



Authorization for Credit Card Transactions

Department of Homeland Security

Form G-1450

How To Fill Out Form G-1450

1. Type or print legibly in black ink.
2. Complete the "**Applicant's/Petitioner's/Requester's Information**," "**Credit Card Billing Information**," and "**Credit Card Information**" sections and sign the authorization. **NOTE:** The credit card must be issued by a U.S. bank.
3. Place your Form G-1450 ON TOP of your application, petition, or request package.

NOTE: Failure to provide the requested information may result in DHS and your financial institution not accepting the payment. DHS cannot process credit card payments without an authorized signature.

NOTE: Please see the USCIS Form G-1450 website for additional information.

We recommend that you print or save a copy of your completed Form G-1450 to review in the future and for your records.

By completing this transaction, you agree that you have paid for a government service and that the filing fee, biometric services fee and all related financial transactions are final and not refundable, regardless of any action DHS takes on an application, petition, or request. You must submit all fees in the exact amounts. DHS will charge your credit card up to the amount you authorize below.

Please refer to the form(s) you are filing for additional information, or you may call the USCIS Customer Contact number at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Applicant's/Petitioner's/Requester's Information (Full Legal Name)			
Given Name (First Name)		Middle Name (if any)	Family Name (Last Name)
Credit Card Billing Information (Credit Card Holder's Name as it Appears on the Card)			
Given Name (First Name)		Middle Name (if any)	Family Name (Last Name)
Credit Card Holder's Billing Address:			
Street Number and Name		Apt. Ste. Flr. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Number
City or Town		State	ZIP Code
Credit Card Holder's Signature and Contact Information:			
Credit Card Holder's Signature			
Credit Card Holder's Daytime Telephone Number		Credit Card Holder's Email Address	
Credit Card Information			
Credit Card Number	Credit Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover		Authorized Payment Amount
Credit Card Expiration Date CVV Code (mm/yyyy)			\$.00

February 19, 2026

U.S. Postal Service (USPS):
USCIS
Attn: I-539
P.O. Box 4010
Carol Stream, IL 60197-4010

Re: Form I-539 – Request for Change of Status from B-2 to F-2
Applicant: Marina THESSING BANDEIRA
Principal F-1: Rodrigo VEIGA DA CUNHA (SEVIS ID: N0034422297)

Dear Sir or Madam,

This office respectfully submits Form I-539 on behalf of Ms. Marina Thessing Bandeira, who was lawfully admitted to the United States in B-2 status on September 5, 2025, with authorization to remain until March 4, 2026. This request for change of status to F-2 is timely filed prior to the expiration of her authorized stay.

Ms. Bandeira seeks classification as the dependent spouse of Mr. Rodrigo Veiga da Cunha, who maintains valid F-1 status pursuant to an approved STEM OPT extension through February 2, 2028. Mr. Veiga da Cunha is employed full-time by Deloitte Tax LLP and remains in full compliance with all F-1 and STEM OPT requirements.

The parties met in 2023 in Brazil through a mutual friend and have maintained a bona fide relationship since that time. At the time of Ms. Bandeira's admission on September 5, 2025, she possessed a round-trip ticket with a scheduled return in November 2025, consistent with temporary visitor intent. Her admission was for tourism and personal visitation, and she has not engaged in employment or study inconsistent with B-2 classification.

Following her admission, the couple shared continuous cohabitation and routine domestic life, in addition to ordinary tourism activities within the United States, including visits within Illinois and neighboring states. These activities are documented in the chronologically organized photographic record submitted as Exhibit N.

It was only after this period of continuous cohabitation that the parties decided to marry. The decision was not predetermined at the time of admission but arose from the progression of their relationship during Ms. Bandeira's authorized stay. On January 3,

2026, they were lawfully married in Chicago, Illinois, in the presence of Mr. Veiga da Cunha's parents, who were visiting the United States at that time. Photographs of the ceremony and sworn third-party support statements are included in the evidentiary submission.

Following their marriage, the parties determined that the appropriate and lawful mechanism for residing together during Mr. Veiga da Cunha's authorized F-1/STEM OPT period would be Ms. Bandeira's classification as an F-2 dependent. Ms. Bandeira understands that F-2 status does not authorize employment and affirms that she will remain within its regulatory limitations. Both parties have submitted sworn declarations confirming that no preconceived immigrant intent existed at the time of admission and that all immigration rules have been respected.

Mr. Veiga da Cunha's annual base compensation is \$89,200, in addition to bonuses, as evidenced by the enclosed Employment Verification Letter, Compensation Statement, and recent pay records. His income is sufficient to fully support the household. An updated Form I-20 reflecting Ms. Bandeira as an F-2 dependent has been properly issued and is enclosed.

Ms. Bandeira has maintained lawful status at all times and has not violated the terms of her admission.

