das autoridades brasileiras
Reservé aux autorités brésiliennes
For the use of Brazilian authorities
Para uso de las autoridades brasileñas
4
INFORMAÇÕES PARA O TITULAR
Este passaporte é propriedade da República Federativa do Brasil e qualquer tentativa de adulteração o tornará inválido.
O extravio – perda, roubo ou destruição – do passaporte constitui fato grave e deve ser comunicado imediatamente à autoridade policial e à Embaixada ou ao Consulado do Brasil, conforme o caso. Para isso, recomenda-se que o titular copie as informações da página 2. Se o passaporte for entregue a pessoa ou serviço que não pertença ao Governo Brasileiro (por exemplo, para obtenção de visto, compra de passagem, etc.) e não for restituído, o titular deve considerá-lo como extraviado. A concessão de novo passaporte em substituição ao extraviado depende de investigação.
Apenas o titular do passaporte poderá usá-lo. A utilização fraudulenta ou a cessão a outra pessoa constituem crimes, pela lei brasileira. Para ressalvar sua responsabilidade, o titular deve assinar seu passaporte, no local previsto na página 3, imediatamente após recebê-lo. Este passaporte só é válido com a assinatura do titular, salvo em caso de incapacidade.
É recomendável que o brasileiro residente no exterior, ou de passagem por região conturbada, matricule-se na Embaixada ou no Consulado do Brasil mais próximo. Impossibilitado de comparecer pessoalmente, poderá comunicar-se por outro meio, fornecendo nome completo, endereço e número do passaporte.
O brasileiro que viaje por áreas conturbadas deve ter presente que a assistência do Governo Brasileiro poderá ser limitada e dependerá das autoridades locais. A contratação de seguro de viagem poderá trazer tranquilidade ao viajante e a seus familiares.
É responsabilidade do titular verificar, antes da viagem, a validade do passaporte e a necessidade de visto. O titular poderá solicitar a substituição do passaporte mesmo antes do vencimento, em vista de que muitos países exigem prazo mínimo de validade.
O menor de idade, não emancipado, viajando desacompanhado de qualquer um dos pais, ou responsável legal, só poderá sair do Brasil munido da autorização pertinente prevista em lei.
O cidadão brasileiro que tenha outra nacionalidade deve ter em conta que a assistência consular brasileira no país de que também é nacional poderá ser consideravelmente limitada.
Consulte / Consultez / Consult / Consulte
www.portalconsular.mre.gov.br ou www.pf.gov.br
5


VISAS
VISTOS
SUN 21 2017
DEC 20 2017
VISA
UNITED STATES OF AMERICA
Issuing Post Name
BRASILIA
Control Number
20171315480002
Surname
FERREIRA DA COSTA
Given Name
VINICIUS
Visa Type /Class
R B1/B2
Passport Number
FR051007
Sex
M
Birth Date
25SEP1988
Nationality
BRZL
Entries
M
Issue Date
16MAY2017
Expiration Date
11MAY2027
1000
Annotation
M1403081
**
VNUSAFERREIRA<DA<COSTA<<VINICIUS<<<<<<<<<<<<
FR051007<5BRA8809254M2705114B3BRAOKRXG361150


VISTOS 8 VISAS
VISTOS 9 VISAS


VISTOS 10 VISAS
VISTOS 11 VISAS


VISTOS 12 VISAS
VISTOS 13 VISAS


VISTOS 14 VISAS
VISTOS 15 VISAS


VISTOS 16 VISAS
VISTOS 17 VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS 21 VISAS
VISTOS 20 VISAS

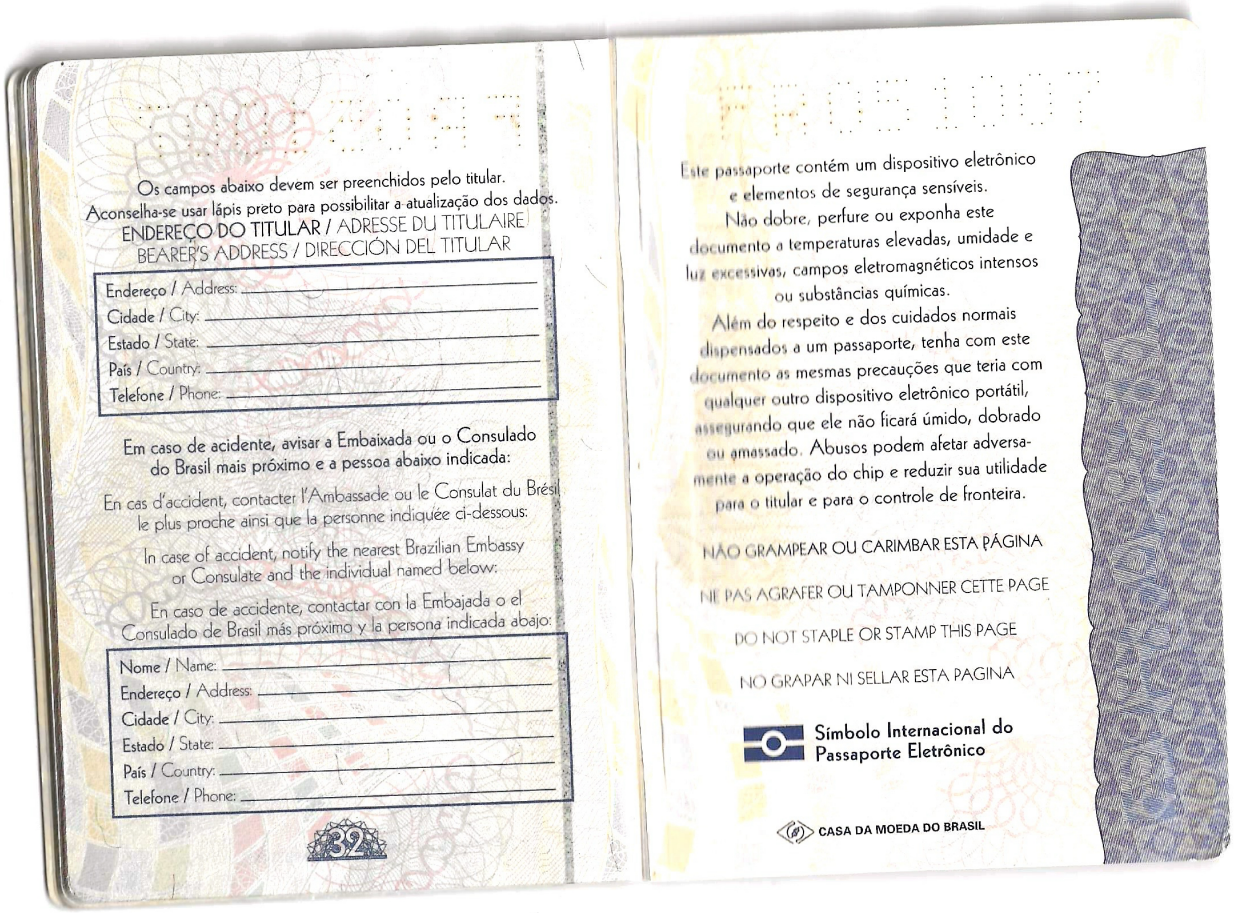
VISTOS VISAS
VISTOS VISAS


VISTOS 24 VISAS
VISTOS 25 VISAS


FRO51007
VISTOS 26 VISAS
VISTOS 27 VISAS


VISTOS 28 VISAS
VISTOS 29 VISAS

VISTOS 30 VISAS
VISTOS 31 VISAS



Os campos abaixo devem ser preenchidos pelo titular.
Aconselha-se usar lápis preto para possibilitar a atualização dos dados.

ENDEREÇO DO TITULAR / ADRESSE DU TITULAIRE
BEARER'S ADDRESS / DIRECCIÓN DEL TITULAR

Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

Em caso de acidente, avisar a Embaixada ou o Consulado do Brasil mais próximo e a pessoa abaixo indicada:

En cas d'accident, contacter l'Ambassade ou le Consulat du Brésil le plus proche ainsi que la personne indiquée ci-dessous:

In case of accident, notify the nearest Brazilian Embassy or Consulate and the individual named below:

En caso de accidente, contactar con la Embajada o el Consulado de Brasil más próximo y la persona indicada abajo:

Nome / Name: _____
Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

32

Este passaporte contém um dispositivo eletrônico e elementos de segurança sensíveis.
Não dobre, perfure ou exponha este documento a temperaturas elevadas, umidade e luz excessivas, campos eletromagnéticos intensos ou substâncias químicas.
Além do respeito e dos cuidados normais dispensados a um passaporte, tenha com este documento as mesmas precauções que teria com qualquer outro dispositivo eletrônico portátil, assegurando que ele não ficará úmido, dobrado ou amassado. Abusos podem afetar adversamente a operação do chip e reduzir sua utilidade para o titular e para o controle de fronteira.

NÃO GRAMPEAR OU CARIMBAR ESTA PÁGINA

NE PAS AGRAFER OU TAMPONNER CETTE PAGE

DO NOT STAPLE OR STAMP THIS PAGE

NO GRAPAR NI SELLAR ESTA PAGINA

Símbolo Internacional do Passaporte Eletrônico

CASA DA MOEDA DO BRASIL

Document digitally signed in accordance with Provisional Measure No. 2200-2/2001 which established the Brazilian Public Key Infrastructure (ICP-BRASIL)

FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

BIRTH CERTIFICATE

NAME

VINÍCIUS FERREIRA DA COSTA

CPF

025.578.321-38

REGISTRATION

028738 01 55 1988 1 00017 536 0013960 86

DATE OF BIRTH (IN FULL)	DAY	MONTH	YEAR
SEPTEMBER TWENTY-FIFTH, NINETEEN EIGHTY-EIGHT	**25**	**09**	**1988**

TIME OF BIRTH	CITY OF BIRTH
10:35 AM	**ITAPURANGA - GOIÁS**

CITY OF REGISTRATION AND STATE	PLACE, CITY OF BIRTH AND STATE	SEX
ITAPURANGA - GOIÁS	**SÃO FRANCISCO HOSPITAL / ITAPURANGA - GOIÁS**	**MALE**

FILIATION

AFRANIO CARDOSO DA COSTA, BRAZILIAN, BUSINESSMAN, BORN IN ITAPURANGA - GOIÁS
MARLENE RODRIGUES FERREIRA, BRAZILIAN, SALESPERSON, BORN IN ITAPURANGA - GOIÁS

GRANDPARENTS

JAIR DA COSTA MARINHO AND ALENIR CARDOSO MARINHO, GERALDO JOSÉ FERREIRA AND DOLZIRA RODRIGUES FERREIRA

TWINS	NAME AND REGISTRATION NUMBER OF TWINS
NO	

DATE OF REGISTRATION (IN FULL)	LIVE BIRTH REGISTRATION NUMBER
DECEMBER SECOND, NINETEEN EIGHTY-EIGHT	**-**

NOTES / ANNOTATIONS TO BE ADDED

-

REGISTRATION NOTES

NO RECORD.

Certificate prepared by Cláudio Ferreira Rabelo Holanda da Costa - Deputy of the Civil Registry of Natural Persons of Itapuranga - 2nd Notary Office, who electronically signed it on August 1, 2024, in accordance with Provision No. 149/2023 of the National Council of Justice.

The content of the certificate is true. I certify.

Certificate issued on August 1, 2024.

This is an electronic public document, issued pursuant to Article 228-F of the National Code of Norms of the National Justice Department of the National Council of Justice - Extrajudicial Court (CNN/CN/CNJ-Extra) - Provision 149, and is only valid in digital format, with reproduction prohibited.

Civil Registry Office of Natural Persons
Itapuranga - 2nd Notary Office - Goiás
Arthur Vidal Rabelo Costa - Registrar
Rua 46, corner of Avenida Anhanguera, no number – CENTRO - ZIP Code: 76680-000
Email: rabeloholanda@uol.com.br
Phone: (62) 33551480

Validation of the digital signature attribute
www.registrocivil.org.br/validacao
Hash Code:
C59821B84FEB92CDC263CF23803A52C8
Civil Registry Information Center - CRC-Nacional

Judiciary of the State of Goiás
Digital Oversight Seal

00972408012296230010003

Check at: http://extrajudicial.tjgo.jus.br/selo

I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.


_____ Date: September 2, 2025.

Documento assinado digitalmente conforme MP nº 2200-2/2001 que instituiu a Infraestrutura de Chaves Públicas Brasileira (ICP-BRASIL)

REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

CERTIDÃO DE NASCIMENTO

NOME
VINÍCIUS FERREIRA DA COSTA

CPF
025.578.321-38

MATRÍCULA
028738 01 55 1988 1 00017 536 0013960 86

DATA DE NASCIMENTO (POR EXTENSO)
VINTE E CINCO DE SETEMBRO DE UM MIL NOVECENTOS E OITENTA E OITO

DIA: **25** | MÊS: **09** | ANO: **1988**

HORA DE NASCIMENTO: **10:35**

NATURALIDADE: **ITAPURANGA - GO**

MUNICÍPIO DE REGISTRO E UNIDADE DA FEDERAÇÃO: **ITAPURANGA - GO**

LOCAL. MUNICÍPIO DE NASCIMENTO E UF: **HOSPITAL SÃO FRANCISCO / ITAPURANGA - GO**

SEXO: **MASCULINO**

FILIAÇÃO
AFRANIO CARDOSO DA COSTA, BRASILEIRO, EMPRESÁRIO, NATURAL DE ITAPURANGA - GO MARLENE RODRIGUES FERREIRA, BRASILEIRA, COMERCIÁRIA, NATURAL DE ITAPURANGA - GO.

AVÓS
JAIR DA COSTA MARINHO E ALENIR CARDOSO MARINHO GERALDO JOSÉ FERREIRA E DOLZIRA RODRIGUES FERREIRA

GÊMEOS: **NÃO**

NOME E MATRÍCULA DOS GÊMEOS:

DATA DO REGISTRO (POR EXTENSO)
DOIS DE DEZEMBRO DE UM MIL E NOVECENTOS E OITENTA E OITO

NÚMERO DA DNV/DECLARAÇÃO DE NASCIDO VIVO: -

AVERBAÇÕES / ANOTAÇÕES À ACRESCER
-

ANOTAÇÕES DE CADASTRO
SEM INFORMAÇÕES.

Certidão lavrada por Cláudio Ferreira Rabelo Holanda da Costa - Substituto do Registro Civil das Pessoas Naturais de Itapuranga - 2° Ofício, o(a) qual assinou eletronicamente aos 01 de Agosto de 2024, nos termos do Provimento nº 149/2023 do Conselho Nacional de Justiça

O conteúdo da certidão é verdadeiro. Dou fé

Certidão emitida em 01 de Agosto de 2024

Este é um documento público eletrônico, emitido nos termos do Artigo 228-F do Código Nacional de Normas da Corregedoria Nacional de Justiça do Conselho Nacional de Justiça - Foro Extrajudicial (CNN/ CN/CNJ-Extra) - Provimento 149, só tendo validade em formato digital, vedado a sua reprodução

Oficial de Registro Civil das Pessoas Naturais
Itapuranga - 2° Ofício - GO
Arthur Vidal Rabelo Costa - Oficial
Rua 46 esquina com a Avenida Anhanguera, s/n° - CENTRO - CEP: 76680-000
E-mail: rabeloholanda@uol.com.br
Tel: (62) 33551480

Validação do atributo da assinatura digital
www.registrocivil.org.br/validacao
Cod. Hash:
C59821B84FEB92CDC263CF23803A52C8
Central de Informações do Registro Civil - CRC-Nacional

Poder Judiciário Estado de Goiás
Selo Eletrônico de Fiscalização

00972408012296230010003

Consulte este selo em http://extrajudicial.tjgo.jus.br/selo

For: **VINICIUS FERREIRA DA COSTA**

U.S. Customs and Border Protection
Securing America's Borders

Most Recent I-94

Note to employers, local, state or federal agency granting benefits:
Please visit the CBP I-94/I-95 Website and click on the tab for "Get Most Recent I-94/I-95" to perform a search for the applicant to confirm that the biographic and travel information displayed on this I-94/I-95 printout matches the "Get Most Recent I-94/I-95" returned results for this applicant. Reference the CBP I-94/I-95 Website FAQs.

Admission I-94 Record Number: 45133365985

Arrival/Issued Date: 2017 June 21

Class of Admission: B2

Admit Until Date: 2017 December 20

Details provided on the I-94 Information form:

Last/Surname: FERREIRA DA COSTA

First (Given) Name: VINICIUS

Birth Date: 1988 September 25

Document Number: FR051007

Country of Citizenship: Brazil

- Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94/I-95. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).
- What to do if someone requests your admission info: If an employer, local, state or federal agency requests admission information, present your admission (I-94/I-95) number along with any additional required documents requested by that employer or agency.
- For security, close your browser after retrieving your I-94/I-95 number.

OMB No. 1651-0111
Expiration Date: 01/31/2026

View Travel History

Travel history includes up to 100 arrivals and departures spanning the last ten years

Travel History Results

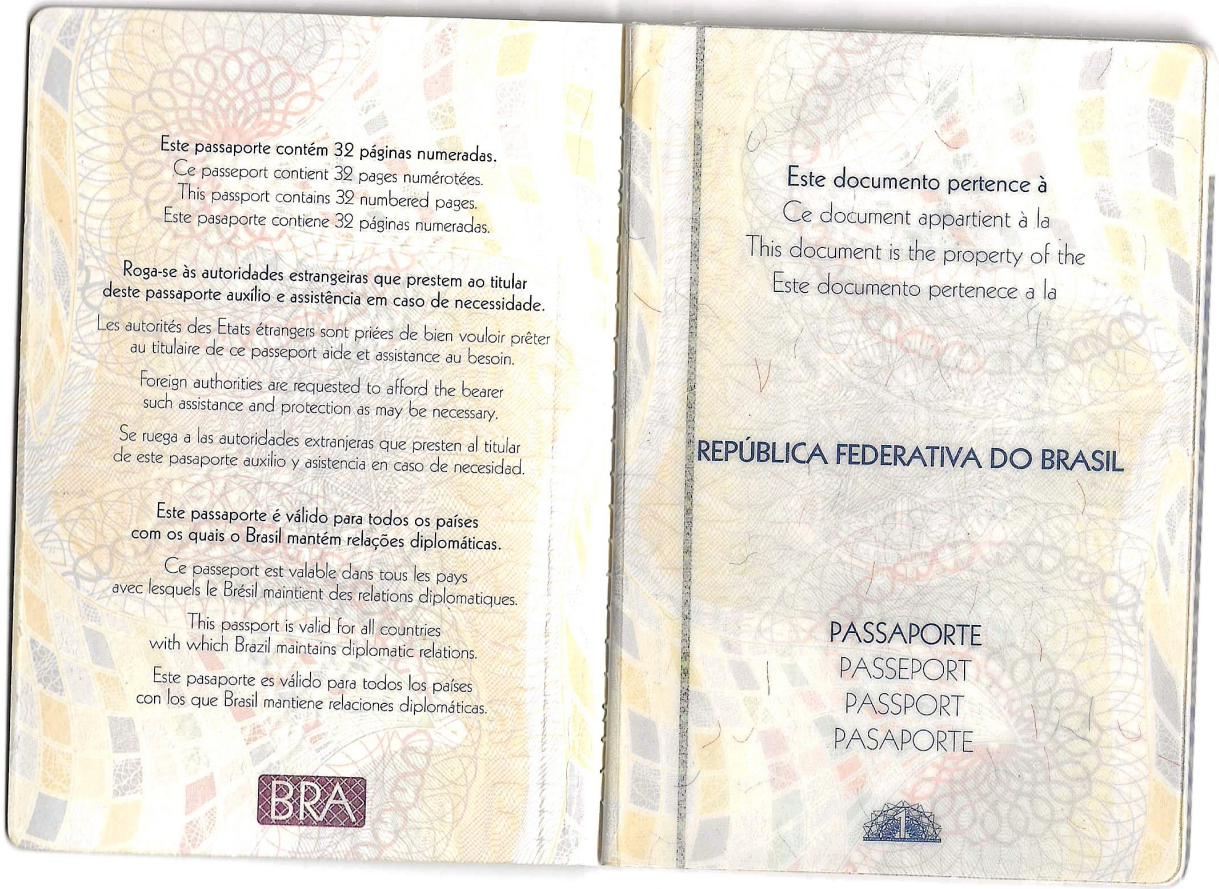
Document Number: **FR051007**

Document Country of Issuance: **Brazil**

Row	DATE	TYPE	LOCATION
1	2017-06-21	Arrival	SFR

OMB No. 1651-0111 Expiration Date: 01/31/2026

Exhibit 2 - Cynara dos Santos's Identification Documents



Este passaporte contém 32 páginas numeradas.
Ce passeport contient 32 pages numérotées.
This passport contains 32 numbered pages.
Este pasaporte contiene 32 páginas numeradas.

Roga-se às autoridades estrangeiras que prestem ao titular deste passaporte auxílio e assistência em caso de necessidade.

Les autorités des Etats étrangers sont priées de bien vouloir prêter au titulaire de ce passeport aide et assistance au besoin.

Foreign authorities are requested to afford the bearer such assistance and protection as may be necessary.

Se ruega a las autoridades extranjeras que presten al titular de este pasaporte auxilio y asistencia en caso de necesidad.

Este passaporte é válido para todos os países com os quais o Brasil mantém relações diplomáticas.

Ce passeport est valable dans tous les pays avec lesquels le Brésil maintient des relations diplomatiques.

This passport is valid for all countries with which Brazil maintains diplomatic relations.

Este pasaporte es válido para todos los países con los que Brasil mantiene relaciones diplomáticas.

BRA

Este documento pertence à
Ce document appartient à la
This document is the property of the
Este documento pertenece a la

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSEPORT
PASSPORT
PASAPORTE



Cynara dos Santos

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

FR051008

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSPORT

TIPO / TYPE: P
PAÍS EMISSOR / ISSUING COUNTRY: BRA
PASSAPORTE Nº / PASSPORT No: FR051008

SOBRENOME / SURNAME: DOS SANTOS

NOME / GIVEN NAMES: CYNARA

NACIONALIDADE / NATIONALITY: BRASILEIRO(A)

DATA DO NASCIMENTO / DATE OF BIRTH: 14 OUT/OCT 1987

IDENTIDADE Nº / PERSONAL No:

SEXO / SEX: F

NATURALIDADE / PLACE OF BIRTH: GOIÂNIA/GO

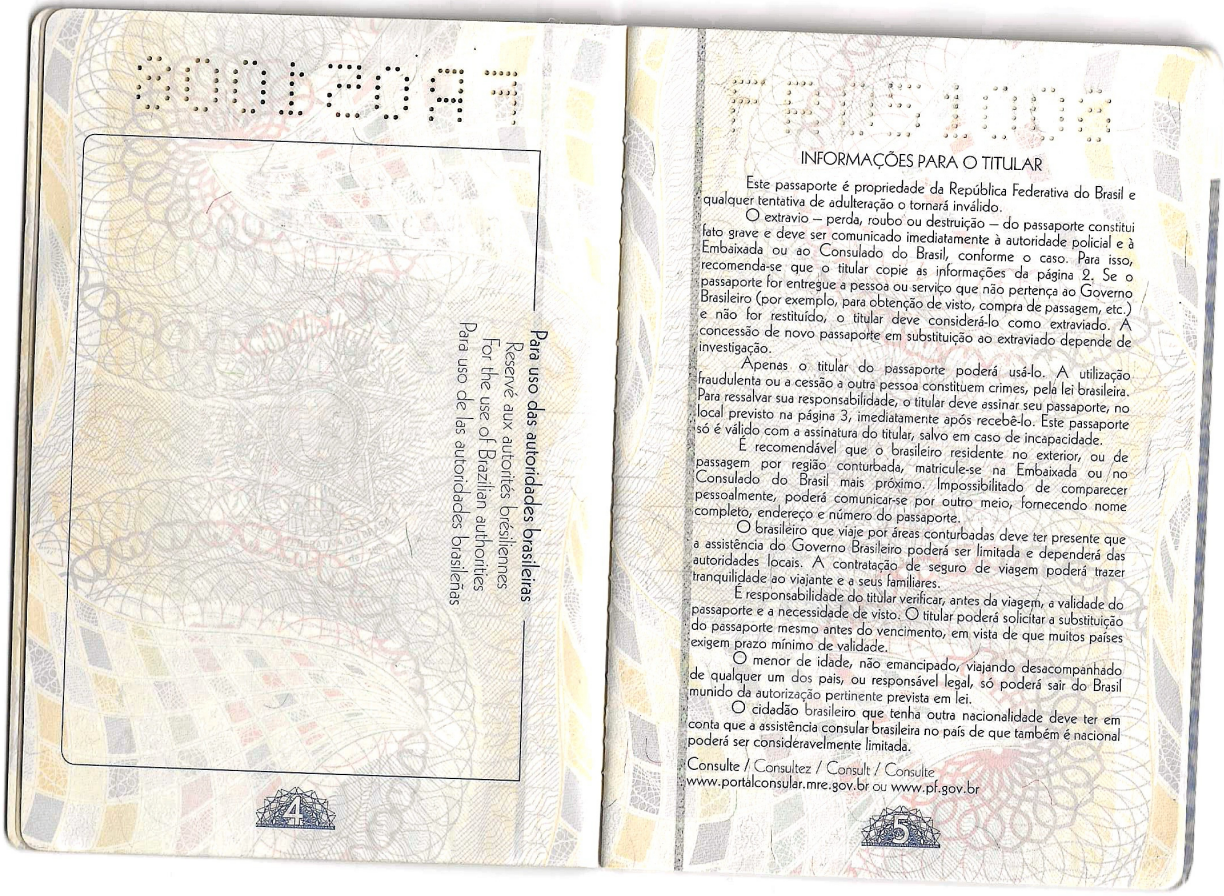
FILIAÇÃO / FILIATION: NEILA DOS SANTOS

DATA DE EXPEDIÇÃO / DATE OF ISSUE: 24 JUN/JUN 2016

AUTORIDADE / AUTHORITY: SR/DPF/GO

VÁLIDO ATÉ / DATE OF EXPIRY: 23 JUN/JUN 2026

P<BRADOS<SANTOS<<CYNARA<<<<<<<<<<<<<<<<<<<<
FR051008<8BRA8710145F2606233<<<<<<<<<<<<<<02



Para uso das autoridades brasileiras
Reservé aux autorités brésiliennes
For the use of Brazilian authorities
Para uso de las autoridades brasileñas

4

INFORMAÇÕES PARA O TITULAR

Este passaporte é propriedade da República Federativa do Brasil e qualquer tentativa de adulteração o tornará inválido.

O extravio – perda, roubo ou destruição – do passaporte constitui fato grave e deve ser comunicado imediatamente à autoridade policial e à Embaixada ou ao Consulado do Brasil, conforme o caso. Para isso, recomenda-se que o titular copie as informações da página 2. Se o passaporte for entregue a pessoa ou serviço que não pertença ao Governo Brasileiro (por exemplo, para obtenção de visto, compra de passagem, etc.) e não for restituído, o titular deve considerá-lo como extraviado. A concessão de novo passaporte em substituição ao extraviado depende de investigação.

Apenas o titular do passaporte poderá usá-lo. A utilização fraudulenta ou a cessão a outra pessoa constituem crimes, pela lei brasileira. Para ressalvar sua responsabilidade, o titular deve assinar seu passaporte, no local previsto na página 3, imediatamente após recebê-lo. Este passaporte só é válido com a assinatura do titular, salvo em caso de incapacidade.

É recomendável que o brasileiro residente no exterior, ou de passagem por região conturbada, matricule-se na Embaixada ou no Consulado do Brasil mais próximo. Impossibilitado de comparecer pessoalmente, poderá comunicar-se por outro meio, fornecendo nome completo, endereço e número do passaporte.

O brasileiro que viaje por áreas conturbadas deve ter presente que a assistência do Governo Brasileiro poderá ser limitada e dependerá das autoridades locais. A contratação de seguro de viagem poderá trazer tranquilidade ao viajante e a seus familiares.

É responsabilidade do titular verificar, antes da viagem, a validade do passaporte e a necessidade de visto. O titular poderá solicitar a substituição do passaporte mesmo antes do vencimento, em vista de que muitos países exigem prazo mínimo de validade.

O menor de idade, não emancipado, viajando desacompanhado de qualquer um dos pais, ou responsável legal, só poderá sair do Brasil munido da autorização pertinente prevista em lei.

O cidadão brasileiro que tenha outra nacionalidade deve ter em conta que a assistência consular brasileira no país de que também é nacional poderá ser consideravelmente limitada.

Consulte / Consultez / Consult / Consulte
www.portalconsular.mre.gov.br ou www.pf.gov.br

5


VISTOS VISAS
JUN 21 2017
DEC 20 2017
VISA
UNITED STATES OF AMERICA
Issuing Post Name
BRASILIA
Control Number
20171315480001
Surname
DOS SANTOS
Given Name
CYNARA
Visa Type /Class
R B1/B2
Passport Number
FR051008
Sex
F
Birth Date
14OCT1987
Nationality
BRZL
Entries
M
Issue Date
16MAY2017
Expiration Date
11MAY2027
0111
Annotation
M1403082
* *
VNUSADOS<SANTOS<<CYNARA<<<<<<<<<<<<<<<<<<<<
FR051008<8BRA8710145F2705114B3BRA0KRXH231263


VISTOS VISAS
VISTOS VISAS

VISTOS 10 VISAS
VISTOS 11 VISAS

VISTOS 12 VISAS
VISTOS 13 VISAS

VISTOS 15 VISAS
VISTOS 14 VISAS

VISTOS 16 VISAS
VISTOS 17 VISAS


VISTOS 18 VISAS
VISTOS 19 VISAS


VISTOS 20 VISAS
VISTOS 21 VISAS


VISTOS 22 VISAS
FRO5 1008
VISTOS 23 VISAS

VISTOS 24 VISAS
VISTOS 25 VISAS


VISTOS 26 VISAS
VISTOS 27 VISAS


VISTOS 28 VISAS
VISTOS 29 VISAS

VISTOS 31 VISAS
VISTOS 30 VISAS

Os campos abaixo devem ser preenchidos pelo titular.
Aconselha-se usar lápis preto para possibilitar a atualização dos dados.

ENDEREÇO DO TITULAR / ADRESSE DU TITULAIRE
BEARER'S ADDRESS / DIRECCIÓN DEL TITULAR

Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

Em caso de acidente, avisar a Embaixada ou o Consulado do Brasil mais próximo e a pessoa abaixo indicada:

En cas d'accident, contacter l'Ambassade ou le Consulat du Brésil le plus proche ainsi que la personne indiquée ci-dessous:

In case of accident, notify the nearest Brazilian Embassy or Consulate and the individual named below:

En caso de accidente, contactar con la Embajada o el Consulado de Brasil más próximo y la persona indicada abajo:

Nome / Name: _____
Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

Este passaporte contém um dispositivo eletrônico e elementos de segurança sensíveis.
Não dobre, perfure ou exponha este documento a temperaturas elevadas, umidade e luz excessivas, campos eletromagnéticos intensos ou substâncias químicas.
Além do respeito e dos cuidados normais dispensados a um passaporte, tenha com este documento as mesmas precauções que teria com qualquer outro dispositivo eletrônico portátil, assegurando que ele não ficará úmido, dobrado ou amassado. Abusos podem afetar adversamente a operação do chip e reduzir sua utilidade para o titular e para o controle de fronteira.

NÃO GRAMPEAR OU CARIMBAR ESTA PÁGINA

NE PAS AGRAFER OU TAMPONNER CETTE PAGE

DO NOT STAPLE OR STAMP THIS PAGE

NO GRAPAR NI SELLAR ESTA PAGINA

Símbolo Internacional do Passaporte Eletrônico

CASA DA MOEDA DO BRASIL

REQUEST YOUR CERTIFICATES DIRECTLY AT REGISTROCIVIL.ORG.BR AND AVOID INTERMEDIARIES

FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

BIRTH CERTIFICATE

Name
CYNARA DOS SANTOS

CPF
022.790.141-06

Registration
024919 01 55 1987 1 00729 016 0146816 15

Date of birth: **October fourteenth, nineteen eighty-seven**	Day: **14**	Month: **10**	Year: **1987**	
Time of birth: **06:35 PM**	Municipality of birth: **Goiânia**		State: **Goiás**	
Place of birth: **HOSPITAL DAS CLÍNICAS**	City of birth: **Goiânia**	State: **Goiás**	Sex: **female**	
Parent's name: **NEILA DOS SANTOS**	City of Birth: **Goianésia**		State: **Goiás**	

Respective Grandparents: **NERCINO MOREIRA DOS SANTOS; CONCEIÇÃO PINTO DOS SANTOS;**

Registration Date: **October twenty-seventh, nineteen eighty-seven**

DNV (NUMBER OF LIVE BIRTH CERTIFICATE): **0--**

Annotations/Annotations

1st Annotation - The registered individual is enrolled in the CPF under No. 022.790.141-06, according to a query made on this date through the database of the Brazilian Federal Revenue Service, as provided by the National Civil Registry Information System. Goiânia-Goiás, 08/14/2025, Annotated by: LARYSSA.FRANCA Seal: 00072508112689930061087

Voluntary registration notes
NO RECORD

CNS No. 024919
Civil Registry Office of Natural Persons
Goiânia - 2nd Subdistrict - Goiás

Antônio do Prado - Registrar

Rua Geraldo Ney, No. 156 - Campinas Sector ZIP Code: 74515020
- Phone: (62)32330055
email: administracao@cartorioantonioprado.com.br

The content of the certificate is true. I certify.

Goiânia - Goiás, 08/14/2025.

Digital seal: 00072508112689730010823
Amount charged for this certificate: R$90.34

CIVIL registry

Electronically signed by: Karine Vieira De Souza - 08/14/2025 08:49:03 AM, pursuant to Article 19 of Law No. 6,015/73, and Article 228-F of the National Code of Norms of the Judicial Administrative Department of the National Council of Justice - Extrajudicial Forum (CNN/CN/CNJ-Extra)
CNS (Civil Registry Number): 122697 - Clerk - Goiás - 2nd Subdistrict
Validation: https://certidao.registrocivil.org.br/validar Validation Code: rdbd-mxsi
Click here to validate the certificate

SERP: Electronic System fc ersons / RCPN: Civil Registry of Natural Persons

The QR Code of the inspection seal of the State Courts of Justice will be availat table of this certificate at the address mentioned below when it is not present in the certificate itself. This certificate may be issued in physical form within 30 days from the date of its issuance at any Civil Registry Office for Natural Persons in Brazil.

I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.


_____ Date: September 2, 2025.

REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

SOLICITE SUAS CERTIDÕES DIRETAMENTE NO REGISTROCIVIL.ORG.BR E EVITE INTERMEDIÁRIOS

CERTIDÃO DE NASCIMENTO

Nome
CYNARA DOS SANTOS

Número do CPF
022.790.141-06

Matrícula
024919 01 55 1987 1 00729 016 0146816 15

Data de nascimento	Dia	Mês	Ano
quatorze de outubro de um mil e novecentos e oitenta e sete	14	10	1987

Horário de nascimento	Município da naturalidade	UF
18:35 horas	Goiânia	GO

Local de nascimento	Município de nascimento	UF	Sexo
HOSPITAL DAS CLÍNICAS	Goiânia	GO	feminino

Nome do(a) genitor(a)	Município de nascimento	UF
NEILA DOS SANTOS	Goianésia	GO

Avô(ó)(s) respectivo(s)
NERCINO MOREIRA DOS SANTOS; CONCEIÇÃO PINTO DOS SANTOS;

Data de registro	DNV
vinte e sete de outubro de um mil e novecentos e oitenta e sete	0--

Anotações/Averbações
1ª Averbação - O(a) registrado(a) está inscrito(a) no CPF sob o nº 022.790.141-06, conforme consulta realizada nesta data junto à base de dados da Receita Federal do Brasil, disponibilizada pela Central de Informações de Registro Civil - CRC Nacional. Goiânia-GO, 14/08/2025. Averbado por: LARYSSA.FRANCA. Selo: 00072508112689930061087

Anotações voluntárias de cadastro
NÃO CONSTA

CNS Nº 024919
Oficial de Registro Civil das Pessoas Naturais
Goiânia - 2º Subdistrito - GO

Antônio do Prado - Oficial

Rua Geraldo Ney, nº 156 - Setor Campinas CEP: 74515020
- Fone: (62)32330055
e-mail: administracao@cartorioantoniodoprado.com.br

O Conteúdo da certidão é verdadeiro. Dou fé.

Goiânia - GO, 14/08/2025.

Selo digital: 00072508112689730010823
Valor cobrado por esta certidão: R$ 90,34

registro CIVIL

Assinado eletronicamente por: Karine Vieira De Souza - 14/08/2025 08:49:03 , nos termos do artigo 19 da Lei nº 6.015/73, e do artigo 228-F do Código Nacional de Normas da Corregedoria Nacional de Justiça do Conselho Nacional de Justiça - Foro Extrajudicial (CNN/CN/CNJ-Extra)
CNS: 024919 - Escrevente - GO - Goiânia - 2º Subdistrito
Validação: https://certidao.registrocivil.org.br/validar Código Validador: rdbd-mxsi
Clique aqui para validar a certidão

O QR Code do selo de fiscalização dos Tribunais de Justiça Estaduais estará disponível na tabela de validação desta certidão no endereço mencionado abaixo quando não estiver presente na própria certidão. Esta certidão poderá ser materializada em até 30 dias da data de sua emissão em qualquer Ofício de Registro Civil de Pessoas Naturais do Brasil.

For: **CYNARA DOS SANTOS**

U.S. Customs and Border Protection
Securing America's Borders

Most Recent I-94

Note to employers, local, state or federal agency granting benefits:
Please visit the CBP I-94/I-95 Website and click on the tab for "Get Most Recent I-94/I-95" to perform a search for the applicant to confirm that the biographic and travel information displayed on this I-94/I-95 printout matches the "Get Most Recent I-94/I-95" returned results for this applicant. Reference the CBP I-94/I-95 Website FAQs.

Admission I-94 Record Number: 45133431985

Arrival/Issued Date: 2017 June 21

Class of Admission: B2

Admit Until Date: 2017 December 20

Details provided on the I-94 Information form:

Last/Surname: DOS SANTOS

First (Given) Name: CYNARA

Birth Date: 1987 October 14

Document Number: FR051008

Country of Citizenship: Brazil

- Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94/I-95. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).
- What to do if someone requests your admission info: If an employer, local, state or federal agency requests admission information, present your admission (I-94/I-95) number along with any additional required documents requested by that employer or agency.
- For security, close your browser after retrieving your I-94/I-95 number.

OMB No. 1651-0111
Expiration Date: 01/31/2026

View Travel History

Travel history includes up to 100 arrivals and departures spanning the last ten years

Travel History Results

Document Number: **FR051008**

Document Country of Issuance: **Brazil**

Row	DATE	TYPE	LOCATION
1	2017-06-21	Arrival	SFR

OMB No. 1651-0111 Expiration Date: 01/31/2026

Exhibit 3 - Julia Mendanha dos Santos's Identification Documents

Este passaporte contém 32 páginas numeradas.
Ce passeport contient 32 pages numérotées.
This passport contains 32 numbered pages.
Este pasaporte contiene 32 páginas numeradas.

Roga-se às autoridades estrangeiras que prestem ao titular deste passaporte auxílio e assistência em caso de necessidade.

Les autorités des Etats étrangers sont priées de bien vouloir prêter au titulaire de ce passeport aide et assistance au besoin.

Foreign authorities are requested to afford the bearer such assistance and protection as may be necessary.

Se ruega a las autoridades extranjeras que presten al titular de este pasaporte auxilio y asistencia en caso de necesidad.

Este passaporte é válido para todos os países com os quais o Brasil mantém relações diplomáticas.

Ce passeport est valable dans tous les pays avec lesquels le Brésil maintient des relations diplomatiques.

This passport is valid for all countries with which Brazil maintains diplomatic relations.

Este pasaporte es válido para todos los países con los que Brasil mantiene relaciones diplomáticas.

BRA

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Ce document appartient à la
This document is the property of the
Este documento pertenece a la

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSEPORT
PASSPORT
PASAPORTE

YE343657

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.

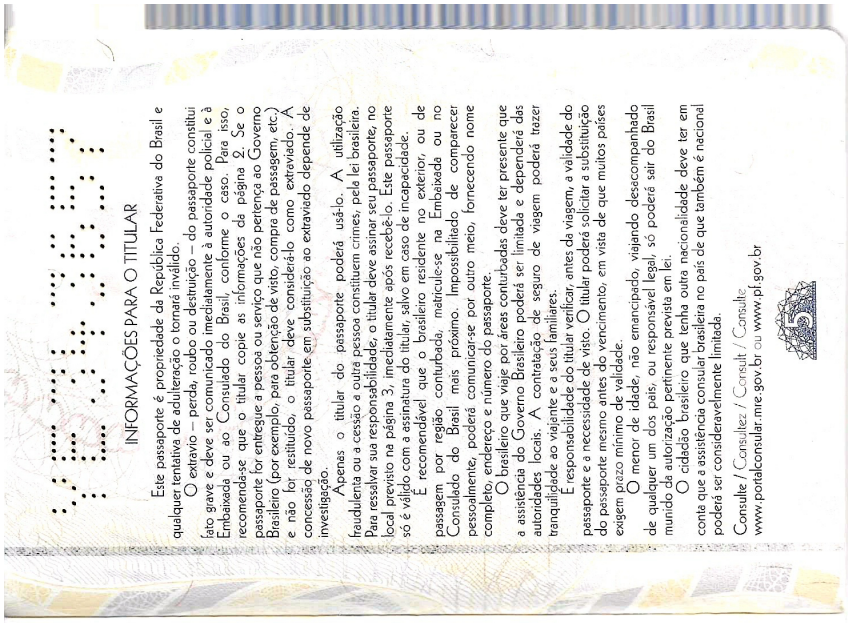
PASSAPORTE
PASSPORT

REPÚBLICA FEDERATIVA DO BRASIL



TIPO / TYPE: P
PAÍS EMISSOR / ISSUING COUNTRY: BRA
PASSAPORTE Nº / PASSPORT No.: YE343657
SOBRENOME / SURNAME: MENDANHA DOS SANTOS
NOME / GIVEN NAMES: JÚLIA
NACIONALIDADE / NATIONALITY: BRASILEIRA
DATA DE NASCIMENTO / DATE OF BIRTH: 18 JUL/JUL 2008
IDENTIDADE Nº / PERSONAL No.:
SEXO / SEX: F
NATURALIDADE / PLACE OF BIRTH: GOIÂNIA, GO, BRASIL
DATA DE EXPEDIÇÃO / DATE OF ISSUE: 02 SET/SEP 2021
AUTORIDADE / AUTHORITY: SÃO FRANCISCO CG
VÁLIDO ATÉ / DATE OF EXPIRY: 01 SET/SEP 2026

P<BRAMENDANHA<DOS<SANTOS<<JULIA<<<<<<<<<<<<<
YE343657<2BRA0807184F2609016<<<<<<<<<<<<<<06



INFORMAÇÕES PARA O TITULAR

Este passaporte é propriedade da República Federativa do Brasil e qualquer tentativa de adulteração o tornará inválido.

O extravio – perda, roubo ou destruição – do passaporte constitui fato grave e deve ser comunicado imediatamente à autoridade policial e à Embaixada ou ao Consulado do Brasil, conforme o caso. Para isso, recomenda-se que o titular copie as informações da página 2. Se o passaporte for entregue a pessoa ou serviço que não pertença ao Governo Brasileiro (por exemplo, para obtenção de visto, compra de passagem, etc.) e não for restituído, o titular deve considerá-lo como extraviado. A concessão de novo passaporte em substituição ao extraviado depende de investigação.

Apenas o titular do passaporte poderá usá-lo. A utilização fraudulenta ou a cessão a outra pessoa constituem crimes, pela lei brasileira. Para ressalvar sua responsabilidade, o titular deve assinar seu passaporte, no local previsto na página 3, imediatamente após recebê-lo. Este passaporte só é válido com a assinatura do titular, salvo em caso de incapacidade.

É recomendável que o brasileiro residente no exterior, ou de passagem por região conturbada, matricule-se na Embaixada ou no Consulado do Brasil mais próximo. Impossibilitado de comparecer pessoalmente, poderá comunicar-se por outro meio, fornecendo nome completo, endereço e número do passaporte.

O brasileiro que viaje por áreas conturbadas deve ter presente que a assistência do Governo Brasileiro poderá ser limitada e dependerá das autoridades locais. A contratação de seguro de viagem poderá trazer tranquilidade ao viajante e a seus familiares.

É responsabilidade do titular verificar, antes da viagem, a validade do passaporte e a necessidade de visto. O titular poderá solicitar a substituição do passaporte mesmo antes do vencimento, em vista de que muitos países exigem prazo mínimo de validade.

O menor de idade, não emancipado, viajando desacompanhado de qualquer um dos pais, ou responsável legal, só poderá sair do Brasil munido da autorização pertinente prevista em lei.

O cidadão brasileiro que tenha outra nacionalidade deve ter em conta que a assistência consular brasileira no país de que também é nacional poderá ser consideravelmente limitada.