Enclosures

- A. G-1450, Authorization for Credit Card Transactions;
- B. Form G-28: Notice of Entry of Appearance as Attorney or Accredited Representative;
- C. Form I-539: Application to Extend or Change Nonimmigrant Status;
- D. Form G-1145 e-Notification of Application/Petition Acceptance;
- E. Passports and Visa Pages;
- F. Identification Documents and Marriage Certificate;
- G. I-20 (F-2) – Marina Thessing Bandeira;
- H. I-20 (F-1 STEM OPT) – Rodrigo Veiga da Cunha;
- I. Most Recent I-94 Records and Travel Histories;
- J. Approval and Employment Authorization Document (STEM OPT);
- K. Employment Verification Letter;
- L. Compensation Statement;
- M. Recent Pay Statements;
- N. Apartment Lease Contract;
- O. Round-Trip Ticket (September 2025);
- P. Photographic Record of Relationship;
- Q. Third-Party Support Letters;
- R. Sworn Declarations of the Parties.

For the foregoing reasons, Ms. Bandeira respectfully requests approval of her change of status to F-2.

Should additional information be required, this office remains available to respond promptly.

Respectfully submitted,



Otavio Haverroth Silva
California Bar # 343486



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 0 7 4 9 2 6 2 5 4 3 8

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name) **HAVERROTH SILVA**
2.b. Given Name (First Name) **Otavio**
2.c. Middle Name **N/A**

Address of Attorney or Accredited Representative

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**

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number **5102419336**
5. Mobile Telephone Number (if any) **5102419336**
6. Email Address (if any) **otavio@legalhs.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
California

1.b. Bar Number (if applicable)
343486

1.c. I (select **only one** box) am not am subject to any order suspending, enjoining, restraining, disbaring, 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)
HS Law Corp

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-539

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

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

N/A

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

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

N/A

4. Receipt Number (if any)

N/A

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) THESSING BANDEIRA

6.b. Given Name (First Name) Marina

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

+55 48 99167-2431

11. Mobile Telephone Number (if any)

+55 48 99167-2431

12. Email Address (if any)

marinatbandeira@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 90487

13.b. Apt. Ste. Flr. N/A

13.c. City or Town San Diego

13.d. State CA 13.e. ZIP Code 92169

13.f. Province N/A

13.g. Postal Code N/A

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.

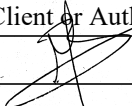
- 1.a. I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

- 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) 02/18/2026

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) 02/18/2026

- 2.a. Signature of Law Student or Law Graduate
N/A

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



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)

1.b Given Name (First Name)

1.c Middle Name

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 to Extend/Change Nonimmigrant Status

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

USCIS
Form I-539
OMB No. 1615-0003
Expires 03/31/2027

For USCIS Use Only		Fee Stamp		Action Block	
Returned					
Resubmitted					
Relocated	Received				
	Sent				
Remarks:	<input type="checkbox"/> Granted		<input type="checkbox"/> Denied		<input type="checkbox"/> Applicant interviewed on _____
	New Class _____		<input type="checkbox"/> Still within period of stay		
	Dates:	From ____/____/____	<input type="checkbox"/> S/D to: _____		
To ____/____/____		<input type="checkbox"/> Place under docket control			

To be completed by an Attorney or Accredited Representative (if any).	<input checked="" type="checkbox"/> 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)
		343486	0 0 7 4 9 2 6 2 5 4 3 8

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

Part 1. Information About You

1. Your Full Legal Name

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

2. Alien Registration Number (A-Number) (if any) 3. USCIS Online Account Number (if any)

▶ A- N/A ▶ N/A

4. Your U.S. Mailing Address (Safe Address, if applicable)

In Care Of Name (if any)
Otavio HAVERROTH SILVA

Street Number and Name	Apt. Ste. Flr.	Number
PO Box 90487	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	N/A
City or Town	State	ZIP Code
San Diego	CA	92169

5. Is your mailing address the same as your physical address? Yes No

If you answered "Yes" to **Item Number 5**, skip to **Item Number 7**. If you answered "No" to **Item Number 5**., provide information on your physical address in **Item Number 6**.

6. Your Current Physical Address

Street Number and Name	Apt. Ste. Flr.	Number
55 W Chestnut St	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1603
City or Town	State	ZIP Code
Chicago	IL	60610



Part 1. Information About You (continued)

Other Information About You

7. Country of Birth 8. Country of Citizenship or Nationality
9. Date of Birth (mm/dd/yyyy) 10. U.S. Social Security Number (if any)
11. Provide Information About Your Most Recent Entry Into the United States
- | | | |
|--|--|--|
| Date of Last Arrival Into the United States (mm/dd/yyyy) | Form I-94 Arrival-Departure Record Number | Passport Number (if any) |
| <input type="text" value="09/05/2025"/> | <input type="text" value="7 0 9 5 3 3 4 4 0 A 4"/> | <input type="text" value="GM199748"/> |
| Travel Document Number (if any) | Country of Passport or Travel Document Issuance | Passport or Travel Document Expiration Date (mm/dd/yyyy) |
| <input type="text" value="GM199748"/> | <input type="text" value="Brazil"/> | <input type="text" value="08/11/2035"/> |
12. Current Nonimmigrant Status (for example, F-1 student, H-4 dependent, etc.) Date Status Expires (mm/dd/yyyy)
- Select this box if you were granted Duration of Status (D/S).

Part 2. Application Type

1. I am applying for (select **only one** box):
- Reinstatement to student status.
 - An extension of stay in my current status.
 - A change of status.
2. If you are applying for a change of status or change of employer/information medium, complete the following:
- | | | | |
|--|---|---|---|
| I am requesting to change my status or employer/information medium to: | <input type="text" value="F2 - SPOUSE-CHILD OF F-1"/> | I am requesting the change to be effective (mm/dd/yyyy) | <input type="text" value="03/04/2026"/> |
|--|---|---|---|
3. Number of people included in this application (select **only one** box):
- I am the only applicant.
 - I am filing this application for myself and members of my family.
4. The total number of people (including me) in the application is: (Form I-539A is required for each co-applicant.)
5. The name of the school you will attend (if applicable) as an Academic Student, Vocational Student, or Exchange Visitor.
6. Your Student and Exchange Visitor Information System (SEVIS) ID Number, if applicable.

Part 3. Processing Information

1. I/We request that my/our current or requested status be extended until (mm/dd/yyyy):
2. Is this application based on an extension or change of status already granted to your spouse, child, or parent? Yes No



Part 4. Additional Information About the Applicant (continued)

6. Have you been arrested or convicted of any criminal offense since last entering the United States? Yes No

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

7.a. Acts involving torture or genocide? Yes No

7.b. Killing any person? Yes No

7.c. Intentionally and severely injuring any person? Yes No

7.d. Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened? Yes No

7.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No

Have you **EVER**:

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

8.b. Worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No

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

10. Have you **EVER** sold, provided, or transported weapons, or assisted any person in selling, providing, or transporting weapons, which, you knew or believed would be used against another person? Yes No

11. Have you **EVER** received any weapons training, paramilitary training, or other military-type training? Yes No

12. Have you **EVER** violated the terms of the nonimmigrant status you now hold? Yes No

13. Are you now in removal proceedings? Yes No

14. Have you **EVER** been employed in the United States since last admitted or granted an extension or change of status? Yes No

If you answered "No" to **Item Number 14.**, fully describe how you are supporting yourself in **Part 8. Additional Information**. Include documentary evidence of the source, amount, and basis for any income.

If you answered "Yes" to **Item Number 14.**, fully describe any and all periods of employment in **Part 8. Additional Information**. Include the name and address of the employer, weekly income, and whether the employment was specifically authorized by USCIS.

15. Are you currently or have you **EVER** been a J-1 exchange visitor or a J-2 dependent of a J-1 exchange visitor? Yes No

If you answered "Yes" to **Item Number 15.**, you must provide the dates you maintained status as a J-1 exchange visitor or J-2 dependent in **Part 8. Additional Information**.



Part 5. Applicant's 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
- 2. Applicant's Mobile Telephone Number (if any)
- 3. Applicant's Email Address (if any)

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 6.**, understood, all of the responses and information contained in, and submitted with, my application, and that all of the responses and the information are 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)

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

Interpreter's Full Name

- 1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name

Interpreter's Contact Information

- 3. Interpreter's Daytime Telephone Number
- 4. Interpreter's Mobile Telephone Number (if any)
- 5. Interpreter's Email Address (if any)

Interpreter's Certification and Signature

I certify, under penalty of perjury, that I am fluent in English and , 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 they understood every instruction, question, and answer on the application.

- 6. Interpreter's Signature Date of Signature (mm/dd/yyyy)



Part 7. 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) Preparer's Given Name (First Name)
2. Preparer's Business or Organization Name

Preparer's Contact Information

3. Preparer's Daytime Telephone Number 4. Preparer's Mobile Telephone Number (if any)
5. Preparer's Email Address (if any)

Preparer's Certification and Signature

I certify, under penalty of perjury, that I prepared this application for the applicant at their request and with express consent and that all of the responses and information contained in and submitted with the application are complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that they understand the responses and information in or submitted with the application.

6. Preparer's Signature  Date of Signature (mm/dd/yyyy)



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 (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)	Given Name (First Name)	Middle Name (if applicable)
	THESSING BANDEIRA	Marina	N/A

2. A-Number ▶ A-

N/A									
-----	--	--	--	--	--	--	--	--	--

3.	Page Number	Part Number	Item Number
	4	4	14

I am financially dependent on my spouse, Rodrigo Veiga da Cunha.

4.	Page Number	Part Number	Item Number
	N/A	N/A	N/A

N/A

5.	Page Number	Part Number	Item Number
	N/A	N/A	N/A

N/A

6.	Page Number	Part Number	Item Number
	N/A	N/A	N/A

N/A





e-Notification of Application/Petition Acceptance

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

USCIS
Form G-1145

What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

PURPOSE: The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receipting your immigration form.