Consulte / Consultez / Consult / Consulte
www.portalconsular.mre.gov.br ou www.pf.gov.br



VISTOS
VISAS

VISTOS
VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS VISAS
VISTOS VISAS


VISTOS 14 VISAS
VISTOS 15 VISAS


VISTOS 16 VISAS
VISTOS 17 VISAS


VISTOS 18 VISAS
VISTOS 19 VISAS

VISTOS 20 VISAS
VISTOS 21 VISAS

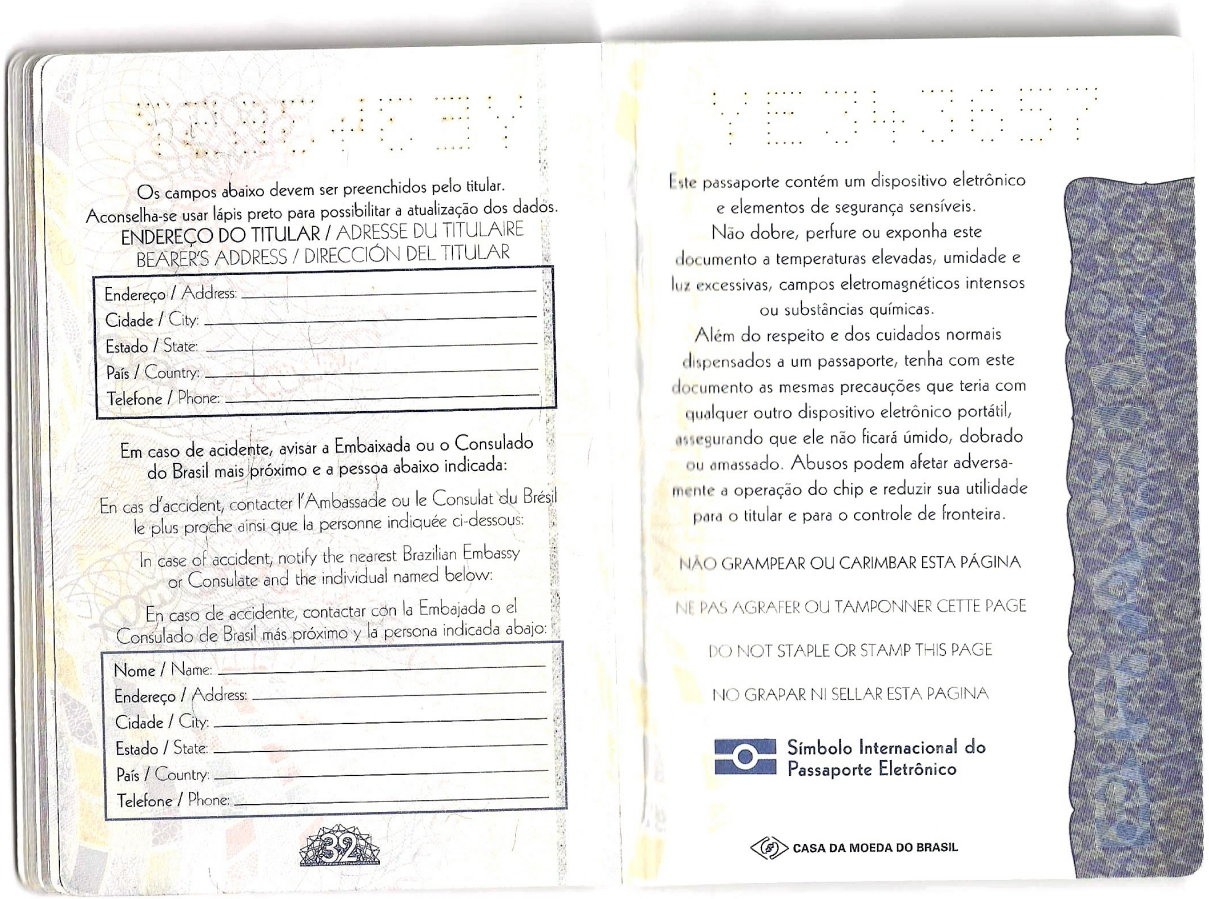
VISTOS VISAS
VISTOS VISAS

VISTOS 25 VISAS
VISTOS 24 VISAS


VISTOS 26 VISAS
VISTOS 27 VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS 31 VISAS
VISTOS 30 VISAS



Os campos abaixo devem ser preenchidos pelo titular.
Aconselha-se usar lápis preto para possibilitar a atualização dos dados.

ENDEREÇO DO TITULAR / ADRESSE DU TITULAIRE
BEARER'S ADDRESS / DIRECCIÓN DEL TITULAR

Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

Em caso de acidente, avisar a Embaixada ou o Consulado do Brasil mais próximo e a pessoa abaixo indicada:

En cas d'accident, contacter l'Ambassade ou le Consulat du Brésil le plus proche ainsi que la personne indiquée ci-dessous:

In case of accident, notify the nearest Brazilian Embassy or Consulate and the individual named below:

En caso de accidente, contactar con la Embajada o el Consulado de Brasil más próximo y la persona indicada abajo:

Nome / Name: _____
Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

Este passaporte contém um dispositivo eletrônico e elementos de segurança sensíveis.
Não dobre, perfure ou exponha este documento a temperaturas elevadas, umidade e luz excessivas, campos eletromagnéticos intensos ou substâncias químicas.
Além do respeito e dos cuidados normais dispensados a um passaporte, tenha com este documento as mesmas precauções que teria com qualquer outro dispositivo eletrônico portátil, assegurando que ele não ficará úmido, dobrado ou amassado. Abusos podem afetar adversamente a operação do chip e reduzir sua utilidade para o titular e para o controle de fronteira.

NÃO GRAMPEAR OU CARIMBAR ESTA PÁGINA

NE PAS AGRAFER OU TAMPONNER CETTE PAGE

DO NOT STAPLE OR STAMP THIS PAGE

NO GRAPAR NI SELLAR ESTA PAGINA

Símbolo Internacional do Passaporte Eletrônico

CASA DA MOEDA DO BRASIL



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Ce passeport contient 32 pages numérotées.
This passport contains 32 numbered pages.
Este pasaporte contiene 32 páginas numeradas.

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Foreign authorities are requested to afford the bearer such assistance and protection as may be necessary.

Se ruega a las autoridades extranjeras que presten al titular de este pasaporte auxilio y asistencia en caso de necesidad.

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Ce passeport est valable dans tous les pays avec lesquels le Brésil maintient des relations diplomatiques.

This passport is valid for all countries with which Brazil maintains diplomatic relations.

Este pasaporte es válido para todos los países con los que Brasil mantiene relaciones diplomáticas.

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Ce document appartient à la
This document is the property of the
Este documento pertenece a la

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSEPORT
PASSPORT
PASAPORTE

1



Julia Mendanha dos Santos

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

FR051010

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSPORT

TIPO / TYPE: P
PAÍS EMISSOR / ISSUING COUNTRY: BRA
PASSAPORTE Nº / PASSPORT No: FR051010

SOBRENOME / SURNAME: MENDANHA DOS SANTOS

NOME / GIVEN NAMES: JULIA

NACIONALIDADE / NATIONALITY: BRASILEIRO(A)

DATA DO NASCIMENTO / DATE OF BIRTH: 18 JUL/JUL 2008

IDENTIDADE Nº / PERSONAL No

SEXO / SEX: F

NATURALIDADE / PLACE OF BIRTH: GOIÂNIA/GO

FILIAÇÃO / FILIATION:
EDSON ANTONIO MENDANHA JUNIOR
CYNARA DOS SANTOS MENDANHA

O titular, enquanto menor, está autorizado pelos genitores, pelo prazo deste documento, a viajar desacompanhado ou apenas com um dos pais, indistintamente. Res. CNJ 131/11, Art. 13.

DATA DE EXPEDIÇÃO / DATE OF ISSUE: 24 JUN/JUN 2016

AUTORIDADE / AUTHORITY: SR/DPF/GO

VÁLIDO ATÉ / DATE OF EXPIRY: 23 JUN/JUN 2021

P<BRAMENDANHA<DOS<SANTOS<<JULIA<<<<<<<<<<<<<
FR051010<1BRA0807184F2106238<<<<<<<<<<<<<<02


01012017
Para uso das autoridades brasileiras
Reservé aux autorités brésiliennes
For the use of Brazilian authorities
Para uso de las autoridades brasileñas
4
PASSPORT
INFORMAÇÕES PARA O TITULAR
Este passaporte é propriedade da República Federativa do Brasil e qualquer tentativa de adulteração o tornará inválido.
O extravio – perda, roubo ou destruição – do passaporte constitui fato grave e deve ser comunicado imediatamente à autoridade policial e à Embaixada ou ao Consulado do Brasil, conforme o caso. Para isso, recomenda-se que o titular copie as informações da página 2. Se o passaporte for entregue a pessoa ou serviço que não pertença ao Governo Brasileiro (por exemplo, para obtenção de visto, compra de passagem, etc.) e não for restituído, o titular deve considerá-lo como extraviado. A concessão de novo passaporte em substituição ao extraviado depende de investigação.
Apenas o titular do passaporte poderá usá-lo. A utilização fraudulenta ou a cessão a outra pessoa constituem crimes, pela lei brasileira. Para ressalvar sua responsabilidade, o titular deve assinar seu passaporte, no local previsto na página 3, imediatamente após recebê-lo. Este passaporte só é válido com a assinatura do titular, salvo em caso de incapacidade.
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Consulte / Consultez / Consult / Consulte
www.portalconsular.mre.gov.br ou www.pf.gov.br
5


VISTOS VISAS
VISA
UNITED STATES OF AMERICA
Issuing Post Name
BRASILIA
Control Number
20171315480003
Surname
MENDANHA DOS SANTOS
Given Name
JULIA
Visa Type /Class
R B1/B2
Passport Number
FR051010
Sex
F
Birth Date
18JUL2008
Nationality
BRZL
Entries
M
Issue Date
15MAY2017
Expiration Date
11MAY2027
1010
Annotation
M1402886
* *
VNUSAMENDANHA<DOS<SANTOS<<JULIA<<<<<<<<<<<<
FR051010<1BRA0807184F2705114B3BRA0KRS1021409

VISTOS VISAS
VISTOS VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS 12 VISAS
VISTOS 13 VISAS

VISTOS
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VISTOS
VISAS


VISTOS VISAS
VISTOS VISAS
DEPARTMENT OF HOMELAND SECURITY • U.S. CUSTOMS AND BORDER PROTECTION
ADMITTED
SFR
JUN 21 2017
DEC 20 2017
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4312

VISTOS
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VISTOS
VISAS

VISTOS 21 VISAS
VISTOS 20 VISAS

VISTOS VISAS
VISTOS VISAS

VISTOS 25 VISAS
VISTOS 26 VISAS

VISTOS 97 VISAS
VISTOS 96 VISAS

VISTOS
VISAS
VISTOS
VISAS

VISTOS 30 VISAS
VISTOS 31 VISAS

Os campos abaixo devem ser preenchidos pelo titular.
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ENDEREÇO DO TITULAR / ADRESSE DU TITULAIRE
BEARER'S ADDRESS / DIRECCIÓN DEL TITULAR

Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

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Nome / Name: _____
Endereço / Address: _____
Cidade / City: _____
Estado / State: _____
País / Country: _____
Telefone / Phone: _____

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Não dobre, perfure ou exponha este documento a temperaturas elevadas, umidade e luz excessivas, campos eletromagnéticos intensos ou substâncias químicas.
Além do respeito e dos cuidados normais dispensados a um passaporte, tenha com este documento as mesmas precauções que teria com qualquer outro dispositivo eletrônico portátil, assegurando que ele não ficará úmido, dobrado ou amassado. Abusos podem afetar adversamente a operação do chip e reduzir sua utilidade para o titular e para o controle de fronteira.

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Símbolo Internacional do Passaporte Eletrônico

CASA DA MOEDA DO BRASIL

Judiciary of the State of Goiás
Digital Oversight Seal
01981601160917128606466

Check at: http://extrajudicial.tjgo.jus.br/selo

FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

BIRTH CERTIFICATE

Name

JÚLIA MENDANHA DOS SANTOS

Registration

024919 01 55 2008 1 02004 176 0410976 61

Date of birth in full	Day	Month	Year
JULY EIGHTEENTH, TWO THOUSAND EIGHT	18	07	2008

Time of birth	City of Birth / State
12:20 PM	Goiânia - Goiás

City of Registration / State	Place of birth	Sex
Goiânia - Goiás	HOSPITAL DA MULHER (Women's Hospital)	Female

Filiation

EDSON ANTONIO MENDANHA JUNIOR
CYNARA DOS SANTOS MENDANHA

Grandparents

Paternal: **Edson Antonio Mendanha** and **Maria do Carmo Silva**
Maternal: **Neila dos Santos**

Twin(s)	Name and registration number of twin(s)
NO	

Date of registration in full	Live birth registration number
JULY TWENTY-FOURTH, TWO THOUSAND EIGHT	62683782

Notes / Annotations
No record

Fees:	R$ 29.16
Judicial Fee:	R$ 12.25
ISS:	R$ 1.46
Total:	R$ 42.87

ANTONIO DO PRADO REGISTRY OFFICE

2nd Civil Registry and Notary Office
Rua Geraldo Ney, corner of Avenida 24 de Outubro, No. 156, Campinas Sector, Goiânia - Goiás
ZIP Code: 74.515-020 Phone: (62) 3233-0055
www.cartorioantoniodoprado.com.br

The content of this certificate is true. I certify.
Goiânia / Goiás
March 21, 2016

----//signature//----

POLLYANE DIOGO GONÇALVES ROQUE
DEPUTY REGISTRAR AND CLERK

I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.


_____ Date: September 2, 2025.

Poder Judiciário do Estado de Goiás
Selo Digital de Fiscalização
01981601160917128606466
Consulte: http://extrajudicial.tjgo.jus.br/selo

REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

CERTIDÃO DE NASCIMENTO

Nome

JÚLIA MENDANHA DOS SANTOS

Matrícula

024919 01 55 2008 1 02004 176 0410976 61

Data de nascimento por extenso	Dia	Mês	Ano
DEZOITO DE JULHO DE DOIS MIL E OITO	18	07	2008

Hora	Município de Nascimento / UF
12:20	Goiânia - GO

Município de Registro/UF	Local de Nascimento	Sexo
Goiânia - GO	HOSPITAL DA MULHER	Feminino

Filiação

EDSON ANTONIO MENDANHA JUNIOR
CYNARA DOS SANTOS MENDANHA

Avós

Paternos: **Edson Antonio Mendanha** e **Maria do Carmo Silva**.
Materna: **Neila dos Santos**.

Gêmeo(s)	Nome e matrícula do(s) gêmeo(s)
NÃO	

Data do registro de nascimento por extenso	DNV (Declaração de nascido vivo)
VINTE E QUATRO DE JULHO DE DOIS MIL E OITO	62683782

Observações / Averbações

Sem Informação

Emolumentos:	29,16
Taxa Judiciária:	12,25
ISS:	1,46
Total:	42,87

CARTÓRIO ANTÔNIO DO PRADO

2º Registro Civil e Tabelionato de Notas
Rua Geraldo Ney, esquina com Av. 24 de Outubro, nº156, Setor Campinas, Goiânia-GO
CEP: 74.515-020 Fone: 62*3233-0055
www.cartorioantoniodoprado.com.br

O conteúdo da certidão é verdadeiro. Dou Fé.
Goiânia / GO
21 de março de 2016

POLLYANE DIOGO GONÇALVES ROQUE
SUB-OFICIAL E ESCREVENTE

For: **JULIA MENDANHA DOS SANTOS**

U.S. Customs and Border Protection
Securing America's Borders

Most Recent I-94

Note to employers, local, state or federal agency granting benefits:
Please visit the CBP I-94/I-95 Website and click on the tab for "Get Most Recent I-94/I-95" to perform a search for the applicant to confirm that the biographic and travel information displayed on this I-94/I-95 printout matches the "Get Most Recent I-94/I-95" returned results for this applicant. Reference the CBP I-94/I-95 Website FAQs.

Admission I-94 Record Number: 45133465885

Arrival/Issued Date: 2017 June 21

Class of Admission: B2

Admit Until Date: 2017 December 20

Details provided on the I-94 Information form:

Last/Surname: MENDANHA DOS SANTOS

First (Given) Name: JULIA

Birth Date: 2008 July 18

Document Number: FR051010

Country of Citizenship: Brazil

- Effective April 26, 2013, DHS began automating the admission process. An alien lawfully admitted or paroled into the U.S. is no longer required to be in possession of a preprinted Form I-94/I-95. A record of admission printed from the CBP website constitutes a lawful record of admission. See 8 CFR § 1.4(d).
- What to do if someone requests your admission info: If an employer, local, state or federal agency requests admission information, present your admission (I-94/I-95) number along with any additional required documents requested by that employer or agency.
- For security, close your browser after retrieving your I-94/I-95 number.

OMB No. 1651-0111
Expiration Date: 01/31/2026

View Travel History

Travel history includes up to 100 arrivals and departures spanning the last ten years

Travel History Results

Document Number: **FR051010**

Document Country of Issuance: **Brazil**

Row	DATE	TYPE	LOCATION
1	2017-06-21	Arrival	SFR

OMB No. 1651-0111 Expiration Date: 01/31/2026

Exhibit 4 - Vinicius Ferreira da Costa and Cynara dos Santos’s Marriage Certificate

CERTIFICATION OF VITAL RECORDS

MC
#: 202302274009501
Fees: $0.00
02/27/2023 04:19:07 PM
Receipt #: 1647330
Filed By: BAINUMJ
LYNN MARIE GOYA
CLARK COUNTY CLERK

STATE OF NEVADA
MARRIAGE CERTIFICATE

No: 202302230008718

STATE OF NEVADA } SS:
COUNTY OF CLARK }

This is to certify that the undersigned, Reverend Domonic Johnson,
(print name of official performing marriage)

did on the 23rd day of the month of February of the year 2023,

at Chapel of the flowers 1717 S. Las Vegas Blvd.,
(name and address of location where marriage performed)

Las Vegas, Nevada, with their mutual consent and witnessed in the
(city)

presence of x Sirley Ferreira Laisa Santos, join in lawful wedlock:
(print name of witness or witnesses)

CYNARA DOS SANTOS of **PINOLE, CALIFORNIA** born **10/14/1987**, and

VINICIUS FERREIRA DA COSTA of **PINOLE, CALIFORNIA** born **09/25/1988**.

UNITED STATES OF AMERICA OF THE SEAL COUNTY OF CLARK STATE OF NEVADA

Signature of Official Performing Marriage (Black Ink Only)

REV. DOMONIC JOHNSON
Print Name and Title of Official

1156 SHADES END AVE.
Address of Official Performing Marriage

N. LAS VEGAS, NV 89081
City, State and Zip Code

201602052028596
Nevada Certificate of Permission Officiant ID Number

Lynn Marie Goya

Lynn Marie Goya, County Clerk

Couple's Mailing Address: **893 FOURTH AVE, A, PINOLE, CALIFORNIA 94564**

This Certificate must be **typewritten or printed in black ink** and delivered within ten (10) calendar days by the Marriage Officiant to the Clark County Clerk's Office, **500 S. Grand Central Parkway, 1st Floor, Las Vegas, Nevada 89155**

1969073
CERTIFIED COPY
DOCUMENT ATTACHED IS A TRUE AND CORRECT COPY OF THE DOCUMENT OR DATA ON FILE MINUS ANY REDACTED PORTIONS

Mar 31 2023

Lynn Marie Goya
CLERK

Patent #5,636,874

C2831509

TouchSafe®

This copy is not valid unless prepared on *SafeImage*™ paper, impressed with the raised seal of Clark County.

KEEP DOCUMENT IN A SAFE PLACE
ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Exhibit 5 - Cynara dos Santos's Divorce Certificate

Judiciary Branch State of Goiás
Electronic Inspection Seal

06831212171342091002044

Check this seal at
http://extrajudicial.tjgo.jus.br/selo

FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

Book B-011 Page 189 Entry 002209

MARRIAGE CERTIFICATE WITH DIVORCE ANNOTATION EDSON ANTONIO MENDANHA JUNIOR CYNARA DOS SANTOS

Registration
025734 01 55 2006 2 00011 189 0002209 20

Full names prior to marriage, dates and places of birth, nationality, and parentage of the spouses

EDSON ANTONIO MENDANHA JUNIOR, born on the 21st of May 1985, from Marabá-PA, Brazilian, single, salesman, son of EDSON ANTONIO MENDANHA and MARIA DO CARMO SILVA, resident and domiciled at Av. Perimetral, Block 08, Lot 20, Padre Pelágio, in Goianira-GO**

CYNARA DOS SANTOS, born on the 14th of October 1987, from Goiânia-GO, Brazilian, single, administrative assistant, daughter of NEILA DOS SANTOS, resident and domiciled at Av. Perimetral, Block 08, Lot 20, Padre Pelágio, in Goianira-GO**

DATE OF MARRIAGE REGISTRATION (IN FULL)	Day	Month	Year
March eighteen, two thousand six	18	03	2006

Marriage Property System
Partial Community of Property

Name that each spouse started using (in case of changes)
CYNARA DOS SANTOS MENDANHA

Annotations/Notations

Marriage solemnized in this Registry, before Justice of the Peace Maria Abadia Ribeiro d'Ávila. The following ANNOTATION is recorded in the referred Entry: By mandate of Dr. SIVAL GUERRA PIRES, Honorable Judge of the 3rd Family and Succession Court of the District of Goiânia-GO, extracted from case files No. 4135, I annotate the **Consensual Divorce** of the couple, requested by the SPOUSES, decreed by judgment on 01/08/2013, he will continue to use the name **EDSON ANTONIO MENDANHA JUNIOR**, and she will resume using the name **CYNARA DOS SANTOS**, annotated on 09/15/2014. **

Name of the Registry Office
Civil Registry and 3rd Notary Public Office

Registrar
João das Graças Ribeiro

City / State
Goiânia – State of Goiás

Address
Av. Rio de Janeiro, 373 – Centro
ZIP Code: 75.370-000 – Phone: (62) 3516-1382

The content of this certificate is true. I certify.
Goiânia-GO, September 15, 2014.

----//signature//----
Pollyana Pires Gentile
Clerk

Civil Registry Stamp

I, André Vinícius Inacio Penna Mello, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.

_____ **Date: September 2, 2025.**

Poder Judiciário Estado de Goiás
Selo Eletrônico de Fiscalização

06831212171342091002044

Consulte esse selo em
http://extrajudicial.tjgo.jus.br/selo

REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

Livro B-011 | Folha 189 | Termo 002209

CERTIDÃO DE CASAMENTO COM AVERBAÇÃO DE DIVÓRCIO

EDSON ANTONIO MENDANHA JUNIOR
CYNARA DOS SANTOS

Matrícula

025734 01 55 2006 2 00011 189 0002209 20

Nomes completos de solteiro, datas e locais de nascimento, nacionalidade e filiações dos cônjuges

EDSON ANTONIO MENDANHA JUNIOR, nascido aos 21 de maio de 1985, natural de Marabá-PA, de nacionalidade brasileira, solteiro, vendedor, filho de EDSON ANTONIO MENDANHA e de MARIA DO CARMO SILVA, residente e domiciliado na Av. Perimetral, Qd. 08, Lt. 20, Padre Pelágio, em Goianira-GO ••

CYNARA DOS SANTOS, nascida aos 14 de outubro de 1987, natural de Goiânia-GO, de nacionalidade brasileira, solteira, assitente administrativa, filha de NEILA DOS SANTOS, residente e domiciliada na Av. Parimetral, Qd. 08, Lt. 20, Padre Pelágio, em Goianira-GO ••

Data do registro do casamento (por extenso)	Dia	Mês	Ano
Dezoito de março de dois mil e seis ••	18	03	2006

Regime de bens do casamento
Comunhão Parcial de Bens ••

Nome que cada um dos cônjuges passou a utilizar (quando houver alteração)
CYNARA DOS SANTOS MENDANHA ••

Observações / Averbações

Casamento celebrado neste Ofício, perante o Juíza de Paz Juíza de Paz Maria Abadia Ribeiro d'Ávila. Consta do referido Assento a seguinte AVERBAÇÃO: Por mandado do Dr.SIVAL GUERRA PIRES M.M. Juiz de Direito da 3ª Vara de Família e Sucessões da Comarca de Goiânia-GO, extraído dos autos nº 4135 averbo o **Divórcio Consensual**, do casal, requerido pelo CASAL, decretado por sentença em 08/01/2013, ele continuará a usar o nome de **EDSON ANTONIO MENDANHA JUNIOR**, voltando ela a usar o nome de **CYNARA DOS SANTOS**, averbado no dia 15/09/2014. ••

Nome do Ofício
Registro Civil e 3º Tabelionato de Notas

Oficial Registrador
João das Graças Ribeiro

Município / UF
Goianira - Estado de Goiás

Endereço
Av. Rio de Janeiro, 373 - Centro
CEP: 75.370-000 - Fone: (62) 3516-1382

O conteúdo da certidão é verdadeiro. Dou fé.

Goianira-GO, 15 de setembro de 2014.

Pollyana Pires Gentile
Escrevente

REG. CIVIL E TAB. DE NOTAS - João das Graças Ribeiro Oficial - GOIANIRA-GO

CASA DA MOEDA DO BRASIL

Exhibit 6 - Vinicius Ferreira da Costa's Declaration with English translation

Personal Statement of Vinícius Ferreira da Costa

My name is Vinícius Ferreira da Costa, and I arrived in the United States with my wife, Cynara, and Julia, my wife's daughter and my daughter at heart, on June 20, 2017. As soon as I arrived, I got a job in the construction industry, where I worked until the end of that year. It was an extremely demanding job, requiring a lot of physical effort, and I ended up losing a significant amount of weight during that period. When the rainy season arrived, later in the year, which is common in the region where I lived, work slowed down, and I had to look for another opportunity.

That was when I saw an advertisement in a WhatsApp group, posted by a Brazilian named Gustavo, who said he needed someone to demolish a large boat. He mentioned that he worked at a marina and seemed to be in charge of the place. The owner of this marina was named Chris Welsh. I worked on this job for about a week until the boat was completely demolished. After that, I returned to the construction industry, where I stayed for a few months.

About four to five months later, Gustavo contacted me again, asking if I would be interested in working full-time at the marina. He introduced me to the owner, Chris, describing him as a very influential and important man who could help me obtain documents in the country in the future. Gustavo said I would earn $15 per hour, and, believing in this possibility, I accepted the job.

I started working at Sugar Dock Marina, and on my first day, I met Santiago, nicknamed *Max*, with whom I began working closely. Shortly after, Max started working in the marina's office. Chris told me that he had secured a large contract involving a boat called Chayenne, an old racing catamaran that had been converted into a vessel for transporting submarines and conducting ocean cleanups. He said he needed more people for this job and asked me for referrals. I recommended a friend named Brener, who also started working there. Over time, another employee named Ramiro, who came from Mexico, also began working at the marina.

One of the first dangerous jobs I carried out was precisely with the Cheyenne boat. We needed to remove the diesel tanks from the boat, which were located inside a compartment known as the *cave*. The tank was leaking, and the area became filled with diesel. A colleague named Alfredo (also called Ramiro) and I went in to remove the tanks, and we came out completely soaked in fuel. That experience stood out to me as the first job I realized was completely unsafe and wrong.

At first, I was impressed by the size of the boats and the environment, but gradually I realized that something was very wrong there. I also noticed the difference in treatment between me and Max: he was freer, had privileges, while I was always monitored and treated with suspicion. The only difference between us was that he had documents and I did not.

Chris promised growth and said that he would protect us from immigration authorities, which made me believe I was in a safe place. We knew that immigration officials rented boats at the marina, and because of that, we felt "protected," but it was only an illusion. This idea gave me a sense of



security, and I truly believed I was in an important place that could offer me stability and a chance for legal status.

My ideal workday would start at 8 a.m. and end around 5:30/6 p.m., but I never had a fixed quitting time. We did everything: cleaning the marina, boat maintenance, sanding, and even cleaning diesel tanks. Many times, these tasks were performed on boats that didn't even belong to the marina, which made me suspect that Chris was lending our workforce to others.

I worked about 60 hours per week, never receiving overtime pay. Payment was biweekly, and when I asked for a raise, I was told that my English wasn't good and that, since I didn't have documents, I should consider myself lucky to have a job. Out of fear of losing the job, I accepted performing risky tasks, even when I knew there was a danger to my health and safety. We were also misled by promises of future salary increases.

On one occasion, a metal dock sank, and Chris, who was also a diver, tied air bags and asked us to inject air with a compressor until the dock rose again. We did this without any proper training. Another time, he used a crane, even without a license to operate it, and ordered us to remove a boat from the water, a dangerous task for which we had no preparation.

The most dangerous work I did was cleaning diesel tanks on a heavily rusted metal boat. The tank was about 30 feet deep, and we entered with pressure machines to clean the inner walls. The pump was at the bottom, pumping out water and debris, and in the end, we had to remove the remaining diesel and rust with buckets. We would get filthy and soaked with diesel mixed with rust. I worked on this task for several days, alongside Marcos and Brener, practically without protective equipment, sometimes using only a simple mask.

Over time, I began to fear the consequences of these tasks. The smell and constant contact with diesel worried me, and I knew it could affect my health in the future. Even so, I felt I had to continue, because I believed that by staying loyal to the work, Chris would keep his promise to help with my legal status.

One of the most dangerous boats was the Cheyenne, where we performed maintenance in the area with the mast adapted to lower submarines. It was common to work at high places without proper safety measures, often using only a rope or an improvised seat. On another boat, the Hydroptere, I had to climb to anchor the crane, and I remember it was one of the most tense moments, as Chris operated the equipment without being trained.

During the most dangerous and strenuous jobs, precisely those for which we had no preparation or training, Chris would often insult us whenever something went wrong. A small mistake was enough for him to lose control and start yelling, calling us idiots and incompetent. I remember one situation when we were moving a container behind the office in a very tight space and almost dropped it. He became furious, shouting orders aggressively and humiliating us in front of everyone. Even with my limited English, I perfectly understood the tone and meaning of the insults.



This type of behavior was constant and made the work environment tense and exhausting, especially because we were always afraid of making mistakes and being mistreated again.

Chris once asked Brener and me to clean a boat called Gardina, which was out of the water. While cleaning, we found firearm ammunition inside the boat. This terrified me, because I knew that Chris owned weapons and seemed to use them as a form of intimidation.

In another significant incident, I had to travel to Newport Beach at Chris's request. We had worked all day when, without any prior notice, he told me I needed to drive a small truck there, transporting materials from the *Cheyenne* boat and his personal belongings. The trip was about seven hours long, and I arrived around one or two in the morning. That is, I had worked all day and still faced hours on the road, without a shower or food, just to meet Chris's demands. When I finally made contact so he could open the door, he told me to sleep in one of the rooms in the house. Upon entering, I noticed the room had a basket full of long guns. I was scared, not knowing what to do, but I was exhausted and ended up sleeping there. The next morning, we unloaded everything, and I still had to drive back to the marina, working another full day. This type of situation happened more than once, and I never felt safe. I did not want to be near weapons, but I had no choice: it was either obey or risk my job and my family's livelihood.

In another incident, I severely injured my hand while cutting a rope with a pocket knife. The cut was deep and bled heavily. My colleagues wanted to take me to the hospital, but James (in charge of overseeing the boat renovation) did not allow it, saying I had no insurance and that if I went, I would have to pay out of pocket. He also mentioned that, as an immigrant, this could cause me problems. I applied an improvised bandage, covered it with a glove, and continued working. Later, I bought a "butterfly" bandage at a pharmacy and treated the wound myself. This situation left me feeling humiliated and desperate, but I continued out of fear of losing my job and with the hope of regularizing my status and that of my family.

On another occasion, I recall an incident involving a beaver found in the water, which Alfredo (also called Ramiro) removed. The body was already in a state of decomposition, swollen, and dangerous to handle. Chris asked us to preserve the beaver's tail, and even without knowing the exact purpose, we followed his instructions. We took the animal to an isolated spot in the marina, in the old tool container, and carefully, using gloves, cut off the tail. We placed the tail in a box lined with salt to protect it, while the body remained in place. The entire process was risky due to the condition of the animal, but we followed Chris's orders.

During the time I worked at the marina, I suffered from severe anxiety. I slept poorly, was constantly afraid, and felt trapped. I even took on two jobs to try to make ends meet: I drove for Uber from 4 a.m. to 10 a.m., and then went straight to the marina until 7 p.m.

At a certain point, Gustavo, the man who recruited me, disappeared. I recall that one day a police car showed up with his partner inside, and later he said that she had made up a lie to obtain



documents. Shortly after, he vanished, deleted all social media accounts, and, according to rumors, fled back to Brazil. Since then, I have been afraid to return, as I feel I could face retaliation.

With the 2020 pandemic, the marina had to suspend its activities, and we were all left without work. I returned to the construction industry, where I still work today. Chris passed away from a heart attack in March 2021, and the marina came under the management of his widow.

Today I understand that living through that period was like being trapped in a great illusion. I truly believed that if I continued obeying and working hard, I would be able to regularize my status and have a stable life. I thought all the suffering would be temporary, that those promises of help were sincere, and that patience alone would make things better. But, in reality, I now realize that it was all part of a cycle of manipulation. They kept us there precisely because of that hope, making us work for almost nothing, exhausted, and afraid of losing the little we had. The promise of "help with paperwork" was what held us captive, what made us accept any condition, no matter how unfair or dangerous it was.

Today I see that it was a form of control: while we believed we were moving toward a better future, in reality, we were being exploited, living through horrible moments, often without rest, without safety, and without knowing when it would all end. I carried alone the burden of supporting my family, believing I was doing the best for them, when, in fact, I was slowly destroying myself: physically and emotionally. The pandemic, in a way, was a liberation because it made me see the truth: I was not building a future; I was trapped in a lie that prevented me from moving forward and fighting for something truly worthy.

During the time I was in the United States, I had two children, who were born here and are American citizens. My dream today is to be able to give them the best possible future, as well as bring stability to our entire family.

I declare, under penalty of perjury, that all the information above is true and accurately reflects my experience.



I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



_____ Date: October 30, 2025.

Declaração Pessoal de Vinícius Ferreira da Costa

Meu nome é Vinícius Ferreira da Costa, e cheguei aos Estados Unidos, juntamente com minha esposa, Cynara, e Julia, filha da minha esposa e minha filha de coração, no dia 20 de junho de 2017. Assim que cheguei, consegui um emprego na área de construção civil, onde trabalhei até o final daquele ano. Era um serviço extremamente pesado, exigia muito esforço físico, e acabei perdendo bastante peso nesse período. Quando chegou a época de chuvas, mais para o final do ano, que é comum na região onde eu morava, o trabalho diminuiu e eu precisei procurar outra oportunidade.

Foi então que vi um anúncio em um grupo de WhatsApp, feito por um homem chamado Gustavo, brasileiro, que dizia precisar de alguém para demolir um barco grande. Ele mencionou que trabalhava em uma marina e parecia ser o encarregado do local. O dono dessa marina se chamava Chris Welsh. Trabalhei por cerca de uma semana nesse serviço até concluir a demolição do barco. Depois disso, voltei para a construção civil, onde permaneci por alguns meses.

Cerca de quatro a cinco meses depois, Gustavo entrou novamente em contato comigo perguntando se eu teria interesse em trabalhar fixo na marina. Ele me apresentou o dono, Chris, como um homem muito influente e importante, que poderia me ajudar a conseguir documentos no país no futuro. Gustavo disse que eu ganharia US$15 por hora, e, acreditando nessa possibilidade, aceitei o trabalho.

Comecei a trabalhar na marina Sugar Dock, e no meu primeiro dia conheci Santiago, apelidado de *Max*, com quem passei a trabalhar junto. Pouco tempo depois, Max passou a trabalhar no escritório da marina. Chris me contou que havia conseguido um contrato grande com um barco chamado Chayenne, um catamarã de corrida antigo que havia sido transformado em um barco para transportar submarinos e realizar limpezas oceânicas. Ele disse que precisava de mais pessoas para esse trabalho e me pediu indicações. Indiquei um amigo chamado Brener, que também começou a trabalhar lá. Com o tempo, outro funcionário chamado Remiro, que veio do México, também passou a trabalhar na marina.

Um dos primeiros serviços perigosos que realizei foi justamente com o barco Cheyenne. Precisávamos retirar os tanques de diesel do barco, que ficavam dentro de um compartimento conhecido como *caverna*. O tanque estava vazando, e o local ficou cheio de diesel. Eu e um colega chamado Alfredo (também chamado Ramiro) entramos para fazer a retirada dos tanques, e saímos completamente encharcados de combustível. Aquilo me marcou como o primeiro serviço que percebi ser totalmente inseguro e errado.

No começo, fiquei encantado com o tamanho dos barcos e com o ambiente, mas aos poucos percebi que havia algo muito errado ali. Notei também a diferença no tratamento entre mim e Max: ele era mais livre, tinha privilégios, enquanto eu era sempre vigiado e tratado com desconfiança. A única diferença entre nós era que ele tinha documentos e eu não.

Chris prometia crescimento e dizia que nos protegia da imigração, o que me fazia acreditar que estava em um lugar seguro. Sabíamos que oficiais de imigração alugavam barcos na marina e, por isso, estávamos "protegidos", mas eram apenas ilusões. Essa ideia me deu

uma sensação de segurança, e eu realmente acreditava que estava em um local importante, que poderia me oferecer estabilidade e uma chance de regularização.

Meu dia ideal de trabalho começava às 8am e terminava por volta das 5:30/6pm, mas eu não tinha um horário fixo de saída. Fazíamos de tudo: limpeza da marina, manutenção de barcos, lixamento e até limpeza de tanques de diesel. Muitas vezes, esses serviços eram feitos para barcos que nem pertenciam à marina, o que me fazia suspeitar de que Chris emprestava nossa força de trabalho para outros.

Eu trabalhava cerca de 60 horas por semana, sem nunca receber hora extra. O pagamento era quinzenal, e quando pedi um aumento, me disseram que meu inglês não era bom e que, por não ter documentos, eu devia me considerar com sorte por estar empregado. Por medo de perder o trabalho, aceitei realizar tarefas arriscadas, mesmo quando sabia que havia risco à minha saúde e segurança. Éramos iludidos com futuros aumentos de salário também.

Em uma ocasião, um dock de metal afundou, e Chris, que também era mergulhador, amarrou bolsas de ar e pediu que injetássemos ar com um compressor até o dock subir novamente. Fizemos isso sem nenhum treinamento adequado. Outro dia, ele usou um guindaste, mesmo sem licença para operá-lo, e nos mandou retirar um barco da água, um serviço perigoso e para o qual não tínhamos qualquer preparo.

O trabalho mais perigoso que fiz foi a limpeza de tanques de diesel em um barco metálico muito enferrujado. O tanque tinha cerca de 30 pés de profundidade, e entrávamos com máquinas de pressão para limpar as paredes internas. A bomba ficava no fundo, bombeando água e sujeira para fora, e no final precisávamos retirar o resto de diesel e ferrugem com baldes. Ficávamos imundos e encharcados com diesel misturado com ferrugem. Trabalhei nesse serviço por vários dias, junto com Marcos e Brener, praticamente sem equipamento de proteção, às vezes, apenas uma máscara simples.

Com o tempo, comecei a temer pelas consequências desses serviços. O cheiro e o contato constante com o diesel me preocupavam, e eu sabia que aquilo poderia afetar minha saúde no futuro. Mesmo assim, eu precisava continuar, pois acreditava que, mantendo-me fiel ao trabalho, Chris cumpriria sua promessa de ajudar na minha regularização.

Um dos barcos mais perigosos era o Cheyenne, no qual fazíamos manutenção na área onde ficava o mastro adaptado para descer submarinos. Era comum trabalhar em locais altos, sem segurança adequada, muitas vezes apenas com uma corda ou uma cadeirinha improvisada. Em outro barco, o Hydroptere, precisei subir para ancorar o guindaste, e lembro que foi um dos momentos mais tensos, pois Chris operava o equipamento sem ser especializado.

Nos trabalhos mais perigosos e pesados, justamente aqueles para os quais não tínhamos qualquer preparo ou treinamento, Chris costumava nos insultar sempre que algo saía errado. Bastava um pequeno erro para ele perder o controle e começar a gritar, chamando-nos de idiotas e incompetentes. Lembro que, em uma dessas situações, estávamos movendo um contêiner para trás do escritório, em um espaço muito apertado, e quase o deixamos cair. Ele ficou furioso, gritando ordens em tom agressivo, nos humilhando na frente de todos. Mesmo com meu inglês limitado, eu entendia perfeitamente o tom e o

significado dos insultos. Esse tipo de comportamento era constante e tornava o ambiente de trabalho tenso e desgastante, especialmente porque estávamos sempre com medo de errar e sermos novamente destratados.

Chris me pediu, certa vez, que eu e Brener limpássemos um barco chamado Gardina, que estava fora da água. Enquanto limpávamos, encontramos munições de arma de fogo dentro do barco. Isso me deixou apavorado, porque sabia que Chris possuía armas e parecia usar isso como forma de intimidação.

Em outro episódio marcante, precisei viajar até Newport Beach a pedido de Chris. Tínhamos trabalhado o dia inteiro quando, sem aviso prévio, ele me disse que eu precisava dirigir um caminhão pequeno até lá, transportando materiais do barco *Cheyenne* e pertences pessoais dele. A viagem era longa, cerca de sete horas, e cheguei por volta de uma ou duas da manhã. Ou seja, trabalhei o dia inteiro e ainda enfrentei horas de estrada, sem banho e sem comida, apenas para atender às exigências de Chris. Quando finalmente consegui contato para que ele abrisse a porta, ele me mandou dormir em um dos quartos da casa. Ao entrar, percebi que o quarto tinha uma cesta cheia de armas longas. Fiquei assustado, sem saber o que fazer, mas estava exausto e acabei dormindo ali mesmo. Na manhã seguinte, descarregamos tudo e eu ainda precisei dirigir de volta para a marina, trabalhando mais um dia inteiro. Esse tipo de situação aconteceu mais de uma vez, e nunca consegui me sentir seguro. Eu não queria estar perto de armas, mas não tinha escolha: era obedecer ou colocar meu emprego e o sustento da minha família em risco.

Em outro episódio, me machuquei gravemente na mão ao cortar uma corda com uma faca de bolso. O corte foi profundo e sangrou bastante. Meus colegas quiseram me levar ao hospital, mas James (encarregado de comandar a reforma no barco) não permitiu, dizendo que eu não tinha seguro e que, se fosse, teria que pagar por conta própria. Ele ainda mencionou que, por ser imigrante, isso poderia me trazer problemas. Coloquei um curativo improvisado, cobri com uma luva e continuei trabalhando. Depois, comprei um curativo "borboletinha" em uma farmácia e tratei o ferimento sozinho. Essa situação me deixou humilhado e desesperado, mas continuei por medo de perder o emprego e a esperança de regularizar minha situação e da minha família.

Em outra ocasião, lembro de um incidente envolvendo um castor encontrado na água, que o Alfredo (também chamado de Ramiro) retirou. O corpo já estava em estado de decomposição, inchado e perigoso de manusear. Chris nos pediu para preservar a cauda do castor, e mesmo sem saber exatamente o propósito, seguimos suas instruções. Levamos o animal para um local isolado na marina, no antigo contêiner de ferramentas, e com cuidado, usando luvas, cortamos a cauda. Colocamos a cauda em uma caixa forrada com sal, protegendo-a, enquanto o corpo permanecia no local. Todo o processo era arriscado devido ao estado do animal, mas seguimos as ordens de Chris.

Durante o tempo que trabalhei na marina, sofri com muita ansiedade. Dormia mal, tinha medo constante e sentia-me preso. Cheguei a ter dois empregos para tentar equilibrar as contas: fazia Uber das 4h às 10h da manhã, e depois seguia direto para a marina até as 19h.

Em determinado momento, Gustavo, o homem que me recrutou, desapareceu. Lembro que um dia uma viatura policial apareceu com a companheira dele dentro, e depois ele disse

que ela tinha inventado uma mentira para conseguir documentos. Pouco tempo depois, ele sumiu, apagou todas as redes sociais e, segundo boatos, fugiu de volta ao Brasil. Desde então, tenho medo de retornar, pois sinto que posso sofrer retaliações.

Com a pandemia de 2020, a marina precisou interromper as atividades, e todos nós ficamos sem trabalho. Voltei para a construção civil, onde trabalho até hoje. Chris faleceu de infarto em março de 2021, e a marina passou a ser administrada pela viúva dele.

Hoje entendo que viver aquele período foi como estar preso em uma grande ilusão. Eu realmente acreditava que, se continuasse obedecendo e trabalhando duro, conseguiria me regularizar e ter uma vida estável. Achava que todo o sofrimento seria temporário, que aquelas promessas de ajuda eram sinceras e que bastava paciência para as coisas melhorarem. Mas, na verdade, percebo agora que tudo aquilo fazia parte de um ciclo de manipulação. Eles nos mantinham ali justamente por causa dessa esperança, trabalhando por quase nada, exaustos, com medo de perder o pouco que tínhamos. A promessa de "ajuda com os papéis" era o que nos prendia, o que fazia a gente aceitar qualquer condição, por mais injusta ou perigosa que fosse.

Hoje vejo que era uma forma de controle: enquanto acreditávamos que estávamos caminhando para um futuro melhor, na verdade estávamos sendo explorados, vivendo momentos horríveis, muitas vezes sem descanso, sem segurança, e sem saber quando tudo aquilo teria fim. Eu carregava sozinho o peso de sustentar minha família, acreditando que estava fazendo o melhor por eles, quando, na verdade, estava me destruindo aos poucos: física e emocionalmente. A pandemia, de certa forma, foi uma libertação, porque me fez enxergar a verdade: eu não estava construindo um futuro, estava preso a uma mentira que me impedia de seguir em frente e de lutar por algo realmente digno.