ROUTINE USES: The information provided on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [**DHS/USCIS-007 - Benefits Information System and DHS/USCIS-001 - Alien File (A-File) and Central Index System (CIS)**], which can be found at www.dhs.gov/privacy. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name	Applicant/Petitioner Full First Name	Applicant/Petitioner Full Middle Name N/A
Email Address		Mobile Phone Number (Text Message)

Exhibit list

Exhibits: Pages:

Evidence of Identity and Marital Relationship

Rodrigo's Passport	1
Rodrigo's Visa - F1	2
Marina's Passport	3
Marina's Visa - B2	4
Rodrigo's Birth Certificate	5-7
Marina's Birth Certificate	8-10
Marriage Certificate	11

Evidence of Lawful F-1 STEM OPT Status and Derivative F-2 Eligibility

Marina's I-20 (F2)	12-14
Rodrigo's I-20 (F1)	15-18
Marina's Copy of I-94 and Travel History	19-21
Rodrigo's Copy of I-94 and Travel History	22-25
I-797 Approval EAD STEM OPT	26
Rodrigo's - New EAD Card	27
Rodrigo's - Previous EAD card	28-29

Evidence of Ongoing Employment and Lawful Maintenance of F-1 STEM OPT Status

Employment Agreement and STEM OPT Sponsor Documentation	30-62
Rodrigo's PayStubs and Bank Statement	63-82
Chicago Apartment Lease Contract	83-88

Evidence of Bona Fide Marital Relationship and Intent to Comply with Nonimmigrant Status

Round-trip tickets departing from the Marina	89-91
Car and accommodation reservations	92-96
Photos of the couple at various moments with descriptions	97-121
Marina's Father - Mr. Vladimir	122-124
Friendly Witness - Ms. Juliana	125
Rodrigo's Mother - Ms. Ângela	126-128
Friend of the couple - Mr. Pedro	129-131
Rodrigo's Affidavit	132
Marina's Affidavit	133

Evidence of Identity and Marital Relationship



FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

BIRTH CERTIFICATE

NAME:

Rodrigo Veiga da Cunha

CPF

065.999.439-93

REGISTRATION:

105197 01 55 2001 1 00190 107 0086383 78

DATE OF BIRTH IN FULL

May twelve, two thousand one

Day Month Year

12 05 2001

TIME

11:02 AM

PLACE OF BIRTH

Florianópolis/SC

CITY OF REGISTRATION AND STATE

Florianópolis/SC

PLACE, CITY OF BIRTH AND STATE

Carmela Dutra Maternity,
Florianópolis/SC

SEX

Male

FILIATION

Virato João Leal da Cunha e Ângela Zoldan da Veiga Cunha

GRANDPARENTS

Paternal grandparents: José Xavier da Cunha and Sônia Filomena Leal da Cunha
Maternal grandparents: Luiz Adolfo Olsen da Veiga and Rosa Zoldan da Veiga

TWIN

No

NAME AND REGISTRATION OF THE TWIN(S)

DATE OF REGISTRATION IN FULL

May thirteen two thousand one

LIVE REGISTRATION NUMBER

no record

NOTES

Annotation of CPF in accordance with Article 6 of CNJ Provision No. 63 of 2017, pursuant to a query carried out in the database of the Brazilian Federal Revenue Service made available by the CRC. Fees exempt. CPF annotation seal: GTH85666-THEW

Fees: Certificate R\$36.49; Funds R\$8.29; ISS R\$1.82. Seal R\$0.00; Total R\$46.60.

REGISTRY NAME: **CIVIL REGISTRY OFFICE OF TITLES AND DOCUMENTS**

REGISTRAR: **Iolê Luz Faria**

CITY/DISTRICT/STATE: **FLORIANÓPOLIS/SC**

ADDRESS: Rua Emilio Blum, 131, Block A, Room 801 – Centro –

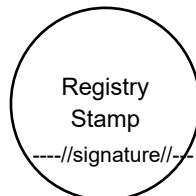
Phone: (48) 3225-2470

PRINTED BY: ELTON

The Content of this Certificate is true. I certify.
Florianópolis, December 23, 2024.

---//signature//---

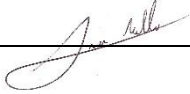
Paula Mendes Pires Schaefer
Clerk



Judiciary
State of Santa Catarina
Digital Inspection Seal
Regular Seal
HIM52805-048S
Check the act data at:
www.tjsc.jus.br/selo

BRP 030455657
BA 030455657
ARPENBRASIL

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: January 29, 2026.



REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

CERTIDÃO DE NASCIMENTO

NOME:

Rodrigo Veiga da Cunha

CPF

065.999.439-93

MATRÍCULA:

105197 01 55 2001 1 00190 107 0086383 78

DATA DE NASCIMENTO POR EXTENSO

Doze de maio de dois mil e um

DIA

12

MÊS

05

ANO

2001

HORA

11:02

NATURALIDADE

Florianópolis/SC

MUNICÍPIO DE REGISTRO E UNIDADE DA FEDERAÇÃO

Florianópolis/SC

LOCAL, MUNICÍPIO DE NASCIMENTO E UF

Maternidade

Carmela

Dutra,

Florianópolis/SC

SEXO

Masculino

FILIAÇÃO

Viriato João Leal da Cunha e Ângela Zoldan da Veiga Cunha

AVÓS

Avós paternos: José Xavier da Cunha e Sônia Filomena Leal da Cunha

Avós maternos: Luiz Adolfo Olsen da Veiga e Rosa Zoldan da Veiga

GÊMEO

Não

NOME E MATRÍCULA DO(S) GÊMEO(S)

DATA DO REGISTRO POR EXTENSO

Treze de maio de dois mil e um

DECLARAÇÃO DE NASCIDO VIVO

não informado

OBSERVAÇÕES

Averbação de CPF de acordo com art. 6º do Provimento n.63 de 2017 do CNJ, conforme consulta realizada junto a base de dados da Receita Federal do Brasil disponibilizada pela CRC. Emolumentos isentos. Selo de averbação de CPF: GTH85666-THEW

Emolumentos: Certidão R\$ 36,49; Fundos R\$ 8,29; ISS R\$ 1,82; Selo R\$ 0,00; Total R\$ 46,60.

NOME DO OFÍCIO: OFÍCIO DE REG CIVIL TIT E DOCTOS

OFICIAL REGISTRADOR: Iolê Luz Faria

MUNICÍPIO/COMARCA/UF: Florianópolis/SC

ENDEREÇO: Rua Emilio Blum, 131, Bloco A, Sala 801 - Centro -

Fone: (48) 3225-2470

IMPRESSO POR: ELTON

O conteúdo da certidão é verdadeiro. Dou Fé.
Florianópolis, 23 de dezembro de 2024

Paula Mendês Pires Schaefer

Paula Mendês Pires Schaefer

Escrevente

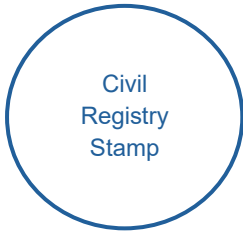


Poder Judiciário
Estado de Santa Catarina
Selo Digital de Fiscalização
Selo normal

HIM52805-048S

Confira os dados do ato em:
www.tjsc.jus.br/selo

ARPENBRASILIA ASSOCIAÇÃO NACIONAL DOS REGISTRADORES DE PESSOAS NATURAIS
BA 030455657 BRP



FEDERATIVE REPUBLIC OF BRAZIL
STATE OF SANTA CATARINA
CITY AND JUDICIAL DISTRICT OF FLORIANÓPOLIS
Civil Registry Office of Natural Persons 80.672.124/0001-52
IOLÉ LUZ FARIA

Registrar
Maria Faria de Sousa **Isabel Faria de Souza** **Luciana R. Duarte**
 Deputy Registrar Clerk Clerk

5.650.594

BIRTH CERTIFICATE

I hereby certify that, under No. **71242** on pages **289** of Book No. **A-151** of the Birth Registry, there is recorded the birth record of "**Marina Thessing Bandeira**"

Born on the **thirtieth (30)** of **April** of **1995**, at **11:10 PM**

At: **Dr. Carlos Correa Maternity - Florianópolis-SC**

sex: **Female**

Daughter of: **Vladimir Silva Bandeira**

From: **this state - SC**

occupation: **Service Member**

and: **Veronice Thessing**

From: **this state - SC**

occupation: **Student**

Paternal grandparents: **João Mariano Bandeira**

and: **Beatriz Silva Bandeira**

Maternal grandparents: **Romeu Thessing**

and: **Lori Lucia Thessing**

Declarant: **the father**

The witnesses are listed in the record

Record drawn up on: **May fourth (04), 1995**

Notes:

Typed by: Luiz Eduardo



The Above is True and I certify.

Florianópolis, January 20, 2005

---//Signature//---

Luciane Rosa Duarte
Clerk

Registrar

FARIA REGISTRY OFFICE Rua Vidal Ramos, 53 s1 106 CENTRO 88-010.320 0**48-233.6131

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: January 28, 2026.



REPÚBLICA FEDERATIVA DO BRASIL

ESTADO DE SANTA CATARINA
MUNICÍPIO E COMARCA DE FLORIANÓPOLIS
Ofício do Registro Civil das Pessoas Naturais

80.672.124/0001-52

Maria Faria de Souza
Oficial Substituta

Isabel Faria de Souza
Escrevente

Luciane R. Duarte
Escrevente

CERTIDÃO DE NASCIMENTO

5.650.594

CERTIFICO que, sob N° 71242 às folhas 289 do Livro N° A-151
de Registro de Nascimentos, encontra-se o assento de
" Marina Thessing Bandeira "
Nascida aos trinta (30) de abril de 1995, às 23:10 horas
em(no): Maternidade Dr. Carlos Correa - Florianópolis-SC
do sexo: Feminino
Filha de: Vladimir Silva Bandeira
Natural de: deste estado-SC
profissão: Militar
e de: Veronice Thessing
Natural de: deste estado-SC
profissão: Estudante
Avós paternos: João Mariano Bandeira
e: Beatriz Silva Bandeira
Avós maternos: Romeu Thessing
e: Lori Lucia Thessing
Declarante: o pai
As Testemunhas constam no termo.
Assento lavrado em: quatro (04) de maio de 1995.
Observação:

Digitado por: Luis Eduardo



O Referido é Verdade e Dou Fé.