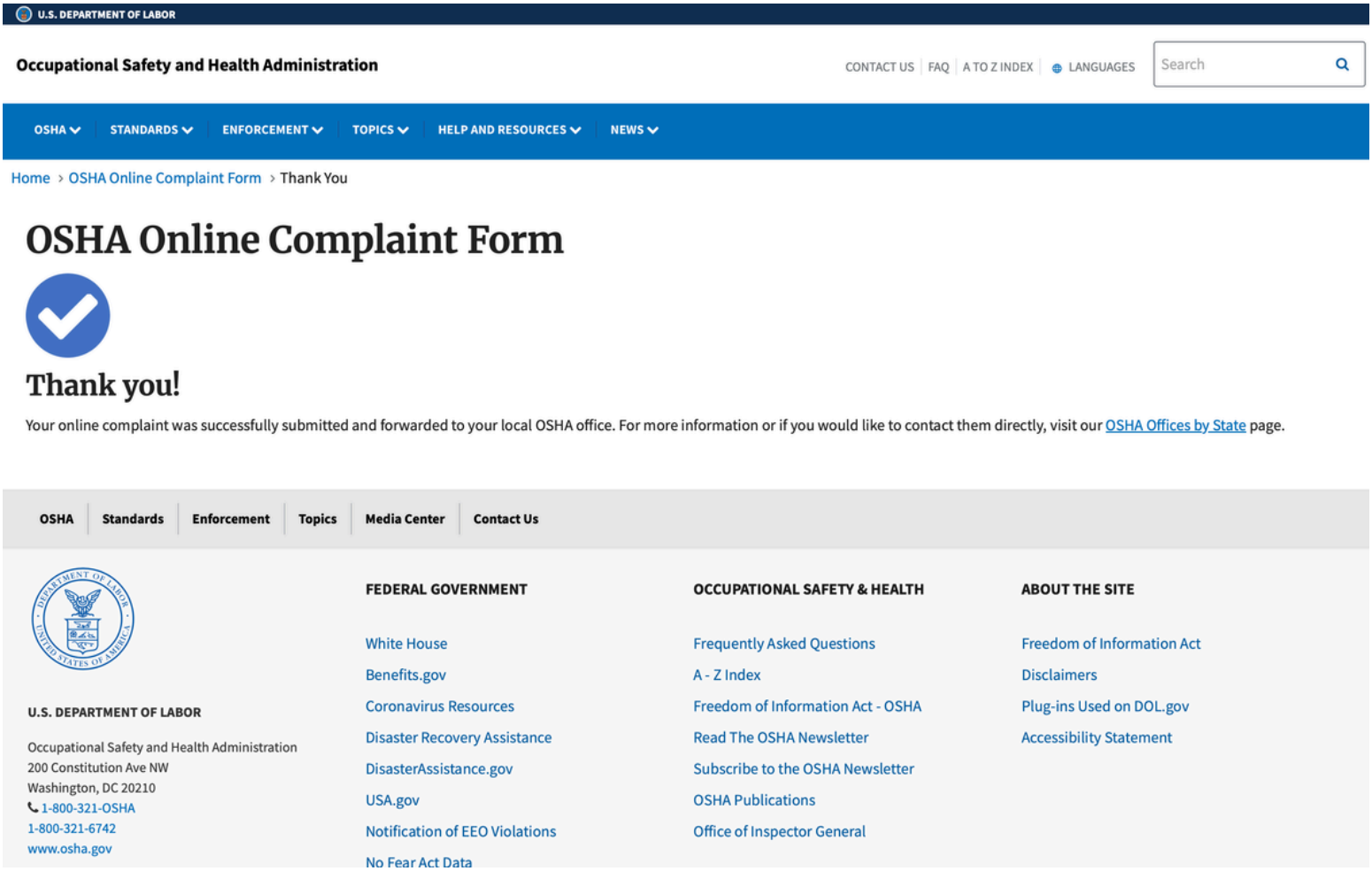
Durante esse período que estive nos Estados Unidos, tive dois filhos, que nasceram aqui e são cidadãos americanos. Meu sonho, hoje, é poder dar a eles o melhor futuro possível. Além de trazer estabilidade para toda a nossa família.

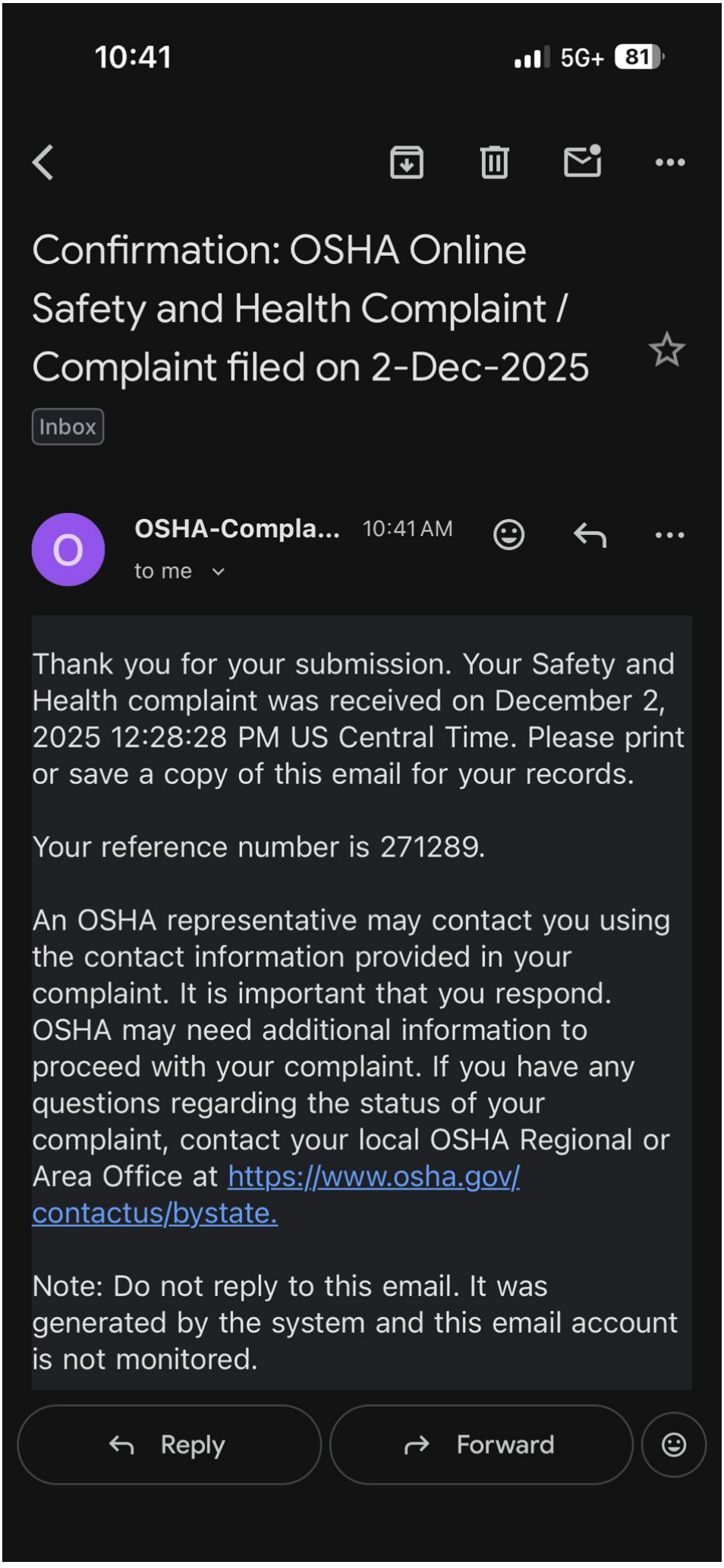
Declaro, sob pena de perjúrio, que todas as informações acima são verdadeiras e refletem com precisão a minha experiência.

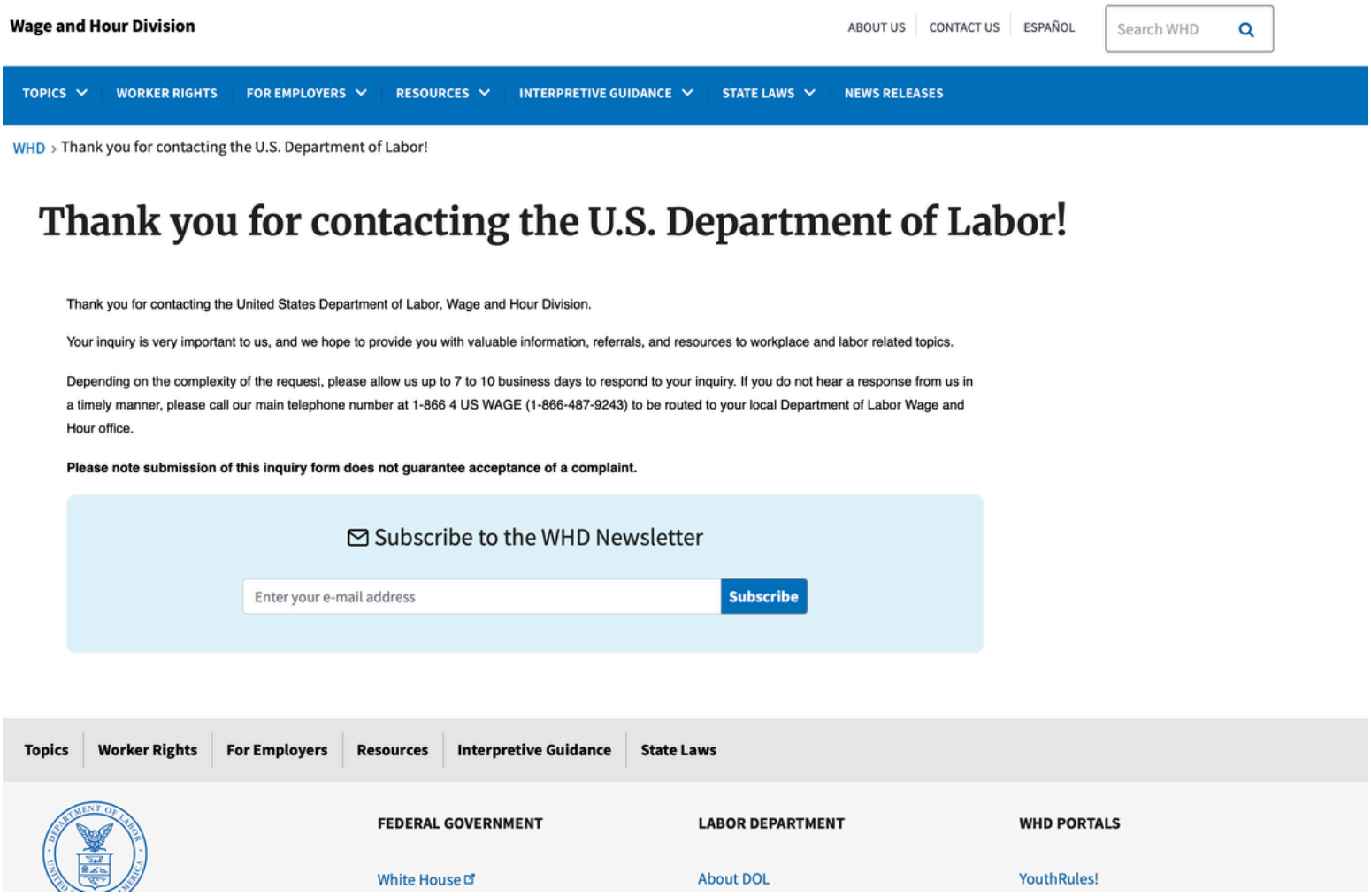
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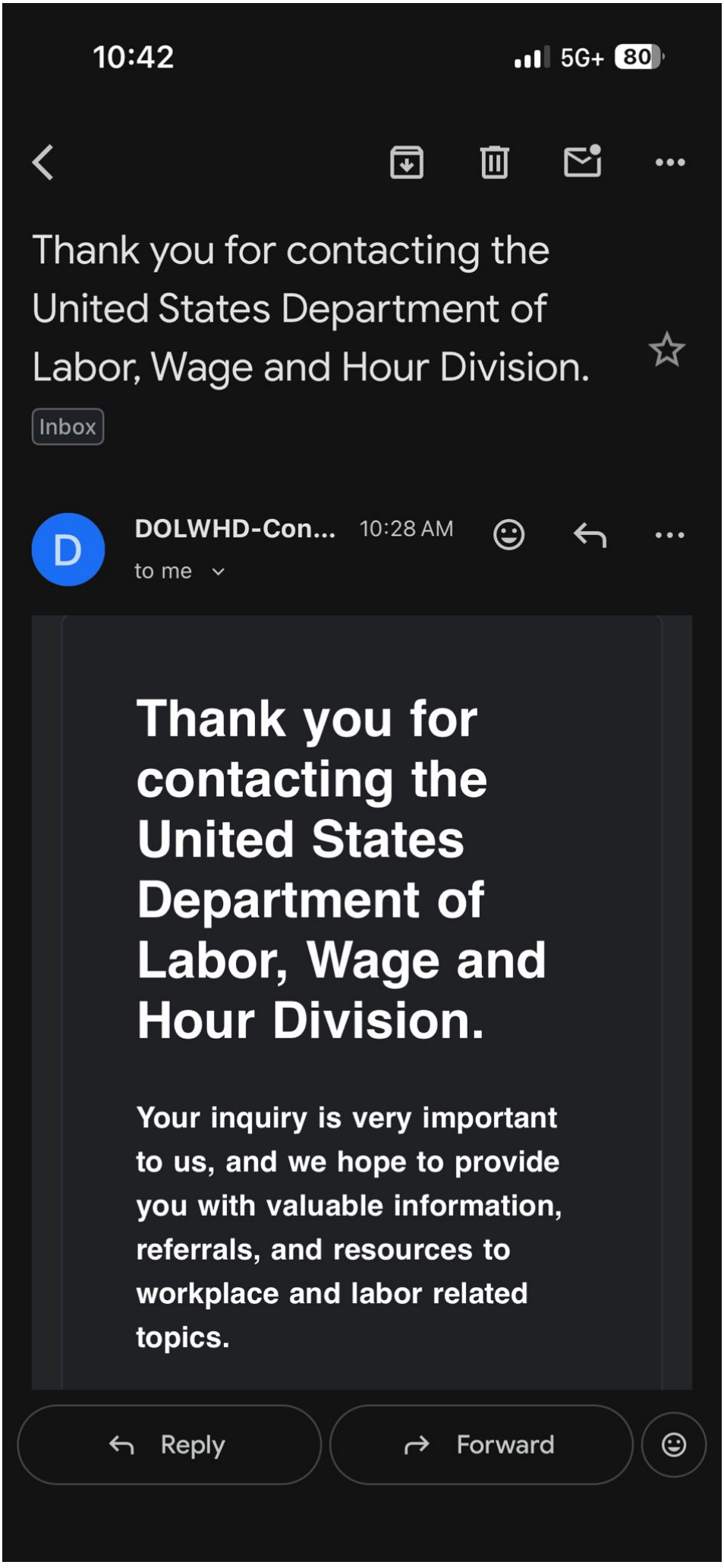
Vinícius Ferreira da Costa

Exhibit 7 - Eligibility Requirement: Compliance with Reasonable Requests for Assistance from Law Enforcement


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OSHA-Compla... 10:41 AM
to me
Thank you for your submission. Your Safety and Health complaint was received on December 2, 2025 12:28:28 PM US Central Time. Please print or save a copy of this email for your records.
Your reference number is 271289.
An OSHA representative may contact you using the contact information provided in your complaint. It is important that you respond. OSHA may need additional information to proceed with your complaint. If you have any questions regarding the status of your complaint, contact your local OSHA Regional or Area Office at https://www.osha.gov/contactus/bystate.
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WHD › Thank you for contacting the U.S. Department of Labor!
Thank you for contacting the U.S. Department of Labor!
Thank you for contacting the United States Department of Labor, Wage and Hour Division.
Your inquiry is very important to us, and we hope to provide you with valuable information, referrals, and resources to workplace and labor related topics.
Depending on the complexity of the request, please allow us up to 7 to 10 business days to respond to your inquiry. If you do not hear a response from us in a timely manner, please call our main telephone number at 1-866 4 US WAGE (1-866-487-9243) to be routed to your local Department of Labor Wage and Hour office.
Please note submission of this inquiry form does not guarantee acceptance of a complaint.
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Your inquiry is very important to us, and we hope to provide you with valuable information, referrals, and resources to workplace and labor related topics.
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YOUSA Law Firm

[redacted] <[redacted]@yousalaw.com>

Follow-Up Inquiry – Confirmation of Receipt and Status of Complaint

Sices, Bianca B - WHD <Sices.Bianca.B@dol.gov> 28 de janeiro de 2026 às 18:54
Para: "Shim, Jennifer T - WHD" <Shim.Jennifer@dol.gov>, "[redacted]@yousalaw.com" <[redacted]@yousalaw.com>

Hello Mr. Vitor,

Thank you for contacting the US Department of Labor, Wage and Hour Division.

Your client was reached out to by one of our San Jose District Office Technicians on December 3rd, 2025.

The Wage and Hour Division (WHD) enforces the federal minimum wage of $7.25 per hour, overtime pay, recordkeeping, and child labor requirements of the Fair Labor Standards Act (FLSA).

Unless specifically exempt, you have the right under federal law to receive overtime pay, or not less than 1.5 times your regular rate of pay, after 40 hours of work in a seven-day workweek. Federal law doesn't require overtime pay for work on Saturdays, Sundays, holidays, or regular days of rest unless overtime hours are worked on such days. For more information, visit our Overtime page. Please see elaws - Fair Labor Standards Act Advisor for commonly used exemptions.

Enforcement Through Legal Remedies: The FLSA allows the Department of Labor ("Department") or an employee to recover back wages and an equal amount in liquidated damages where minimum wage and overtime violations exist. Generally, **a two-year statute** of limitations applies to the recovery of back wages and liquidated damages. A three-year statute of limitations applies in cases involving willful violations. Remedies may be recovered through administrative procedures, litigation, and/or criminal prosecution. For more information, please visit our Digital_Reference_Guide_FLSA.pdf

The Wage & Hour Division cannot answer questions related to safety and health, or other job-related working conditions. If you have questions about these conditions, please contact the Occupational Safety and Health Administration. You can find their contact information at Contact Us | Occupational Safety and Health Administration.

The Wage & Hour Division cannot answer questions related to immigration. Please contact the US Citizenship and Immigration Services (USCIS). You can find their contact information at https://www.uscis.gov

Bianca Sices

Wage & Hour Technician

Wage & Hour Division

U.S. Department of Labor

Wage and Hour Division Intake Form

Contact:

I am a current or former worker

Vinicius Ferreira da Costa

893 4th ave #A
Pinole CA 94564
United States
(510) 253-9457
viniciusferreiracosta.vfc@gmail.com

Portuguese Brazilian is my preferred language
AFTER 4PM is the best time to reach me

Question/Concern:

I worked at Sugar Dock Marina in Richmond, CA, from April 2018 to March 2020 as an independent contractor (Form 1099). I did repairs, maintenance, cleaning, and mechanical work, often operating machines and boats without training or safety conditions. I worked around 60 hours per week, but never received overtime pay — only my regular $15/hour, about $1,300 every two weeks. Despite working long hours, including extra shifts, I was never paid for overtime. I was discriminated against for being undocumented, paid less than others, and threatened because of my status. The owner was Chris Welsh, who passed away in 2020. Today, his widow manages the marina. The job was dangerous — I rarely received protective gear and injured my hand on a boat without medical care. I didn't report before because I was told undocumented workers had no rights and I was afraid. I stayed because I was misled to believe

working there would help me with my immigration status.

Inquiry type:

- I wasn’t paid extra for working over 40 hours in week.
- My employer doesn’t provide meal or rest breaks.
- I have a different issue that is not listed here.

Employer:

Sugar Dock Marina
800 Wharft St
Richmond, CA 94804

Business: Marina
Locations: I only know of two places: Sugar Dock Marina and The Brickyard Marina.
How many people work for them: Today I'm not sure, but from 2018 to 2020 we had around eight employees.

Business Owner/Manager/Contact:
Spouse of Chris Welsh
(510) 232-4282

Routing Zip:

95112

Referral:

I do not wish to provide

ContactWHD

From: Shim, Jennifer T - WHD <Shim.Jennifer@dol.gov>
Sent: Wednesday, January 28, 2026 1:49 PM
To: Sices, Bianca B - WHD <Sices.Bianca.B@dol.gov>
Subject: FW: Follow-Up Inquiry – Confirmation of Receipt and Status of Complaint

Jennifer Tse Shim

Regional Coordinator – Workplace Crimes, Western Region

Wage & Hour Division

U.S. Department of Labor

From: [redacted]@yousalaw.com>
Sent: Wednesday, January 28, 2026 1:01 PM
To: Shim, Jennifer T - WHD <Shim.Jennifer@dol.gov>
Subject: Re: Follow-Up Inquiry – Confirmation of Receipt and Status of Complaint

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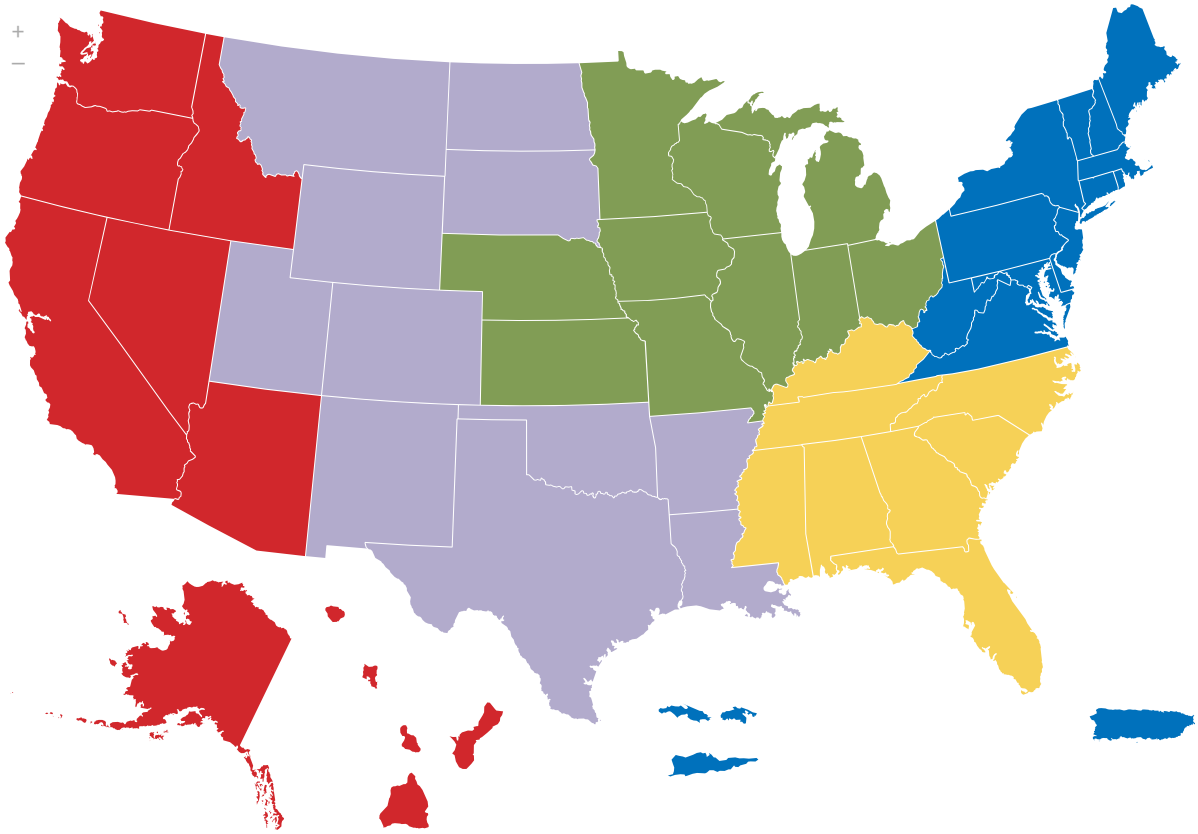
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Regional Coordinators-Workplace Crimes

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Western Region

Coordinator Contact info: Jennifer Tse Shim
90 7th Street
Suite 11-100

San Francisco, CA 94103
Tel: (415) 241-3523
Fax: (415) 241-3523
Shim.Jennifer@dol.gov

Southwest Region

Coordinator Contact info:
Esther Del Toro Oliver
525 S. Griffin Street
Suite 800
Dallas, TX 75202
Tel: (214) 749-2024
Fax: (214) 749-2024
DelToroOliver.Maria@dol.gov

Southeast Region

Coordinator Contact info: Ty Cox
61 Forsyth Street SW
Room 7M40
Atlanta, GA 30303
Tel: (678) 237-0536
Fax: (678) 237-0536
Cox.Ty@dol.gov

Northeast Region

Coordinator Contact info: Heather Burton
1835 Market Street
Mailstop WHD/19
Philadelphia, PA 19103
Tel: (857) 264-4714
Fax: (857) 264-4714
Burton.Heather@dol.gov

Midwest Region

Coordinator Contact info: Anna Lusero
230 S. Dearborn Street
Room 530
Chicago, IL 60604
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Fax: (312) 596-7196
Lusero.Anna@dol.gov

Wage and Hour Division

An agency within the U.S. Department of Labor

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Exhibit 8 - Evidence of Trauma and Severe Form of Trafficking - Vinicius Ferreira da Costa's Psychological Evaluation

Rebecca Claudette Napoli, LCSW
Licensed Clinical Social Worker #LCSW89084
Bay Area Center for Immigration Evaluations | tel: 510-842-6766 | fax: 844-698-0744 | www.bacie.org | info@bacie.org

Mental Health Report

(09/09/2025)

Otavio Haverroth Silva and Natália Vieira Santanna
P.O Box 90487
San Diego, CA 92169

Reference: Vinicius Ferreira da Costa (DOB:09/25/1988)

Professional Qualifications
I am a trilingual Licensed Clinical Social Worker in the state of California. I have worked in the mental health field in both nonprofit and government agencies since 2014. I possess a Master's in Social Work with a Mental Health concentration and a Bachelor of Art in Psychology and Spanish Language.

As a practicing clinician, I have served the community by providing counseling to those enrolled in the Family Stabilization Program housed in CalWORKS, the Youth Outreach Program housed in the Probation Department, and families participating in Children and Family Services. I have clinical experience performing trauma-informed assessments and providing therapeutic services to children and their families with socio-emotional needs, behavioral difficulties, and family issues. I have clinical experience with children and families receiving child welfare services with complex issues involving abuse, neglect, trauma, behavioral health, and substance use. I have experience writing court reports and continue to provide services that meet the cultural and language needs of the families being served.

Purpose of Evaluation
Otavio Haverroth Silva and Natália Vieira Santanna referred Vinicius Ferreira da Costa for a mental health evaluation. Prior to the interview, Vinicius Ferreira da Costa was informed of the purposes of the evaluation, the limitations of confidentiality, and the probable uses of the information derived from the interview. Mr. Ferreira da Costa agreed to the interview.

The interview took place on September 9, 2025. The client's identity was verified with a valid photo ID. During the course of the interview, a history was taken, including a trauma history. A thorough assessment of symptomatology and functional status was completed as well as an assessment for Malingering. The evaluation was conducted in Portuguese. The following report summarizes the relevant content discussed. *Any quotations used in this report are a paraphrased, translation of the client's words.*

Statement of Credibility
Mr. Ferreira da Costa was assessed to be a credible reporter as evidenced by the following: Mr. Ferreira da Costa demonstrated consistency in details (vivid believable imagery and realistic symptom description) while describing his lived experiences and internal experiences. There did not appear to be any indications of symptom magnification, malingering, or feigning emotional distress. Mr. Ferreira da Costa's symptoms were consistent with emotional expression and his report was consistent with the assessment tools administered.

Identifying Information and Behavioral Observations

Mr. Ferreira da Costa is a 36-year-old Brazilian man. He appears to be his stated age, is dressed casually and appropriately, and presents with a broad affect and an anxious mood. There does not appear to be a history of suicidal or homicidal ideation, hallucinations, or delusions. Mr. Ferreira da Costa completed symptoms screenings and the results are as follows: Patient Health Questionnaire (**PHQ9)** = 6 (positive for Minimal Depression), Anxiety Questionnaire (**GAD7)** = 14 (positive for Moderate Anxiety), Trauma Symptom Inventory (**PCL-5**) = 49 (positively correlated with Post Traumatic Stress Disorder), Adverse Childhood Experiences Questionnaire (**ACE**) = 6 (client reports having experienced 6 types of adverse experiences in childhood).

Background

Mr. Ferreira da Costa reports that he was born and raised in Itapuranga, Goiás, Brazil, and is the only child born to his parents. He explains that his parents never married and that he was predominantly raised by his mother, who worked throughout his life to provide for him. He reported having one sister and one brother on his father's side. Reflecting on those early years, he states, *"When I was very young, my mother struggled to provide for us, but things improved."* He describes his stepfather as a harsh and abusive presence in his life, explaining that he was hit about twice a week and often demeaned without reason. He recalls, *"My stepfather was very rude, mean, put me down, and I felt as though I would get hit for no reason."* His stepfather later died of a heart attack when Mr. Ferreira da Costa was 17 years old.

Mr. Ferreira da Costa reports that he was also raised for significant portions of his childhood by his grandmother, who cared for him from birth until the age of nine. He describes her as an important figure in his life and notes the profound impact of her death in 2014, stating, *"I was somewhat raised by my grandmother from zero to nine years, and she died in 2014, and that really impacted me."* In terms of education, he reports completing three out of five years of a computer engineering program before leaving school to dedicate himself to his work stating, *"The business was going well, and I left to dedicate myself 100% to the company."*

As an adult, Mr. Ferreira da Costa established his own business in Brazil but struggled financially after experiencing multiple robberies. He explains, *"I had several jobs and was robbed three times, which impacted my finances; I was no longer able to sustain my business."* These circumstances ultimately led him to migrate. He reports that on June 20, 2017, he left Brazil with his partner, Ms. Cynara Dos Santos, and her daughter from a prior relationship, Julia Dos Santos. Since arriving in the United States, the couple has had two additional children: Olivia Da Costa (female, born June 3, 2020) and Caio Da Costa (male, born November 22, 2023). Mr. Ferreira da Costa explains that he and his family currently rent a house in Pinole, California, where he works in construction to support his wife and three children.

Clinical Interview

Mr. Ferreira da Costa reports that shortly after arriving in the United States in June 2017, he was able to find work in construction. The work was physically grueling and poorly compensated, and he recalls, *"I lost 16 kilos in six months."* He explains that he began working the day after his arrival, often laboring long hours for very little pay until the job ended in December 2017. Shortly thereafter, he saw a WhatsApp advertisement placed by a man named Gustavo, who was seeking someone to demolish a boat. Mr. Ferreira da Costa accepted the offer and recalls working for about a week until the boat was nearly torn down. In May, Gustavo called again, offering him a position for $15 per hour. Mr. Ferreira da Costa accepted, which began a longer period of exploitation.

Mr. Ferreira da Costa explains that Gustavo introduced him to others, including a man named Santiago, who worked in construction, and to Christopher Welsh, the owner of the company from the very first day. Mr. Ferreira da Costa recalls that Christopher had secured a new contract, and Gustavo recruited additional undocumented workers, including Mr. Ferreira da Costa's friend Banner and another man named Ramiro, by promising steady employment and support with immigration documents. He describes being given tasks that were unsafe and far beyond his training, including operating forklifts and working with toxic materials. He explains, *"My colleague and I told him that we did not feel comfortable submerging ourselves in diesel, and he said that we had to. We had to do several tasks that were unsafe for several months because he said it needed to be done promptly."*

The working conditions were dangerous and relentless. Mr. Ferreira da Costa describes being forced to work eleven or more hours daily, cleaning diesel tanks and pressure-washing them without proper masks, protective clothing, or eye equipment. He recalls being ordered to transport equipment, driving across the state on multiple occasions after working full days, stating, *"I had worked all day, had to drive to New Port Beach, a house Chris ownred empty the U-Haul, sleep for four hours, drive back to the Bay Area, and then continue to work. He would fly there and back, but Gustavo would regularly tell me that he was going to help me."*

On another occasion, after an exhausting eight-hour day, Chris insisted that Mr. Ferreira da Costa drive a Suburban to San Diego, a seven-hour trip, despite Mr. Ferreira da Costa's protests that he was too tired. He describes arriving at Chris's house and being placed in a room filled with guns, which made him extremely anxious. The next morning, he was taken straight to the airport and then transported directly to a boat to resume heavy labor. He recalls, *"The second time was worse than the first time. The way he treated all of us made us feel like he was a wealthy man able to do whatever he wanted and get away with it."* He continues by explaining, "*I was supposed to go to San Diego with this Suburban, but I told Chris I couldn't because there could be immigration checkpoints; I was terrified at that time. He said, 'no problem, you don't have papers, you can't go anywhere, I'll take you to my house in New Port Beach that I just arrived at in San Diego…See how lucky you are to work here, I can protect you from immigration."*

Mr. Ferreira da Costa describes his "worst moment" as the time he severely injured his left hand with a construction knife while covering the Ragtime. He recalls, *"I cut through my thumb, Brenner wanted to take me to the hospital and I told James, the new supervisor who took Gustavo's place. I wanted to go to the doctor, but James said no because they did not have insurance to cover my injury."* Denied medical care, he worked through pain and disability, which he describes as both physically excruciating and emotionally devastating.

The traffickers maintained control through a combination of false promises and intimidation. Christopher and Gustavo repeatedly told the workers that Christopher was powerful, wealthy, and able to protect them from immigration enforcement. Mr. Ferreira da Costa recalls, *"Christopher told us that we were very lucky to be there because he was protecting us from immigration."* He also remembers ICE agents arriving at the boats but never interacting with the workers, reinforcing his belief that Christopher was shielding them. Gustavo and James often promised that Christopher's influence could help them secure immigration documents, which made Mr. Ferreira da Costa afraid to leave, as he believed he had no other options. He explains, *"I worried that because I did not have documents, I would lose my job if I did not do what I was told."*

He also recalls verbal mistreatment, describing Christopher as *"very rude and would get angry at us. He would call us idiots and would get frustrated with us and say it was because we did not know English. But the problem wasn't that we did not know English—it was that no one knew how to operate the machinery or do the work expected of us."* When Mr. Ferreira da Costa and others asked for a raise, they were told they would not receive one because they lacked English fluency and documentation. He also recalled discovering ammunition on the boat, which heightened his fear and reinforced his belief that a weapon might be used against him if he failed to comply.

Mr. Ferreira da Costa worked under these conditions from late December 2017 through March 2020, when the COVID-19 pandemic finally ended the project. He recalls, *"The pandemic liberated me from that job."* He continues to carry emotional scars from this period, particularly fear, humiliation, and a sense of exploitation. He reports ongoing anxiety related to his experiences, including fear when recalling unsafe labor tasks, the memory of being surrounded by weapons, and the pain of being denied medical treatment for his injury.

History of Trauma

Mr. Ferreira da Costa reports multiple traumatic experiences before his arrival in the U.S. He recalls being physically abused throughout his childhood, explaining that he was *"beaten by [his] stepfather throughout [his] childhood."* He also reports witnessing two separate murders and states, *"One was when I was a child, on the street near my house, around 10 years old; the other was a merchant who was a neighbor of my business and was shot after resisting a robbery."* In the first incident, he recalls directly seeing a person being killed. In the second, he remembers hearing gunshots, then running outside and seeing a perpetrator leaving as his neighbor fell to the ground. These events left powerful imagery in his memory, and he explains that although he continues to recall them, he feels less affected now because he perceives himself as safer in his current circumstances.

Mr. Ferreira da Costa also describes multiple experiences of violent robbery in Brazil, particularly connected to his work in commerce. He reports being robbed several times at work, experiencing a robbery at his home, and once being forced at gunpoint to surrender his car. He explains that this latter incident was especially distressing, as it occurred when he and his wife, who was working as a wedding photographer at the time, were returning home. The perpetrator took their vehicle, which contained his wife's camera and the photographs from the wedding she had just worked.

These cumulative traumas, including physical abuse in childhood, witnessing murder, and repeated robberies, created a foundation of exposure to violence and fear. While Mr. Ferreira da Costa acknowledges that the *"imagery of those traumas"* remains in his mind, he explains that feeling safer now has reduced their day-to-day impact. Nonetheless, these prior experiences likely contributed to his vulnerability as a trafficking survivor, shaping his perception of danger, powerlessness, and mistrust in systems of safety and protection.

Inventory of Current Symptoms

Mr. Ferreira da Costa continues to experience trauma-related symptoms that are consistent with posttraumatic stress, though he notes that the intensity has shifted since leaving the trafficking situation. He describes intrusive thoughts and memories that arise without warning, often reflecting on how he endured such conditions. He explains, *"I know that I needed money for my family, so I would put up with it. Now I think about it a lot, how did I allow this to happen? I am an educated person, how did I let it happen for so long?"* He further reflects, *"How did I believe the lie that he was helping us and going to*

protect us? I think about how I put myself and my family at risk during that time." These ruminations are accompanied by anxiety and self-blame. He states, *"I always feel anxious and think about it, and I feel embarrassed about myself and for having gone through it. How did I think this was normal?"* Physiologically, he reports that his hands often become sweaty when he is anxious, a somatic marker of his distress.

He identifies several triggers that evoke these intrusive reactions. Immigration matters are particularly activating, as they remind him of the false promises he relied upon. He shares, *"I think about how I lived for years believing a promise."* He also avoids anything related to boats or maritime activity, explaining, *"I am not interested in boats or water, and I do not want to hear or talk about anything related to boats and maritime. I had an uncle who purchased a boat, and my wife noted that there had been a visible shift in me."* He recounts an incident while camping when a friend brought a boat, stating, *"It is not that I am afraid of it, I just avoid it completely, I have lost all interest."*

In terms of mood and cognition, Mr. Ferreira da Costa describes feeling anxious, particularly in the last two months, as he has been participating in the immigration process. He acknowledges that therapy could be beneficial, though he continues to struggle with self-blame and negative self-perceptions related to his past experiences. He explains that his anxiety first began during the trafficking period and has persisted since, though its intensity has lessened now that he is no longer under direct control.

Hyperarousal symptoms remain present but are less acute than before. Mr. Ferreira da Costa reports sleeping approximately six hours per night, with difficulty falling or staying asleep about once every two weeks. He explains that his sleep was significantly worse while working under exploitative conditions, but that *"I feel much better now that I am no longer in that situation."* He denies reckless or self-destructive behavior but notes that he was often on edge during the trafficking period, fearful of making mistakes or provoking mistreatment.

Taken together, these symptoms illustrate a marked change from his baseline functioning prior to the trafficking experience. While Mr. Ferreira da Costa acknowledges past exposure to violence in Brazil, he reports that his ongoing anxiety, avoidance, intrusive memories, and disrupted sleep are tied specifically to his experience in the United States. These symptoms continue to interfere with his sense of safety, self-esteem, and overall functioning.

Mr. Ferreira da Costa demonstrates notable resilience despite his traumatic history. He explains that securing stable employment where he is valued and properly trained has provided him with a renewed sense of dignity and security. He shares, *"My wife and getting a new job have really helped me feel better."* His supportive relationship and his ability to reestablish himself in safe and meaningful work highlight his capacity to recover and adapt, even after prolonged exploitation.

Summary

Mr. Ferreira da Costa currently meets DSM-5 criteria for **Unspecified Trauma- and Stressor-Related Disorder (F43.9)**. This diagnosis is in the same category as Acute Stress Disorder and Posttraumatic Stress Disorder (PTSD) but applies when trauma-related symptoms cause clinically significant distress and impairment without meeting the full criteria for a discrete disorder. It provides a clinically appropriate way to capture the ongoing impact of trauma on mood, functioning, and coping.

Mr. Ferreira da Costa's presenting symptoms are directly tied to his trafficking experience in the United States. He endorses **intrusive symptoms**, including recurrent and distressing memories and psychological reactions of fear and anxiety when reminded of his exploitation. He explains, *"Now I think about it a lot, how did I allow this to happen? I am an educated person, how did I let it happen for so long?"* He also reports ongoing **avoidance symptoms**, including a refusal to engage in conversations or activities related to boats, recalling, *"I am not interested in boats or water, and I do not want to hear or talk about anything related to boats and maritime."* Finally, he endorses mild **hyperarousal symptoms**, particularly sleep disturbance, noting that he typically sleeps only six hours a night and has periodic difficulty falling or staying asleep. While these symptoms have improved since leaving his exploitative work environment, they remain clinically significant and disruptive to his sense of peace and security.

In my clinical opinion, Mr. Ferreira da Costa experienced psychological harm as a result of his trafficking experience. His traffickers exploited his undocumented status to coerce and intimidate him, using false promises of immigration protection to secure his compliance. He was denied medical care after sustaining an injury, forced to work in unsafe conditions, and routinely demeaned, leaving him with lasting feelings of fear, humiliation, and self-blame. The use of his vulnerable immigration status as a tool of control was particularly damaging, amplifying his sense of powerlessness and trapping him in unsafe and exploitative labor.

Mr. Ferreira da Costa would benefit from trauma-informed psychotherapy to address his lingering intrusive memories, avoidance behaviors, and residual anxiety. Therapeutic approaches such as Cognitive Behavioral Therapy (CBT) with a trauma focus or Eye Movement Desensitization and Reprocessing (EMDR) would likely be beneficial. Additionally, supportive counseling could reinforce the strengths he has demonstrated in rebuilding stability through his family and employment. Mr. Ferreira da Costa expressed openness to therapy and acknowledged that treatment could help him further reduce his anxiety and self-blame. With appropriate support, his prognosis for continued recovery is good.

Respectfully submitted,



Rebecca Claudette Napoli, LCSW (09/09/2025)
Licensed Clinical Social Worker
#LCSW89084

Exhibit 9 - Evidence of Trauma and Severe Form of Trafficking - Photographic Evidence

Vinicius replacing the tent cover while climbing more than 15 meters high.



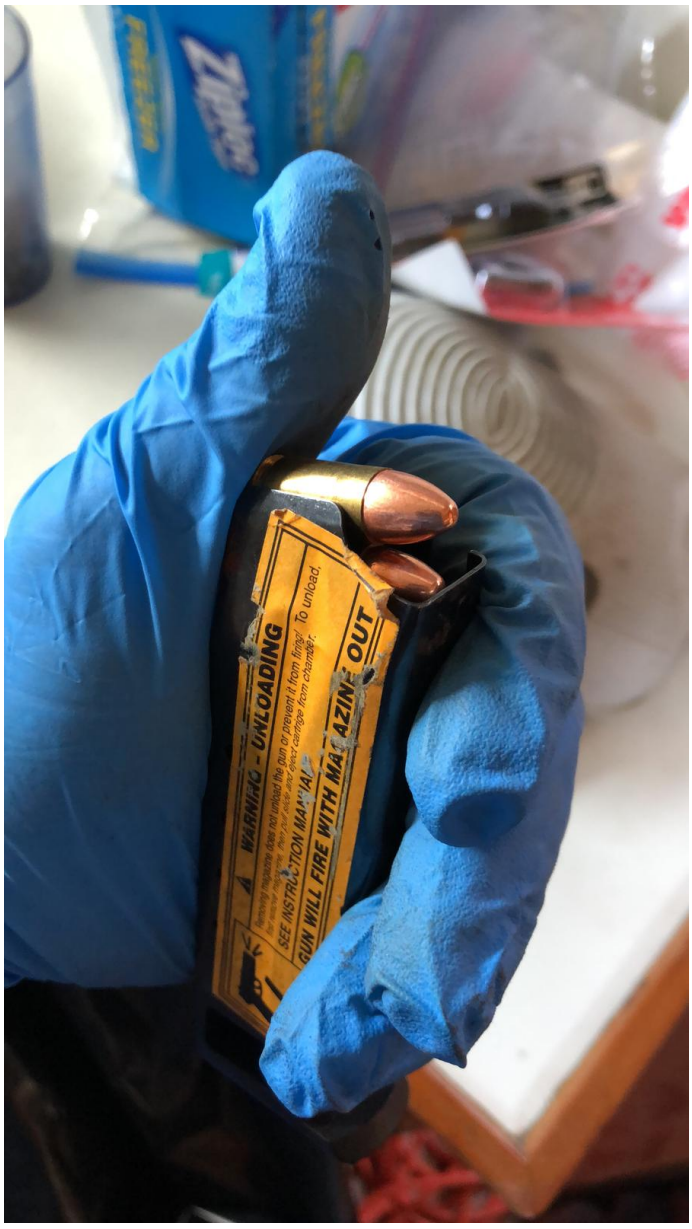
Vinicius working for countless hours sanding every gap.



Entrance door to the Regatime.



Ammunition found inside the Gardina boat.



Marco on the deck of the Regatime before we started sanding



Sanding of the Regatime.



Cleaning rust from an old boat docked at Sugar Dock.



Photo showing how Vinicius looked after sanding the Regatime.



Vinicius installing a bomb on a barge that was taking on water.



Cut on the hand sustained while working, without being able to go to the hospital.



Vinicius and Ramiro assisting Marco with rappelling on the mast of the Hidroped boat, without any prior rappelling training



Vinicius and Brener sanding the Regatime.



Truck loaded at night to be taken to Newport Beach.



Cheyenne departing.



Progress of sanding the Regatime; these photos were taken to report our work.





Vinicius and Marco removing rust from the old barge.