Florianópolis, em 20 de janeiro de 2005

Oficial

Luciane Rosa Duarte

OFÍCIO FARIA Rua Vidal Ramos, 53 sl 106 CENTRO 88-010.320-0000 48-223.6131

CERTIFICATION OF MARRIAGE

LICENSE NUMBER: M202532027-0

BETWEEN

GROOM'S NAME: RODRIGO VEIGA DA CUNHA

AGE: 24 AND

BRIDE'S NAME: MARINA THESSING BANDEIRA

AGE: 30 ON

DATE OF MARRIAGE: JANUARY 3, 2026

WERE UNITED IN MARRIAGE IN THE COUNTY OF COOK, AND STATE OF ILLINOIS

IN A CIVIL CEREMONY

BY

NAME: ALFREDO MALDONADO

OFFICIANT TITLE: JUDGE

AT

CITY OF CEREMONY: CHICAGO, ILLINOIS

DATE RECORDED: JANUARY 5, 2026

LICENSE ISSUED DATE: DECEMBER 19, 2025

This is to certify that this is a true and correct abstract from the official record filed with the office of the Cook County Clerk.

1/9/2026 16:07

0205924

This is to certify that this is a true and correct copy of the official marriage record filed with the Cook County Clerk



Monica Gordon

Monica Gordon
Office of the Cook County Clerk



THE WORD VOID APPEARS WHEN PHOTOCOPIED

HOLD UP TO LIGHT TO VERIFY TRUE WATERMARK

Evidence of Lawful F-1 STEM OPT Status and Derivative F-2 Eligibility

SEVIS ID: N0037412820

SURNAME/PRIMARY NAME Thessing Bandeira	GIVEN NAME Marina	Class of Admission F-2 DEPENDENT
PREFERRED NAME Marina Thessing Bandeira	PASSPORT NAME	
COUNTRY OF BIRTH BRAZIL	COUNTRY OF CITIZENSHIP BRAZIL	
CITY OF BIRTH Florianopolis	DATE OF BIRTH 30 APRIL 1995	
RELATIONSHIP TO STUDENT SPOUSE	ADMISSION NUMBER	

STUDENT'S INFORMATION

STUDENT'S SURNAME/PRIMARY NAME Veiga da Cunha	STUDENT'S GIVEN NAME Rodrigo
STUDENT'S COUNTRY OF BIRTH BRAZIL	STUDENT'S DATE OF BIRTH 12 MAY 2001
STUDENT'S COUNTRY OF CITIZENSHIP BRAZIL	STUDENT'S ADMISSION NUMBER 395882933A4
STUDENT'S SEVIS ID: N0034422297	

STUDENT'S SCHOOL INFORMATION

SCHOOL NAME University of Pennsylvania University of Pennsylvania	SCHOOL CODE AND APPROVAL DATE PHI214F00151000 21 JANUARY 2003
--	--

STUDENT'S PROGRAM OF STUDY

EDUCATION LEVEL BACHELOR'S	MAJOR 1 Econometrics and Quantitative Economics 45.0603	MAJOR 2 Political Science and Government, General 45.1001
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 30 JULY 2023
START OF CLASSES 29 AUGUST 2023	PROGRAM START/END DATE 29 AUGUST 2023 - 19 DECEMBER 2024	

STUDENT'S FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 58,620	Personal Funds	\$ 95,028
Living Expenses	\$ 30,408	Funds From This School	\$
Expenses of Dependents (1)	\$ 6,000	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 95,028	TOTAL	\$ 95,028

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

Neena Kapoor **DATE ISSUED** 11 February 2026 **PLACE ISSUED** PHILADELPHIA, PA

SIGNATURE OF: Neena Kapoor, International Advisor

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.5(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

Rodrigo Veiga da Cunha **DATE** 02/13/2026

SIGNATURE OF: Rodrigo Veiga da Cunha

NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE
-----------------------------------	------------------	---	-------------

SEVIS ID: N0037412820 (F-2)

NAME: Marina Thessing Bandeira

REMARKS FOR STUDENT

I have reviewed the Form I-983. It is completed, signed, and addresses all program requirements. All majors at the University of Pennsylvania are matched to the most appropriate CIP code from the U.S. Department of Education (DOE). The I-20 will reflect the DOE CIP code, but a diploma and transcript will continue to use the description of the major as defined by the university.

STUDENT'S EMPLOYMENT AUTHORIZATIONS

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
STEM OPT	FULL TIME	APPROVED	03 FEBRUARY 2026	02 FEBRUARY 2028

STUDENT'S EMPLOYER INFORMATION

TYPE	AUTHORIZATION DATES			
STEM OPT	03 FEBRUARY 2026 - 02 FEBRUARY 2028			
EMPLOYER NAME	START DATE	END DATE	CITY & STATE	
Deloitte Tax LLP	03 FEBRUARY 2026	02 FEBRUARY 2028	Chicago, IL	

CHANGE OF STATUS/CAP-GAP EXTENSION

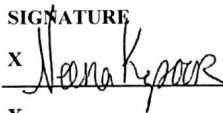
--

STUDENT'S CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
N/A. Student is on post-completion practical training.	

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the dependent after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Neena Kapoor	DSO/ARO	X 	Feb 11, 2026	PHL
		X		
		X		
		X		

INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20, 2) a valid F-1 visa (unless you are exempt from visa requirements), 3) a valid passport, and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport, 2) a valid F-1 student visa (unless you are exempt from visa requirements), and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school, 2) engage only in authorized employment, and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status, 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school, or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.

SEVIS ID: N003442297

SURNAME/PRIMARY NAME Veiga da Cunha	GIVEN NAME Rodrigo	Class of Admission F-1 ACADEMIC AND LANGUAGE
PREFERRED NAME Rodrigo Veiga da Cunha	PASSPORT NAME	
COUNTRY OF BIRTH BRAZIL	COUNTRY OF CITIZENSHIP BRAZIL	
CITY OF BIRTH Florianopolis	DATE OF BIRTH 12 MAY 2001	
FORM ISSUE REASON CONTINUED ATTENDANCE	ADMISSION NUMBER 395802933M	

SCHOOL INFORMATION

SCHOOL NAME University of Pennsylvania University of Pennsylvania	SCHOOL ADDRESS 3935 WALNUT ST, 5th Floor, PHILADELPHIA, PA 19104
SCHOOL OFFICIAL TO CONTACT UPON ARRIVAL Neena Kapoor International Advisor	SCHOOL CODE AND APPROVAL DATE PHI214F00151000 21 JANUARY 2003

PROGRAM OF STUDY

EDUCATION LEVEL BACHELOR'S	MAJOR 1 Econometrics and Quantitative Economics 45.0603	MAJOR 2 Political Science and Government, General 45.1001
PROGRAM ENGLISH PROFICIENCY Required	ENGLISH PROFICIENCY NOTES Student is proficient	EARLIEST ADMISSION DATE 30 JULY 2023
START OF CLASSES 29 AUGUST 2023	PROGRAM START/END DATE 29 AUGUST 2023 - 19 DECEMBER 2024	

FINANCIALS

ESTIMATED AVERAGE COSTS FOR: 9 MONTHS		STUDENT'S FUNDING FOR: 9 MONTHS	
Tuition and Fees	\$ 58,620	Personal Funds	\$ 95,028
Living Expenses	\$ 30,408	Funds From This School	\$
Expenses of Dependents (1)	\$ 6,000	Funds From Another Source	\$
Other	\$	On-Campus Employment	\$
TOTAL	\$ 95,028	TOTAL	\$ 95,028

REMARKS

I have reviewed the Form I-983. It is completed, signed, and addresses all program requirements. All majors at the University of Pennsylvania are matched to the most appropriate CIP code from the U.S. Department of Education (DOE). The I-20 will reflect the DOE CIP code, but a diploma and transcript will continue to use the description of the major as defined by the university.

SCHOOL ATTESTATION

I certify under penalty of perjury that all information provided above was entered before I signed this form and is true and correct. I executed this form in the United States after review and evaluation in the United States by me or other officials of the school of the student's application, transcripts, or other records of courses taken and proof of financial responsibility, which were received at the school prior to the execution of this form. The school has determined that the above named student's qualifications meet all standards for admission to the school and the student will be required to pursue a full program of study as defined by 8 CFR 214.2(f)(6). I am a designated school official of the above named school and am authorized to issue this form.

Neena Kapoor **DATE ISSUED** 11 February 2026 **PLACE ISSUED** PHILADELPHIA, PA

SIGNATURE OF: Neena Kapoor, International Advisor

STUDENT ATTESTATION

I have read and agreed to comply with the terms and conditions of my admission and those of any extension of stay. I certify that all information provided on this form refers specifically to me and is true and correct to the best of my knowledge. I certify that I seek to enter or remain in the United States temporarily, and solely for the purpose of pursuing a full program of study at the school named above. I also authorize the named school to release any information from my records needed by DHS pursuant to 8 CFR 214.3(g) to determine my nonimmigrant status. **Parent or guardian, and student, must sign if student is under 18.**

Rodrigo Veiga da Cunha **DATE** 02/13/2026

SIGNATURE OF: Rodrigo Veiga da Cunha

NAME OF PARENT OR GUARDIAN	SIGNATURE	ADDRESS (city/state or province/country)	DATE
-----------------------------------	------------------	---	-------------

SEVIS ID: N0034422297 (F-1)

NAME: Rodrigo Veiga da Cunha

EMPLOYMENT AUTHORIZATIONS

TYPE	FULL/PART-TIME	STATUS	START DATE	END DATE
STEM OPT	FULL TIME	APPROVED	03 FEBRUARY 2026	02 FEBRUARY 2028

EMPLOYER INFORMATION

TYPE	AUTHORIZATION DATES		
STEM OPT	03 FEBRUARY 2026 - 02 FEBRUARY 2028		
EMPLOYER NAME	START DATE	END DATE	CITY & STATE
Deloitte Tax LLP	03 FEBRUARY 2026	02 FEBRUARY 2028	Chicago, IL

CHANGE OF STATUS/CAP-GAP EXTENSION

--

AUTHORIZED REDUCED COURSE LOAD

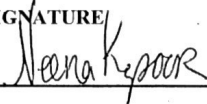
--

CURRENT SESSION DATES

CURRENT SESSION START DATE	CURRENT SESSION END DATE
N/A. Student is on post-completion practical training.	