Exhibit 10 - Vinicius Ferreira da Costa's Evidence of Good Moral Character - FBI Background Check

VINICIUS FERREIRA DA COSTA
C/O: VINICIUS FERREIRA DA COSTA
893 FOURTH AVE #A
PINOLE, CA 94564

U.S. Department of Justice
Federal Bureau of Investigation
Criminal Justice Information Services Division
Clarksburg, WV 26306

VINICIUS FERREIRA DA COSTA
C/O: VINICIUS FERREIRA DA COSTA
893 FOURTH AVE #A
PINOLE, CA 94564

Date: 12-29-2025

The Criminal Justice Information Services (CJIS) Division of the Federal Bureau of Investigation (FBI) has completed the following fingerprint submission:

Subject Name

VINICIUS FERREIRA DA COSTA

Search Completed Result 12-29-2025 E2025363000000261117

A SEARCH OF THE FINGERPRINTS PROVIDED BY THIS INDIVIDUAL HAS REVEALED NO PRIOR ARREST DATA AT THE FBI. THIS DOES NOT PRECLUDE FURTHER CRIMINAL HISTORY AT THE STATE OR LOCAL LEVEL.

Date of Birth: 09/25/1988

Social Security number: XXX-XX-XXXX

The result of the above response is only effective for the date the submission was originally completed. For more updated information, please submit new fingerprints of the Subject.

In order to protect Personally Identifiable Information, as of August 17, 2009, FBI policy has changed to no longer return the fingerprint cards. This form will serve as the FBI's official response.

This Identity History Summary (IdHS) is provided pursuant to 28 CFR 16.30-16.34 solely for you to conduct a personal review and/or obtain a change, correction, or updating of your record. **This IdHS is not provided for the purpose of licensing or employment or any other purpose enumerated in 28 CFR 20.33.**

Any questions may be addressed to the Customer Service Group at 304-625-5590. You may also visit the website at www.fbi.gov/checks for further instructions.

Chris Ormerod
Section Chief
Biometric Services Section
Criminal Justice Information
Services Division

Exhibit 11 – Vinicius Ferreira da Costa's Bank Transfer Records Reflecting Wages Received

Bank of America

P.O. Box 15284
Wilmington, DE 19850

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your Adv Plus Banking

for May 15, 2019 to June 12, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on May 15, 2019	$184.31
Deposits and other additions	4,721.07
Withdrawals and other subtractions	-3,720.48
Checks	-0.00
Service fees	-12.00
Ending balance on June 12, 2019	**$1,172.90**

IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Deposits and other additions

Date	Description	Amount
05/20/19	Online Banking Transfer Conf# 5b2a7c28c; WELSH, CHRISTOPHER	751.50
05/20/19	Online Banking Transfer Conf# 5325f4bde; WELSH, CHRISTOPHER	522.00
05/20/19	Online Banking Transfer Conf# ed42aae12; WELSH, CHRISTOPHER	324.00
05/20/19	Uber 05/20 #000873535 PMNT RCVD Uber San Francisco CA	110.02
05/21/19	Uber 05/21 #000204649 PMNT RCVD Uber San Francisco CA	53.34
05/22/19	Uber 05/22 #000619925 PMNT RCVD Uber San Francisco CA	133.88
05/28/19	Uber 05/28 #000193931 PMNT RCVD Uber San Francisco CA	122.27
05/28/19	Zelle Transfer Conf# T069QMRMR; RODOLFO ALBANEZ OLIVERIA	114.00
05/29/19	RAISER,LLC DES:EDI PAYMNT ID:N6U6O9YE9ZWMQSS INDN:Vinicius Ferreira da c CO ID:1800896455 CCD PMT INFO:REF*TN*N6U6O9YE9Z\	6.35
05/30/19	Uber 05/30 #000049093 PMNT RCVD Uber San Francisco CA	94.25
05/31/19	Uber 05/31 #000459815 PMNT RCVD Uber San Francisco CA	63.01
06/03/19	Uber 06/01 #000602571 PMNT RCVD Uber San Francisco CA	112.76
06/03/19	Uber 06/03 #000793697 PMNT RCVD Uber San Francisco CA	81.08
06/03/19	BKOFAMERICA ATM 06/02 #000007097 DEPOSIT EL CERRITO EL CERRITO CA	70.00
06/03/19	Zelle Transfer Conf# 5f5164ba7; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
06/05/19	Online Banking Transfer Conf# 814a74068; WELSH, CHRISTOPHER	1,354.50
06/05/19	Online Banking Transfer Conf# 37c45f44c; WELSH, CHRISTOPHER	144.00
06/05/19	Online Banking Transfer Conf# 92e92a292; WELSH, CHRISTOPHER	100.00
06/05/19	Online Banking Transfer Conf# cef1a2db5; WELSH, CHRISTOPHER	81.00
06/06/19	Uber 06/06 #000466241 PMNT RCVD Uber San Francisco CA	112.30
06/07/19	Uber 06/07 #000929441 PMNT RCVD Uber San Francisco CA	76.83
06/11/19	Uber 06/10 #000593875 PMNT RCVD Uber San Francisco CA	175.21

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Are Not FDIC Insured	Are Not Bank Guaranteed	May Lose Value

SSM-02-19-0619.B | ARVSWN3H

Deposits and other additions - continued

Date	Description	Amount
06/11/19	RAISER,LLC DES:EDI PAYMNT ID:9FXY0S7PAVIG415 INDN:Vinicius Ferreira da c CO ID:1800896455 CCD PMT INFO:REF*TN*9FXY0S7PAV\	5.42
06/12/19	Uber 06/12 #000124875 PMNT RCVD Uber San Francisco CA	78.35
Total deposits and other additions		**$4,721.07**

Withdrawals and other subtractions

Date	Description	Amount
05/17/19	CHECKCARD 0516 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399136002137825356	-48.02
05/20/19	CHECKCARD 0519 SQ *IPANEMA GRILL I EL CERRITO CA 24492159139854238208634	-21.14
05/20/19	THE HOME DEPOT 05/19 #000027801 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-27.15
05/20/19	MARSHALL' 1075 05/19 #000014905 PURCHASE MARSHALL' 10759 S EL CERRITO CA	-44.20
05/20/19	COSTCO GAS #04 05/20 #000050974 PURCHASE COSTCO GAS #0482 RICHMOND CA	-21.37
05/21/19	OREILLY AUTO # 05/21 #000755578 PURCHASE OREILLY AUTO #356 EL CERRITO CA	-4.38
05/21/19	COSTCO GAS #04 05/21 #000843207 PURCHASE COSTCO GAS #0482 RICHMOND CA	-19.04
05/21/19	JAY VEE LIQUOR 05/21 #000048557 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
05/22/19	COSTCO GAS #04 05/22 #000287492 PURCHASE COSTCO GAS #0482 RICHMOND CA	-22.60
05/22/19	SMART AND FINA 05/22 #000495239 PURCHASE SMART AND FINAL SAN PABLO CA	-310.43
05/23/19	CHECKCARD 0522 FASTRAK CSC 415-486-8655 CA 24431069142672589653616 RECURRING	-115.00
05/23/19	JAY VEE LIQUOR 05/23 #000593264 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-31.06
05/24/19	SHELL SERVICE 05/23 #000709648 PURCHASE SHELL SERVICE STA OAKDALE CA	-18.29
05/24/19	SHELL SERVICE 05/23 #000518149 PURCHASE SHELL SERVICE STA OAKDALE CA	-2.39
05/28/19	CHECKCARD 0524 JACK IN THE BOX #3491 ANTIOCH CA 24692169144100639513895	-31.07
05/28/19	CHECKCARD 0527 SQ *KAADY CAR WASHES 32 Albany CA 2469216914710042769456 5	-14.00
05/28/19	Online Banking payment to CRD 3267 Confirmation# 2801229235	-158.92
05/28/19	CHECKCARD 0528 ARCO#00428SALE RICHMOND CA	-28.15
05/28/19	AIRPORT BLVD G 05/28 #000089424 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.96
05/28/19	COSTCO GAS #04 05/28 #000852986 PURCHASE COSTCO GAS #0482 RICHMOND CA	-19.95
05/28/19	WHALEPOINT MAR 05/28 #000201445 PURCHASE WHALEPOINT MARINE RICHMOND CA	-31.66
05/29/19	CHECKCARD 0527 STARBUCKS STORE 10775 OAKDALE CA 24692169148100926491389	-27.55
05/29/19	CHECKCARD 0529 UBER TRIP HELP.UBER.COMCA 24492159149715778102628	-10.06
05/29/19	JAY VEE LIQUOR 05/29 #000898985 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
05/30/19	CHECKCARD 0529 UBER TRIP HELP.UBER.COMCA 24492159149715795618317	-7.82
05/30/19	CHECKCARD 0530 UBER TRIP HELP.UBER.COMCA 24492159150719833580980	-9.47
05/30/19	CHECKCARD 0529 BURGER KING #11964 https://petroCA 24186169149400005386076	-7.27
05/31/19	CHECKCARD 0530 UBER TRIP HELP.UBER.COMCA 24492159150719851571242	-7.79
05/31/19	CHECKCARD 0531 ARCO#00428SALE RICHMOND CA	-30.45

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Withdrawals and other subtractions - continued

Date	Description	Amount
05/31/19	Online Banking Transfer Conf# 4386181fe; Marinho	-1,000.00
05/31/19	JAY VEE LIQUOR 05/31 #000740948 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
05/31/19	COSTCO GAS #04 05/31 #000031782 PURCHASE COSTCO GAS #0482 RICHMOND CA	-34.13
06/03/19	CHECKCARD 0601 UBER TRIP HELP.UBER.COMCA 24492159152717960113367	-9.21
06/03/19	CHECKCARD 0601 UBER TRIP HELP.UBER.COMCA 24492159152719979899853	-6.79
06/03/19	CHECKCARD 0531 SQ *CORNELIO NAVARR RICHMOND CA 24492159151740194277544	-11.00
06/03/19	CHECKCARD 0601 UBER TRIP HELP.UBER.COMCA 24492159152719996416921	-6.87
06/03/19	AIRPORT BLVD G 06/01 #000082601 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.74
06/03/19	CHECKCARD 0601 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399153000245027301	-32.06
06/03/19	ROSS STORES #5 06/01 #000074124 PURCHASE ROSS STORES #507 EL CERRITO CA	-50.00
06/03/19	CHECKCARD 0601 SQ *KAADY CAR WASHES 32 Albany CA 2469216915310052164 2586	-10.00
06/03/19	COSTCO WHSE #0 06/01 #000000641 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-283.02
06/03/19	CHECKCARD 0603 ARCO#00428SALE RICHMOND CA	-34.32
06/03/19	AIRPORT BLVD G 06/03 #000068195 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.74
06/03/19	JAY VEE LIQUOR 06/03 #000504820 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
06/04/19	COSTCO GAS #04 06/04 #000878424 PURCHASE COSTCO GAS #0482 RICHMOND CA	-22.62
06/05/19	CHECKCARD 0605 UBER TRIP HELP.UBER.COMCA 24492159156715216588743	-9.29
06/05/19	JAY VEE LIQUOR 06/05 #000101319 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
06/06/19	CHECKCARD 0604 STARBUCKS STORE 06972 EL CERRITO CA 24692169156100691909499	-11.85
06/06/19	CHECKCARD 0605 UBER TRIP HELP.UBER.COMCA 24492159156717235135035	-7.65
06/06/19	CHECKCARD 0606 UBER TRIP HELP.UBER.COMCA 24492159157713272908243	-9.58
06/06/19	CHECKCARD 0605 POINT RICHMOND MARKET & RICHMOND CA 24493989157400423000232	-11.63
06/06/19	Online Banking payment to CRD 3267 Confirmation# 4184246276	-176.35
06/06/19	THE HOME DEPOT 06/06 #000849172 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-101.04
06/07/19	CHECKCARD 0606 UBER TRIP HELP.UBER.COMCA 24492159157717292743696	-7.74
06/07/19	CHECKCARD 0607 UBER TRIP HELP.UBER.COMCA 24492159158717331939932	-9.27
06/07/19	COSTCO GAS #04 06/07 #000485916 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-28.30
06/07/19	JAY VEE LIQUOR 06/07 #000433411 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-50.82
06/10/19	CHECKCARD 0607 UBER TRIP HELP.UBER.COMCA 24492159158713354114917	-7.84
06/10/19	CHECKCARD 0608 Spotify USA 877-7781161 NY 24204299159000716823928 RECURRING	-14.99
06/10/19	CHECKCARD 0608 CCSF MTA IPS PRKNG METE SAN FRANCISCOCA 24431069160207733201868	-0.25
06/10/19	CHECKCARD 0608 CCSF MTA IPS PRKNG METE SAN FRANCISCOCA 24431069160207733109400	-0.25

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Withdrawals and other subtractions - continued

Date	Description	Amount
06/10/19	CHECKCARD 0608 MELS DRIVE-IN 3 SAN FRANCISCOCA 24013399160001144461923	-90.65
06/10/19	JAY VEE LIQUOR 06/09 #000138717 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-18.15
06/10/19	COSTCO GAS #04 06/09 #000553755 PURCHASE COSTCO GAS #0482 RICHMOND CA	-12.41
06/10/19	COSTCO WHSE #0 06/09 #000205388 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-13.99
06/10/19	LA LOMA NO 1 06/09 #000016730 PURCHASE LA LOMA NO 1 RICHMOND CA	-8.39
06/10/19	COSTCO GAS #04 06/10 #000060901 PURCHASE COSTCO GAS #0482 RICHMOND CA	-24.97
06/11/19	CHECKCARD 0610 BURGER KING #11964 https://petroCA 24186169161400005673286	-8.89
06/11/19	JAY VEE LIQUOR 06/10 #000990343 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
06/11/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-89.46
06/12/19	CHECKCARD 0610 STARBUCKS STORE 06469 RICHMOND CA 24692169162100209886801	-2.75
06/12/19	CHECKCARD 0611 UBER TRIP HELP.UBER.COMCA 24492159162715604417218	-7.96
06/12/19	COSTCO GAS #04 06/12 #000011602 PURCHASE COSTCO GAS #0482 RICHMOND CA	-19.06
06/12/19	SAFEWAY STORE 06/12 #000063998 PURCHASE SAFEWAY STORE EL CERRITO CA	-43.06
06/12/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-149.20
06/12/19	ATT DES:Payment ID:XXXXXXXXXMYW9L INDN:Vinicius da costa CO ID:9864031005 WEB	-60.00
Total withdrawals and other subtractions		**-$3,720.48**

Service fees

Date	Transaction description	Amount
06/12/19	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

Bank of America

P.O. Box 15284
Wilmington, DE 19850

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Your Adv Plus Banking

for June 13, 2019 to July 15, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on June 13, 2019	$1,172.90
Deposits and other additions	5,122.89
Withdrawals and other subtractions	-5,266.69
Checks	-0.00
Service fees	-12.00
Ending balance on July 15, 2019	**$1,017.10**

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¡Podemos hacerlo!

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su centro financiero más cercano.

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Call **1.800.432.1000**, or visit
your nearest financial center.

SSM-01-19-2835.B | ARTGRC8K

IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Bank of America, N.A. Member FDIC and Equal Housing Lender

We are changing how we notify you if your account is overdrawn

Starting in August, we will stop sending overdraft postcards to you through the mail but will continue to email you anytime you do not have enough money in your account to cover your transactions.

Do not worry – they will continue to be sent to the primary email address we have for you. If you want us to use a different one, you can always change it in Mobile or Online Banking.

Deposits and other additions

Date	Description				Amount
06/13/19	Uber	06/13 #000562477 PMNT RCVD Uber	San Francisco CA		142.10
06/14/19	Uber	06/14 #000008191 PMNT RCVD Uber	San Francisco CA		93.06
06/17/19	Uber	06/17 #000148951 PMNT RCVD Uber	San Francisco CA		105.09
06/18/19	Uber	06/18 #000496731 PMNT RCVD Uber	San Francisco CA		77.69
06/20/19	Online Banking Transfer Conf# f80cc1a24; WELSH, CHRISTOPHER				729.00
06/20/19	Online Banking Transfer Conf# 61e72c74c; WELSH, CHRISTOPHER				351.00
06/20/19	Online Banking Transfer Conf# d2634981d; WELSH, CHRISTOPHER				108.00
06/20/19	Online Banking Transfer Conf# 3897f077c; WELSH, CHRISTOPHER				99.00
06/21/19	Uber	06/21 #000818787 PMNT RCVD Uber	San Francisco CA		116.69
06/24/19	Uber	06/24 #000308725 PMNT RCVD Uber	San Francisco CA		99.67
06/25/19	Uber	06/25 #000645307 PMNT RCVD Uber	San Francisco CA		95.15
06/26/19	Zelle Transfer Conf# 7475cf01c; DE ALMEIDA, MARCOS				10.00
06/27/19	Uber	06/27 #000528933 PMNT RCVD Uber	San Francisco CA		52.71
07/01/19	BKOFAMERICA ATM 07/01 #000003623 DEPOSIT EL CERRITO		EL CERRITO	CA	700.00
07/05/19	BKOFAMERICA ATM 07/05 #000003804 DEPOSIT EL CERRITO		EL CERRITO	CA	300.00
07/08/19	Online Banking Transfer Conf# 4839f8940; WELSH, CHRISTOPHER				540.00
07/08/19	Online Banking Transfer Conf# f316176da; WELSH, CHRISTOPHER				378.00
07/08/19	Online Banking Transfer Conf# 33b9749ea; WELSH, CHRISTOPHER				261.00
07/08/19	Online Banking Transfer Conf# 17e575296; WELSH, CHRISTOPHER				171.00

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Our Mobile Banking app[1] and Online Banking are both certified by J.D. Power[2] for providing

"An Outstanding Customer Experience."

Download the app today from your app store or visit bankofamerica.com.

[1] Mobile Banking requires that you download the Mobile Banking app and is only available for select mobile devices. Message and data rates may apply.
[2] J.D. Power 2019 Mobile App Certification Program℠ and 2019 Website Certification Program℠ recognition is based on successful completion of an audit and exceeding a customer experience benchmark through a survey of recent servicing interactions. For more information, visit jdpower.com/awards. SSM-11-18-0529.C | ARFVGMFT

Deposits and other additions - continued

Date	Description	Amount
07/08/19	Online Banking Transfer Conf# 9bf7769c1; WELSH, CHRISTOPHER	72.00
07/08/19	Zelle Transfer Conf# 0232213e7; OLIVEIRA SANTOS, KAIQUE EMANOEL	37.00
07/11/19	Uber 07/11 #000142605 PMNT RCVD Uber San Francisco CA	164.01
07/12/19	Uber 07/12 #000716927 PMNT RCVD Uber San Francisco CA	137.42
07/15/19	Uber 07/15 #000200627 PMNT RCVD Uber San Francisco CA	152.02
07/15/19	Uber 07/13 #000248131 PMNT RCVD Uber San Francisco CA	131.28
Total deposits and other additions		**$5,122.89**

Withdrawals and other subtractions

Date	Description	Amount
06/13/19	CHECKCARD 0612 UBER TRIP HELP.UBER.COMCA 24492159163719643295675	-9.28
06/13/19	CHECKCARD 0612 MR PIZZA MAN RICHMOND CA 24431069164400487000018	-21.38
06/13/19	CHECKCARD 0613 UBER TRIP HELP.UBER.COMCA 24492159164715699105536	-9.20
06/13/19	JAY VEE LIQUOR 06/13 #000566745 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
06/14/19	CHECKCARD 0613 UBER TRIP HELP.UBER.COMCA 24492159164713717404353	-7.69
06/14/19	CHECKCARD 0613 FASTRAK CSC 415-486-8655 CA 24431069164672597432816 RECURRING	-115.00
06/14/19	CHECKCARD 0614 UBER TRIP HELP.UBER.COMCA 24492159165717757216345	-9.15
06/14/19	COSTCO GAS #04 06/14 #000853280 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-29.55
06/14/19	AIRPORT BLVD G 06/14 #000667971 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-2.49
06/14/19	AIRPORT BLVD G 06/14 #000075357 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.74
06/14/19	OREILLY AUTO # 06/14 #000388586 PURCHASE OREILLY AUTO #356 EL CERRITO CA	-16.44
06/17/19	CHECKCARD 0614 UBER TRIP HELP.UBER.COMCA 24492159165713778195527	-7.77
06/17/19	CHECKCARD 0615 UBER TRIP HELP.UBER.COMCA 24492159166717822708960	-8.89
06/17/19	CHECKCARD 0614 THE SOLAR CAR WASH 1 BERKELEY CA 2442806916650124197009	-17.00
06/17/19	CHECKCARD 0615 UBER TRIP HELP.UBER.COMCA 24492159166719846119323	-7.90
06/17/19	CHECKCARD 0615 SQ *POT-O-GOLD KETT MADERA CA 2449215916785432014363 7	-11.00
06/17/19	CHECKCARD 0614 HILLTOP FOOD M RICHMOND CA	-60.73
06/17/19	CHEVRON/FOSTER 06/15 #000578217 PURCHASE CHEVRON/FOSTER'S RENO NV	-43.28
06/17/19	CHECKCARD 0615 ELDORADO CVC BUFFET RENO NV 24717059167171678348291	-45.00
06/17/19	CHECKCARD 0615 PP*SILVERLEGAC RENO NV 24492159166894585156503	-18.00
06/17/19	CHECKCARD 0615 PP*SILVERLEGAC RENO NV 24492159166894585465110	-45.00
06/17/19	CHECKCARD 0615 EL DORADO EXPRESSIONS RENO NV 24717059167171678346766	-14.43
06/17/19	CHECKCARD 0615 GENERAL STORE RENO NV 24717059167261672043087	-23.40
06/17/19	CHECKCARD 0615 SQ *JUNIORSIGNS RENO NV 24492159167741486339770	-21.65
06/17/19	CHECKCARD 0615 ELDORADO MILLIES24 RENO NV 24717059167171678338466	-76.50

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Withdrawals and other subtractions - continued

Date	Description	Amount
06/17/19	7-ELEVEN 06/16 #000517365 PURCHASE 7-ELEVEN RENO NV	-2.50
06/17/19	WM SUPERC Wal- 06/16 #000222378 PURCHASE WM SUPERC Wal-Mar RENO NV	-18.16
06/17/19	WAL-MART #3254 06/16 #000121854 PURCHASE WAL-MART #3254 RENO NV	-7.76
06/17/19	CHEVRON/GILL S 06/16 #000853655 PURCHASE CHEVRON/GILL SIDH DIXON CA	-60.33
06/17/19	CHECKCARD 0616 PEDRICK PRODUCE DIXON CA 24013399167002174640108	-37.23
06/17/19	AIRPORT BLVD G 06/17 #000050724 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.37
06/17/19	COSTCO GAS #04 06/17 #000484944 PURCHASE COSTCO GAS #0482 RICHMOND CA	-33.25
06/17/19	JAY VEE LIQUOR 06/17 #000796499 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
06/17/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-206.62
06/18/19	CHECKCARD 0616 ELDORADO BUFFET RENO NV 24717059168161684929951	-79.65
06/18/19	SAFEWAY STORE 06/18 #000769329 PURCHASE SAFEWAY STORE 1 PINOLE CA	-21.38
06/19/19	CHECKCARD 0619 UBER TRIP HELP.UBER.COMCA 24492159170719059852234	-10.95
06/19/19	Online Banking payment to CRD 3267 Confirmation# 3897208737	-54.60
06/19/19	Zelle Transfer Conf# d10e91f3c; Brener Usa	-46.49
06/19/19	COSTCO GAS #04 06/19 #000069708 PURCHASE COSTCO GAS #0482 RICHMOND CA	-29.83
06/20/19	CHECKCARD 0618 STARBUCKS STORE 06469 RICHMOND CA 24692169170100949013914	-21.50
06/20/19	CHECKCARD 0619 UBER TRIP HELP.UBER.COMCA 24492159170717078562305	-10.01
06/20/19	MOBILE PURCHASE 0619 Netflix.com netflix.com CA	-12.99
06/20/19	CHECKCARD 0620 UBER TRIP HELP.UBER.COMCA 24492159171717116415291	-9.25
06/20/19	CHECKCARD 0619 BURGER KING #11964 RICHMOND CA 24186169171400459000869	-12.75
06/20/19	THE HOME DEPOT 06/20 #000135719 PURCHASE THE HOME DEPOT 10 HERCULES CA	-11.93
06/21/19	CHECKCARD 0620 UBER TRIP HELP.UBER.COMCA 24492159171715138614255	-10.13
06/21/19	CHECKCARD 0620 BURGER KING #11964 https://petroCA 24186169171400000250880	-13.43
06/21/19	COSTCO GAS #04 06/21 #000586117 PURCHASE COSTCO GAS #0482 RICHMOND CA	-19.92
06/21/19	AIRPORT BLVD G 06/21 #000215555 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.37
06/21/19	PGANDE DES:WEB ONLINE ID:25104058060319 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-45.28
06/24/19	CHECKCARD 0622 UBER TRIP HELP.UBER.COMCA 24492159173719243720583	-8.68
06/24/19	CHECKCARD 0622 EXTREME PIZZA - PARK PL RICHMOND CA 24269799173100469859658	-27.07
06/24/19	CHECKCARD 0621 THE SOLAR CAR WASH 1 BERKELEY CA 24428069174100911852488	-16.00
06/24/19	CHECKCARD 0622 UBER TRIP HELP.UBER.COMCA 24492159173719269346834	-8.30
06/24/19	JAY VEE LIQUOR 06/21 #000944739 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-37.40
06/24/19	JAY VEE LIQUOR 06/22 #000984500 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00

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Withdrawals and other subtractions - continued

Date	Description	Amount
06/24/19	COSTCO WHSE #0 06/22 #000512754 PURCHASE COSTCO WHSE #0029 ROSEVILLE CA	-43.09
06/24/19	CHECKCARD 0623 ARCO#00428SALE RICHMOND CA	-42.33
06/24/19	SAFEWAY STORE 06/23 #000654018 PURCHASE SAFEWAY STORE 18 ROCKLIN CA	-19.29
06/24/19	AIRPORT BLVD G 06/24 #000488297 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.96
06/24/19	COSTCO GAS #04 06/24 #000004882 PURCHASE COSTCO GAS #0482 RICHMOND CA	-12.05
06/24/19	PRONTO MONEY TRA DES:8776528709 ID:2JIO2UA3NH1LA0Z INDN:VINICIUS FERREIRA DA C CO ID:3202381863 PPD	-504.99
06/25/19	CHECKCARD 0623 MCDONALD'S F32113 ROCKLIN CA 2442733917571003586962 7	-28.36
06/25/19	CHECKCARD 0624 US TREASURY TAX PA 615-730-6367 TN 24224439176104007606617	-425.00
06/25/19	CHECKCARD 0624 VPS CONV. FEE 615-730-6367 TN 2422443917610400825084 5	-2.55
06/25/19	CHECKCARD 0625 UBER TRIP HELP.UBER.COMCA 24492159176717433456627	-9.24
06/25/19	CHECKCARD 0624 SQ *KAADY CAR WASHES 32 Albany CA 24692169175100918081970	-12.00
06/25/19	CHECKCARD 0624 BURGER KING #2055 https://petroCA 24186169175091000850880	-11.94
06/25/19	COSTCO GAS #04 06/25 #000405637 PURCHASE COSTCO GAS #0482 RICHMOND CA	-20.52
06/25/19	DISCOUNT FABRI 06/25 #000285903 PURCHASE DISCOUNT FABRIC BERKLEY CA	-41.79
06/25/19	JAY VEE LIQUOR 06/25 #000435208 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-27.00
06/26/19	CHECKCARD 0625 UBER TRIP HELP.UBER.COMCA 24492159176717451275511	-7.24
06/26/19	CHECKCARD 0626 UBER TRIP HELP.UBER.COMCA 24492159177717489430160	-9.29
06/26/19	WHALEPOINT MAR 06/26 #000210457 PURCHASE WHALEPOINT MARINE RICHMOND CA	-30.58
06/26/19	MARSHALL' 1075 06/26 #000211071 PURCHASE MARSHALL' 10759 S EL CERRITO CA	-40.65
06/27/19	CHECKCARD 0626 UBER TRIP HELP.UBER.COMCA 24492159177713508513250	-8.99
06/27/19	CHECKCARD 0626 UBER TRIP HELP.UBER.COMCA 24492159177717512221982	-11.48
06/27/19	CHECKCARD 0627 UBER TRIP HELP.UBER.COMCA 24492159178717546437009	-9.42
06/27/19	CHECKCARD 0626 EXTREME PIZZA - PARK PL RICHMOND CA 24269799178000927184779	-49.28
06/28/19	CHECKCARD 0627 UBER TRIP HELP.UBER.COMCA 24492159178719565249620	-8.48
06/28/19	CHECKCARD 0627 UBER TRIP HELP.UBER.COMCA 24492159178717572251407	-3.00
06/28/19	CHECKCARD 0628 UBER TRIP HELP.UBER.COMCA 24492159179715605156642	-4.10
07/01/19	CHECKCARD 0628 UBER TRIP HELP.UBER.COMCA 24492159179715626328915	-11.91
07/01/19	CHECKCARD 0629 UBER TRIP HELP.UBER.COMCA 24492159180715671259657	-9.11
07/01/19	CHECKCARD 0629 UBER TRIP HELP.UBER.COMCA 24492159180719719588770	-1.00
07/01/19	CHECKCARD 0629 UBER TRIP HELP.UBER.COMCA 24492159180715697638611	-8.06
07/01/19	CHECKCARD 0629 UBER TRIP HELP.UBER.COMCA 24492159180713702700427	-10.94
07/01/19	CA DMV EL CERR 06/29 #000304111 PURCHASE CA DMV EL CERRITO EL CERRITO CA	-5.00
07/01/19	CHECKCARD 0629 UBER TRIP HELP.UBER.COMCA 24492159180713719563859	-7.42
07/01/19	WATERGATE MARK 06/29 #000489294 PURCHASE WATERGATE MARKET EMERYVILLE CA	-24.47
07/01/19	ROSS STORES #2 06/29 #000021814 PURCHASE ROSS STORES #260 EMERYVILLE CA	-29.07

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Withdrawals and other subtractions - continued

Date	Description	Amount
07/01/19	BIG 5 SPORTING 06/30 #000751805 PURCHASE BIG 5 SPORTING GO EL CERRITO CA	-65.84
07/01/19	ATLAS 06/30 #000005969 PURCHASE ATLAS EL CERRITO CA	-17.09
07/01/19	CHECKCARD 0630 Valley Liquor Napa CA	-48.04
07/01/19	CHECKCARD 0630 VALLEJO SINCLA VALLEJO CA	-7.18
07/01/19	Zelle Transfer Conf# ac8838c7c; Vladimir Andressa	-600.00
07/02/19	CHECKCARD 0701 YOGURTLAND CA222 PINOLE CA 2423168918209126600 1361	-5.31
07/03/19	CHECKCARD 0702 UBER TRIP HELP.UBER.COMCA 2449215918371588432 7660	-8.12
07/03/19	CHECKCARD 0703 UBER TRIP HELP.UBER.COMCA 2449215918471792361 5328	-9.72
07/03/19	ATT DES:Payment ID:XXXXXXXXXEPAYM INDN:Vinicius da costa CO ID:9864031004 PPD	-60.00
07/05/19	CHECKCARD 0703 UBER TRIP HELP.UBER.COMCA 2449215918471794397 9043	-8.00
07/05/19	CHECKCARD 0703 CENTURY THEATRES 446 RICHMOND CA 2469216918510026357 2506	-19.45
07/05/19	RICHMOND GROCE 07/04 #000908054 PURCHASE RICHMOND GROCER RICHMOND CA	-11.23
07/08/19	CHECKCARD 0705 BURGER KING #11964 https://petroCA 2418616918640000268 0541	-10.01
07/08/19	CHECKCARD 0706 UBER TRIP HELP.UBER.COMCA 2449215918771313192 5606	-8.51
07/08/19	Online Banking payment to CRD 3267 Confirmation# 1443700129	-268.46
07/08/19	CHECKCARD 0708 Spotify USA 877-7781161 NY 2420429918900070990 4838 RECURRING	-14.99
07/08/19	Zelle Transfer Conf# 327006e6f; Brener Usa	-102.50
07/10/19	CHECKCARD 0709 UBER TRIP HELP.UBER.COMCA 2449215919071530185 4248	-8.12
07/10/19	COSTCO GAS #04 07/10 #000011237 PURCHASE COSTCO GAS #0482 RICHMOND CA	-42.53
07/10/19	COSTCO WHSE #0 07/10 #000243119 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-90.51
07/11/19	CHECKCARD 0709 MARINA BAY YACHT HARBOR RICHMOND CA 2476790919187240028 8565	-12.00
07/11/19	CHECKCARD 0710 UBER TRIP HELP.UBER.COMCA 2449215919171935689 9644	-12.90
07/11/19	COSTCO GAS #04 07/11 #000247480 PURCHASE COSTCO GAS #0482 RICHMOND CA	-21.06
07/11/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-89.35
07/12/19	CHECKCARD 0711 UBER TRIP HELP.UBER.COMCA 2449215919271341308 5932	-8.48
07/12/19	CHECKCARD 0712 UBER TRIP HELP.UBER.COMCA 2449215919371745167 3102	-10.90
07/12/19	COSTCO GAS #04 07/12 #000069971 PURCHASE COSTCO GAS #0482 RICHMOND CA	-21.77
07/12/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-270.01
07/15/19	CHECKCARD 0712 UBER TRIP HELP.UBER.COMCA 2449215919371747896 2561	-10.92
07/15/19	CHECKCARD 0713 UBER TRIP HELP.UBER.COMCA 2449215919471951576 9677	-9.32
07/15/19	CHECKCARD 0713 UBER TRIP HELP.UBER.COMCA 2449215919471554160 8293	-8.33

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Withdrawals and other subtractions - continued

Date	Description	Amount
07/15/19	CHECKCARD 0712 MARINA BAY YACHT HARBOR RICHMOND CA 24767909195891300453273	-12.00
07/15/19	CHECKCARD 0713 STARBUCKS STORE 06585 REDWOOD CITY CA 24692169195100394434756	-2.45
07/15/19	AIRPORT BLVD G 07/13 #000294549 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.96
07/15/19	CHECKCARD 0713 GRAND GAS PINOLE PINOLE CA 24801979195839000043697	-21.66
07/15/19	CHECKCARD 0713 THE SOLAR CAR WASH 1 BERKELEY CA 24428069195100574521524	-11.00
07/15/19	JAY VEE LIQUOR 07/13 #000002581 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-26.89
07/15/19	OREILLY AUTO # 07/13 #000032802 PURCHASE OREILLY AUTO #356 EL CERRITO CA	-47.16
07/15/19	CHECKCARD 0713 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399195001755503699	-33.95
07/15/19	CVS/PHARMACY # 07/13 #000419700 PURCHASE CVS/PHARMACY #09 El Cerrito CA	-13.81
07/15/19	ROSS STORES #5 07/13 #000061992 PURCHASE ROSS STORES #507 EL CERRITO CA	-31.81
07/15/19	CHECKCARD 0714 LA PENCA AZUL-PARK S ALAMEDA CA 24744559195430000127027	-24.64
07/15/19	CHECKCARD 0714 LA PENCA AZUL-PARK S ALAMEDA CA 24744559195430000127159	-12.07
07/15/19	Palm Food Palm 07/14 #000809047 PURCHASE Palm Food Palm Fo Richmond CA	-3.99
07/15/19	Palm Food Palm 07/14 #000810038 PURCHASE Palm Food Palm Fo Richmond CA	-5.00
07/15/19	CHECKCARD 0714 SQ *IPANEMA GRILL INC EL CERRITO CA 24692169195100491136122	-39.06
07/15/19	SAFEWAY STORE 07/14 #000771056 PURCHASE SAFEWAY STORE EL CERRITO CA	-25.50
07/15/19	THE HOME DEPOT 07/14 #000774644 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-6.52
07/15/19	AIRPORT BLVD G 07/15 #000673980 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.37
Total withdrawals and other subtractions		**-$5,266.69**

Service fees

Date	Transaction description	Amount
07/15/19	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

Bank of America

P.O. Box 15284
Wilmington, DE 19850

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Your Adv Plus Banking

for July 16, 2019 to August 14, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on July 16, 2019	$1,017.10
Deposits and other additions	4,840.87
Withdrawals and other subtractions	-5,616.68
Checks	-0.00
Service fees	-12.00
Ending balance on August 14, 2019	**$229.29**

IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

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Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Deposits and other additions

Date	Description	Amount
07/17/19	Uber 07/17 #000040733 PMNT RCVD Uber San Francisco CA	80.37
07/19/19	Zelle Transfer Conf# 5be40f9d5; DOS SANTOS, CYNARA	700.00
07/22/19	Online Banking Transfer Conf# 045bc73d2; WELSH, CHRISTOPHER	1,179.00
07/22/19	Zelle Transfer Conf# 9d81c8a3e; DOS SANTOS, CYNARA	380.00
07/22/19	Online Banking Transfer Conf# be55b23f7; WELSH, CHRISTOPHER	315.00
07/22/19	Zelle Transfer Conf# 02952c58f; FERREIRA, BRENER	110.38
07/22/19	Uber 07/22 #000627765 PMNT RCVD Uber San Francisco CA	67.17
07/25/19	Zelle Transfer Conf# 27e835256; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
07/26/19	Uber 07/26 #000427491 PMNT RCVD Uber San Francisco CA	66.31
07/29/19	Uber 07/27 #000856254 PMNT RCVD Uber San Francisco CA	107.70
07/29/19	Uber 07/29 #000685147 PMNT RCVD Uber San Francisco CA	88.47
08/01/19	Uber 08/01 #000231573 PMNT RCVD Uber San Francisco CA	30.07
08/05/19	Online Banking Transfer Conf# 0afb29e1a; WELSH, CHRISTOPHER	1,413.00
08/05/19	Online Banking Transfer Conf# ca90fc927; WELSH, CHRISTOPHER	90.00
08/12/19	Uber 08/10 #000164259 PMNT RCVD Uber San Francisco CA	97.20
08/12/19	Zelle Transfer Conf# c87036bf5; NERES, ANDRESSA	11.50
08/13/19	Uber 08/13 #000903598 PMNT RCVD Uber San Francisco CA	69.70
Total deposits and other additions		**$4,840.87**

Withdrawals and other subtractions

Date	Description	Amount
07/16/19	CHECKCARD 0716 UBER TRIP HELP.UBER.COMCA 24492159197717702874786	-11.36
07/16/19	Zelle Transfer Conf# 8ad3692af; Brener Usa	-265.95
07/16/19	COSTCO GAS #04 07/16 #000400727 PURCHASE COSTCO GAS #0482 RICHMOND CA	-31.92

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Withdrawals and other subtractions - continued

Date	Description	Amount
07/16/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-220.18
07/17/19	CHECKCARD 0716 UBER TRIP HELP.UBER.COMCA 24492159197719721159579	-11.01
07/17/19	AIRPORT BLVD G 07/17 #000641150 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-29.76
07/17/19	AIRPORT BLVD G 07/17 #000037763 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-12.02
07/17/19	Zelle Transfer Conf# 4dc0cd1ca; Brener Usa	-265.91
07/18/19	CHECKCARD 0717 UBER TRIP HELP.UBER.COMCA 24492159198719778111480	-8.31
07/18/19	CHECKCARD 0718 UBER TRIP HELP.UBER.COMCA 24492159199713815874167	-10.18
07/18/19	7-ELEVEN 07/18 #000262197 PURCHASE 7-ELEVEN EL CERRITO CA	-38.41
07/18/19	7-ELEVEN 07/18 #000265063 PURCHASE 7-ELEVEN EL CERRITO CA	-7.23
07/19/19	CHECKCARD 0717 MARINA BAY YACHT HARBOR RICHMOND CA 24767909199921600248069	-12.00
07/19/19	CHECKCARD 0718 UBER TRIP HELP.UBER.COMCA 24492159199717838668746	-5.22
07/19/19	CHECKCARD 0718 UBER TRIP HELP.UBER.COMCA 24492159199717835785097	-11.90
07/19/19	CHECKCARD 0719 SHELL SERVICE BUTTONWILLOW CA	-27.28
07/19/19	SHELL SERVICE 07/19 #000311035 PURCHASE SHELL SERVICE S BUTTONWILLOW CA	-12.86
07/19/19	PGANDE DES:WEB ONLINE ID:27321355070119 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-44.29
07/22/19	CHECKCARD 0719 AMZN MKTP US*MA89R8O92 AMZN.COM/BILLWA 244310692000837544000065	-38.14
07/22/19	MOBILE PURCHASE 0719 Netflix.com netflix.com CA	-12.99
07/22/19	CHECKCARD 0721 LA CITY PARKING METER LOS ANGELES CA 24755429203732030699491	-2.00
07/22/19	CHECKCARD 0721 ARCO #42852 AM LEBEC CA	-46.22
07/22/19	CHECKCARD 0721 ROSA SHOES 1 VENICE CA 24431069203286219600032	-10.95
07/22/19	COSTCO GAS #04 07/21 #000884858 PURCHASE COSTCO GAS #0482 RICHMOND CA	-33.98
07/22/19	CHEVRON/GIL MO 07/21 #000235776 PURCHASE CHEVRON/GIL MOORE LIVERMORE CA	-6.95
07/22/19	CHECKCARD 0721 SQ *KAADY CAR WASHES 32 Albany CA 24692169203100147613037	-12.00
07/22/19	AIRPORT BLVD G 07/22 #000811501 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.74
07/22/19	JAY VEE LIQUOR 07/22 #000766857 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
07/23/19	CHECKCARD 0721 SUBWAY 03562907 AVENAL CA 24164079203255210319878	-31.35
07/23/19	CHECKCARD 0722 US TREASURY TAX PA 615-730-6367 TN 24224439204104001336852	-382.00
07/23/19	CHECKCARD 0722 PAYUSATAX CONV. FEE 615-730-6367 TN 24137469204600142001290	-2.55
07/23/19	CHECKCARD 0723 UBER TRIP HELP.UBER.COMCA 24492159204713142265827	-9.39
07/23/19	OREILLY AUTO # 07/23 #000990777 PURCHASE OREILLY AUTO #356 EL CERRITO CA	-16.99
07/24/19	CHECKCARD 0723 UBER TRIP HELP.UBER.COMCA 24492159204719160136071	-7.95
07/25/19	COSTCO GAS #04 07/25 #000872989 PURCHASE COSTCO GAS #0482 RICHMOND CA	-27.64
07/25/19	BKOFAMERICA ATM 07/25 #000003088 WITHDRWL EL CERRITO EL CERRITO CA	-800.00
07/25/19	JAY VEE LIQUOR 07/25 #000205157 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00

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Withdrawals and other subtractions - continued

Date	Description	Amount
07/25/19	THE WOODL 203 07/25 #000213862 PURCHASE THE WOODL 203 FOL SAN FRANCISCO CA	-13.39
07/25/19	HONDA PMT DES:8002058235 ID:2JOPMOL9PJ2YZ8T INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
07/26/19	CHECKCARD 0725 UBER TRIP HELP.UBER.COMCA 24492159206717273784017	-8.27
07/26/19	CHECKCARD 0725 SQ *JUNIOR BARBECUE SAN FRANCISCOCA 24492159207741473235850	-40.00
07/29/19	CHECKCARD 0726 UBER TRIP HELP.UBER.COMCA 24492159207717333842739	-15.79
07/29/19	CHECKCARD 0726 FASTRAK CSC 415-486-8655 CA 24431069207672612260225 RECURRING	-115.00
07/29/19	CHECKCARD 0727 UBER TRIP HELP.UBER.COMCA 24492159208713378472440	-10.98
07/29/19	CHECKCARD 0727 UBER TRIP HELP.UBER.COMCA 24492159208713406435468	-11.57
07/29/19	AIRPORT BLVD G 07/27 #000493615 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.37
07/29/19	CHECKCARD 0727 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399209003652773171	-30.63
07/29/19	SPEED OIL CHAN 07/27 #000203606 PURCHASE SPEED OIL CHANGE EL CERRITO CA	-68.58
07/29/19	COSTCO GAS #04 07/27 #000074711 PURCHASE COSTCO GAS #0482 RICHMOND CA	-42.14
07/29/19	LA LOMA NO 1 07/27 #000024030 PURCHASE LA LOMA NO 1 RICHMOND CA	-68.63
07/29/19	SAFEWAY STORE 07/27 #000689597 PURCHASE SAFEWAY STORE EL CERRITO CA	-47.27
07/30/19	CHECKCARD 0730 UBER TRIP HELP.UBER.COMCA 24492159211719568172539	-9.19
07/31/19	CHECKCARD 0730 UBER TRIP HELP.UBER.COMCA 24492159211719585358848	-8.07
07/31/19	CHECKCARD 0729 THE SOLAR CAR WASH 1 BERKELEY CA 2442806921150084373807 4	-8.00
07/31/19	JAY VEE LIQUOR 07/31 #000134601 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
07/31/19	COSTCO GAS #04 07/31 #000413084 PURCHASE COSTCO GAS #0482 RICHMOND CA	-29.35
07/31/19	COSTCO WHSE #0 07/31 #000299925 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-60.00
08/01/19	CHECKCARD 0731 UBER TRIP HELP.UBER.COMCA 24492159212719642126773	-8.07
08/01/19	CHECKCARD 0801 UBER TRIP HELP.UBER.COMCA 24492159213713689018950	-12.94
08/01/19	CHECKCARD 0801 UBER TRIP HELP.UBER.COMCA 24492159213713691958300	-12.81
08/02/19	CHECKCARD 0801 UBER TRIP HELP.UBER.COMCA 24492159213713701964603	-8.34
08/02/19	JAY VEE LIQUOR 08/02 #000141888 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-46.90
08/02/19	ATT DES:Payment ID:XXXXXXXXXEPAYQ INDN:Vinicius da costa CO ID:9864031004 PPD	-60.00
08/05/19	CHECKCARD 0802 UBER TRIP HELP.UBER.COMCA 24492159214713764535869	-7.74
08/05/19	CHECKCARD 0803 SQ *IPANEMA GRILL I EL CERRITO CA 24492159215854461709032	-23.98
08/05/19	JAY VEE LIQUOR 08/03 #000620529 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-27.53
08/05/19	Zelle Transfer Conf# 9abe4ce42; cynara	-150.00
08/05/19	Online Banking payment to CRD 3267 Confirmation# 3003073292	-262.48
08/05/19	COSTCO GAS #04 08/05 #000279406 PURCHASE COSTCO GAS #0482 RICHMOND CA	-27.92

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Withdrawals and other subtractions - continued

Date	Description	Amount
08/06/19	CHECKCARD 0805 SQ *KAADY CAR WASHES 32 Albany CA 24692169218100377942760	-15.00
08/06/19	Zelle Transfer Conf# 0df0a82d9; cynara	-100.00
08/06/19	COSTCO WHSE #0 08/06 #000240913 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-56.56
08/06/19	JAY VEE LIQUOR 08/06 #000589183 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
08/07/19	CHECKCARD 0806 UBER TRIP HELP.UBER.COMCA 24492159218719030386108	-7.90
08/07/19	THE HOME DEPOT 08/07 #000768093 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-28.71
08/08/19	CHECKCARD 0807 AMAZON.COM*MA00G4G80 AM AMZN.COM/BILLWA 24431069219083313802602	-5.16
08/08/19	CHECKCARD 0807 UBER TRIP HELP.UBER.COMCA 24492159219715086698593	-9.36
08/08/19	CHECKCARD 0808 Spotify USA 877-7781161 NY 24204299220000683374942 RECURRING	-14.99
08/08/19	JAY VEE LIQUOR 08/08 #000744664 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-43.15
08/12/19	CHECKCARD 0809 UBER TRIP HELP.UBER.COMCA 24492159221717205436554	-8.09
08/12/19	CHECKCARD 0810 UBER TRIP HELP.UBER.COMCA 24492159222717275640589	-8.23
08/12/19	COSTCO GAS #04 08/10 #000464218 PURCHASE COSTCO GAS #0482 RICHMOND CA	-27.71
08/12/19	JAY VEE LIQUOR 08/10 #000362097 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-52.53
08/12/19	LA LOMA NO 1 08/10 #000026124 PURCHASE LA LOMA NO 1 RICHMOND CA	-15.04
08/12/19	APPIAN LIQUORS 08/10 #000982250 PURCHASE APPIAN LIQUORS PINOLE CA	-63.65
08/12/19	CHECKCARD 0811 CHURCH S CHICKEN #185 EL CERRITO CA 24137469224001306257180	-32.47
08/12/19	Tropical Trop 08/11 #000113157 PURCHASE Tropical Tropica El Cerrito CA	-177.67
08/12/19	CHECKCARD 0811 BASKIN #361020 EL CERRITO CA 24431069224838001239430	-13.98
08/12/19	MARSHALL' 1075 08/11 #000308242 PURCHASE MARSHALL' 10759 S EL CERRITO CA	-55.95
08/13/19	CHECKCARD 0812 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399224001585252272	-35.41
08/13/19	JAY VEE LIQUOR 08/13 #000905132 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
08/13/19	COSTCO GAS #04 08/13 #000283635 PURCHASE COSTCO GAS #0482 RICHMOND CA	-34.83
08/13/19	JAY VEE LIQUOR 08/13 #000676692 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-18.15
08/13/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-211.74
08/13/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-89.87
08/14/19	CHECKCARD 0813 SQ *KAADY CAR WASHES 32 Albany CA 24692169226100253047866	-10.00
08/14/19	CHECKCARD 0813 SQ *KAADY CAR WASHES 32 Albany CA 24692169226100241211533	-3.00
Total withdrawals and other subtractions		**-$5,616.68**

Service fees

Date	Transaction description	Amount
08/14/19	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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Bank of America

P.O. Box 15284
Wilmington, DE 19850

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Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your Adv Plus Banking

for September 13, 2019 to October 15, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on September 13, 2019	$229.79
Deposits and other additions	5,550.02
Withdrawals and other subtractions	-5,638.62
Checks	-0.00
Service fees	-12.00
Ending balance on October 15, 2019	**$129.19**

¿Estados de cuenta en español?
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Llame al **1.800.688.6086** o visite
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Statements in Spanish?
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Deposits and other additions

Date	Description	Amount
09/13/19	Uber 09/13 #000556933 PMNT RCVD Uber San Francisco CA	52.76
09/16/19	Zelle Transfer Conf# 49e8e4335; NERES, ANDRESSA	660.00
09/16/19	Zelle Transfer Conf# T06TSPW88; CASSIO DA SILVA	10.00
09/23/19	BKOFAMERICA ATM 09/20 #000005101 DEPOSIT EL CERRITO EL CERRITO CA	750.00
09/23/19	Zelle Transfer Conf# eefc6580a; DOS SANTOS, CYNARA	70.00
09/23/19	Uber 09/23 #000154500 PMNT RCVD Uber San Francisco CA	28.80
09/25/19	Online Banking Transfer Conf# 477ca4372; WELSH, CHRISTOPHER	900.00
09/25/19	Online Banking Transfer Conf# 7b3142c99; WELSH, CHRISTOPHER	315.00
09/25/19	Online Banking Transfer Conf# a83a9f05c; WELSH, CHRISTOPHER	108.00
09/25/19	Zelle Transfer Conf# 27bfbf1be; DOS SANTOS, CYNARA	70.00
09/26/19	Zelle Transfer Conf# 6b6309c2c; OLIVEIRA SANTOS, KAIQUE EMANOEL	51.00
09/27/19	Uber 09/27 #000677392 PMNT RCVD Uber San Francisco CA	68.67
09/27/19	Zelle Transfer Conf# 89d922ca8; DE ALMEIDA, MARCOS	6.50
09/30/19	Uber 09/28 #000255665 PMNT RCVD Uber San Francisco CA	142.29
10/01/19	Zelle Transfer Conf# c067a2097; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
10/01/19	RAISER,LLC DES:EDI PAYMNT ID:C6UDBNTUNITUFFW INDN:Vinicius Ferreira da c CO ID:1800896455 CCD PMT INFO:REF*TN*C6UDBNTUNI\	4.50
10/07/19	Zelle Transfer Conf# 04e160eea; DOS SANTOS, CYNARA	800.00
10/08/19	Online Banking Transfer Conf# 9deb75fb0; WELSH, CHRISTOPHER	819.00
10/08/19	Online Banking Transfer Conf# caa9e5ec4; WELSH, CHRISTOPHER	297.00
10/08/19	Online Banking Transfer Conf# f72d4c837; WELSH, CHRISTOPHER	126.00
10/08/19	Zelle Transfer Conf# 04e841cfb; DOS SANTOS, CYNARA	10.00
10/08/19	Zelle Transfer Conf# 1232b6cba; DE ALMEIDA, MARCOS	7.50

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Deposits and other additions - continued

Date	Description	Amount
10/15/19	Zelle Transfer Conf# cc5555955; FERREIRA, BRENER	118.00
10/15/19	BKOFAMERICA ATM 10/13 #000004560 DEPOSIT EL CERRITO EL CERRITO CA	100.00
Total deposits and other additions		**$5,550.02**

Withdrawals and other subtractions

Date	Description	Amount
09/13/19	JAY VEE LIQUOR 09/12 #000980426 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
09/13/19	WHALEPOINT MAR 09/13 #000214818 PURCHASE WHALEPOINT MARINE RICHMOND CA	-62.14
09/16/19	CHECKCARD 0912 MARINA BAY YACHT HARBOR RICHMOND CA 24767909256269600315912	-12.00
09/16/19	CHECKCARD 0913 AIRPORT BLVD GAS S SAN FRANCISCA 24427339257120004114255	-1.53
09/16/19	CHECKCARD 0913 CHEVRON 0090103 RICHMOND CA 24692169256100076553390	-45.00
09/16/19	CHECKCARD 0913 AMZN MKTP US*A63EO0W23 AMZN.COM/BILLWA 24431069257083340586049	-19.99
09/16/19	CHECKCARD 0913 BURGER KING #11964 https://petroCA 24186169256400002088682	-9.82
09/16/19	CHECKCARD 0913 MARINA BAY YACHT HARBOR RICHMOND CA 24767909258275800448419	-12.00
09/16/19	CHECKCARD 0914 AMZN MKTP US*SB44K35G3 AMZN.COM/BILLWA 24431069257083341728541	-6.64
09/16/19	CHECKCARD 0913 MARINA BAY YACHT HARBOR RICHMOND CA 24767909258275800448443	-12.00
09/16/19	CHEVRON/CSI-38 09/14 #000286623 PURCHASE CHEVRON/CSI-38213 LARKSPUR CA	-26.15
09/17/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-206.87
09/20/19	MOBILE PURCHASE 0919 Netflix.com netflix.com CA	-12.99
09/20/19	PGANDE DES:WEB ONLINE ID:32284506090219 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-58.07
09/23/19	CHECKCARD 0921 UBER TRIP HELP.UBER.COMCA 24492159264719953652810	-8.50
09/23/19	CHECKCARD 0921 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399264002722467154	-36.33
09/23/19	JAY VEE LIQUOR 09/21 #000894387 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
09/23/19	CHECKCARD 0921 PAYUSATAX CONV. FEE 615-730-6367 TN 24137469265600203922828	-2.55
09/23/19	CHECKCARD 0921 US TREASURY TAX PAYMENT 615-730-6367 TN 24137469264200221220205	-382.00
09/23/19	CHECKCARD 0921 STARBUCKS STORE 05967 EL CERRITO CA 24692169265100421935085	-21.95
09/23/19	COSTCO GAS #04 09/21 #000583906 PURCHASE COSTCO GAS #0482 RICHMOND CA	-40.81
09/23/19	JAY VEE LIQUOR 09/21 #000537278 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-27.53
09/23/19	CHECKCARD 0922 UBER TRIP HELP.UBER.COMCA 24492159265719069045973	-8.18
09/23/19	CHECKCARD 0922 UBER TRIP HELP.UBER.COMCA 24492159265717039826225	-11.48
09/23/19	HONDA PMT DES:8002058235 ID:2JZAENCQQFS0BRF INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
09/25/19	THE HOME DEPOT 09/25 #000983490 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-25.03

continued on the next page

Withdrawals and other subtractions - continued

Date	Description	Amount
09/25/19	LA LOMA NO 1 09/25 #000032914 PURCHASE LA LOMA NO 1 RICHMOND CA	-40.15
09/25/19	SAFEWAY STORE 09/25 #000498688 PURCHASE SAFEWAY STORE EL CERRITO CA	-25.78
09/25/19	JAY VEE LIQUOR 09/25 #000555463 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-25.00
09/26/19	COSTCO GAS #04 09/26 #000435705 PURCHASE COSTCO GAS #0482 RICHMOND CA	-33.31
09/27/19	AIRPORT BLVD G 09/27 #000929462 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.96
09/30/19	CHECKCARD 0926 NONG THON RESTAURANT EL CERRITO CA 24323049270295100014790	-52.80
09/30/19	CHECKCARD 0928 EXTREME PIZZA - PARK PL RICHMOND CA 24269799271500981919149	-17.62
09/30/19	CHECKCARD 0927 YOSHIO SUSHI EL CERRITO CA 24688089272030036978013	-49.12
09/30/19	AIRPORT BLVD G 09/28 #000589561 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-2.07
09/30/19	COSTCO GAS #04 09/28 #000557197 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-34.96
09/30/19	AIRPORT BLVD G 09/28 #000799455 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-2.18
09/30/19	AIRPORT BLVD G 09/28 #000901652 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-2.18
09/30/19	Online Banking payment to CRD 3267 Confirmation# 1369017593	-257.11
09/30/19	CHECKCARD 0928 SQ *KAADY CAR WASHES 32 Albany CA 24692169271100120624933	-12.00
09/30/19	O'REILLY AUTO 09/28 #000970310 PURCHASE O'REILLY AUTO PAR EL CERRITO CA	-8.54
09/30/19	CHECKCARD 0928 SQ *IPANEMA GRILL I EL CERRITO CA 24492159271740250183243	-26.16
09/30/19	LA LOMA NO 1 09/28 #000033305 PURCHASE LA LOMA NO 1 RICHMOND CA	-47.58
09/30/19	RICHMOND GROCE 09/28 #000631140 PURCHASE RICHMOND GROCER RICHMOND CA	-70.37
09/30/19	JAY VEE LIQUOR 09/28 #000781419 PURCHASE JAY VEE LIQUORS EL CERRITO CA	-9.20
09/30/19	CHECKCARD 0929 FASTRAK CSC 415-486-8655 CA 24431069272672634794136	-85.00
09/30/19	CHECKCARD 0929 GOLDEN CORRAL 2697 CONCORD CA 24445009273000621825896	-53.67
10/01/19	COSTCO GAS #04 10/01 #000025363 PURCHASE COSTCO GAS #0482 RICHMOND CA	-45.94
10/03/19	CHECKCARD 1001 MARINA BAY YACHT HARBOR RICHMOND CA 24767909275385400230924	-12.00
10/03/19	99 RANCH #1781 10/03 #000883522 PURCHASE 99 RANCH #1781 RICHMOND CA	-28.07
10/04/19	ATT DES:Payment ID:XXXXXXXXXEPAYB INDN:Vinicius da costa CO ID:9864031004 PPD	-60.00
10/07/19	CHECKCARD 1004 UBER TRIP HELP.UBER.COMCA 24492159277717820956989	-12.22
10/07/19	CHECKCARD 1006 UBER TRIP HELP.UBER.COMCA 24492159279717962460970	-7.80
10/07/19	CHECKCARD 1006 UBER TRIP HELP.UBER.COMCA 24492159279717965993662	-7.80
10/07/19	LA LOMA NO 1 10/05 #000006489 PURCHASE LA LOMA NO 1 RICHMOND CA	-35.45
10/07/19	CHECKCARD 1006 ARCO#83272MIKE AMERICAN CANYCA	-100.35
10/07/19	SAFEWAY #2940 10/06 #000582410 PURCHASE SAFEWAY #2940 EL CERRITO CA	-66.10
10/07/19	USPS PO 052390 10/07 #000911165 PURCHASE USPS PO 05239002 EL CERRITO CA	-1,294.65

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Withdrawals and other subtractions - continued

Date	Description	Amount
10/08/19	CHECKCARD 1006 LAKEBERRYESSAPK-NAPACA NAPA CA 24240989280500690608900	-10.00
10/08/19	CHECKCARD 1008 Spotify USA 877-7781161 NY 24204299281000706984830 RECURRING	-14.99
10/08/19	Zelle Transfer Conf# 9f3b06fd7; Wife	-250.00
10/08/19	COSTCO WHSE #0 10/08 #000437513 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-40.32
10/08/19	COSTCO WHSE #0 10/08 #000213702 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-180.09
10/08/19	COSTCO WHSE #0 10/08 #000223476 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-19.99
10/08/19	BKOFAMERICA ATM 10/08 #000007161 WITHDRWL EL CERRITO EL CERRITO CA	-500.00
10/09/19	CHECKCARD 1008 UBER TRIP HELP.UBER.COMCA 24492159281715103471712	-3.81
10/11/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-91.28
10/15/19	COSTCO WHSE #0 10/14 #000005558 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-42.74
10/15/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-211.74
Total withdrawals and other subtractions		**-$5,638.62**

Service fees

Date	Transaction description	Amount
10/15/19	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your Adv Plus Banking

for October 16, 2019 to November 12, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on October 16, 2019	$129.19
Deposits and other additions	5,343.22
Withdrawals and other subtractions	-5,128.59
Checks	-0.00
Service fees	-12.00
Ending balance on November 12, 2019	**$331.82**

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SSM-01-19-2835.B | ARTGRC8K

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How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Deposits and other additions

Date	Description	Amount
10/16/19	Zelle Transfer Conf# 3864450b8; DOS SANTOS, CYNARA	100.00
10/18/19	Online Banking Transfer Conf# 2987cdd4c; WELSH, CHRISTOPHER	972.00
10/18/19	Online Banking Transfer Conf# 4b80b21e9; WELSH, CHRISTOPHER	666.00
10/25/19	Online Banking Transfer Conf# 758926f9d; WELSH, CHRISTOPHER	187.01
10/25/19	Online Banking Transfer Conf# b3eb04273; WELSH, CHRISTOPHER	106.00
11/01/19	Zelle Transfer Conf# bdb20ad57; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
11/05/19	Online Banking Transfer Conf# XXXXXXXXX; WELSH, CHRISTOPHER	1,215.00
11/05/19	Online Banking Transfer Conf# 2741b9d2c; WELSH, CHRISTOPHER	558.00
11/05/19	Online Banking Transfer Conf# f48af56e3; WELSH, CHRISTOPHER	513.00
11/05/19	Online Banking Transfer Conf# 4b3663b3c; WELSH, CHRISTOPHER	72.00
11/06/19	Zelle Transfer Conf# 52fc1c752; DOS SANTOS, CYNARA	700.00
11/08/19	Uber 11/08 #000057001 PMNT RCVD Uber San Francisco CA	219.21
Total deposits and other additions		**$5,343.22**

Withdrawals and other subtractions

Date	Description	Amount
10/16/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-210.17
10/17/19	CHEVRON/CSI-09 10/17 #000339427 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.19
10/18/19	COALINGA MART 10/18 #000382082 PURCHASE COALINGA MART COALINGA CA	-14.91
10/21/19	MOBILE PURCHASE 1019 Netflix.com netflix.com CA	-12.99
10/21/19	ARCO #42732 AM 10/19 #000309469 PURCHASE ARCO #42732 AMPM COSTA MESA CA	-11.28
10/21/19	MOBILE PURCHASE 1019 USA*SNACK SODA VENDING BAKERSFIELD CA	-2.60
10/21/19	CHECKCARD 1020 CHEVRON 0090103 RICHMOND CA 24692169293100729141911	-100.00
10/21/19	CHECKCARD 1020 UBER TRIP HELP.UBER.COMCA 24492159293715935028751	-7.59

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What's on your mind?

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Inclusion on the Advisory Panel subject to qualifications.

SSM-01-19-2128.A1 | ARG377KX

Withdrawals and other subtractions - continued

Date	Description	Amount
10/22/19	CHECKCARD 1021 STARBUCKS 800-782-7282 WA 24692169294100352202385	-30.00
10/22/19	MOBILE PURCHASE 1020 CENTURY THEATRES 446 RICHMOND CA	-13.65
10/22/19	CHECKCARD 1020 PAYUSATAX CONV. FEE 615-730-6367 TN 24137469295600189601812	-2.55
10/22/19	CHECKCARD 1020 US TREASURY TAX PAYMENT 615-730-6367 TN 24137469294200190469845	-382.00
10/22/19	THE HOME DEPOT 10/22 #000503213 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-187.01
10/22/19	HONDA PMT DES:8002058235 ID:2K4XXJDM8SVW20F INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
10/22/19	PGANDE DES:WEB ONLINE ID:34739273100219 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-38.08
10/23/19	Zelle Transfer Conf# 7ee9ebc67; Laisa Prima	-30.00
10/28/19	CHECKCARD 1025 UBER TRIP HELP.UBER.COMCA 24492159298719243209694	-13.15
10/28/19	CHECKCARD 1025 CHEVRON 0090103 RICHMOND CA 24692169298100019850184	-9.19
10/28/19	CHECKCARD 1026 SQ *IPANEMA GRILL I EL CERRITO CA 24492159299855337299784	-34.48
10/28/19	IN *KRIS KRING 10/26 #000966994 PURCHASE IN *KRIS KRINGLE CARMEL CA	-15.17
10/28/19	CHECKCARD 1026 ADAM FOX CARMEL BY THECA 24707809300027083131995	-28.22
10/28/19	SAFEWAY #2669 10/26 #000677815 PURCHASE SAFEWAY #2669 CARMEL CA	-53.11
10/28/19	CHECKCARD 1027 MONTEREY IPS METERS MONTEREY CA 24493989301200699201232	-0.60
10/28/19	CHECKCARD 1027 MONTEREY IPS METERS MONTEREY CA 2449398930120069920080 4	-6.00
10/28/19	CHECKCARD 1027 MONTEREY IPS METERS MONTEREY CA 24493989301200699204665	-1.55
10/28/19	Online Banking payment to CRD 3267 Confirmation# 0127482234	-255.64
10/29/19	MOBILE PURCHASE 1027 STARBUCKS STORE 05978 MONTEREY CA	-5.40
10/29/19	CHECKCARD 1028 CHEVRON 0090103 RICHMOND CA 24692169301100873796056	-9.29
10/29/19	CHEVRON/CSI-09 10/29 #000573878 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.29
11/01/19	CHECKCARD 1031 CHEVRON 0090103 RICHMOND CA 24692169304100852800553	-9.29
11/04/19	CHECKCARD 1102 EXTREME PIZZA - PARK PL RICHMOND CA 24269799306501049310304	-25.78
11/05/19	USPS PO 052390 11/05 #000536403 PURCHASE USPS PO 05239002 EL CERRITO CA	-2,194.65
11/05/19	ATT DES:Payment ID:XXXXXXXXXEPAYG INDN:Vinicius da costa CO ID:9864031004 PPD	-60.00
11/06/19	CHEVRON/CSI-09 11/06 #000236720 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.29
11/07/19	CHECKCARD 1106 SQ *IPANEMA GRILL I EL CERRITO CA 24492159310741342531806	-23.82
11/07/19	WALGREENS STOR 11/07 #000803998 PURCHASE WALGREENS STORE 4 SAN FRANCISCO CA	-20.60
11/07/19	CHECKCARD 1107 ARCO#02035MAJI ALBANY CA	-42.82
11/07/19	TRADER JOE'S # 11/07 #000537482 MOBILE PURCHASE TRADER JOE'S # 10 EL CERRITO CA	-45.22
11/08/19	CHECKCARD 1108 UBER TRIP HELP.UBER.COMCA 24492159312719196265661	-17.13
11/08/19	CHECKCARD 1107 SQ *IPANEMA GRILL I EL CERRITO CA 24492159311741349893919	-15.26
11/08/19	CHECKCARD 1108 Spotify USA 877-7781161 NY 24204299312000547683925 RECURRING	-14.99
11/12/19	CHECKCARD 1107 THE SOLAR CAR WASH 1 - BERKELEY CA 24428069312500926772808	-10.00

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Withdrawals and other subtractions - continued

Date	Description	Amount
11/12/19	MOBILE PURCHASE 1108 AIRPORT BLVD GAS S SAN FRANCISCA	-9.02
11/12/19	CHECKCARD 1108 CITY OF BERKELEY- IPS BERKELEY CA 24493989313200899462127	-2.55
11/12/19	CHECKCARD 1109 CITY OF BERKELEY- IPS BERKELEY CA 24493989314200899428796	-0.50
11/12/19	CHECKCARD 1108 CITY OF BERKELEY- IPS BERKELEY CA 24493989313200899469700	-1.35
11/12/19	CHECKCARD 1109 CITY OF BERKELEY- IPS BERKELEY CA 24493989314200899406123	-3.00
11/12/19	CHECKCARD 1109 CITY OF BERKELEY- IPS BERKELEY CA 24493989314200899425149	-3.00
11/12/19	WHOLEFDS BRK 1 11/09 #000707853 PURCHASE WHOLEFDS BRK 100 BERKELEY CA	-23.95
11/12/19	WHOLEFDS BRK 1 11/09 #000740458 PURCHASE WHOLEFDS BRK 100 BERKELEY CA	-1.85
11/12/19	JAY VEE LIQUOR 11/09 #000232841 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-9.50
11/12/19	CHECKCARD 1109 CITY OF BERKELEY- IPS BERKELEY CA 24493989314200899477769	-3.00
11/12/19	CHECKCARD 1109 CITY OF BERKELEY- IPS BERKELEY CA 24493989314200899493303	-1.15
11/12/19	WHOLEFDS BRK 1 11/11 #000646875 PURCHASE WHOLEFDS BRK 100 BERKELEY CA	-1.00
11/12/19	CHECKCARD 1111 CMSVEND*CV BAY AREA VEN SAN JOSE CA 24445009316000849305514	-2.50
11/12/19	MOBILE PURCHASE 1111 WALGREENS #3770 EL CERRITO CA	-26.32
11/12/19	SAFEWAY #1714 11/12 #000647100 PURCHASE SAFEWAY #1714 PINOLE CA	-10.98
11/12/19	CAPITAL ONE DES:MOBILE PMT ID:931539800352945 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-400.00
Total withdrawals and other subtractions		**-$5,128.59**

Service fees

Date	Transaction description	Amount
11/12/19	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

Your Adv Plus Banking

for November 13, 2019 to December 12, 2019

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on November 13, 2019	$331.82
Deposits and other additions	6,262.23
Withdrawals and other subtractions	-6,083.42
Checks	-0.00
Service fees	-0.00
Ending balance on December 12, 2019	**$510.63**

IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

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Deposits and other additions

Date	Description	Amount
11/15/19	Zelle Transfer Conf# 5666483d6; DOS SANTOS, CYNARA	300.00
11/20/19	Online Banking Transfer Conf# a6c86e9eb; WELSH, CHRISTOPHER	1,291.00
11/20/19	STRIPE DES:Vinicius F ID:ST-J8E4G9Z9S8Z6 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	86.68
11/25/19	BKOFAMERICA ATM 11/24 #000004191 DEPOSIT MIRA VISTA RICHMOND CA	60.00
11/27/19	STRIPE DES:Vinicius F ID:ST-C4S0I4B1U8A0 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	376.56
11/29/19	Zelle Transfer Conf# 3d9f906ed; DOS SANTOS, CYNARA	150.00
12/02/19	BKOFAMERICA ATM 11/30 #000003011 DEPOSIT MIRA VISTA RICHMOND CA	45.00
12/02/19	Zelle Transfer Conf# 481719a2d; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
12/04/19	STRIPE DES:Vinicius F ID:ST-C9N4L2K5U9F9 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	382.90
12/06/19	Online Banking Transfer Conf# 72e468fc5; WELSH, CHRISTOPHER	1,440.00
12/06/19	Online Banking Transfer Conf# c2601960d; WELSH, CHRISTOPHER	315.00
12/06/19	Online Banking Transfer Conf# 19571b48e; WELSH, CHRISTOPHER	171.00
12/09/19	Zelle Transfer Conf# 46b097722; DOS SANTOS, CYNARA	500.00
12/09/19	Zelle Transfer Conf# 1f69b7f07; DOS SANTOS, CYNARA	400.00
12/09/19	THE HOME DEPOT 12/08 #000352851 REFUND THE HOME DEPOT #0 EL CERRITO CA	20.56
12/11/19	STRIPE DES:Vinicius F ID:ST-B7E0Y4W2S5P1 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	688.53
Total deposits and other additions		**$6,262.23**

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SSM-09-19-0046.B | ARFWWLDJ

Withdrawals and other subtractions

Date	Description	Amount
11/13/19	CHECKCARD 1112 CHEVRON 0090103 RICHMOND CA 24692169316100113540077	-9.29
11/13/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-211.74
11/13/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-90.11
11/15/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-206.91
11/18/19	CHECKCARD 1116 UBER TRIP HELP.UBER.COMCA 24492159320717806159175	-15.07
11/18/19	CHECKCARD 1117 STARBUCKS 800-782-7282 WA 24692169321100930110842	-25.00
11/18/19	CHECKCARD 1116 STARBUCKS STORE 09861 OAKLAND CA 24692169321100132426202	-2.65
11/18/19	THE HOME DEPOT 11/16 #000727465 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-10.74
11/19/19	CHECKCARD 1119 UBER TRIP HELP.UBER.COMCA 24492159323717016166074	-12.96
11/20/19	MOBILE PURCHASE 1119 Netflix.com netflix.com CA	-12.99
11/20/19	SAFEWAY #2940 11/20 #000707749 PURCHASE SAFEWAY #2940 EL CERRITO CA	-2.75
11/20/19	PGANDE DES:WEB ONLINE ID:36980081103119 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-53.98
11/21/19	Zelle Transfer Conf# c07f0aa43; Andrea Room	-86.68
11/21/19	CHEVRON/CSI-09 11/21 #000979138 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.29
11/21/19	WHALEPOINT MAR 11/21 #000203514 PURCHASE WHALEPOINT MARINE RICHMOND CA	-6.42
11/21/19	HONDA PMT DES:8002058235 ID:2KAF34HV9LG8AGT INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
11/22/19	CHECKCARD 1121 PAYUSATAX CONV. FEE 615-730-6367 TN 24137469326600184146683	-2.55
11/22/19	CHECKCARD 1121 US TREASURY TAX PAYMENT 615-730-6367 TN 24137469325200231003309	-382.00
11/25/19	CHECKCARD 1123 SQ *CAFE DE CASA South San FraCA 24692169327100846949543	-35.67
11/25/19	CHECKCARD 1123 SQ *CAFE DE CASA South San FraCA 24692169327100865593388	-4.39
11/25/19	LA LOMA NO 1 11/23 #000007988 PURCHASE LA LOMA NO 1 RICHMOND CA	-78.67
11/25/19	SAFEWAY #1866 11/23 #000102782 PURCHASE SAFEWAY #1866 ROCKLIN CA	-29.07
11/25/19	COSTCO GAS #00 11/24 #000272763 PURCHASE COSTCO GAS #0029 ROSEVILLE CA	-30.97
11/26/19	CHECKCARD 1125 CHEVRON 0090103 RICHMOND CA 24692169329100985401304	-9.29
11/26/19	WALGREENS STOR 11/26 #000601475 PURCHASE WALGREENS STORE 1 EL CERRITO CA	-16.94
11/26/19	SMART AND FINA 11/26 #000614361 PURCHASE SMART AND FINAL SAN PABLO CA	-16.93
11/27/19	CHECKCARD 1127 UBER TRIP HELP.UBER.COMCA 24492159331719577941028	-20.95
11/27/19	CHEVRON/SALKHI 11/26 #000292140 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-10.12
11/29/19	SAFEWAY #2940 11/28 #000100950 PURCHASE SAFEWAY #2940 EL CERRITO CA	-17.10
11/29/19	SAFEWAY #2940 11/28 #000706859 PURCHASE SAFEWAY #2940 EL CERRITO CA	-21.64
11/29/19	CHEVRON/SALKHI 11/28 #000439338 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-10.12
11/29/19	Online Banking payment to CRD 3267 Confirmation# 2504595584	-33.64

continued on the next page

Withdrawals and other subtractions - continued

Date	Description	Amount
12/02/19	COSTCO WHSE #0 11/30 #000812052 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-14.72
12/02/19	COSTCO GAS #04 11/30 #000530327 PURCHASE COSTCO GAS #0482 RICHMOND CA	-41.20
12/02/19	CHECKCARD 1130 SQ *IPANEMA GRILL I EL CERRITO CA 24492159334854325562649	-54.47
12/02/19	CAPITAL ONE DES:MOBILE PMT ID:933439800303741 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-335.57
12/03/19	CHECKCARD 1201 MCDONALD'S F2094 EL CERRITO CA 24427339336710016693950	-27.72
12/04/19	ATT DES:Payment ID:XXXXXXXXXEPAYK INDN:Vinicius da costa CO ID:9864031004 PPD	-65.00
12/05/19	Zelle Transfer Conf# fd36e7229; Andrea Room	-382.90
12/06/19	CHECKCARD 1205 CHEVRON 0090103 RICHMOND CA 24692169339100805520943	-9.29
12/09/19	SMART AND FINA 12/07 #000692396 PURCHASE SMART AND FINAL SAN PABLO CA	-112.11
12/09/19	MOBILE PURCHASE 1207 SQ *IPANEMA GRILL INC El Cerrito CA	-5.23
12/09/19	USPS PO 052390 12/07 #000700258 PURCHASE USPS PO 05239002 EL CERRITO CA	-2,194.65
12/09/19	COSTCO GAS #04 12/07 #000029783 PURCHASE COSTCO GAS #0482 RICHMOND CA	-35.70
12/09/19	COSTCO WHSE #0 12/07 #000487082 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-92.36
12/09/19	CHECKCARD 1207 SQ *KAADY CAR WASHES 32 Albany CA 24692169341100284694298	-10.00
12/09/19	CHECKCARD 1207 PEET'S #02502 BERKELEY CA 24692169342100493086962	-3.75
12/09/19	CHECKCARD 1208 Spotify USA 877-7781161 NY 24204299342001175645859 RECURRING	-14.99
12/09/19	SAFEWAY #0970 12/07 #000105020 MOBILE PURCHASE SAFEWAY #0970 SAN MATEO CA	-17.79
12/09/19	THE HOME DEPOT 12/08 #000301397 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-66.88
12/09/19	THE HOME DEPOT 12/08 #000225183 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-73.04
12/09/19	CHEVRON/CSI-09 12/09 #000894629 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.29
12/10/19	CHECKCARD 1208 DAISO BA15 ECT EL CERRITO CA 24717059343733436319356	-34.11
12/10/19	JAY VEE LIQUOR 12/10 #000022442 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-18.57
12/11/19	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-92.76
12/12/19	CHECKCARD 1211 UBER TRIP HELP.UBER.COMCA 24492159345719642109357	-18.88
12/12/19	CHECKCARD 1210 DisneyPLUS 888-9057888 CA 24906419344084473666622 RECURRING	-6.99
12/12/19	CHEVRON/SALKHI 12/12 #000676857 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-10.12
12/12/19	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-211.74
Total withdrawals and other subtractions		**-$6,083.42**

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BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

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Bank of America, N.A.
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Tampa, FL 33622-5118

Your Adv Plus Banking

for December 13, 2019 to January 14, 2020

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on December 13, 2019	$510.63
Deposits and other additions	5,425.75
Withdrawals and other subtractions	-5,780.29
Checks	-0.00
Service fees	-2.50
Ending balance on January 14, 2020	**$153.59**

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BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Deposits and other additions

Date	Description	Amount
12/16/19	Zelle Transfer Conf# 791bbbf7f; DOS SANTOS, CYNARA	220.00
12/18/19	STRIPE DES:Vinicius F ID:ST-A1U5K7Q5F2M9 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	214.26
12/20/19	BKOFAMERICA ATM 12/20 #000001433 DEPOSIT EL CERRITO EL CERRITO CA	450.00
12/20/19	Online Banking Transfer Conf# cc5c55ca5; WELSH, CHRISTOPHER	171.00
12/20/19	Online Banking Transfer Conf# e1cd7b558; WELSH, CHRISTOPHER	144.00
12/20/19	Online Banking Transfer Conf# b15d89a07; WELSH, CHRISTOPHER	72.00
12/23/19	Online Banking Transfer Conf# e75aa48c1; WELSH, CHRISTOPHER	756.00
12/23/19	Online Banking Transfer Conf# e18a30929; WELSH, CHRISTOPHER	594.00
12/23/19	Zelle Transfer Conf# 481c32ed2; OLIVEIRA SANTOS, KAIQUE EMANOEL	34.00
12/26/19	BKOFAMERICA ATM 12/26 #000009015 DEPOSIT EL CERRITO EL CERRITO CA	115.00
12/26/19	STRIPE DES:Vinicius F ID:ST-D9N1D9S9I3X1 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	109.53
12/30/19	Zelle Transfer Conf# 10f0c95b4; DOS SANTOS, CYNARA	50.00
12/30/19	Zelle Transfer Conf# 1075faa18; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
01/02/20	STRIPE DES:Vinicius F ID:ST-G5M9G8D1U7E7 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	83.97
01/02/20	Zelle Transfer Conf# 5c71c0f23; DOS SANTOS, CYNARA	50.00
01/02/20	Uber Instant-P 01/03 #000804296 PMNT RCVD Uber Instant-Pay San Francisco CA	28.82
01/03/20	Uber Instant-P 01/03 #000877313 PMNT RCVD Uber Instant-Pay San Francisco CA	41.27
01/06/20	Zelle Transfer Conf# 0804a99f0; DOS SANTOS, CYNARA	500.00
01/06/20	Uber Instant-P 01/04 #000104526 PMNT RCVD Uber Instant-Pay San Francisco CA	15.50
01/08/20	Online Banking Transfer Conf# 4144b5260; WELSH, CHRISTOPHER	1,125.00
01/08/20	Online Banking Transfer Conf# a05cddda0; WELSH, CHRISTOPHER	72.00
01/08/20	STRIPE DES:Vinicius F ID:ST-W1Y1D4W7M8M7 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	39.40

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Help prevent fraud

Just a friendly reminder to make sure your contact information is up to date. It helps us reach you quickly if we detect suspicious activity. Simply sign in to Online Banking and go to Profile & Settings or use the Mobile Banking app.[1]

Is your contact info up to date? Check now at **bankofamerica.com**.

[1]Mobile Banking requires that you download the Mobile Banking app and is only available for select mobile devices. Message and data rates may apply.
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Deposits and other additions - continued

Date	Description	Amount
01/10/20	Uber Instant-P 01/10 #000194984 PMNT RCVD Uber Instant-Pay San Francisco CA	5.00
01/13/20	Zelle Transfer Conf# ca5f6d06a; DOS SANTOS, CYNARA	500.00
Total deposits and other additions		**$5,425.75**

Withdrawals and other subtractions

Date	Description	Amount
12/13/19	CHECKCARD 1212 MOD PIZZA EL CERRITO B EL CERRITO CA 24013399346001517433894	-30.63
12/13/19	Zelle Transfer Conf# 69f346bd0; Andrea Room	-288.56
12/16/19	CHECKCARD 1212 MR PIZZA MAN RICHMOND CA 24431069348400486000273	-26.11
12/16/19	CHECKCARD 1213 BURGER KING #11964 https://prod.CA 24186169347400005675619	-7.65
12/16/19	CHECKCARD 1214 MCDONALD'S F776 BERKELEY CA 24427339349710046240819	-13.86
12/16/19	CHECKCARD 1214 ARCO#00428SALE RICHMOND CA	-45.54
12/16/19	ARCO#00428SALE 12/14 #000274974 PURCHASE ARCO#00428SALEE RICHMOND CA	-10.78
12/16/19	LA LOMA NO 1 12/15 #000003540 PURCHASE LA LOMA NO 1 RICHMOND CA	-51.40
12/16/19	COSTCO WHSE #0 12/16 #000837703 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-17.24
12/17/19	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-229.80
12/19/19	PGANDE DES:WEB ONLINE ID:39279815112919 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-56.68
12/20/19	MOBILE PURCHASE 1219 Netflix.com netflix.com CA	-12.99
12/20/19	TRADER JOE'S # 12/20 #000439157 PURCHASE TRADER JOE'S # 10 EL CERRITO CA	-18.44
12/23/19	CHECKCARD 1220 CHEVRON 0090103 RICHMOND CA 24692169354100409284706	-9.29
12/23/19	CHECKCARD 1220 PAYUSATAX CONV. FEE 615-730-6367 TN 24137469356600279971741	-2.55
12/23/19	CHECKCARD 1220 US TREASURY TAX PAYMENT 615-730-6367 TN 24137469355200256850496	-210.56
12/23/19	RINCON LATINO 12/21 #000491617 PURCHASE RINCON LATINO I RICHMOND CA	-26.28
12/23/19	P508232 12/21 #000436959 WITHDRWL EMERY BAY PU-5082 EMERVILLE CA	-103.99
12/23/19	HONDA PMT DES:8002058235 ID:2KFW15UW87DU449 INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
12/24/19	CHEVRON/SALKHI 12/24 #000378438 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-40.49
12/24/19	SAFEWAY #2940 12/24 #000087180 PURCHASE SAFEWAY #2940 EL CERRITO CA	-21.49
12/26/19	CHECKCARD 1224 SUBWAY 03567823 EL CERRITO CA 24164079358255040595971	-17.24
12/26/19	Zelle Transfer Conf# 42c8ec276; Kaique Primo	-1,000.00
12/26/19	Zelle Transfer Conf# ef4e1c815; Wife	-150.00
12/26/19	ALLSTATE NBINDCO DES:INS PYMT ID:000000967448326 INDN:VINICIUS F DA COSTA CO ID:1360719665 PPD	-179.80
12/27/19	CAPITAL ONE DES:MOBILE PMT ID:936039800215709 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-150.00

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Withdrawals and other subtractions - continued

Date	Description	Amount
12/30/19	CHECKCARD 1227 SQ *CORNELIO NAVARR RICHMOND CA 24492159361740191889925	-13.11
12/30/19	ARCO#07127ARCO 12/30 #000414309 PURCHASE ARCO#07127ARCO RICHMOND CA	-2.04
12/30/19	COSTCO GAS #04 12/30 #000421645 PURCHASE COSTCO GAS #0482 RICHMOND CA	-42.36
12/31/19	JAY VEE LIQUOR 12/31 #000002344 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-25.23
01/02/20	ATT DES:Payment ID:XXXXXXXXXEPAYN INDN:Vinicius da costa CO ID:9864031004 PPD	-65.00
01/03/20	COSTCO GAS #04 01/03 #000442928 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-31.46
01/03/20	CHEVRON/SALKHI 01/03 #000413228 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-29.55
01/06/20	CHECKCARD 0103 OAKLAND PARK METER IPS OAKLAND CA 24445000004000868787093	-1.75
01/06/20	CHECKCARD 0104 BURGER KING #981 https://prod.CA 24186160004091004346741	-21.82
01/06/20	LA LOMA NO 1 01/04 #000006577 PURCHASE LA LOMA NO 1 RICHMOND CA	-64.64
01/06/20	FOODMAXX#411 S 01/05 #000196012 MOBILE PURCHASE FOODMAXX#411 SA SAN PABLO CA	-5.67
01/06/20	SPROUTS FARMER 01/06 #000841755 MOBILE PURCHASE SPROUTS FARMERS PINOLE CA	-6.98
01/06/20	Online Banking payment to CRD 3267 Confirmation# 4236912160	-167.90
01/07/20	CHECKCARD 0106 BURGER KING #11964 https://prod.CA 24186160006400006086320	-7.43
01/07/20	COSTCO GAS #04 01/06 #000056530 PURCHASE COSTCO GAS #0482 RICHMOND CA	-37.57
01/08/20	CHECKCARD 0108 Spotify USA 877-7781161 NY 24204290008001056225858 RECURRING	-14.99
01/08/20	WHOLEFDS BRK 1 01/08 #000613665 MOBILE PURCHASE WHOLEFDS BRK 100 BERKELEY CA	-2.10
01/08/20	BKOFAMERICA ATM 01/08 #000004220 WITHDRWL UNIVERSITY BERKELEY CA	-300.00
01/08/20	BKOFAMERICA ATM 01/08 #000004221 WITHDRWL UNIVERSITY BERKELEY CA	-700.00
01/08/20	COSTCO WHSE #0 01/08 #000051736 MOBILE PURCHASE COSTCO WHSE #0482 RICHMOND CA	-37.09
01/08/20	JAY VEE LIQUOR 01/08 #000031710 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-25.23
01/09/20	COSTCO GAS #04 01/09 #000237245 PURCHASE COSTCO GAS #0482 RICHMOND CA	-29.24
01/10/20	MOBILE PURCHASE 0108 LA LOMA NO 1 RICHMOND CA	-10.73
01/10/20	SAFEWAY #0676 01/10 #000175996 MOBILE PURCHASE SAFEWAY #0676 ALBANY CA	-5.99
01/10/20	SAFEWAY #2451 01/10 #000600648 MOBILE PURCHASE SAFEWAY #2451 BERKELEY CA	-14.98
01/13/20	CHECKCARD 0110 DisneyPLUS 888-9057888 CA 24906410010086338456794 RECURRING	-6.99
01/13/20	JAY VEE LIQUOR 01/10 #000044725 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-25.23
01/13/20	BERKELEY BOWL 01/11 #000490926 MOBILE PURCHASE BERKELEY BOWL W BERKELEY CA	-3.98
01/13/20	SAFEWAY #0691 01/11 #000678758 MOBILE PURCHASE SAFEWAY #0691 BERKELEY CA	-16.28

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Withdrawals and other subtractions - continued

Date	Description	Amount
01/13/20	CHECKCARD 0111 THE SOLAR CAR WASH 1 - BERKELEY CA 24428060012100521554206	-11.00
01/13/20	COSTCO WHSE #0 01/12 #000209480 MOBILE PURCHASE COSTCO WHSE #0482 RICHMOND CA	-174.62
01/13/20	MARSHALL' 1075 01/12 #000930311 MOBILE PURCHASE MARSHALL' 10759 S EL CERRITO CA	-92.39
01/13/20	MAYA TAQUERIA 01/13 #000993064 PURCHASE MAYA TAQUERIA RICHMOND CA	-34.93
01/13/20	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-91.65
01/14/20	COSTCO GAS #04 01/13 #000416939 PURCHASE COSTCO GAS #0482 RICHMOND CA	-32.05
01/14/20	SAFEWAY #2940 01/13 #000184731 PURCHASE SAFEWAY #2940 EL CERRITO CA	-9.98
01/14/20	CAPITAL ONE DES:MOBILE PMT ID:001339800840395 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-250.00
Total withdrawals and other subtractions		**-$5,780.29**

Service fees

Date	Transaction description	Amount
12/23/19	P508232 12/21 #000436959 WITHDRWL EMERY BAY PU-5082 EMERVILLE CA FEE	-2.50
Total service fees		**-$2.50**

Note your Ending Balance already reflects the subtraction of Service Fees.

BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

Customer service information

Customer service: 1.800.432.1000

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.
P.O. Box 25118
Tampa, FL 33622-5118

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Your Adv Plus Banking

for January 15, 2020 to February 11, 2020

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on January 15, 2020	$153.59
Deposits and other additions	5,516.54
Withdrawals and other subtractions	-5,587.93
Checks	-0.00
Service fees	-0.00
Ending balance on February 11, 2020	**$82.20**

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IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

Updating your contact information - We encourage you to keep your contact information up-to-date. This includes address, email and phone number. If your information has changed, the easiest way to update it is by visiting the Help & Support tab of Online Banking.

Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

- Tell us your name and account number.
- Describe the error or transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (10 calendar days if you are a Massachusetts customer) (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account) to do this, we will provisionally credit your account for the amount you think is in error, so that you will have use of the money during the time it will take to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we credit your account at the conclusion of our investigation.

Reporting other problems - You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or an unauthorized transaction within the time period specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you and you agree to not make a claim against us, for the problems or unauthorized transactions.

Direct deposits - If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us to find out if the deposit was made as scheduled. You may also review your activity online or visit a financial center for information.

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Deposits and other additions

Date	Description	Amount
01/15/20	Zelle Transfer Conf# ade0f9ccb; DOS SANTOS, CYNARA	100.00
01/16/20	Zelle Transfer Conf# 765f35a28; DOS SANTOS, CYNARA	330.00
01/17/20	Uber Instant-P 01/17 #000197283 PMNT RCVD Uber Instant-Pay San Francisco CA	139.77
01/17/20	Zelle Transfer Conf# 1211e4f1d; DE ALMEIDA, MARCOS	7.50
01/21/20	Online Banking Transfer Conf# abdfc779d; WELSH, CHRISTOPHER	1,359.00
01/21/20	Online Banking Transfer Conf# 65fcdf714; WELSH, CHRISTOPHER	414.00
01/21/20	Online Banking Transfer Conf# d30db1981; WELSH, CHRISTOPHER	99.00
01/21/20	Online Banking Transfer Conf# 64be108cf; WELSH, CHRISTOPHER	90.00
01/27/20	Bank of America DES:CASHREWARD ID:FERREIRA DA COS INDN:00000006122674520000000 CO ID:2002290310 PPD	11.67
01/29/20	STRIPE DES:Vinicius F ID:ST-O7R6K3H5Q1U9 INDN:VINICIUS FERREIRADACOS CO ID:1800948598 CCD	1,500.00
01/30/20	Zelle Transfer Conf# 1ff2d3a73; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
01/31/20	Uber 01/31 #000828789 PMNT RCVD Uber San Francisco CA	75.60
02/03/20	Uber 02/01 #000685811 PMNT RCVD Uber San Francisco CA	69.38
02/05/20	Zelle Transfer Conf# bb9f86858; DOS SANTOS, CYNARA	250.00
02/06/20	Online Banking Transfer Conf# 066497f98; WELSH, CHRISTOPHER	855.04
02/10/20	Uber 02/08 #000870833 PMNT RCVD Uber San Francisco CA	105.94
02/11/20	Uber 02/10 #000724279 PMNT RCVD Uber San Francisco CA	74.64
Total deposits and other additions		**$5,516.54**

Help prevent fraud

Just a friendly reminder to make sure your contact information is up to date. It helps us reach you quickly if we detect suspicious activity. Simply sign in to Online Banking and go to Profile & Settings or use the Mobile Banking app.[1]

Is your contact info up to date? Check now at **bankofamerica.com**.

[1]Mobile Banking requires that you download the Mobile Banking app and is only available for select mobile devices. Message and data rates may apply.
Bank of America, N.A. Member FDIC.

SSM-07-19-0200.B | ARMRCXRQ

Withdrawals and other subtractions

Date	Description	Amount
01/15/20	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-218.71
01/16/20	SAFEWAY #0691 01/16 #000243749 PURCHASE SAFEWAY #0691 BERKELEY CA	-7.68
01/16/20	BKOFAMERICA ATM 01/16 #000006929 WITHDRWL EL CERRITO EL CERRITO CA	-320.00
01/17/20	AIRPORT BLVD G 01/17 #000128897 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-3.59
01/17/20	AIRPORT BLVD G 01/17 #000337443 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.53
01/17/20	JAY VEE LIQUOR 01/17 #000175501 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-25.23
01/17/20	0549 /2CA049 S 01/17 #000051460 PURCHASE 0549 /2CA049 SEES EL CERRITO CA	-35.50
01/21/20	CHECKCARD 0118 EXTREME PIZZA - PARK PL RICHMOND CA 24269790018001038018743	-15.00
01/21/20	CHECKCARD 0118 FASTRAK CSC 415-486-8655 CA 24431060018075019900013	-45.00
01/21/20	COSTCO GAS #04 01/18 #000057172 PURCHASE COSTCO GAS #0482 RICHMOND CA	-34.46
01/21/20	CHECKCARD 0118 CITY OF BERKELEY- IPS BERKELEY CA 24493980019200899447595	-2.00
01/21/20	MOBILE PURCHASE 0119 Netflix.com netflix.com CA	-12.99
01/21/20	BERKELEY BOWL 01/19 #000432715 MOBILE PURCHASE BERKELEY BOWL W BERKELEY CA	-6.18
01/21/20	COSTCO GAS #04 01/21 #000434349 PURCHASE COSTCO GAS #0482 RICHMOND CA	-33.15
01/21/20	JAY VEE LIQUOR 01/21 #000032944 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
01/22/20	COSTCO GAS #04 01/22 #000213480 PURCHASE COSTCO GAS #0482 RICHMOND CA	-28.02
01/22/20	COSTCO WHSE #0 01/22 #000030376 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-31.59
01/22/20	COSTCO WHSE #0 01/22 #000841453 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-1.64
01/22/20	HONDA PMT DES:8002058235 ID:2KLJHGS01UIWZ6K INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
01/22/20	PRONTO MONEY TRA DES:8776528709 ID:2KLQOPAUUS2SR92 INDN:VINICIUS FERREIRA DA C CO ID:3202381863 PPD	-606.94
01/22/20	PGANDE DES:WEB ONLINE ID:41924698010220 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-92.73
01/23/20	SAFEWAY #2451 01/23 #000426925 PURCHASE SAFEWAY #2451 BERKELEY CA	-15.86
01/27/20	JAY VEE LIQUOR 01/24 #000051439 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
01/27/20	CHECKCARD 0125 DONUT TIME EL CERRITO CA 24692160026100471025422	-10.30
01/27/20	7-ELEVEN 01/25 #000899228 PURCHASE 7-ELEVEN ALBANY CA	-14.48
01/27/20	SAFEWAY #0691 01/25 #000754758 PURCHASE SAFEWAY #0691 BERKELEY CA	-5.00
01/27/20	SAFEWAY #3132 01/25 #000067060 PURCHASE SAFEWAY #3132 OAKLAND CA	-3.99
01/27/20	COSTCO GAS #04 01/26 #000475339 PURCHASE COSTCO GAS #0482 RICHMOND CA	-39.08
01/27/20	SAFEWAY #3132 01/26 #000938758 PURCHASE SAFEWAY #3132 OAKLAND CA	-18.65
01/27/20	COSTCO WHSE #0 01/26 #000463770 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-100.74
01/27/20	SAFEWAY #2940 01/26 #000367957 MOBILE PURCHASE SAFEWAY #2940 EL CERRITO CA	-21.83
01/27/20	JAY VEE LIQUOR 01/27 #000020122 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43

continued on the next page

Withdrawals and other subtractions - continued

Date	Description	Amount
01/28/20	CHECKCARD 0127 SQ *KAADY CAR WASHES 32 Albany CA 24692160028100769947459	-18.00
01/28/20	Tropical Trop 01/28 #000222379 PURCHASE Tropical Tropica El Cerrito CA	-73.00
01/29/20	BKOFAMERICA ATM 01/29 #000001398 WITHDRWL EL CERRITO EL CERRITO CA	-700.00
01/29/20	BKOFAMERICA ATM 01/29 #000001399 WITHDRWL EL CERRITO EL CERRITO CA	-300.00
01/30/20	CHECKCARD 0129 TROPICAL FISH WORLD EL CERRITO CA 24239000029900011400125	-8.79
01/30/20	CHECKCARD 0130 PlaystationNetwork 800-3457669 CA 24204290030000038823725	-10.00
01/31/20	COSTCO GAS #04 01/31 #000411591 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-33.03
01/31/20	Zelle Transfer Conf# e3a07ed28; Wife	-100.00
01/31/20	JAY VEE LIQUOR 01/31 #000205137 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
01/31/20	CHEVRON/CSI-09 01/31 #000497859 PURCHASE CHEVRON/CSI-09740 ORINDA CA	-3.97
01/31/20	CAPITAL ONE DES:MOBILE PMT ID:003039800078117 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-304.61
02/03/20	CHECKCARD 0131 MOD PIZZA EL CERRITO B EL CERRITO CA 24013390031004046344771	-26.16
02/03/20	CHECKCARD 0201 UBER TRIP HELP.UBER.COMCA 24492150032717275060407	-4.46
02/03/20	AIRPORT BLVD G 02/01 #000915252 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-4.37
02/03/20	CHECKCARD 0201 SQ *IPANEMA GRILL INC EL CERRITO CA 24692160032100677019775	-5.23
02/03/20	CHECKCARD 0202 TST* BURGERIM - PLEASAN PLEASANT HILLCA 24137460033100617719514	-37.42
02/03/20	COSTCO GAS #04 02/02 #000504395 PURCHASE COSTCO GAS #0422 SO SAN FRANC CA	-38.41
02/03/20	CHEVRON/SALKHI 02/02 #000058818 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-1.89
02/03/20	SPROUTS FARMER 02/02 #000203387 PURCHASE SPROUTS FARMERS ALBANY CA	-47.94
02/03/20	WALGREENS STOR 02/02 #000601980 PURCHASE WALGREENS STORE 1 EL CERRITO CA	-17.55
02/03/20	CHEVRON/CSI-09 02/03 #000222909 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-9.29
02/04/20	COSTCO WHSE #0 02/04 #000251339 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-35.85
02/04/20	Zelle Transfer Conf# 47ff8505a; Marcos Dock	-13.25
02/04/20	ATT DES:Payment ID:XXXXXXXXXEPAYT INDN:Vinicius da costa CO ID:9864031004 PPD	-65.00
02/05/20	CENTRAL FOODS 02/05 #000014192 PURCHASE CENTRAL FOODS EL SOBRANTE CA	-12.64
02/05/20	Central Food S 02/05 #000024603 PURCHASE Central Food Supe El Sobrante CA	-37.86
02/05/20	Online Banking payment to CRD 3267 Confirmation# 1596369497	-132.12
02/07/20	CHEVRON/CSI-09 02/07 #000195251 PURCHASE CHEVRON/CSI-09010 RICHMOND CA	-10.98
02/07/20	CHECKCARD 0207 ARCO#00428SALE RICHMOND CA	-25.91
02/10/20	Zelle Transfer Conf# 6d5a57699; Denise Contadora USA	-220.00
02/10/20	CHECKCARD 0207 BURGER KING #981 https://prod.CA 24186160039091001813536	-28.36
02/10/20	PURCHASE 0208 Spotify USA 877-7781161 NY	-14.99

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Withdrawals and other subtractions - continued

Date	Description	Amount
02/10/20	CHEVRON/SALKHI 02/07 #000330082 PURCHASE CHEVRON/SALKHI PE EL CERRITO CA	-28.46
02/10/20	AIRPORT BLVD G 02/08 #000112397 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-1.96
02/10/20	CHECKCARD 0208 THE SOLAR CAR WASH 1 - BERKELEY CA 24428060040100617329048	-9.00
02/10/20	SAFEWAY #2940 02/08 #000097046 PURCHASE SAFEWAY #2940 EL CERRITO CA	-38.41
02/10/20	CHECKCARD 0209 FASTRAK CSC 415-486-8655 CA 24431060040075026794898	-45.00
02/10/20	COSTCO WHSE #0 02/09 #000554060 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-174.61
02/11/20	SAFEWAY #2940 02/10 #000277287 PURCHASE SAFEWAY #2940 EL CERRITO CA	-10.49
02/11/20	COSTCO GAS #04 02/11 #000059824 PURCHASE COSTCO GAS #0482 RICHMOND CA	-37.97
02/11/20	CAPITAL ONE DES:MOBILE PMT ID:004139800398796 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-300.00
02/11/20	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-92.40
Total withdrawals and other subtractions		**-$5,587.93**

BANK OF AMERICA

P.O. Box 15284
Wilmington, DE 19850

VINICIUS FERREIRA DA COSTA
10944 SAN PABLO AVE APT 212
EL CERRITO, CA 94530-2373

Customer service information

Customer service: 1.800.432.1000

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P.O. Box 25118
Tampa, FL 33622-5118

Please see the **Important Messages - Please Read** section of your statement for important details that could impact you.

Your Adv Plus Banking

for February 12, 2020 to March 13, 2020

Account number: 3251 1205 4441

VINICIUS FERREIRA DA COSTA

Account summary

Beginning balance on February 12, 2020	$82.20
Deposits and other additions	6,548.19
Withdrawals and other subtractions	-6,490.36
Checks	-0.00
Service fees	-12.00
Ending balance on March 13, 2020	**$128.03**

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IMPORTANT INFORMATION:
BANK DEPOSIT ACCOUNTS

How to Contact Us - You may call us at the telephone number listed on the front of this statement.

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Deposit agreement - When you opened your account, you received a deposit agreement and fee schedule and agreed that your account would be governed by the terms of these documents, as we may amend them from time to time. These documents are part of the contract for your deposit account and govern all transactions relating to your account, including all deposits and withdrawals. Copies of both the deposit agreement and fee schedule which contain the current version of the terms and conditions of your account relationship may be obtained at our financial centers.

Electronic transfers: In case of errors or questions about your electronic transfers - If you think your statement or receipt is wrong or you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address and number listed on the front of this statement as soon as you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

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Deposits and other additions

Date	Description	Amount
02/12/20	Zelle Transfer Conf# 8b3820012; DOS SANTOS, CYNARA	200.00
02/14/20	Uber 02/14 #000990991 PMNT RCVD Uber San Francisco CA	91.74
02/18/20	BKOFAMERICA MOBILE 02/16 3683639666 DEPOSIT *MOBILE CA	500.00
02/18/20	Zelle Transfer Conf# f3b1fbb5a; DOS SANTOS, CYNARA	200.00
02/18/20	Uber 02/18 #000015919 PMNT RCVD Uber San Francisco CA	69.48
02/18/20	Zelle Transfer Conf# 6613a4ce4; DE ALMEIDA, MARCOS	50.00
02/19/20	RAISER 6795 DES:EDI PAYMNT ID:6C96HYKQV7RPGR8 INDN:Vinicius Ferreira da c CO ID:3800896455 CCD PMT INFO:REF*TN*6C96HYKQV7\	7.50
02/21/20	Online Banking Transfer Conf# 68e650d2c; WELSH, CHRISTOPHER	1,733.63
02/21/20	Zelle Transfer Conf# 4f3047290; DOS SANTOS, CYNARA	500.00
02/21/20	Uber 02/21 #000492873 PMNT RCVD Uber San Francisco CA	93.19
02/21/20	Zelle Transfer Conf# cef202d41; DE ALMEIDA, MARCOS	12.00
02/24/20	Zelle Transfer Conf# 8c4d6124e; FERREIRA, BRENER	74.28
02/25/20	Uber 02/24 #000076501 PMNT RCVD Uber San Francisco CA	141.76
02/25/20	RAISER 6795 DES:EDI PAYMNT ID:TC13M4620Q56HI6 INDN:Vinicius Ferreira da c CO ID:3800896455 CCD PMT INFO:REF*TN*TC13M4620Q\	2.50
03/02/20	Uber 02/28 #000955313 PMNT RCVD Uber San Francisco CA	177.27
03/02/20	Zelle Transfer Conf# 5e47ea0f4; MARINHO, JAIR	165.00
03/02/20	Zelle Transfer Conf# bfa281598; OLIVEIRA SANTOS, KAIQUE EMANOEL	35.00
03/05/20	Online Banking Transfer Conf# 47d2cb0d4; WELSH, CHRISTOPHER	1,725.81
03/06/20	BKOFAMERICA ATM 03/06 #000009908 DEPOSIT MIRA VISTA RICHMOND CA	100.00
03/09/20	Uber 03/08 #000612401 PMNT RCVD Uber San Francisco CA	73.43
03/09/20	Uber 03/06 #000397397 PMNT RCVD Uber San Francisco CA	65.60
03/10/20	Zelle Transfer Conf# 79b345f19; DOS SANTOS, CYNARA	330.00
03/10/20	Zelle Transfer Conf# 3c0c7dd34; DOS SANTOS, CYNARA	200.00
Total deposits and other additions		**$6,548.19**

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Investment products: **Are Not FDIC Insured** | **Are Not Bank Guaranteed** | **May Lose Value**

SSM-12-19-0082.B | 2847602

Withdrawals and other subtractions

Date	Description	Amount
02/12/20	CHECKCARD 0211 AMZN MKTP US*JL5YC9U43 AMZN.COM/BILLWA 24431060042083722492302	-16.45
02/12/20	CHECKCARD 0210 DisneyPLUS 888-9057888 CA 24906410041088217410952 RECURRING	-6.99
02/12/20	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-198.91
02/14/20	AIRPORT BLVD G 02/14 #000323178 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-30.49
02/14/20	AIRPORT BLVD G 02/14 #000130699 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-2.07
02/18/20	CHECKCARD 0216 UBER TRIP HELP.UBER.COMCA 24492150047719444994659	-6.21
02/18/20	WHALEPOINT MAR 02/15 #000004659 PURCHASE WHALEPOINT MARINE RICHMOND CA	-0.54
02/18/20	CHECKCARD 0217 AMAZON.COM*AS17684C3 AM AMZN.COM/BILLWA 24431060048083304643219	-34.32
02/18/20	COSTCO GAS #04 02/17 #000863241 PURCHASE COSTCO GAS #0482 RICHMOND CA	-31.65
02/18/20	CHECKCARD 0217 SQ *KAADY CAR WASHES 32 Albany CA 24692160049100300342140	-10.00
02/18/20	JAY VEE LIQUOR 02/17 #000010240 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
02/18/20	O'REILLY AUTO 02/17 #000544698 PURCHASE O'REILLY AUTO PAR EL CERRITO CA	-14.26
02/18/20	RINCON LATINO 02/17 #000493704 PURCHASE RINCON LATINO I RICHMOND CA	-13.76
02/18/20	SPRINT8006396111 DES:ACHBILLPAY ID:XXXXXXXXX INDN:CYNARA DOSSANTOS CO ID:2521616695 PPD	-209.98
02/19/20	CHECKCARD 0218 STARBUCKS 800-782-7282 WA 24692160049100528772763	-15.00
02/20/20	PURCHASE 0219 Netflix.com netflix.com CA	-12.99
02/20/20	COSTCO GAS #04 02/20 #000519020 PURCHASE COSTCO GAS #0482 RICHMOND CA	-28.47
02/20/20	JAY VEE LIQUOR 02/20 #000014457 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-36.50
02/20/20	PGANDE DES:WEB ONLINE ID:44375636013120 INDN:VINICIUS F DA COSTA CO ID:5940742640 WEB	-84.78
02/21/20	WHALEPOINT MAR 02/21 #000195131 PURCHASE WHALEPOINT MARINE RICHMOND CA	-7.64
02/21/20	HONDA PMT DES:8002058235 ID:2KR6YSMLNMFIQ7Z INDN:VINICIUS DA COSTA CO ID:AXXXXXXXXX PPD	-646.96
02/24/20	CHECKCARD 0220 SPEED OIL CHANGE CENTER EL CERRITO CA 24765180052030021267967	-71.58
02/24/20	CHECKCARD 0221 SQ *CORNELIO NAVARRO Richmond CA 24692160052100682279955	-26.22
02/24/20	CHECKCARD 0221 SUPER DUPER BURGER EMER EMERYVILLE CA 24765010053206088104792	-41.52
02/24/20	CHECKCARD 0221 SUPER DUPER BURGER EMER EMERYVILLE CA 24765010053206088105096	-9.29
02/24/20	CHECKCARD 0222 BURGER KING #5792 https://prod.CA 24186160053091002568833	-30.45
02/24/20	CHECKCARD 0222 BURGER KING #5792 EMERYVILLE CA 24186160054091542001013	-3.70
02/24/20	CHECKCARD 0222 DAISO BA17 EMV EMERYVILLE CA 24717050054150543046178	-28.97
02/24/20	ROSS STORES #2 02/22 #000061199 PURCHASE ROSS STORES #260 EMERYVILLE CA	-75.13
02/24/20	MARSHALLS 5795 02/22 #000133984 PURCHASE MARSHALLS 5795 CH EMERYVILLE CA	-65.51
02/24/20	SAFEWAY #2940 02/23 #000508276 PURCHASE SAFEWAY #2940 EL CERRITO CA	-3.99
02/24/20	COSTCO GAS #04 02/24 #000298240 PURCHASE COSTCO GAS #0482 RICHMOND CA	-31.65

continued on the next page

Withdrawals and other subtractions - continued

Date	Description	Amount
02/24/20	JAY VEE LIQUOR 02/24 #000013554 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
02/24/20	PRONTO MONEY TRA DES:8776528709 ID:2KRDQCYXD2JA51A INDN:VINICIUS FERREIRA DA C CO ID:3202381863 PPD	-585.70
02/25/20	CHECKCARD 0224 CHEVRON 0090103 RICHMOND CA 24692160055100546486702	-9.38
02/26/20	CHECKCARD 0225 AMAZON.COM*ZY8UR0LF3 AM AMZN.COM/BILLWA 2443106005608331384 7982	-79.11
02/27/20	CHECKCARD 0226 FASTRAK CSC 415-486-8655 CA 24431060057075032602119	-35.00
02/27/20	COSTCO WHSE #0 02/27 #000291653 PURCHASE COSTCO WHSE #0482 RICHMOND CA	-63.10
02/27/20	CAPITAL ONE DES:MOBILE PMT ID:005739800121241 INDN:DA COSTAVINICIUS CO ID:9279744980 WEB	-200.00
02/28/20	CHECKCARD 0228 ARCO#00428SALE RICHMOND CA	-34.39
02/28/20	AIRPORT BLVD G 02/28 #000105777 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-28.52
02/28/20	AIRPORT BLVD G 02/28 #000787991 PURCHASE AIRPORT BLVD GAS S SAN FRANCIS CA	-5.05
03/02/20	CHECKCARD 0229 ARCO#00428SALE RICHMOND CA	-27.61
03/02/20	LA LOMA NO 1 02/29 #000000277 PURCHASE LA LOMA NO 1 RICHMOND CA	-21.33
03/02/20	LA LOMA NO 1 02/29 #000000278 PURCHASE LA LOMA NO 1 RICHMOND CA	-143.49
03/02/20	ARCO#00428SALE 02/29 #000870886 PURCHASE ARCO#00428SALEE RICHMOND CA	-2.25
03/02/20	CHECKCARD 0229 IN N OUT BURGER 213 SACRAMENTO CA 24013390061000116085792	-20.55
03/02/20	CHECKCARD 0229 IN N OUT BURGER 213 SACRAMENTO CA 24013390061000116086261	-3.21
03/02/20	CHEVRON/CSI-21 02/29 #000035524 PURCHASE CHEVRON/CSI-21028 ROSEVILLE CA	-50.49
03/02/20	SMART AND FINA 02/29 #000964329 PURCHASE SMART AND FINAL ROSEVILLE CA	-29.09
03/02/20	SMART AND FINA 02/29 #000597350 PURCHASE SMART AND FINAL ROSEVILLE CA	-19.99
03/02/20	COSTCO GAS #04 03/01 #000895237 PURCHASE COSTCO GAS #0482 RICHMOND CA	-20.78
03/02/20	ARCO#83236SHER 03/01 #000189122 PURCHASE ARCO#83236SHERG WEST SACRAMEN CA	-4.53
03/02/20	CHECKCARD 0301 SQ *KAADY CAR WASHES 32 Albany CA 24692160062100016035386	-10.00
03/02/20	BKOFAMERICA ATM 03/01 #000002025 WITHDRWL EL CERRITO EL CERRITO CA	-700.00
03/04/20	Zelle Transfer Conf# 7d500f489; Jair Junio	-10.00
03/04/20	7-ELEVEN 03/04 #000093426 PURCHASE 7-ELEVEN RICHMOND CA	-10.06
03/04/20	KWIK SERV GAS 03/04 #000699095 PURCHASE KWIK SERV GAS RICHMOND CA	-6.35
03/04/20	JAY VEE LIQUOR 03/04 #000012625 PURCHASE JAY VEE LIQUOR EL CERRITO CA	-27.43
03/05/20	BKOFAMERICA ATM 03/05 #000003475 WITHDRWL EL CERRITO EL CERRITO CA	-700.00
03/05/20	BKOFAMERICA ATM 03/05 #000003477 WITHDRWL EL CERRITO EL CERRITO CA	-300.00
03/05/20	SAFEWAY #2940 03/05 #000209707 PURCHASE SAFEWAY #2940 EL CERRITO CA	-23.41

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Withdrawals and other subtractions - continued

Date	Description	Amount
03/05/20	ATT DES:Payment ID:XXXXXXXXXEPAYY INDN:Vinicius da costa CO ID:9864031004 PPD	-65.00
03/06/20	Online Banking payment to CRD 3267 Confirmation# 1551854231	-202.54
03/06/20	COSTCO GAS #04 03/06 #000019902 PURCHASE COSTCO GAS #0482 RICHMOND CA	-29.99
03/06/20	THE HOME DEPOT 03/06 #000619996 PURCHASE THE HOME DEPOT #0 EL CERRITO CA	-110.85
03/09/20	CHECKCARD 0307 STARBUCKS 800-782-7282 WA 24692160067100726436606	-20.00
03/09/20	SAFEWAY #2940 03/06 #000544728 PURCHASE SAFEWAY #2940 EL CERRITO CA	-18.36
03/09/20	TRADER JOE'S # 03/07 #000485365 PURCHASE TRADER JOE'S # 10 EL CERRITO CA	-35.70
03/09/20	SHELL SERVICE 03/07 #000444696 PURCHASE SHELL SERVICE S EMERYVILLE CA	-50.23
03/09/20	CHECKCARD 0308 Spotify USA 877-7781161 NY 24204290068001351505852 RECURRING	-14.99
03/09/20	CHECKCARD 0307 MR PIZZA MAN RICHMOND CA 24431060069400481000415	-43.48
03/09/20	GOODWILL INDUS 03/08 #000028586 PURCHASE GOODWILL INDUSTRI ALBANY CA	-21.96
03/09/20	MARSHALL' 1075 03/08 #000323678 PURCHASE MARSHALL' 10759 S EL CERRITO CA	-32.91
03/10/20	CHECKCARD 0309 UBER TRIP HELP.UBER.COMCA 24492150069715121321037	-9.90
03/10/20	CHECKCARD 0310 AMAZON.COM*KN5783J03 AM AMZN.COM/BILLWA 24431060070083309656134	-101.95
03/11/20	CHECKCARD 0310 AMZN MKTP US*8M2CE62L3 AMZN.COM/BILLWA 24431060070083737134613	-15.09
03/11/20	NWP DES:ONLINE PAY ID:EPAY10003418589 INDN:VINICIUS F DA COSTA CO ID:1835451512 WEB	-94.95
03/12/20	CHECKCARD 0311 DisneyPLUS 888-9057888 CA 24906410071090061655503 RECURRING	-6.99
03/12/20	CHECKCARD 0312 ARCO#00428SALE RICHMOND CA	-11.17
03/12/20	LA LOMA NO 1 03/12 #000002199 PURCHASE LA LOMA NO 1 RICHMOND CA	-5.04
03/12/20	ARCO#00428SALE 03/12 #000603967 PURCHASE ARCO#00428SALEE RICHMOND CA	-5.35
03/12/20	PRONTO MONEY TRA DES:8776528709 ID:2KUOC6E4K62H2HQ INDN:VINICIUS FERREIRA DA C CO ID:3202381863 PPD	-333.08
03/12/20	ALLSTATE NBINDCO DES:INS PREM ID:000000967448326 INDN:DA COSTA CO ID:1362999368 WEB	-198.91
03/13/20	SAFEWAY #2940 03/12 #000736014 PURCHASE SAFEWAY #2940 EL CERRITO CA	-40.26
Total withdrawals and other subtractions		**-$6,490.36**

Service fees

Date	Transaction description	Amount
03/13/20	Monthly Maintenance Fee	-12.00
Total service fees		**-$12.00**

Note your Ending Balance already reflects the subtraction of Service Fees.

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Important Messages - Please Read

We want to make sure you stay up-to-date on changes, reminders, and other important details that could impact you.

On May 21, 2020, we are increasing the amount of funds that will be available when a check deposit is put on hold.

Here are the updates to your Deposit Agreement and Disclosures. You can see these updates at bankofamerica.com/depositagreement after the May effective date.

When a hold is placed on your check deposit:

- The first $225 (previously $200) of your check deposit will be available the next business day (see "Longer Delays May Apply").
- For certain check deposits into new accounts, the first $5,525 (previously $5,000) of a day's total deposits will be available the next business day (see "Special Rules for New Accounts").
- Cash withdrawal limitations will no longer apply (previously $400) (see "Cash-Withdrawal Limitation," to be deleted in May).

In addition, we may place a longer hold when you deposit checks totaling more than $5,525 (previously $5,000) on any one day (see "Longer Delays May Apply").

For additional information regarding the availability of funds after a check deposit, please review the "When Funds are Available for Withdrawal and Deposit Holds" section of our Deposit Agreement at www.bankofamerica.com/depositagreement.

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Exhibit 12 - Eligibility Requirement: Evidence of Severe Form of Trafficking / Physical Presence / Community Ties / Good Moral Character: Letters of Support

Support letter for Vinicius F. Da Costa T visa application

I, Cynara Dos Santos, born in Goiânia, Goiás, Brazil, on October 14, 1987. I have known Vinicius for 19 years. We have been married since 2015 and in a relationship since 2011.

We came to the United States in 2017 together with our daughter Júlia in search of a safer life. Vinicius has always been the main provider for our family, and upon arriving here it was no different, he is very hardworking and always very responsible. In 2018, after trying to provide for us by working in construction without being able to cover all the expenses, he found a Brazilian (Gustavo) in a WhatsApp group offering a temporary job. After a week of occasional work, Gustavo made an offer for a permanent position, Vinicius would have 8 guaranteed hours a day and earn $15 per hour. The job consisted of maintaining the Marina (Sugar Dock) and making small repairs on the boats docked there. As his wife, I felt relieved and encouraged him to accept the position, he would work fewer hours and there was the promise that his salary would be increased shortly after confirming that he was suitable for the job. At the beginning, we were happy with the change, the work seemed lighter than what he had encountered in construction up to that point. However, then came very specific tasks that required skills Vinicius had not been trained to have. He always reported a friendly work environment among his colleagues, but whenever the boss (Cris Welsh) was present at the Marina they were subjected to humiliations and insults. The tasks came to include increasingly dangerous undertakings with very little or no safety protection at all. The hours that were

----//signature//----

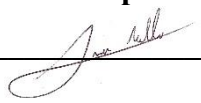
initially supposed to be fixed began to vary, many times he had to work night shifts without prior notice or any pay adjustment. The promised salary increase never came, and based on Vinicius and his colleagues' lack of documentation, the supervisors and Chris Welsh always reinforced their immigration status as the reason why they had to work hard, since because of it they would not be employed anywhere else. Vinicius sent me, on several occasions, photographs of weapons or ammunition found on the boats or in Chris' house, always left as if they were meant to be discovered to scare them. The job I had encouraged him to accept began to feel more dangerous and hostile with each passing day. But despite the shouting and insults, Chris or Gustavo were always implying that as soon as Vinicius had his documents in hand, he could earn more, as if they had some way to regularize his status. This supposed help with obtaining legal status, the promised salary increase, the threats that he would not be able to find work elsewhere, combined with the very little money Vinicius was able to earn at the Marina, convinced us that staying at the Marina was the only option Vinicius had to support our family; even though many times he was instructed to hide because of the presence of ICE agents at the docks, with the supervisors always emphasizing that they (Vinicius and his colleagues) were only safe because they worked at Sugar Dock. Vinicius was injured several times at work and was always instructed not to seek medical help, the supervisors Gustavo and James made it clear that because Vinicius and the other workers were undocumented, they were not covered by the company's insurance and that this would have consequences both for them and for Chris himself. The last time Vinicius was injured, I personally treated his wounds at home, very afraid that he could have serious complications due to the severity of the injury; he had to continue working even while hurt and without medical assistance. The certainty that Vinicius would not find a better position kept him at the Marina for two years. When the first lockdown due to the COVID-19 pandemic was decreed in March 2020, they stopped activities at the Marina with no expected return, and Vinicius began working in construction for his current employer.

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----//signature//---- 9/1/2025

Cynara Dos Santos
(510)253-5992
cynara.santos.cs@gmail.com

I, André Vinícius Inacio Penna Mello, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



Date: September 2, 2025.

Carta de suporte para aplicação de visto T de Vinicius F. Da Costa

Eu Cynara Dos Santos, nascida em Goiânia, Goiás, Brasil em outubro 14, 1987. Conheço Vinicius a 19 anos. Somos casados desde 2015 e nos relacionamos desde 2011.

Viemos para os Estados Unidos em 2017 juntamente com nossa filha Júlia em busca de uma vida mais segura. Vinicius sempre foi o provedor principal de nossa família e chegando aqui não foi diferente, ele muito trabalhador e sempre muito responsável em 2018, depois de tentar prover para nós trabalhando na construção sem conseguir cobrir todas as despesas, encontrou um brasileiro (Gustavo) em um grupo de WhatsApp oferecendo um trabalho temporário. Depois de uma semana de trabalho sem compromisso Gustavo fez uma proposta para uma posição fixa, Vinicius teria 8 horas diárias garantidas e receberia $15 a hora. O trabalho consistia em dar manutenção na Marina (Sugar Dock) e fazer alguns pequenos reparos nos barcos lá estacionados. Eu como esposa fiquei aliviada e o incentivei a aceitar a vaga, ele trabalharia menos horas e tinha a promessa de que teria seu salário aumentado em pouco tempo, após a confirmação de que ele serviria para o serviço. Logo no começo ficamos felizes com a mudança, o serviço parecia mais leve do que o que ele havia encontrado na construção até então. Porém então vieram serviços bem específicos, que exigiam habilidades que o Vinicius não tinha sido treinado a ter, ele sempre relatava um ambiente de trabalho amistoso entre os colegas, mas sempre que o patrão (Cris Welsh) estava presente na Marina eles sofriam humilhações e xingamentos. As tarefas passaram a incluir empreitadas cada vez mais perigosas e com muito pouco ou sem nenhum tipo de proteção de segurança. As horas q inicialmente seriam horas fixas

passaram a variar, muitas vezes ele teve que cumprir turnos noturnos sem aviso prévio ou ajuste de pagamento. O aumento salarial prometido nunca chegava com base na falta de documentação de Vinicius e seus colegas, os encarregados e Chris Welsh sempre reforçaram a ilegalidade imigratória como razão para que eles trabalhassem bem, pois por isso eles não seriam empregados em mais lugar algum. Vinicius me mandou, algumas vezes, fotografias de armas ou munições encontradas nos barcos ou na casa de Chris, sempre deixadas como se fossem supostas de serem encontradas para assusta-lós. O trabalho que havia incentivado a aceitar passou a soar perigoso e hostil a cada dia. Mas apesar dos gritos e xingamentos Chris ou Gustavo estavam sempre insinuando que assim que Vinicius estivesse com seus documentos em mãos ele poderia ganhar melhor, como se eles tivessem algum meio de legaliza-lo. Essa suposta ajuda para a legalização, o aumento salarial prometido, as ameaças de que ele não seria capaz de encontrar trabalho em outro lugar somados ao pouquíssimo dinheiro que o Vinicius conseguia receber na Marina nos convenciam de que ficar na Marina era a única opção que o Vinicius tinha para sustentar nossa família. Mesmo que por muitas vezes ele fosse orientado a se esconder por causa da presença de agentes do ICE nas docas com os supervisores sempre enfatizando que eles (Vinicius e seus colegas) só estavam seguros por trabalharem na Sugar Dock. Vinicius se machucou algumas vezes no trabalho e era sempre orientado a não procurar ajuda médica, os supervisores Gustavo e James deixavam claro que por serem indocumentados Vinicius, ou os outros trabalhadores não estavam cobertos pelo seguro da empresa e que isso traria consequências tanto para eles como que para o próprio Chris. Da última vez que Vinicius se machucou eu mesma fiz os curativos em casa com muito medo de que ele pudesse ter complicações sérias devido a gravidade do machucado, ele teve que continuar trabalhando mesmo machucado e sem ajuda médica. A certeza de que Vinicius não encontraria uma posição em um lugar melhor o segurou na Marina por dois anos, quando foi decretado o primeiro lockdown por causa da Pandemia de COVID19 em março de 2020 eles pararam as atividades na Marina sem previsão de retorno e Vinicius passou a trabalhar na construção com seu atual patrão.

Cynara Dos Santos 9/1/2025

Cynara Dos Santos
(510)253-5992
cynara.santos.cs@gmail.com



Cynara dos Santos

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

FR051008

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSPORT

TIPO / TYPE: P
PAÍS EMISSOR / ISSUING COUNTRY: BRA
PASSAPORTE Nº / PASSPORT No: FR051008

SOBRENOME / SURNAME: DOS SANTOS

NOME / GIVEN NAMES: CYNARA

NACIONALIDADE / NATIONALITY: BRASILEIRO(A)

DATA DO NASCIMENTO / DATE OF BIRTH: 14 OUT/OCT 1987

IDENTIDADE Nº / PERSONAL No:

SEXO / SEX: F

NATURALIDADE / PLACE OF BIRTH: GOIÂNIA/GO

FILIAÇÃO / FILIATION: NEILA DOS SANTOS

DATA DE EXPEDIÇÃO / DATE OF ISSUE: 24 JUN/JUN 2016

AUTORIDADE / AUTHORITY: SR/DPF/GO

VÁLIDO ATÉ / DATE OF EXPIRY: 23 JUN/JUN 2026

P<BRADOS<SANTOS<<CYNARA<<<<<<<<<<<<<<<<<<<<
FR051008<8BRA8710145F2606233<<<<<<<<<<<<<<02

Letter of support for T visa application for Vinicius Da Costa

Brener Neves Ferreiro

+1 (470) 782-7735

Brenerneves1@gmail.com

I, Brener Neves Ferreira, a Brazilian born in Goiânia-Goiás on June 18, 1994, met Vinicius da Costa in June 2018, my wife worked with Vinicius's wife in Brazil, and in October 2018, Vinicius told me that they were hiring at his workplace, so I met and spoke with Gustavo (Marina Supervisor) and started working at Sugar Dock.

The work was very dangerous and there was no training, we didn't have fixed duties. Once, Chris Welsh told us to clean a boat, while cleaning, Vinicius and I found firearm ammunition, we were apprehensive but continued working. In that same boat, Vinicius had to stay inside to steer, and Chris was in another boat towing it to reach the other side of the Marina, that boat had been out of the water for a long time, and when we put it back in the water, it started taking on water, and Vinicius had to keep using a pump so the boat wouldn't sink with him inside.

Another time was when he bought a boat called Hydropter, that boat was in a Marina in Hawaii, Chris then told James that we should take a plane to Hawaii and bring the boat back by sailing it, without any experience, so I, Vinicius, Ramiro, and Marcos said we wouldn't go because the risk to our lives was too great. Then he hired other experienced people to do that job, when the boat arrived, Chris told us to remove the mast, Vinicius, who had never done that before, was lifted to the top, tying some ropes to place a support so the mast could be removed by the crane.

Once, after working hours, Chris told Vinicius to take a trailer to Chris's house in Newport Beach, he had worked the entire day and drove through the night to get there. Chris did not accept "no" as an answer, and the next day Vinicius was working with us again, without any time to rest.

Another time, Vinicius injured his hand. I took the truck to take him to the hospital, but James prevented me from doing so, saying that we were not insured by the company and that they would not cover the cost. Vinicius's hand remained swollen for many days.

Once, Chris found a beaver floating in the Marina and said that the beaver's tail was worth a lot of money, it was already in a state of decomposition. We removed the beaver with the help of a net, and I, Vinicius, Ramiro, and Marcos spent the whole day trying to remove the tail, and the stench was terrible.

Chris had a personal boat that was his prized possession, he decided to renovate it, so he told us to cover it with a white tarp, we used fire to shape the boat, something we had never done before, and it was very dangerous. After covering it, we started sanding the boat; the heat was intense, and we had no time to rest. James always emphasized that Chris was a very influential man and that if we did the

job well he would help us with the paperwork to live legally in the United States. Vinicius and I believed him because immigration officers often came to the Marina and boarded boats all the time. During those times, James told us to hide in the containers because we weren't legal yet, but that Chris would help us in the future.

Because of the job, Vinicius and I held on to the hope of being able to legalize our status in the country.

Vinicius has always shown himself to be a person of character, honest, and trusting of others. He is always willing to help people, lives well in the community, and is always surrounded by friends. I believe that, just like me, he trusted that everything that was promised would be fulfilled one day.

We only stopped working at the Marina in March 2020 because the marina was closed due to COVID-19.

I, Brener Neves Ferreira, declare under penalty of perjury that the statements in this letter are true.



I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.


_____ Date: October 13, 2025.

Carta de suporte para aplicação visto T para Vinicius Da Costa

Brener Neves Ferreiro

+1 (470) 782-7735

Brenerneves1@gmail.com

Eu Brener Neves Ferreira, Brasileiro nascido em Goiânia-Go, no dia 18 de junho de 1994, conheci o Vinicius da Costa em junho de 2018, minha esposa trabalhou com a esposa do Vinicius no Brasil e em outubro de 2018 Vinicius me disse que estavam contratando no emprego que ele estava, então me encontrei e conversei com o Gustavo (Supervisor da Marina), e iniciei o trabalho na Sugar Dock.

O trabalho era muito perigoso e sem nenhum treinamento, não tínhamos função fixa, uma vez o Chris Welsh falou para limpar um barco, quando estávamos limpando eu e Vinicius encontramos munição de arma de fogo, ficamos apreensíveis mais continuamos a trabalhar, nesse mesmo barco Vinicius teve que ficar dentro dele para guiar e o Chris em outro barco rebocando para que chegassem ao outro lado da Marina, esse barco estava fora da água por muito tempo, quando colocamos ele na água o barco começou a entra água e o Vinicius tinha que ficar usado uma bomba para que o barco não afundasse com ele dentro.

Um outro momento foi quando ele comprou um barco chamado Hydropter, esse barco estava em uma Marina no Hawai, Chris então disse a James para que nós pegássemos uma avião para o Hawai e trouxesse o barco navegando, sem nem uma experiência, então eu, Vinicius, Ramiro e Marcos falamos que não iriamos, que o risco de vida era muito grande, então ele contratou outras pessoas com experiência para fazer esse trabalho, quando esse barco chegou o Chris falou para a gente retirar o mastro, Vinicius que nunca tinha feito isso foi levantado até o topo amarrando algumas cordas para colocar um apoio para o mastro ser retirados pelo guindaste.

Certa vez o Chris após o expediente de trabalho falou para o Vinicius levar um trailer para a Casa do Chris em New Port Beach, ele trabalhou o dia inteiro e dirigiu a noite para chegar até o local, Chris não aceitava não como resposta e no outro dia Vinicius estava trabalhando com a gente, sem tempo para descanso.

Um outro momento Vinicius machucou a mão, peguei a camionete para levar ele no Hospital mais fui impedido de o levar pelo o James , porque segundo ele não estávamos segurados pela empresa e que esse custo eles não iriam pagar, Vinicius ficou muitos dias com a mão inchada.

Uma certa vez Chris encontrou um Castor boiando na Marina, então comentou que a calda do Castor valia muito dinheiro, o mesmo já estava em estado de decomposição, retiramos o Castor com a ajuda de uma rede e eu, Vinicius, Ramiro e Marcos ficamos o dia todo para conseguir retirar a calda e o mal cheiro era terrível.

Chris tinha um barco pessoal que era a joia rara dele, ele decidiu reformar esse barco, então falou para que a gente cobrisse ele com uma lona branca, no que usávamos fogo para fazer o molde do barco, nunca tínhamos feito isso, era muito perigoso, depois de cobrir começamos a lixar esse barco, o calor era muito forte e sem tempo de descanso. James sempre ressaltava que o Chris era um homem de muita influência, que se a gente fizesse o trabalho bem feito ele iria

nos ajudar com a documentação para viver legal no Estados Unidos, Vinicius e eu acreditávamos porque a imigração chegava na Marinha e entrava em barcos a todo tempo, nesses momentos o James falava para a gente se esconder nos contêiner porque ainda não estava legal mas que o Chris futuramente iria nos ajudar.

Por conta do trabalho Vinicius e eu ficava com esperança de conseguir legalizar no país.

Vinicius sempre se mostrou uma pessoa de caráter, honesto e que confia no próximo, sempre esta disponível em ajudar o próximo, vive bem em comunidade e sempre esta rodeado de amigos, eu acredito que assim como eu, cofiou que tudo que foi prometido seria cumprido um dia.

Só paramos de trabalhar na Marina em março de 2020 por que a Marina foi fechada por conta do COVID 19.

Eu Brener Neves Ferreira declaro sob pena de perjúrio, que o descrito nesta carta e verdadeiro.



September 7, 2025

Character support letter For Vinicuis Da Costa

Adam Knight
105 Roberta Ave
Pleasant Hill Ca 94523
925-584-4855
DOB: 08/22/1978

To Whom It May Concern:

I am writing to you on behalf of Vinicius Da Costa. I am the owner of AK Construction. Vini has worked for me since 2020. I was introduced to Vini through one of my other employees who thought the world of Vini and told me I just had to hire him. That decision has been one of the best decisions I have made my 18 years as a General Contractor. In the 5 years since Vini started, he has grown from a laborer with basic construction skills to my most trusted Foremen in charge of jobs and crews including out of town work where he is my eyes and ears on the job.

As Foreman, his task is to run the job, work with the client on communication, progress, needs and overall expectations. We work in peoples' homes who often move out or leave for extended periods of time. He is always looking out for the customers home and protecting their property. He drives my equipment and trailers around to jobs, drops off tools at our shop. At any given time he could be in charge of $10,000 - $50,000 in tools and equipment and is always the most responsible of my employees with this equipment. There is no doubt that he is the most invested of all my employees and he makes sure we as a company succeed and continue to thrive.

Outside of work I have gotten to know Vini and his beautiful family as friends. Our families have vacationed together a couple times and he attended my wedding just a few months ago. I have had the privilege to get to know him as a family man. He is a great father and great example to his 3 children. We have had several conversations about building his life in America. His daughter Julia has his work ethic and is looking forward to attending college and truly is working hard to become a lawyer. He has always been adamant about doing things the right way and establishing his life here. Building credit the right way, always being honest and upfront about everything. I know he has developed a solid group of friends that loves to camp all across California.

In the 5 years that I have known Vini, his character has always been unimpeachable. He is always the one to do the right thing, even when it is difficult or uncomfortable. He has always let me know when things aren't going well, or if some incident has happened that will cost the company both time and money. He has never tried to hide it or shy away from

responsibility. He knows that the crew he is responsible for is under his care and direction and takes full responsibility in the good and the bad. I trust him explicitly in all aspects of the business. He is the most important of my employees and I look forward to many more years as both his boss and a good friend.

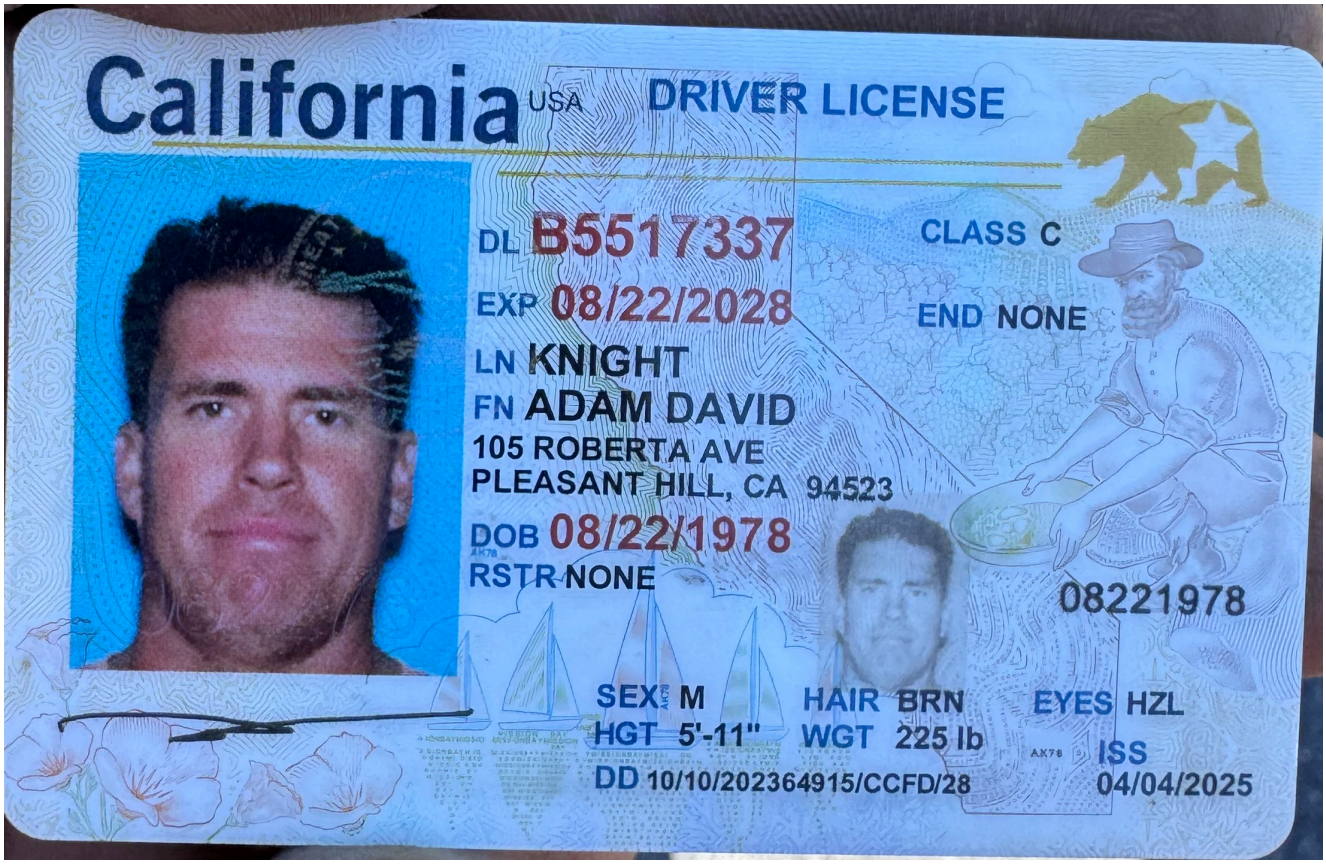
Under penalty of perjury, I attest that the information described in this letter is true.

Regards

Adam Knight
AK Construction



8/7/2025


California USA DRIVER LICENSE
DL B5517337
EXP 08/22/2028
LN KNIGHT
FN ADAM DAVID
105 ROBERTA AVE
PLEASANT HILL, CA 94523
DOB 08/22/1978
RSTR NONE
CLASS C
END NONE
08221978
SEX M
HGT 5'-11"
HAIR BRN
WGT 225 lb
EYES HZL
DD 10/10/202364915/CCFD/28
ISS 04/04/2025

August 17, 2025

Vinicius Ferreira Da Costa

To Whom It May Concern:

My name is Jair Da Costa Marinho, I live at 2353 Canary Ct., Rocklin, CA and I was born on November 17, 1972.

I am the uncle of Vinicius Ferreira Da Costa, and I have known him throughout his entire life. As his family member, I have had the privilege of observing his values, dedication, and strong sense of responsibility over many years.

Vinicius is a man of good moral character. He is hardworking, honest, and respectful in all of his relationships. He takes his commitments seriously and is someone who can always be trusted to act with integrity.

He is also a devoted father and family man, who provides care, stability, and love to his household. His dedication to his family and his willingness to work hard to support them reflect his strong principles and good nature.

Beyond that, Vinicius is the kind of person who is always willing to help others. He is just a phone call away whenever I need assistance, and I know I can always count on him. For example, as a homeowner, I have often relied on his skills in construction and renovation. He has helped me save money and given me peace of mind by repairing my sink, building a gazebo in my backyard, and painting walls in my home. These are just a few examples, but they show the type of man he is—generous with his time, dependable, and always ready to lend a hand.

My children absolutely love him, and I believe that speaks volumes about his character. You know someone is a truly good person when children naturally trust and enjoy being around them.

It has been a lifetime of great moments and positive experiences with Vinicius. He is not only a loyal and trustworthy employee and friend but also an exceptional family member whose actions consistently demonstrate his good moral character.

Under penalty of perjury, I attest that the statements in this letter are true.

Sincerely,

Jair Da Costa Marinho Jr.
(415) 505-1314
Jaircosta40@hotmail.com


California USA
COMMERCIAL DRIVER LICENSE
DL D3460932
CLASS AM1
EXP 11/17/2023
END NONE
LN MARINHO
FN JAIR DA COSTA JR
2353 CANARY CT
ROCKLIN, CA 95765
DOB 11/17/1972
RSTR CORR LENS
DONOR
11171972
SEX M
HAIR BRN
EYES BRN
HGT 5'-07"
WGT 180 lb
DD 12/12/201954306/AAFD/23
ISS 12/12/2019

September 1, 2025

To Whom It May Concern,

My name is Gabriel Holthaus, born on December 8, 1975 in San Pablo, California. My phone number is (916) 305-9499. I am writing this letter in strong support of Vinícius Ferreira da Costa.

I have known Vinícius for over four years, and he has worked for me regularly throughout this entire time. From the beginning, Vinícius has proven himself to be hardworking, reliable, and an outstanding leader. I can always count on him to arrive on time, stay late when needed, and complete every task with dedication and precision.

Vinícius is not only an excellent employee, but also a loyal family man and committed community member. He consistently demonstrates integrity and responsibility both in his personal and professional life. When given a complex task with many steps and details, I know I can trust Vinícius to complete it thoroughly and correctly. If clarification is ever needed, he takes initiative to resolve the issue independently, and only reaches out if absolutely necessary.

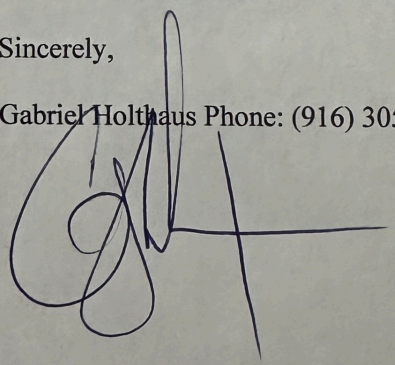
Over the years, I have assigned Vinícius to many important projects, including the installation of paint booths at automotive body shops. These are complex jobs that require technical skill, problem-solving, and attention to detail. Vinícius has always been able to execute these tasks without difficulty, earning my complete trust and confidence.

It is without hesitation that I offer my full support for Vinícius. He has been an invaluable worker and an exceptional individual, and I strongly recommend him for any opportunity or endeavor he pursues.

I declare under penalty of perjury that the statements in this letter are true.

Sincerely,

Gabriel Holthaus Phone: (916) 305-9499




California USA DRIVER LICENSE
DL A8416433
CLASS C
EXP 12/08/2028
END NONE
LN HOLTHAUS
FN GABRIEL JACOB
3273 BARKER RD
LOOMIS, CA 95650
DOB 12/08/1975
RSTR NONE
12081975
SEX M
HAIR BRN
EYES HZL
HGT 5'-07"
WGT 180 lb
ISS 09/26/2023
DD 11/28/2018673RB/DDFD/28

My name is Santiago M. Valdes. I was born in Mexico on July 25, 1989. My phone number is 530-566-7190 and my email address is maxvaldes25@gmail.com.

I first met Vinicius when I was hired by Chris to help build the office trailer at the marina. From the very beginning, it was obvious to me that Chris mostly hired undocumented workers, including Vinicius, Brenner, Marcos, and Ramiro. There was always a clear difference in the way I was treated compared to them. Because I had legal documents, I had more freedom and better conditions, while the others were often pressured or treated unfairly.

The work environment itself was very poor. Our break room was nothing more than a shipping container, with no structure for meals or proper breaks. We never received any training on how to safely operate heavy equipment like the forklift. I remember clearly the day we had to place a container behind the office. Chris became angry and impatient with Vinicius and the others, yelling because they did not know how to handle the equipment properly. It was not their fault because no one had ever trained them. He was often aggressive and mean to us, especially when we struggled with English or did not immediately understand instructions.

Chris also made us drive the company truck even though it was not properly insured. This put us at risk every time we were on the road. On top of that, we were never paid overtime. I personally never received overtime pay, even though I worked extra hours regularly, and that unfair treatment was one of the main reasons I left the marina.

I also witnessed dangerous situations. For example, during the work on the Cheyenne, I saw Vinicius and Ramiro come out soaked in diesel after removing leaking fuel bags. Another time, whenever there was talk about immigration authorities possibly showing up, Gustavo told Vinicius and the others to hide inside containers so they would not be seen. These things stuck with me because they showed how vulnerable they were compared to me.

The unequal treatment was very clear. Chris used the difference between documented and undocumented workers to control the team. I could come and go more freely, while Vinicius and the others were constantly under pressure.

Eventually, I left the marina first. More than once, I invited Vinicius to come work with me in construction, telling him it was much better than what we had at the marina. At first he did not want to leave, because he believed Chris's promises that the marina was a great opportunity. It was not until after the

pandemic shutdown that he finally decided to follow my advice and leave the marina as well.

Since then, I have continued to work with Vinicius in the same construction company beginning in 2020. Altogether, I have known and worked alongside him for the past seven years. In that time, I have known him to be honest, dependable, and hardworking. He has always shown good moral character, treating coworkers with respect and taking pride in his work. He consistently goes out of his way to help others, supports his team, and takes responsibility for his work without complaint. I have never known him to show any sign of moral turpitude. On the contrary, I have only seen in him the qualities of integrity, reliability, and kindness that define someone of the highest moral character.

Everything I have written here is based on what I personally saw and experienced alongside Vinicius.

I declare under penalty of perjury that the statements in this letter are true.

Santiago M. Valdes

Date: 9/21/25


California USA DRIVER LICENSE
DL D9636611
CLASS C
EXP 07/25/2027
END NONE
LN MELGAREJO VALDES
FN SANTIAGO
5445 MORROW DR
SAN PABLO, CA 94806
DOB 07/25/1989
07251989
RSTR NONE
DONOR
SEX M
HAIR BLK
EYES BRN
HGT 6'-02"
WGT 200 lb
ISS 07/23/2024
DD 07/06/2021556OD/DDFD/27

Support Letter for Vinicius Da Costa's T visa application

I, Ramiro Pérez, was born in Mazatlán, Sinaloa, Mexico, on August 29, 1967. I returned to work at the Sugar Dock marina in November, 2019. I had already worked there for 10 years for the former owner when I returned to Mexico. In 2019, once again I went to the United States and the new owner, Chris Welsh, hired me to work with Vinicius Da Costa, Gustavo, Brener, Marco, and Santiago.

Upon arrival, they were preparing the ship called Cheyenne for a mission in Japan. Vinicius and I changed the diesel bladders that had some leaks: it was a catamaran-type watercraft. We tried to empty those bags taking as much diesel as possible to a container where these bags were attached with zig zag ropes; we spent hours there untying them, and when we departed we were soaked in diesel that had leaked from the bags and was loose inside the hull.

All the time we were performing activities that we didn't know how to do, for which we never had proper training. We removed the mast from a ship called Hydropeter using massive cranes; it was necessary the support of a forklift, a tool for which we were never trained and that, even so, we used everyday to move trash and small vessels. Without any experience and knowing that the coworkers on whose hands many times we trusted our safety didn't have the necessary skills either, there was no chance for us to refuse to perform the activities. Chris Welsh, our employer, or supervisors Gustavo and James would give us no options; orders were given as orders, never in a friendly tone. There were cases of trips without any prior notice just at the end of the workday, even when we weren't paid any overtime. On a certain occasion, Vinicius went to Newport Beach carrying both personal and material for Chris' businesses. More than once, we were ordered to travel at night, coming to our final destination at dawn and returning very early the following morning, without enough rest.

There was always the promise that we would soon earn more, that when we had our papers, our salaries would be raised. Chris offered me a space where I could park a trailer to live there with my wife; we would then not pay neither rent, nor water, nor electricity. At the beginning it looked like a good opportunity, but with that, we couldn't go out because in exchange for a place to live, we watched the marina day and night. I couldn't be absent or leave the marina unsupervised. He also offered a boat to others, looking for someone else to live there moored for the same purpose, but nobody accepted.

Chris' major project was to restore a boat called Ragtime. We covered it with white plastic, forming a containment around the boat. As we were putting up this containment, Vinicius' hand got injured while raising a high, heavy beam. The injury looked serious and we asked the person in charge, James, to take him to the hospital. James explained that we had no insurance because we had no documents and continued working normally. Vinicius went back to work even with his hand cut. After having covered the boat, we sanded all the wood to remove the old paint, and although it was almost 100 degrees Fahrenheit outside, we used to spend long hours working exposed to unbearable heat inside the containment.

We used to do our best convinced that Chris, as Gustavo would say, might someday legalize our status in the United States. ICE agents were always around in the marina using piers they rented and we were always instructed to remain hidden while they were around. So, we stayed inside the containers waiting until they left. When cleaning up boats, we came across ammunition and guns, which made us feel unsafe because we didn't know who might be armed or not. We always worked very hard hoping that we would get our permit; we really believed that it would be possible through hard work.

We spent all the time running maintenance at the marina randomly and untrained. We had no training to climb or rappel high masts, however, we did so. We couldn't drive forklifts; however, we did. We didn't know how to help Chris with the crane he had in the marina; as far as we knew, he didn't have a license,

however, he hoisted and moved heavy pieces, boats, and even containers, and we were always there helping without knowing how to do it safely, but without any courage to say “no”. We made a new office once; Chris needed to place a container behind that office using the crane and we held the container with ropes trying to fit it in the exact place. As we had no experience, we almost had the new office destroyed, and he got very upset, yelling and telling us that we were unprepared morons.

On a different occasion, we came across a dead beaver in the water, and when we picked it up to throw it away, Chris demanded that we cut off the animal’s tail. None of us wanted to do it because the body was already in decay and the smell was unbearable, however, as usual, it wasn’t an option, and we had to do it. The feeling was always that of obedience at any cost if we wanted to keep the job.

Chris hired a guy called Sand to be in charge of a submarine area. We had to change the deck from the place where he worked, a very high canvas, I don’t know its exact measures. It was our turn again to make this change without any training, climbing the structure, pulling the heavy canvas and covering it all, running serious risks, as none of us had the experience required. We felt we were always running the risk of suffering an accident, but there was nobody to turn to and seek help or instructions.

Chris bought a boat called Gardina that was in a neighboring marina. We had to tow it through the canal, running a huge risk of sinking, as its hull was rotting and even when moored it would start to sink. Moving it across without sinking was very hard, leaving us, who conducted it, in danger too. When we got to Sugar Dock, we used the crane to take it out of the water. Tasks were always gigantic and the work we performed was never small or easy. We felt a lot lack of training and many times we wouldn’t even be instructed in the least as to how to perform tasks safely.

I kept working there even after everybody had left. When the pandemic arrived, work stopped, the marina was closed and all its employees left, but as I lived there, I stayed and took care of the place. Chris died in March, 2021, which paralyzed all the projects involving boats. We stopped living there when we returned to Mexico in 2024.

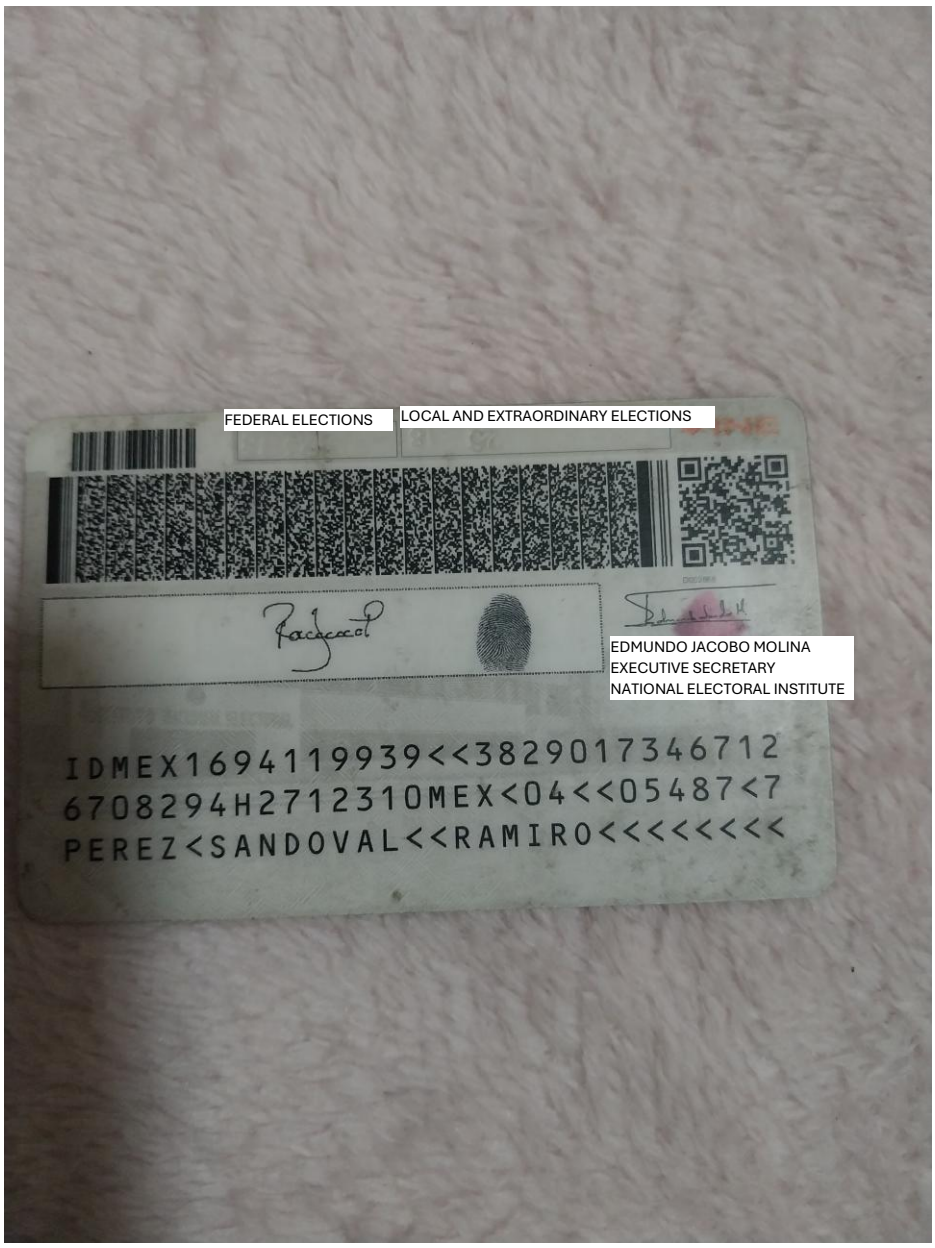
Despite all the stress we would go through, working with my coworkers was sometimes fun; we relieved tension by taking care of each other. I know we had no experience, but I felt I could trust my coworkers. Vinicius was always very honest. I could attest many times to his good nature, always helpful and concerned about us. He would do everything to make us safer. All the time he was willing to help and was also a very responsible person regarding work and family. Vinicius is a very hardworking man and is always ready to learn; he has a lot to build for himself and his family. If I can say those times left something good, that was his friendship.

I declare under penalty of perjury that all that I have stated herein is true, I attest.

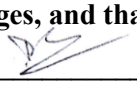
…/signature/…. 09/17/25
Ramiro Perez. Date

Contact: +52 669 932 1832 E-mail address: ramiroperez460@gmail.com

…./Seal of the United Mexican States/….	MEXICO	NATIONAL ELECTORAL INSTITUTE		
…/Voter's picture/….		**VOTER ID**		
		NAME		DATE OF BIRTH
		PEREZ SANDOVAL RAMIRO		08/29/1967
		ADDRESS		SEX: M
		C TAMARINDO 7914 FRACC INVONAVIT LA FORESTA 82198 MAZATLAN, S/N		…/Voter's picture/….
		VOTER KEY PRSNRM67082925H300		
		CURP (UNIQUE POPULATION REGISTRY CODE) PESR670829HSLRNM03		REGISTRATION YEAR 1991 04
		STATE 25	MUNICIPALITY 012	SECTION 3829
		CITY 0001	ISSUED 2017	EXPIRY 2027


FEDERAL ELECTIONS
LOCAL AND EXTRAORDINARY ELECTIONS
EDMUNDO JACOBO MOLINA
EXECUTIVE SECRETARY
NATIONAL ELECTORAL INSTITUTE
IDMEX1694119939<<3829017346712
6708294H2712310MEX<04<<05487<7
PEREZ<SANDOVAL<<RAMIRO<<<<<<<<

I, Teodoro Daniel Larsen, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Spanish to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



_____ Date: September 30, 2025.

Carta de apoyo para la aplicación de visa T de Vinicius Da Costa

Yo, Ramiro Pérez, nací en Mazatlán, Sinaloa, México, el 29 de agosto de 1967. Volví a trabajar en la marina Sugar Dock en noviembre de 2019. Había trabajado allí durante 10 años para el antiguo dueño cuando regresé a México. En 2019 fui una vez más a los Estados Unidos y el nuevo propietario, Chris Welsh, me contrató para trabajar junto con Vinicius Da Costa, Gustavo, Brener, Marco y Santiago.

Al llegar, estaban preparando el barco Cheyenne para una misión en Japón. Vinicius y yo hicimos el cambio de las bolsas de diésel que tenían fugas; era un barco tipo catamarán. Intentamos vaciar esas bolsas sacando la mayor cantidad posible de diésel hacia un contenedor en la cubierta donde el barco estaba amarrado. Entramos en esos compartimentos muy estrechos donde esas bolsas estaban sujetas con cuerdas en zigzag; pasamos horas allí dentro desamarrando, y cuando salimos estábamos empapados de diésel que se había filtrado de las bolsas y estaba suelto dentro del casco.

Todo el tiempo realizábamos trabajos que no sabíamos cómo hacer, nunca tuvimos entrenamiento apropiado. Retiramos el mástil de un barco llamado Hydropeter usando grúas gigantes; era necesario el apoyo de una carretilla elevadora, herramienta para la cual nunca fuimos entrenados y que aun así usábamos todos los días para mover basura y pequeñas embarcaciones. Sin experiencia y sabiendo que los compañeros en quienes muchas veces confiábamos nuestra seguridad tampoco tenían las habilidades necesarias, no había posibilidad de negarnos a ejecutar los trabajos. Chris Welsh, nuestro empleador, o los supervisores Gustavo y James no nos daban opciones; las órdenes eran dadas como órdenes, nunca en tono amistoso. Hubo casos de viajes sin aviso previo justo al final de la jornada, aun cuando no se nos pagaban horas extras. En cierta ocasión, Vinicius fue a Newport Beach transportando tanto cosas personales como materiales para las empresas de Chris. Más de una vez se nos ordenó viajar de noche, llegando al destino final de madrugada y regresando al día siguiente muy temprano, sin descansos suficientes.

Siempre había la promesa de que pronto ganaríamos más, de que cuando tuviéramos nuestros papeles nuestros salarios aumentarían. Chris me ofreció un espacio donde podía estacionar un tráiler para vivir con mi esposa; no pagaríamos alquiler ni agua ni luz. Al principio parecía una buena oportunidad, pero con eso no podíamos salir, pues a cambio de la vivienda vigilábamos la marina día y noche. Yo no podía ausentarme y dejar la marina sin supervisión. También ofreció un barco a otros, buscando a alguien más que quisiera vivir allí atracado con el mismo propósito, pero nadie aceptó.

El mayor proyecto de Chris era reformar un barco llamado Ragtime. Lo cubrimos con plástico blanco, haciendo una contención alrededor del barco. Mientras hacíamos esa cobertura, Vinicius se lastimó la mano levantando una viga alta y pesada. La herida parecía grave y solicitamos que

el encargado James lo llevara al hospital. James explicó que no teníamos seguro porque no teníamos documentos, y seguimos trabajando normalmente. Vinicius volvió al trabajo aun con la mano cortada. Después de cubrir el barco, lijamos toda la madera para retirar la pintura antigua, y aunque afuera hacía casi 100 grados Fahrenheit, pasábamos muchas horas trabajando en un calor insoportable dentro de la contención.

Nos esforzábamos al máximo, convencidos de que Chris, como decía Gustavo, podría algún día legalizarnos en Estados Unidos. Agentes del ICE estaban siempre en la marina usando muelles que alquilaban allí, y se nos instruía a escondernos mientras ellos estuvieran. Así que nos quedábamos dentro de contenedores esperando hasta que se fueran. En las limpiezas de barcos encontramos municiones y armas, lo cual nos hacía sentir inseguros, pues no sabíamos quién podía estar armado o no. Trabajamos con mucho empeño, siempre con la esperanza de conseguir nuestro permiso; realmente creíamos que eso sería posible con trabajo duro.

Estábamos todo el tiempo dando mantenimiento a la marina de manera aleatoria y sin preparación. No teníamos entrenamiento para subir a los mástiles con rappel y aun así lo hacíamos. No sabíamos manejar carretillas elevadoras, pero las usábamos. No sabíamos cómo ayudar a Chris con la grúa que tenía en la marina; según lo que sabíamos, él no tenía licencia, pero aun así levantaba y movía piezas pesadas, barcos o incluso contenedores, y nosotros siempre alrededor ayudando, sin saber cómo hacerlo con seguridad, pero sin valor para decir que no. Una vez hicimos una nueva oficina; Chris necesitaba colocar un contenedor detrás de esa oficina con la grúa y nosotros sosteníamos ese contenedor con cuerdas, intentando ubicarlo en el lugar exacto. Como no teníamos experiencia, casi destruimos la oficina nueva, y él se puso muy nervioso, gritando y diciéndonos que éramos idiotas sin preparación.

En otra ocasión encontramos un castor muerto en el agua, y cuando lo recogimos para desecharlo, Chris exigió que le quitáramos la cola al animal. Ninguno de nosotros quería hacerlo porque el cuerpo ya estaba en descomposición y el olor era insoportable, pero como siempre, no era opcional y tuvimos que hacerlo. La sensación siempre fue de obediencia a cualquier costo si queríamos mantener el trabajo.

Chris contrató a un muchacho llamado Sand para encargarse de un área de submarinos. Tuvimos que cambiar la cubierta del lugar donde trabajaba, una lona muy alta, no sé la medida exacta. Nos tocó a nosotros hacer ese cambio nuevamente sin entrenamiento, escalando la estructura, jalando la lona pesada y cubriendo todo, corriendo serios riesgos ya que ninguno de nosotros tenía la experiencia necesaria. Sentíamos que siempre estábamos en riesgo de accidente, pero no había a quién acudir en busca de ayuda o instrucción.

Chris adquirió un barco llamado Gardina que estaba en una marina vecina. Tuvimos que remolcarlo a través del canal, corriendo grandes riesgos de naufragio, pues el casco estaba en descomposición y aun atracado comenzaba a hundirse. Fue muy difícil trasladarlo sin que se hundiera, poniendo en riesgo también a los que lo llevábamos. Al llegar a la Sugar Dock usamos la grúa para sacarlo del agua. Las tareas eran siempre enormes, los trabajos que realizábamos nunca eran pequeños ni simples. Sentíamos mucha falta de entrenamiento y muchas veces ni siquiera recibíamos indicaciones mínimas de cómo ejecutar las tareas con seguridad.

Seguí trabajando allí aun después de que todos se fueron. Con la pandemia, los trabajos se detuvieron, cerraron la marina y todos los empleados se marcharon, pero como yo vivía allí me quedé cuidando el lugar. Chris murió en marzo de 2021, lo que paralizó los proyectos con los barcos. Solo dejamos de vivir allí cuando regresamos a México en 2024.

A pesar de todo el estrés que vivíamos, trabajar con los compañeros a veces era divertido; aliviábamos la tensión cuidándonos unos a otros. Yo sabía que no teníamos experiencia, pero sentía que podía confiar en mis colegas. Vinicius siempre fue muy íntegro, pude muchas veces constatar su buena índole, siempre servicial y preocupado por nosotros. Nunca escatimó esfuerzos para que estuviéramos más seguros. Todo el tiempo estuvo dispuesto a ayudar y fue muy responsable con su trabajo y con su familia. Vinicius es un hombre muy trabajador y siempre está dispuesto a aprender; tiene mucho que construir para sí y para su familia. Si puedo decir que aquel tiempo me dejó algo bueno, fue su amistad.

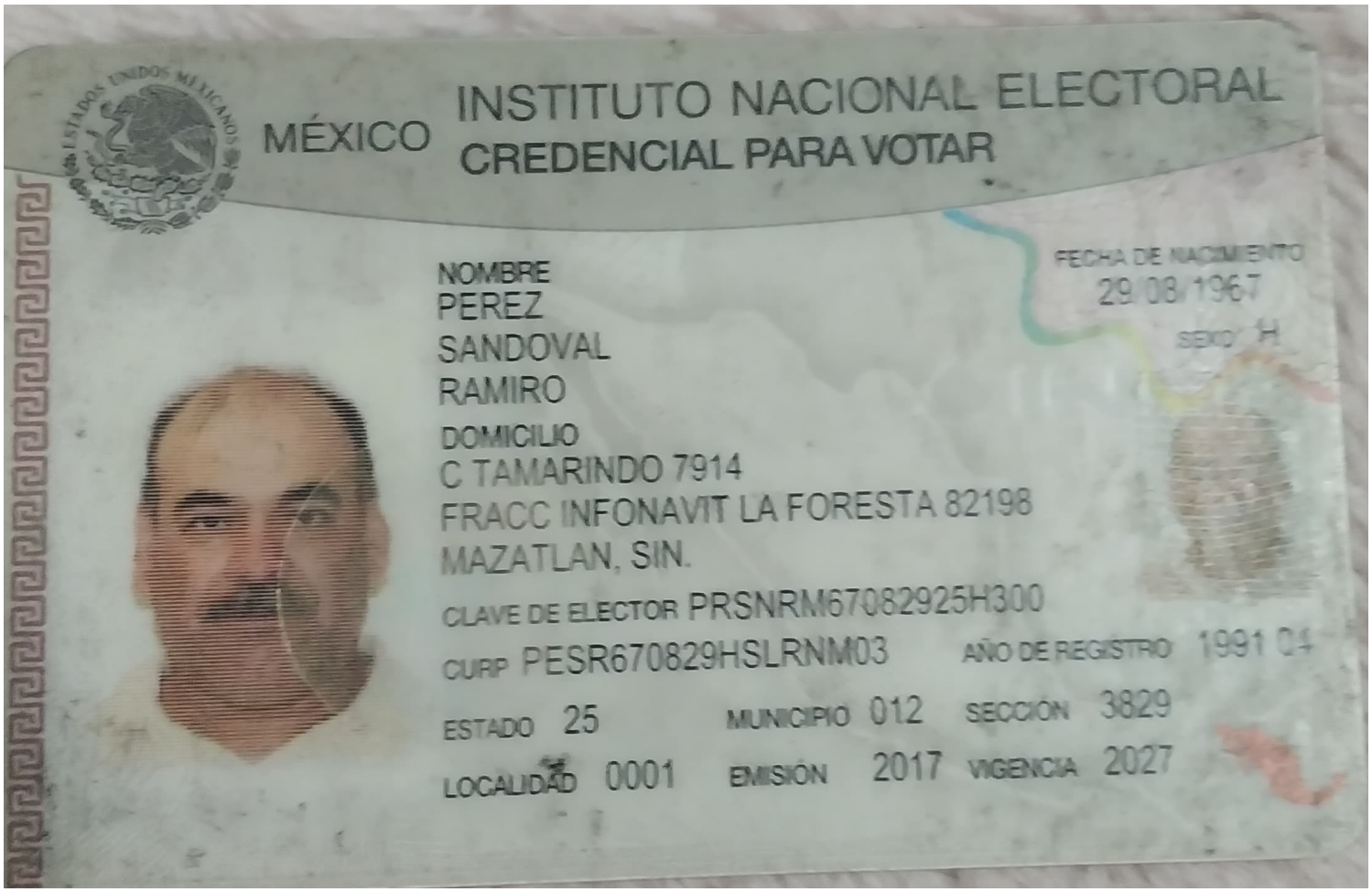
Declaro bajo pena de perjurio que todo lo que relato aquí es verdad y doy fe.

09/17/25

Ramiro Perez.

Fecha

Contato. +52 669 932 1832 E-mail. ramiroperez460@gmail.com


MÉXICO
INSTITUTO NACIONAL ELECTORAL
CREDENCIAL PARA VOTAR
NOMBRE
PEREZ
SANDOVAL
RAMIRO
DOMICILIO
C TAMARINDO 7914
FRACC INFONAVIT LA FORESTA 82198
MAZATLAN, SIN.
FECHA DE NACIMIENTO
29/08/1967
SEXO H
CLAVE DE ELECTOR PRSNRM67082925H300
CURP PESR670829HSLRNM03
AÑO DE REGISTRO 1991 04
ESTADO 25
MUNICIPIO 012
SECCIÓN 3829
LOCALIDAD 0001
EMISIÓN 2017
VIGENCIA 2027

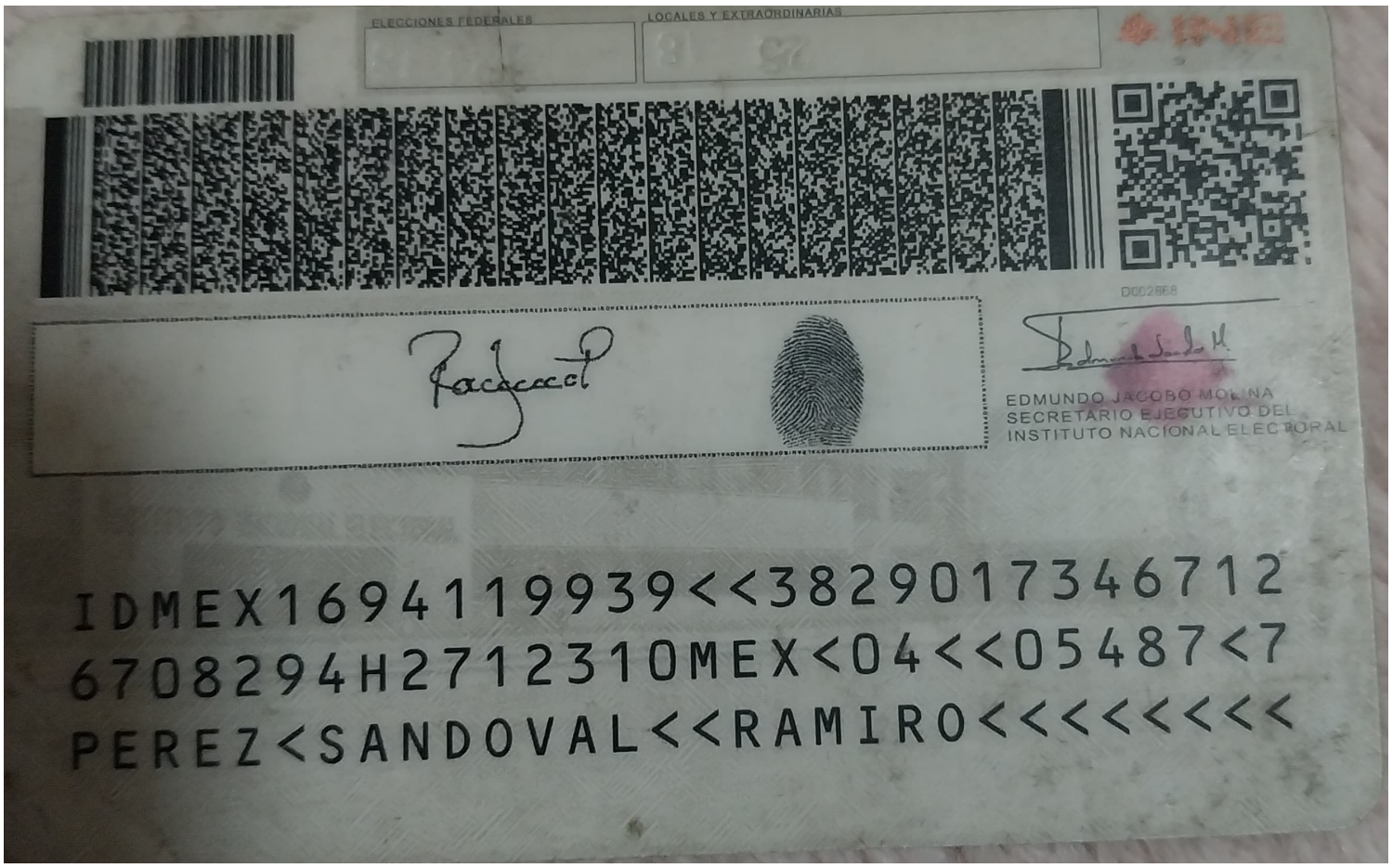

ELECCIONES FEDERALES
LOCALES Y EXTRAORDINARIAS
EDMUNDO JACOBO MOLINA
SECRETARIO EJECUTIVO DEL
INSTITUTO NACIONAL ELECTORAL
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6708294H2712310MEX<04<<05487<7
PEREZ<SANDOVAL<<RAMIRO<<<<<<<<<

Exhibit 13 - Julia Mendanha dos Santos's SIJS Approval with Deferred Action Granted

THE UNITED STATES OF AMERICA

I-797 | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY
U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number MSC2490017850		Case Type I360 - PETITION FOR AMERASIAN, WIDOWER, OR SPECIAL IMMIGRANT
Received Date 10/04/2023	Priority Date 10/04/2023	Petitioner A201 831 066 MENDANHA DOS SANTOS, JULIA
Notice Date 01/20/2024	Page 1 of 1	Beneficiary A201 831 066 MENDANHA DOS SANTOS, JULIA

AMIGOS IMMIGRATION
c/o ROBERTA LAUB-RODE
503 D STREET STE 1
SAN RAFAEL CA 94901

Notice Type: Approval Notice
Class: SL6
Section: Special Immigrant-Juvenile

I-797 Approval Notice for **Form I-360, Petition for Amerasian, Widow(er), or Special Immigrant with Deferred Action.**

USCIS has approved the above petition.

Grant of Deferred Action:

Your **Form I-360** petition has been approved, but you do not yet have a visa available to file an application for adjustment of status. USCIS has determined that you warrant a favorable exercise of discretion to receive deferred action. As a result, you have been placed in deferred action and you may be issued an employment authorization document. Deferred action is an act of administrative convenience to the government which gives some cases lower priority for removal from the United States for a specified period of time.

Your grant of deferred action will remain in effect for a period of four years from the date of this notice unless terminated earlier by USCIS.

Pursuant to 8 CFR Sec. 274a.12(c)(14), a noncitizen with approved deferred action is eligible to apply for employment authorization with the appropriate fee. If you would like to apply for employment authorization, you must properly file Form I-765, Application for Employment Authorization, and enter eligibility category (c)(14). You will receive separate correspondence regarding the adjudication of your Form I-765 once it is filed.

If you are represented by an attorney, all further correspondence should be accompanied by Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative.

USCIS will notify you separately about any other cases you have filed.

This form is not a visa, nor may you use it in place of a visa.

This form does not constitute employment authorization, nor may you use it in place of an Employment Authorization Document.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

USCIS encourages you to sign up for a USCIS online account. To learn more about creating an account and the benefits, go to https://www.uscis.gov/file-online.

National Benefits Center
U.S. CITIZENSHIP & IMMIGRATION SVC
P.O. Box 648003
Lee's Summit MO 64002

USCIS Contact Center: www.uscis.gov/contactcenter

FORM I-797 [REV. 08/01/16]

Exhibit 14 – Evidence Strong Ties to the United States - Children's School Attendance

Grades and Attendance: Dos Santos, Julia Mendanha

Student Number: 388913 **CA SSID:** 3112739730 **Computer Login:** julia.dossantos **Email:** julia.dossantos@wccschools.org **Locker:** C2 - 177 **Combination:** 49-07-31

Attendance By Class

Exp	Last Week M	T	W	H	F	This Week M	T	W	H	F	Course	Q1	Q2	S1	Q3	Q4	S2	Absences	Tardies
1(A)							T				AP Government & Politics United States Email Huy, Danny - Rm: B305	A 96						1	1
2(A)											Spanish 4 [H] Email Castillo Cardenas, Martin C - Rm: C106	A 96	[i]	A 96				1	0
3(A)											Theater 1 [P] Email Decker, Bradley - Rm: B106	A+ 100	[i]	A+ 100				2	0
C(A)	.	.	.	.	.	.	.	.	.	.	Counselor Email Jones, Kenneth - Rm: A131	[i]	[i]	[i]	[i]	[i]	[i]	0	0
																	Attendance Totals	4	1

Current Simple GPA (Q4):

Show dropped classes also

Attendance By Day

Last Week M	T	W	H	F	This Week M	T	W	H	F	Absences Q1	Absences YTD	Tardies Q1	Tardies YTD
										0	0	0	0
									Attendance Totals	0	0	0	0

Legend

Attendance Codes: Blank=Present | A=Absent | T=Tardy | AM=All Day Absence Due to Medical | I=Illness | M=Medical Appointment |

Course	Expression	8/18-8/22					8/25-8/29					9/1-9/5					9/8-9/12					9/15-9/19				
		M	T	W	H	F	M	T	W	H	F	M	T	W	H	F	M	T	W	H	F	M	T	W	H	F
AP Government & Politics United States Huy, Danny B305 E: 08/19/2025 L: 10/24/2025	1(A)	-					A					-											T			
Spanish 4 [H] Castillo Cardenas, Martin C C106 E: 08/19/2025 L: 01/20/2026	2(A)	-					A					-														
Theater 1 [P] Decker, Bradley B106 E: 08/19/2025 L: 01/20/2026	3(A)	-					A			M		-														
Counselor Jones, Kenneth A131 E: 08/19/2025 L: 06/13/2026	C(A)	-	.	.	.	.	.	.	.	.	.	-	.	.	.	.	.	.	.	.	.	.	.	.	.	.

Course	Expression	9/22-9/26					9/29-10/3					10/6-10/10					10/13-10/17					10/20-10/24				
		M	T	W	H	F	M	T	W	H	F	M	T	W	H	F	M	T	W	H	F	M	T	W	H	F
AP Government & Politics United States Huy, Danny B305 E: 08/19/2025 L: 10/24/2025	1(A)																-									-
Spanish 4 [H] Castillo Cardenas, Martin C C106 E: 08/19/2025 L: 01/20/2026	2(A)																-									-
Theater 1 [P] Decker, Bradley B106 E: 08/19/2025 L: 01/20/2026	3(A)																-									-
Counselor Jones, Kenneth A131 E: 08/19/2025 L: 06/13/2026	C(A)	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	-	.	.	.	.	.	.	.	.	-

Legend

Grades and Attendance: Da Costa, Olivia

Student Number: 425326 **CA SSID:** 3376266513 **Computer Login:** olivia.dacosta **Email:** olivia.dacosta@wccschools.org

Attendance By Class

Exp	Last Week M	T	W	H	F	This Week M	T	W	H	F	Course	Q1	T1	Q2	S1	Q3	T2	Q4	T3	S2	Absences	Tardies
HR(A)											Homeroom/Advisory Email Miao, Qin - Rm: A7	[i]		[i]	[i]	[i]		[i]		[i]	0	0
P1(A)											Kindergarten Mandarin DI Email Miao, Qin - Rm: A7	[i]		[i]	[i]	[i]		[i]		[i]	0	0
																				Attendance Totals	0	0

Current weighted GPA (Q4):

Show dropped classes also

Attendance By Day

Last Week M	T	W	H	F	This Week M	T	W	H	F	Absences Q1	Absences YTD	Tardies Q1	Tardies YTD
										0	0	0	0
									Attendance Totals	0	0	0	0

Legend

Attendance Codes: Blank=Present | A=Absent | T=Tardy | AM=All Day Absence Due to Medical | I=Illness | M=Medical Appointment | MT=Medical Tardy | O=Office | V=Activity | E=Excused | F=Expulsion Indep Study | H=In House Suspension | K=Indpent Study Incomplete | L=Tardy 30+ | G=Gone early 30+ | W=SWAT | S=Suspended | D=Indpent Study Complete | C=Cut | U=Unexcused | Q=Quality Control | SE=Saturday School |

Citizenship Codes: O=Outstanding | S=Satisfactory | N=Needs to improve | U=Unsatisfactory | H=0.33 | K=0.50 | J=0.75 | C=1.00 | D=1.25 | Q=1.50 | X=1.75 | L=2.00 | T=2.25 | G=2.50 | B=3.00 | W=3.50 | R=4.00 | V=4.50 | A=5.00 | E=5.50 | F=6.00 | I=6.50 | M=7.00 |

Exhibit 15 – Evidence Strong Ties to the United States - U.S. Citizen Children.

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

CITY OF BERKELEY
DEPARTMENT OF HEALTH, HOUSING & COMMUNITY SERVICES

1052020170442 — STATE FILE NUMBER

1202061001930 — LOCAL REGISTRATION NUMBER

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY

THIS CHILD

1A. NAME OF CHILD - FIRST	1B. MIDDLE	1C. LAST
OLIVIA	SANTOS	DA COSTA

2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH - MM/DD/CCYY	4B. HOUR - 24 HOUR CLOCK TIME
FEMALE	SINGLE	-	06/03/2020	1500

PLACE OF BIRTH

5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION
ALTA BATES MEDICAL CENTER	2450 ASHBY AVENUE

5C. CITY	5D. COUNTY
BERKELEY	ALAMEDA

NAME OF PARENT

6A. NAME OF PARENT - FIRST	6B. MIDDLE	6C. LAST - BIRTH NAME	6D.	7. BIRTHPLACE - STATE/ COUNTRY	8. DATE OF BIRTH
VINICIUS	FERREIRA	DA COSTA	☐ MOTHER ☒ FATHER ☐ PARENT	BRAZIL	09/25/1988

NAME OF PARENT

9A. NAME OF PARENT - FIRST	9B. MIDDLE	9C. LAST - BIRTH NAME	9D.	10. BIRTHPLACE - STATE/ COUNTRY	11. DATE OF BIRTH
CYNARA	-	DOS SANTOS	☒ MOTHER ☐ FATHER ☐ PARENT	BRAZIL	10/14/1987

INFORMANT AND BIRTH CERTIFICATION

I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.	12A. PARENT OR OTHER INFORMANT - SIGNATURE CYNARA DOS SANTOS VINICIUS FERREIRA DA COSTA	12B. RELATIONSHIP TO CHILD MOTHER FATHER	12C. DATE SIGNED 06/04/2020 06/04/2020
I CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED.	13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE DANIELA MARAVILLA, BIRTH CLERK	13B. LICENSE NUMBER A139565	13C. DATE SIGNED 06/10/2020

13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT
ONOUWEM UNYIME NSEYO, MD
136 PERALTA AVE, SAN FRANCISCO, CA 94110

14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT
DANIELA MARAVILLA, BIRTH CLERK

LOCAL REGISTRAR

15A. DATE OF DEATH - MM/DD/CCYY	15B. STATE FILE NO. - STATE USE ONLY	16. LOCAL REGISTRAR - SIGNATURE	17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY
		LISA HERNANDEZ, MD	06/10/2020

This is to certify that this document is a true copy of the official record filed with the City of Berkeley.

by:

LISA B. HERNANDEZ, MD, MPH
LOCAL REGISTRAR AND HEALTH OFFICER

00053423 2

DATE ISSUED JUL 2 0 2020

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

PBNCO (Rev) 07/18

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

CITY OF BERKELEY
DEPARTMENT OF HEALTH, HOUSING & COMMUNITY SERVICES

1052023360320 — STATE FILE NUMBER

1202361003663 — LOCAL REGISTRATION NUMBER

CERTIFICATE OF LIVE BIRTH
STATE OF CALIFORNIA
USE BLACK INK ONLY

THIS CHILD

1A. NAME OF CHILD - FIRST	1B. MIDDLE	1C. LAST
CAIO	SANTOS	DA COSTA

2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH - MM/DD/CCYY	4B. HOUR - 24 HOUR CLOCK TIME
MALE	SINGLE	-	11/22/2023	1748

PLACE OF BIRTH

5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION
ALTA BATES MEDICAL CENTER	2450 ASHBY AVENUE
5C. CITY	**5D. COUNTY**
BERKELEY	ALAMEDA

NAME OF PARENT

6A. NAME OF PARENT - FIRST	6B. MIDDLE	6C. LAST - BIRTH NAME	6D. ☐ MOTHER ☒ FATHER ☐ PARENT	7. BIRTHPLACE - STATE/ COUNTRY	8. DATE OF BIRTH
VINICIUS	FERREIRA	DA COSTA		BRAZIL	09/25/1988

NAME OF PARENT

9A. NAME OF PARENT - FIRST	9B. MIDDLE	9C. LAST - BIRTH NAME	9D. ☒ MOTHER ☐ FATHER ☐ PARENT	10. BIRTHPLACE - STATE/ COUNTRY	11. DATE OF BIRTH
CYNARA	-	DOS SANTOS		BRAZIL	10/14/1987

INFORMANT AND BIRTH CERTIFICATION

I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.	12A. PARENT OR OTHER INFORMANT - SIGNATURE	12B. RELATIONSHIP TO CHILD	12C. DATE SIGNED
	VINICIUS DA COSTA	FATHER	11/23/2023
I CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED.	13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE	13B. LICENSE NUMBER	13C. DATE SIGNED
	ROSELYN MOHAMMED, BIRTH CLERK	A162980	11/29/2023

13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT	14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT
REBECCA L TAUB, MD 2500 MILVIA ST, BERKELEY, CA 94704	ROSELYN MOHAMMED, BIRTH CLERK

LOCAL REGISTRAR

15A. DATE OF DEATH - MM/DD/CCYY	15B. STATE FILE NO. - STATE USE ONLY	16. LOCAL REGISTRAR - SIGNATURE	17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY
		ANJU GOEL, MD	11/29/2023

This is to certify that this document is a true copy of the official record filed with the City of Berkeley.

by: _____
LISA B. HERNANDEZ, MD, MPH
LOCAL REGISTRAR AND HEALTH OFFICER

ANJU GOEL, MD MPH
LOCAL REGISTRAR, HEALTH OFFICER

00057345 2

DATE ISSUED JAN 30 2024

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

PBNCO (Rev) 07/18

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Exhibit 16 - Country Conditions: Brazil

An official website of the United States Government Here's how you know

2025 Trafficking in Persons Report: Brazil

IN THIS SECTION /
BRAZIL (TIER 2 WATCH LIST)

BRAZIL (Tier 2 Watch List)

The Government of Brazil does not fully meet the minimum standards for the elimination of trafficking. Despite making significant efforts to do so, it did not demonstrate overall increasing efforts compared with the previous reporting period. Therefore, Brazil was downgraded to Tier 2 Watch List. Significant efforts included adopting a new NAP to combat trafficking, initially convicting a labor trafficker under the anti-trafficking statute, establishing an anti-trafficking prosecutorial unit, and continuing to issue regular updates to the public registry of slave labor offenders (the "dirty list"). However, anti-trafficking law enforcement efforts remained inadequate. Officials continued to litigate cases against many labor traffickers in civil courts, due to insufficient evidence collection and a flawed understanding of both the trafficking crime and Brazil's anti-trafficking statute, which resulted in administrative penalties instead of prison and weakened deterrence. Federal and state courts reported fewer initial convictions, and the government has never reported a final conviction under its 2016 anti-trafficking statute, despite prevalence estimates indicating traffickers exploit tens of thousands of victims in Brazil. The government also initiated fewer investigations and prosecutions and assisted fewer victims. On average, courts took more than 10 years to adjudicate trafficking cases. The government's efforts to combat sex trafficking were limited, and there was insufficient coordination between federal and state authorities, and between service providers and civil society.

Cookie Settings

PRIORITIZED RECOMMENDATIONS:

Train government officials on Law 13.344 to ensure a uniform understanding of human trafficking and dispel the misconception it is only a crime of movement.

Vigorously investigate and prosecute traffickers using the anti-trafficking statute rather than offenses with lesser penalties when possible, and seek adequate penalties for convicted traffickers, which should include significant prison terms.

Resolve criminal proceedings against alleged traffickers expeditiously and without prolonged delays.

Increase efforts to proactively identify trafficking victims, especially sex trafficking victims, and refer them to services; provide victims shelter and specialized assistance.

Improve interagency coordination on anti-trafficking efforts at all levels of government, especially among victim assistance and law enforcement officials.

Improve the mobile inspection group's (GEFM's) evidence collection process and coordination with the Federal Police (PF) and the Federal Public Ministry (MPF) anti-trafficking unit.

Increase prosecution of labor traffickers in criminal courts.

Compile, and effectively communicate between federal and state authorities, comprehensive data on victim identification and assistance; and investigations, prosecutions, and convictions, disaggregated between sex and labor trafficking cases.

Increase the number of specialized anti-trafficking offices, especially in Mato Grosso do Sul, Piaui, Rondônia, Roraima, and Santa Catarina states.

Create and implement an actionable, comprehensive SOP on the identification, referral, and assistance of trafficking victims and train officials on its use.

Ensure the law criminalizing child sex trafficking does not require the elements of force, fraud, or coercion.

Increase efforts to raise awareness of all forms of trafficking.

PROSECUTION

The government maintained inadequate law enforcement efforts.

Brazilian law criminalized labor trafficking and sex trafficking. Article 149-A of the penal code (the anti-trafficking statute) criminalized some forms of sex trafficking and all forms of labor trafficking and prescribed penalties of four to eight years' imprisonment and a fine, which were sufficiently stringent and, with respect to sex trafficking, commensurate with those prescribed for other grave crimes, such as rape. Article 149-A required force, fraud, or coercion for child sex trafficking cases and therefore did not criminalize all forms of child sex trafficking. However, Article 244-A of the child and adolescent statute criminalized inducing a child to engage in sexual exploitation without the need to prove the use of force, fraud, or coercion and prescribed penalties of four to 10 years' imprisonment and a fine, which were sufficiently stringent and commensurate with those prescribed for other grave crimes, such as rape. Article 149 of the penal code (the anti-slave labor statute) criminalized "reducing a person to conditions analogous to slavery," and defined the crime to include degrading work conditions and exhausting work hours, a broader definition than labor trafficking, which requires a showing of force, fraud, or coercion. It prescribed penalties of two to eight years' imprisonment and a fine. The government still used the now-replaced Articles 231 and 231-A, which criminalized some forms of trafficking in persons involving movement during the reporting period when the alleged crimes occurred prior to the enactment of Article 149-A in 2016.

In practice, officials did not consider forced labor to be a form of trafficking and instead addressed alleged labor trafficking as "slave labor. While the government could pursue slave labor cases in criminal courts, it commonly tried these cases in civil courts and very few perpetrators of slave labor were held criminally accountable. The failure to prosecute and convict forced labor as a criminal act created a culture of impunity for labor traffickers. Additionally, officials prioritized transnational sex trafficking, potentially overlooking domestic cases.

Federal authorities initiated 17 human trafficking investigations in 2024, compared with initiating 10 human trafficking investigations in 2023. The government did not report the number of ongoing investigations in 2024, compared with 303 ongoing investigations in 2023 (77 for human trafficking and 226 for slave labor). The federal government reported opening 29 new prosecutions under the anti-trafficking statute (17 for sex trafficking and 12 for labor trafficking) in 2024, compared with opening 41 prosecutions (19 for sex trafficking and 22 for labor trafficking) in 2023. State courts also filed 62 new prosecutions under the anti-trafficking statute (55 for sex trafficking and seven for labor trafficking), compared with 81 state

prosecutions in 2023 (70 for sex trafficking and 11 for labor trafficking). Additionally, state and federal courts reported filing 35 new prosecutions under Articles 231 and 231-A, and 337 new slave labor prosecutions under Article 149; some of the alleged crimes in these cases may have amounted to human trafficking. The government did not report the number of ongoing prosecutions under the anti-trafficking or related statutes in state or federal courts.

In 2024, the government reported five initial trafficking convictions (one for sex trafficking and four for labor trafficking) under the anti-trafficking statute from federal first instance courts, compared with no initial convictions under the anti-trafficking statute in 2023. In addition, state first instance courts issued six initial convictions (all for sex trafficking) under the anti-trafficking statute, compared with 20 such convictions (all for sex trafficking) in 2023. State and federal courts also reported five initial convictions under statutes Articles 231 and 231-A, and 73 initial slave labor convictions under Article 149; some of the crimes committed in these cases may have amounted to human trafficking. The government did not report any final convictions under the anti-trafficking statute in federal courts in 2024 but reported six final convictions (all for sex trafficking) under this statute in state courts. This compared with a combined five final convictions (all for sex trafficking) under the anti-trafficking statute in federal and state courts in 2023. All initial convictions were subject to appeal and, generally, court-ordered sentences did not begin until appeals were exhausted, which weakened the deterrence of initial convictions. Final convictions, where the courts' decision was binding, were not subject to appeal. Traffickers' sentences, especially those involving fewer than four years' imprisonment, often involved community service, work release, and other alternatives to full-time imprisonment.

The government continued to report ongoing prosecutions under the Articles 231 and 231-A, earlier statutes which could be applied to alleged trafficking crimes committed before the 2016 adoption of Article 149-A. However, judges ultimately dismissed many of these cases. In some cases, courts dismissed trafficking charges because the statute of limitations lapsed. Brazil allowed successive appeals in all criminal cases, and convicted traffickers usually filed multiple appeals over several years before convictions became final. Lengthy case timelines and high acquittal rates contributed to a culture of impunity for traffickers, especially labor traffickers prosecuted under the slave labor statute.

The PF was the primary law enforcement entity charged with responding to trafficking crimes; it maintained central units monitoring human trafficking and migrant smuggling crimes (DRTP) and slave labor crimes (NUTRAF), but assigned locally posted human rights investigators to lead human trafficking investigations. States' civil police units were responsible for

investigating trafficking crimes without international elements; the Federal Highway Police could also support investigations. Coordination between federal, state, and municipal law enforcement units varied considerably across the country. Law enforcement units at all levels had insufficient funding, expertise, and staff to investigate trafficking. Federal and state governments shared responsibility for prosecuting human trafficking crimes under Article 149-A. MPF oversaw cases with international or inter-state elements, while state prosecutors oversaw cases within a state's physical territory. MPF also had authority to prosecute slave labor crimes, including forced labor, under Article 149, although criminal prosecutions of slave labor were uncommon relative to the number of cases recorded. In July 2024, the MPF created a specialized prosecutorial unit (UNTC) responsible for prosecuting international human trafficking crimes, which comprised six prosecutors based in four cities. Non-specialized MPF prosecutors across Brazil could also oversee human trafficking and slave labor cases and could request assistance from UNTC.

Labor officials had primary authority over cases of slave labor, although they could not file criminal charges. The Ministry of Labor and Employment (MTE) had a dedicated unit, the Secretariat of Labor Inspections (SIT), which documented situations of slave labor. The Public Labor Ministry's (MPT's) labor prosecutors could apply civil penalties and collect back wages for exploited workers. Many government officials preferred civil proceedings to criminal prosecutions in cases of slave labor, noting that civil proceedings concluded more swiftly and granted victims more immediate benefits for victims in the form of back wages and compensation. Interagency coordination and data collection efforts were inadequate and impeded prosecution efforts. Federal and state agencies did not have a shared database or routine procedure for sharing data on trafficking investigations or slave labor inspections, which limited coordination. In particular, poor evidence collection hindered MPF prosecutors' efforts to build criminal cases against slave labor perpetrators; prosecutors relied on labor inspection reports, which rarely included sufficient evidence to criminally convict or build cases. Officials reported evidence collection improved markedly when MPF prosecutors participated in inspections; however, prosecutors only attended 25 percent of slave labor inspections due to staffing limitations. Prosecutors often received case files several years after slave labor inspections took place, preventing them from collecting additional evidence to support prosecution.

Many federal, state, and municipal officials demonstrated an incomplete understanding of trafficking crimes, including misconceptions of both sex and labor trafficking. Federal anti-trafficking efforts prioritized transnational sex trafficking involving female Brazilian victims exploited abroad, reducing focus on other forms of the crime. Observers reported federal and

state officials lacked an understanding of domestic sex trafficking as a crime, which plausibly inhibited efforts to identify trafficking situations and hold traffickers accountable. Although the federal government reported sub-national authorities were responsible for investigating domestic sex trafficking, there were no reported prosecutions or convictions of sex trafficking in state courts.

Officials did not recognize forced labor as a form of human trafficking, seemingly based on an outdated definitional understanding predating Law 13.344. Consequently, officials typically considered instances of forced labor as slave labor cases and criminal investigations of forced labor under the anti-trafficking statute were uncommon. According to stakeholders, judges demonstrated an incomplete understanding of human trafficking, including the irrelevance of initial consent, which contributed to low conviction rates. The government offered limited training opportunities in partnership with civil society organizations, including awareness training for state law enforcement officials. The government reportedly required new labor judges to complete a training on slave labor, but did not report how many judges participated in the course; by contrast, 76 new judges completed the training in 2019, the last year for which data was available.

The government reported coordinating with British and U.S. counterparts to investigate human trafficking and, during the reporting period, signed new cooperation agreements with Bolivia and Colombia.

The government did not report any investigations, prosecutions, or convictions of government employees complicit in human trafficking crimes. The government did not confirm whether it continued to investigate previously reported cases of officials allegedly complicit in trafficking crimes, including a 2022 investigation involving a police officer and a 2016 child sex trafficking case involving an elected official in Parana state. Similarly, there were no updates on the prosecution’s appeal of an inadequate sentence given to a civil police investigator in 2016 for his involvement in a child sex trafficking ring.

PROTECTION

The government maintained protection efforts.

The government reported identifying 362 trafficking victims in 2024, compared with identifying 337 victims in 2023 and 588 in 2022. Among these victims, there were 207 male

victims and 155 female victims; sixty-five victims were children. The government did not report how many were victims of sex trafficking or labor trafficking. The government also reported identifying 2,004 victims of labor exploitation in 1,035 operations against "slave labor," compared with 3,190 victims of labor exploitation in 2023; however, the government did not specify how many, if any, were trafficking victims, as opposed to victims of other forms of labor exploitation. The government did not publish its regular assessment of the number of trafficking victims within the previous year's population of identified victims of labor exploitation. In 2022, the last year for which data was available, officials assessed as probable trafficking victims 1,970 of 2,575 victims of labor exploitation. Brazil did not have a centralized database to track victim identification and service provision, which made it difficult to analyze protection data, perform year-to-year comparisons, and draw conclusions. Several agencies at various levels of government collected victim data; however, each agency used its own methodology, limiting the ability to share information across institutions and develop effective approaches to protect victims. Officials sometimes struggled to refer victims to services due to incomplete victim records or insufficient coordination between service providers, especially when victims identified in one jurisdiction sought support in another.

The government did not have specialized services for trafficking victims and, instead, provided care to victims through the public health system and civil society; some trafficking victims received services through programs designed for slave labor victims. The government had a national SOP for assisting Brazilian trafficking victims exploited abroad, but the SOP was not comprehensive because it did not outline steps for identifying and assisting victims of trafficking exploited within Brazil. Instead, the federal government deferred to state and local governments to establish their own SOPs for this purpose. In March 2025, with support from an international organization, the government published an updated resource guide for sub-national governments working with trafficking victims exploited within Brazil. The guide outlined best practices and federal anti-trafficking stakeholders that offered assistance services. The government also had a national SOP for assisting slave labor victims, the National Flow for the Assistance of Slave Labor Victims ("National Flow"); the government did not report how many trafficking victims, if any, it referred to care through the National Flow in 2024.

Some sub-national governments maintained their own SOPs; for example, the state of Rio de Janeiro had a combined SOP, developed in 2022, which established procedures for assisting both trafficking and slave labor victims. According to observers, sub-national governments sometimes used outdated identification guidance, such as the previous federal resource guide published in 2013.

Because of this partial protection framework, authorities did not consistently implement nationwide mandates requiring the government provide trafficking victims with temporary shelter; legal, social, and health assistance; and protection against re-victimization. Efforts to identify victims and the quality of care available to them varied considerably from state to state. Authorities in most states did not proactively or consistently identify victims of sex trafficking or forced labor outside the slave labor context. MTE's Labor Inspection Secretariat (SIT) identified victims of slave labor through unannounced inspections of businesses or employers suspected of using slave labor. SIT had a mobile team (GEFM) that conducted multidisciplinary inspections of rural worksites in remote areas; it performed 1,035 inspections in 2024, a significant increase compared with 598 inspections in 2023. SIT inspectors provided slave labor victims with pamphlets outlining available resources upon identification. The Ministry of Justice and Public Security's (MJSP's) six Advanced Posts for Humanitarian Assistance to Migrants (PAAHMs) supported recently-arrived migrants at airports and bus stations; authorities at PAAHMs could screen for trafficking indicators. The government reported limited examples of training local officials to identify and refer trafficking victims during the reporting period.

Authorities operated three municipal-level and 18 state-level anti-trafficking offices (NETPs), which connected victims with service providers and coordinated assistance efforts between local, state, and federal stakeholders. NETPs were unevenly distributed across the country and 10 states lacked an NETP facility. Federal funding for NETPs was insufficient; wealthier states sometimes supplemented their NETPs' budgets, improving the quality of assistance and coordination. The government did not report whether NETPs assisted any victims in 2024, compared with 397 potential trafficking victims assisted in 2022, the last year for which data was available. NETPs could refer victims to the Ministry of Social Development's Social Assistance Service (SUAS) or to other service providers, including civil society. NETPs could also refer child trafficking victims to guardianship councils (CTs). However, CTs often lacked the expertise and resources to adequately support trafficking victims.

The government reported that SUAS was the primary federal agency providing services to trafficking victims; SUAS-CREAS assisted 362 victims in 2024, compared with 388 victims in 2023. The government did not have specialized services for trafficking victims, with the exception of seven anti-trafficking legal clinics at public universities, some of which relied on funding from international donors. Instead, trafficking victims could receive non-specialized services through federal, state, or local government programs for vulnerable individuals, such as healthcare, literacy programs, and transportation. States, local governments, and civil society organizations furnished many of the services available to victims; the availability and

quality of these services varied considerably. SUAS could support trafficking victims at its nationwide network of Specialized Social Service Centers (CREAS) for vulnerable populations, which offered psychologists and social workers.

Slave labor victims were eligible for non-specialized services offered by federal, state, and local authorities; the government had more systematic means of furnishing these services to slave labor victims than to trafficking victims. Many, but not all, slave labor victims also received three months of unemployment insurance following their identification.

SUAS could accommodate victims in its network of non-specialized shelters for vulnerable populations. In practice, very few of these shelters served trafficking victims. Officials could place trafficking victims in similar state-, city-, or civil society-operated shelters, when available. Authorities sometimes inappropriately penalized victims for offenses committed solely as a direct result of being trafficked, including foreign women forced to transport drugs. The government had measures to encourage victims to testify against traffickers and courts encouraged the use of video testimony in criminal cases. Observers continued to express concern about the under-reporting of trafficking crimes, attributing it in part to victims' lack of awareness of available protection services and fear that filing complaints would lead to further exploitation, deportation, or other harm; others suggested victims were discouraged by the long duration of trial proceedings.

The law entitled foreign victims of trafficking to a residence permit; in April 2024, the government revised the permit procedure to extend eligibility to victims regardless of their agreement to testify or otherwise support law enforcement, and to victims' family members. The government did not report issuing residence permits to slave labor or trafficking victims in 2024. The government could assist trafficking victims with repatriation; in 2024, the government reported funding the repatriation of 48 Brazilian trafficking victims from nine countries. The government did not report any victims requesting or receiving restitution in 2024; officials suggested lengthy case timelines discouraged prosecutors and victims from pursuing restitution.

PREVENTION

The government marginally increased efforts to prevent trafficking.

The MJSP's coordination office for anti-trafficking and anti-smuggling efforts (CGETP) oversaw the inter-ministerial group responsible for the implementation of the NAP. In July 2024, the government adopted its 2024-2028 NAP, which it developed in collaboration with an international organization. The NAP included objectives to improve coordination, build capacity, and research gaps in prosecution, protection, and prevention efforts. The MJSP also funded the seven-member anti-trafficking advisory committee (CONATRAP), which included representatives from federal government agencies and NGOs; CONATRAP met at least twice during the report period., The government continued to partner with academic and civil society institutions to produce reports and assessments of trafficking trends and certain government efforts. Where present, NETPs supported the coordination of sub-national anti-trafficking efforts. Coordination between federal and state agencies remained uneven and varied in efficacy.,

Most awareness-raising efforts in Brazil focused on addressing child abuse, child labor, or slave labor more broadly; few campaigns attempted to raise awareness of human trafficking specifically. Federal, state, and municipal governments hosted workshops and performances or published online materials to raise awareness of human trafficking and related crimes, most of which were scheduled to commemorate World Day against Trafficking., The MTE continued its national campaign to raise awareness of the risk of exploitation, including trafficking for domestic workers. The government maintained two human rights hotlines that could receive trafficking-related calls. Hotline operators could refer victims to law enforcement. The government did not report receiving any trafficking-related calls to these hotlines in 2024, compared with 259 trafficking-related calls in 2023. The government did not indicate whether it initiated any investigations from calls to the hotlines. Some states operated their own human rights hotlines.

Authorities made limited efforts to reduce the demand for commercial sex acts by coordinating with a foreign government to prevent known sex offenders from entering Brazil. MTE published a "dirty list," or *lista suja*, twice annually; the dirty list made public the names of individuals and businesses found guilty of using slave labor. MTE added 176 new employers to the registry in October 2024. The October 2024 registry listed 727 employers. Offending employers were listed in the registry for two years. In July 2024, MTE created a secondary registry, allowing employers to be removed from the "dirty list" early through additional fines, enhanced monitoring from MTE, and a commitment to improve workplace conditions. MTE had not yet published a version of the secondary registry by the end of the reporting period. MTE officials reported the most-represented industries on the list in 2024 were charcoal producers, housekeeping services, cattle ranchers, and mining companies. Officials indicated

the number of labor inspectors employed by the government was insufficient to adequately perform inspections across the country; the government initiated, but did not complete, a round of hiring for 900 inspector positions during the reporting period. Labor inspectors' initial and continuing education courses included material on slave labor, but the government did not report how many inspectors utilized this programming.

TRAFFICKING PROFILE:

Trafficking affects all communities. This section summarizes government and civil society reporting on the nature and scope of trafficking as reported over the past five years. Human traffickers exploit domestic and foreign victims in Brazil, and traffickers exploit victims from Brazil abroad. Traffickers exploit women and children from Brazil and other South American countries – especially Bolivia, Paraguay, and Venezuela – in sex trafficking in Brazil. Child sex trafficking is common along Brazil's major highways, including BR-386, BR-116, and BR-255. Traffickers exploit Brazilians – especially Afro-Brazilian men – in situations that could amount to forced labor. Organized criminal groups are associated with the exploitation of women and girls in sex trafficking in the states of Amazonas, Minas Gerais, Rio Grande, Rio Grande do Sul, Santa Catarina, and others. Commercial child sexual exploitation and abuse by foreign visitors in Brazil remains endemic, particularly in resort and coastal areas; many perpetrators of this crime are from Europe and the United States. Forced labor in rural Brazil is associated with charcoal production, cattle ranching, salt industries, logging, mining, and the cultivation of sisal fiber, sugar, grapes, coffee, garlic, and carnauba wax. In Brazil's urban areas, forced labor occurs in factory work, including Sao Paulo's textile industry; construction; domestic work, where cases sometimes involve decades of exploitation; and the hospitality sector. Traffickers force victims, especially foreigners from Bolivia, South Africa, and Venezuela, to engage in drug trafficking and other crimes.

Many identified trafficking victims are from northeast Brazilian states, such as Maranhao. Most identified trafficking victims are people of color, and many are Afro-Brazilian or otherwise of African descent. Multiple sources reported that individuals who advocates described as transgender women are incredibly vulnerable to trafficking in Brazil and abroad, due to social ostracization, high rates of violence, and demand for commercial sex acts from this population. Reporting shows traffickers manipulate or manufacture debts to coerce victims who advocates described as transgender, charging them for room and board, protection, or medical procedures. Traffickers commonly employ deceptive recruitment and debt-based coercion to facilitate victims' exploitation. They increasingly rely on online

advertisements, social media platforms, and other digital means of recruitment. Slave labor perpetrators operated with impunity and victims of slave labor, including trafficking victims, are highly vulnerable to re-victimization.

Recent research into the prevalence of human trafficking in Brazil suggests traffickers are extremely active. One study suggested that up to 16 percent of girls (ages 14 – 17 years) in a northeastern metropolitan area were likely victims of commercial sexual exploitation. Another organization estimated traffickers are exploiting up to 4,500 victims in forced labor in artisanal gold mines. A recent estimate suggests up to 18 percent of hired agricultural workers displayed indicators of forced labor. For cattle ranching, research indicates approximately 14 percent of workers in the sector presently demonstrate indicators of forced labor.

Cuban regime-affiliated medical workers associated with Mais Medicos program, which ended in 2018, continued to pursue a class-action lawsuit against an international organization for its role in their alleged trafficking. The lawsuit alleges the Cuban regime forced the Cuban Mais Medico participants to work in a triangular arrangement facilitated by the international organization. In 2022, Brazilian authorities announced plans to restart the Mais Medicos program without an affiliation with the Cuban regime.

Traffickers exploit Brazilians in sex and labor trafficking abroad in Western Europe, Southeast Asia, the United States and other destinations, often recruiting them with fraudulent job offers. For example, traffickers offer Brazilians jobs overseas in technology or customer service, often in Thailand, and then exploit them in forced labor in online scam operations; these cases have been reported in Burma, Cambodia, and the Philippines. Brazilian martial artists, performers, and domestic workers are vulnerable to trafficking abroad.

TAGS

Brazil | Bureau of Western Hemisphere Affairs | Human Trafficking | Office to Monitor and Combat Trafficking in Persons | Reports

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Brazil 2024 Human Rights Report

Executive Summary

The human rights situation in Brazil declined during the year. The courts took broad and disproportionate action to undermine freedom of speech and internet freedom by blocking millions of users' access to information on a major social media platform in response to a case of harassment. The government undermined democratic debate by restricting access to online content deemed to "undermine democracy," disproportionately suppressing the speech of supporters of former president Jair Bolsonaro as well as journalists and elected politicians, often in secret proceedings that lacked due process guarantees. The government also suppressed politically disfavored speech on the basis that it constituted "hate speech," a vague term untethered to international human rights law.

Significant human rights issues included credible reports of: arbitrary or unlawful killings; torture or cruel, inhuman, or degrading treatment or punishment; arbitrary arrest or detention; and serious restrictions on freedom of expression and media freedom, including violence or threats of violence against journalists.

The government did not always take credible steps to identify and punish officials who committed human rights abuses.

Section 1. Life

a. Extrajudicial Killings

There were several reports police committed arbitrary or unlawful killings during the year. Some killings were attributed to a police operation against transnational criminal organizations in Sao Paulo State in the first half of the year and a police operation that took place from July 2023 to April in Baixada Santista, a coastal area including the port city of Santos.

In July, a São Paulo court charged two officers from a police shock battalion (ROTA) with aggravated homicide and obstructing evidence in the death of Fábio Oliveira Ferreira, who was killed in the operation in July 2023. One defendant was Captain Marcos Correa de Moraes Verardino, one of the coordinators of the operation, who allegedly fired three shots at Ferreira after he had surrendered. The other defendant, Corporal Ivan Pereira da Silva, also of ROTA, allegedly shot the victim twice in the chest while the victim was lying on the ground. In December, the two defendants were acquitted by courts in São Paulo State. The São Paulo Public Prosecutor's Office of appealed the decision, and higher courts were considering that appeal at year's end.

In April, Roraima State Civil Police reported it launched an operation to dismiss a group of officers from the military police of Roraima suspected of being part of a militia and an extermination group, according to a *Globo*

news report. More than 100 officers were investigated, and several arrests were made. The investigation examined cases in which police officers allegedly provided armed security for illegal miners, robbed and tortured competing invaders, and robbed the miner bosses themselves.

There were developments in the politically motivated 2018 killing of city councilwoman Marielle Franco and her driver Anderson Gomes, in Rio de Janeiro. In March, police arrested Chiquinho Brazão, a Federal Chamber deputy (representative), and his brother, Domingos Brazão, a member of the Rio de Janeiro State Audit Court, for their alleged role in ordering the 2018 killing of Franco. The brothers remained in custody and were charged with qualified homicide and attempted homicide. Rivaldo Barbosa, who was the chief of police of Rio de Janeiro when Franco was killed, was also arrested in March for allegedly helping plan the killing and for obstruction of justice. In November, two former police officers were sentenced for the killings. Ronnie Lessa was sentenced to 78 years and nine months for firing the shots that killed Franco and Gomes and injured one of Franco's aides. Élcio de Queiroz was sentenced to 59 years and eight months for driving the getaway car.

b. Coercion in Population Control

There were no reports of coerced abortion or involuntary sterilization on the part of government authorities.

Section 2. Liberty

a. Freedom of the Press

The constitution and law provided for freedom of expression, including for members of the press and other media. Supreme Court (STF) rulings, however, restricted the freedom of expression for individuals it deemed to be in violation of the law prohibiting antidemocratic speech.

Censorship by Governments, Military, Intelligence, or Police Forces, Criminal Groups, or Armed Extremist or Rebel Groups

The law prohibited politically motivated judicial censorship, but there were reports of censorship. The government censored online content deemed in violation of STF orders, which instructed platforms to remove content that allegedly spread misinformation related to the electoral system or judicial institutions or to disparage judicial officials with online threats or harassment. Court records reveal that Justice Alexandre de Moraes personally ordered the suspension of more than 100 user profiles on the social media platform X (formerly Twitter), disproportionately suppressing the speech of advocates of former president Jair Bolsonaro instead of taking narrower measures to penalize content that incited imminent lawless action or harassment. The government telecommunications regulator Anatel ordered internet service providers to block X by order of the STF on August

31, after the company failed to appoint a legal representative and pay outstanding fines for failure to remove content in compliance with orders issued by the STF and the Superior Electoral Court. The STF authorized fines of 50,000 reais ($9,000) per day to individuals or companies who accessed the platform via a virtual private network (VPN), although no fines were reportedly assessed. The STF authorized X to resume its operations in the country on October 8 after the company complied with court orders and paid outstanding fines. Other media companies were subject to similar content removal orders. This broad repression blocked Brazilians' access to information and viewpoints on a range of national and global issues. Additionally, the court's temporary prohibition on the use of a VPN, under penalty of fine, further eroded freedom of the press by removing privacy protections from individuals whose ability to blow the whistle on government corruption hinged on their capacity to do so anonymously.

Nongovernmental criminal elements at times subjected journalists to threats or violence due to the journalists' reporting on their criminal activities.

b. Worker Rights

Freedom of Association and Collective Bargaining

The law provided for freedom of association for all workers (except members of the military, military police, and firefighters), the right to

bargain collectively with some restrictions, and the right to strike. The law prohibited antiunion discrimination, including the dismissal of employees who were candidates for, or holders of, union leadership positions, and it required employers to reinstate workers fired for union activity.

New unions were required to register with the Ministry of Labor, which would accept the registration unless objections were filed by other unions. The law stipulated certain restrictions, such as *unicidade* (in essence, one union per occupational category per city), which limited freedom of association by prohibiting multiple, competing unions of the same professional category in a single geographical area. Unions that represented workers in the same geographical area and professional category could contest another union's registration.

The law stipulated a strike could be ruled "disruptive" by the labor court and the union could be subjected to legal penalties if the strike violated certain conditions, such as if the union failed to notify employers at least 48 hours before the beginning of a walkout or end a strike after a labor court decision. Employers were not allowed to hire substitute workers during a legal strike or fire workers for strike-related activity, provided the strike was not ruled abusive as defined in the law.

The law obliged a union to negotiate on behalf of all registered workers in the professional category and geographical area it represented, regardless of whether an employee paid voluntary membership dues. The law included

collective bargaining rights, such as the ability to negotiate a flexible hourly schedule and work remotely. The law permitted the government to reject clauses of collective bargaining agreements that conflicted with government policy.

Freedom of association and the right to collective bargaining were generally respected, according to observers. Collective bargaining was widespread in establishments in the private sector.

In the view of nongovernmental organization (NGO) experts, the government usually effectively enforced applicable laws, and penalties were commensurate with those for other laws involving denials of civil rights, such as discrimination. Penalties were regularly applied against violators.

Forced or Compulsory Labor

See the Department of State's annual *Trafficking in Persons Report* at https://www.state.gov/trafficking-in-persons-report/.

Acceptable Work Conditions

Wage and Hour Laws

The law provided for a minimum wage, which was higher than the official poverty income level. The law limited the workweek to 44 hours and specified a weekly rest period of 24 consecutive hours, preferably on Sundays. The law also provided for paid annual vacation, prohibited

excessive compulsory overtime, limited overtime to two hours per workday, and stipulated any hour worked above the monthly limit had to be compensated with at least time-and-a-half pay; these provisions generally were enforced for all groups of workers in the formal sector. The constitution also provided for the right of domestic employees to work a maximum of eight hours per day and 44 hours per week, and to receive a minimum wage, a lunch break, social security, and severance pay.

Occupational Safety and Health

The Ministry of Labor set occupational safety and health (OSH) standards that were consistent with internationally recognized norms, although unsafe working conditions were prevalent throughout the country, especially in construction, according to media reports. The law required employers to establish internal committees for accident prevention in workplaces. Inspectors identified unsafe conditions and responded to worker complaints, but the number of inspections conducted was lower than necessary. The law also prohibited firing employees for their committee activities. Workers could remove themselves from situations that endangered their health or safety without jeopardy to their employment, although those in forced labor situations without access to transportation were particularly vulnerable to situations that endangered their health and safety.

Wage, Hour, and OSH Enforcement

The Ministry of Labor addressed problems related to minimum wage, overtime, and OSH laws. In the view of NGO experts, officials effectively enforced OSH laws. Penalties for violations included fines that varied widely depending on the nature of the violation. Penalties were in general commensurate with similar crimes such as fraud or negligence. Penalties were regularly applied against violators. The number of labor inspectors was insufficient to enforce compliance, according to the Labor Inspectors Union. Inspectors had the authority to make unannounced inspections and initiate sanctions.

According to the Brazilian Institute of Geography and Statistics, the informal sector represented almost 40 percent of the workforce.

Gig workers were not considered employees, and food delivery and ride-share companies did not consider the workers who provided services through their platforms to be employees. These workers were not protected by labor laws.

c. Disappearance and Abduction

Disappearance

There were no reports of enforced disappearances by or on behalf of government authorities.

In July, President Luis Inácio Lula da Silva reinstated the Special Commission on Political Deaths and Disappearances to deal with state crimes and political repression that occurred from 1961 to 1979. The commission was created in 1995 but was closed in 2022 by the government of then President Bolsonaro.

Prolonged Detention without Charges

The constitution prohibited arbitrary arrest and detention and provided for the right of persons to challenge the lawfulness of their arrest or detention in court. The government generally observed these requirements; however, political figures and rights groups alleged the government held hundreds of individuals accused of participation in protests that led to the invasion of government buildings on January 8, 2023, in detention for several months without filing charges. They also alleged these protesters were denied access to legal counsel.

Lengthy pretrial detention was a problem. The length of pretrial detention frequently equaled or exceeded the maximum sentence for the alleged crime, according to the National Security Forum. As of 2023, approximately one-quarter of the prison population was awaiting court trial, according to the Brazilian Forum on Public Security.

d. Violations in Religious Freedom

See the Department of State's annual *International Religious Freedom Report* at https://www.state.gov/religiousfreedomreport/.

e. Trafficking in Persons

See the Department of State's annual *Trafficking in Persons Report* at https://www.state.gov/trafficking-in-persons-report/.

Section 3. Security of the Person

a. Torture and Cruel, Inhuman, or Degrading Treatment or Punishment

The constitution prohibited such practices, but there were credible reports government officials employed them.

Military police officers in Porto Alegre, capital of the state of Rio Grande do Sul, were accused of torturing Vladimir Abreu de Oliveira for approximately 40 minutes before attempting to hide his body by throwing him from a bridge in May. An investigation revealed Abreu de Oliveira suffered multiple severe injuries while alive, leading to his death. Five officers were indicted, with charges ranging from torture resulting in death to omission of assistance, and two were in preventive detention. Civil police were

conducting a separate investigation.

b. Protection of Children

Child Labor

See the Department of Labor's *Findings on the Worst Forms of Child Labor* at https://www.dol.gov/agencies/ilab/resources/reports/child-labor/findings/.

Child Marriage

The legal minimum age of marriage was 18, or 16 with parental or legal representative consent. While child marriage declined in recent years, the practice of early marriage (marriage before age 18), especially among girls, was common, according to UNICEF. The government did not always effectively enforce the law.

In March, a report from the newspaper *Econômico Valor* noted approximately one in five women married before turning 18.

c. Protection to Refugees

The government cooperated with the Office of the UN High Commissioner for Refugees and other humanitarian organizations in providing protection and assistance to refugees, returning refugees, or asylum seekers, as well as other persons of concern.

Provision of First Asylum

The law provided for the granting of asylum or refugee status, and the government had a system for providing protection to refugees.

d. Acts of Antisemitism and Antisemitic Incitement

According to the Brazilian Israelite Federation, there were approximately 120,000 Jewish Brazilian citizens, of whom approximately 70,000 lived in the state of São Paulo, according to 2021 data, and 34,000 in the state of Rio de Janeiro.

The law criminalized the manufacture, sale, distribution, or broadcast of symbols, emblems, ornaments, badges, or advertising that used the swastika for purposes of publicizing Nazism. The penalty was two to five years' imprisonment.

In June, the Brazilian Israelite Confederation (CONIB) and the Israelite Federation of the State of São Paulo (FISESP) reported a sharp increase in the number of cases of antisemitism after the Hamas attack on Israel in October 2023. From January to May, 886 cases of antisemitism were recorded, almost six times more than in the same period in 2023. Most of the attacks occurred in digital environments, such as social networks and messaging apps.

Following Israel's military response in Gaza to the Hamas October 2023

terrorist attacks, on February 18, President Lula da Silva stated that "what is happening in the Gaza Strip... it's a genocide." In the speech, he then compared what was occurring in Palestine with "when Hitler decided to kill the Jews." On February 19, CONIB stated it "repudiated the unfounded statements by President Lula comparing the Holocaust to the State of Israel's defense against the terrorist group Hamas," saying the government had adopted an "extreme and unbalanced posture in relation to the tragic conflict in the Middle East."

On October 21, the Public Ministry of Santa Catarina's Special Task Force to Combat Organized Crime arrested four individuals, allegedly members of a neo-Nazi group, for inciting discrimination and planning violent acts in different regions of the country. The arrests were part of "Operation Overlord," which took place in the states of Santa Catarina, São Paulo, Sergipe, Paraná, and Rio Grande do Sul. According to CNN Brasil, the operation aimed to combat antisemitism and hate speech and prevent the planning of violent acts. The individuals arrested allegedly were part of a band that performed at neo-Nazi events in several regions.

For further information on incidents in the country of antisemitism, whether or not those incidents were motivated by religion, and for reporting on the ability of Jews to exercise freedom of religion or belief, please see the Department of State's annual *International Religious Freedom Report* at https://www.state.gov/religiousfreedomreport/.