TRAVEL ENDORSEMENT

This page, when properly endorsed, may be used for re-entry of the student to attend the same school after a temporary absence from the United States. Each endorsement is valid for one year.

Designated School Official	TITLE	SIGNATURE	DATE ISSUED	PLACE ISSUED
Neena Kapoor	DSO/ARO	X 	Feb 11, 2026	PHL
		X		
		X		
		X		

INSTRUCTIONS TO STUDENTS

STUDENT ATTESTATION. You should read everything on this page carefully. Be sure that you understand the terms and conditions concerning your admission and stay in the United States as a nonimmigrant student before signing the student attestation on page 1 of the Form I-20 A-B. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

FORM I-20. The Form I-20 (this form) is the primary document to show that you have been admitted to school in the United States and that you are authorized to apply for admission to the United States in F-1 class of admission. You must have your Form I-20 with you at all times. If you lose your Form I-20, you must request a new one from your designated school official (DSO) at the school named on your Form I-20.

VISA APPLICATION. You must give this Form I-20 to the U.S. consular officer at the time you apply for a visa (unless you are exempt from visa requirements). If you have a Form I-20 from more than one school, be sure to present the Form I-20 for the school you plan to attend. Your visa will include the name of that school, and you must attend that school upon entering the United States. You must also provide evidence of support for tuition and fees and living expenses while you are in the United States.

ADMISSION. When you enter the United States, you must present the following documents to the officer at the port of entry: 1) a Form I-20; 2) a valid F-1 visa (unless you are exempt from visa requirements); 3) a valid passport; and 4) evidence of support for tuition and fees and living expenses while you are in the United States. The agent should return all documents to you before you leave the inspection area.

REPORT TO SCHOOL NAMED ON YOUR FORM I-20 AND VISA. Upon your first entry to the United States, you must report to the DSO at the school named on your Form I-20 and your F-1 visa (unless you are exempt from visa requirements). If you decide to attend another school before you enter the United States, you must present a Form I-20 from the new school to a U.S. consular officer for a new F-1 visa that names the new school. Failure to enroll in the school, by the program start date on your Form I-20 may result in the loss of your student status and subject you to deportation.

EMPLOYMENT. Unlawful employment in the United States is a reason for terminating your F-1 status and deporting you from the United States. You may be employed on campus at your school. You may be employed off-campus in curricular practical training (CPT) if you have written permission from your DSO. You may apply to U.S. Citizenship and Immigration Services (USCIS) for off-campus employment authorization in three circumstances: 1) employment with an international organization; 2) severe and unexpected economic hardship; and 3) optional practical training (OPT) related to your degree. You must have written authorization from USCIS before you begin work. Contact your DSO for details. Your spouse or child (F-2 classification) may not work in the United States.

PERIOD OF STAY. You may remain in the United States while taking a full course of study or during authorized employment after your program. F-1 status ends and you are required to leave the United States on the earliest of the following dates: 1) the program end date on your Form I-20 plus 60 days; 2) the end date of your OPT plus 60 days; or 3) the termination of your program for any other reason. Contact your DSO for details.

EXTENSION OF PROGRAM. If you cannot complete the education program by the program end date on page 1 of your Form I-20, you should contact your DSO at least 15 days before the program end date to request an extension.

SCHOOL TRANSFER. To transfer schools, first notify the DSO at the school you are attending of your plan to transfer, then obtain a Form I-20 from the DSO at the school you plan to attend. Return the Form I-20 for the new school to the DSO at that school within 15 days after beginning attendance at the new school. The DSO will then report the transfer to the Department of Homeland Security (DHS). You must enroll in the new school at the next session start date. The DSO at the new school must update your registration in SEVIS.

NOTICE OF ADDRESS. When you arrive in the United States, you must report your U.S. address to your DSO. If you move, you must notify your DSO of your new address within 10 days of the change of address. The DSO will update SEVIS with your new address.

REENTRY. F-1 students may leave the United States and return within a period of five months. To return, you must have: 1) a valid passport; 2) a valid F-1 student visa (unless you are exempt from visa requirements); and 3) your Form I-20, page 2, properly endorsed for reentry by your DSO. If you have been out of the United States for more than five months, contact your DSO.

AUTHORIZATION TO RELEASE INFORMATION BY SCHOOL. DHS requires your school to provide DHS with your name, country of birth, current address, immigration status, and certain other information on a regular basis or upon request. Your signature on the Form I-20 authorizes the named school to release such information from your records.

PENALTY. To maintain your nonimmigrant student status, you must: 1) remain a full-time student at your authorized school; 2) engage only in authorized employment; and 3) keep your passport valid. Failure to comply with these regulations will result in the loss of your student status and subject you to deportation.

INSTRUCTIONS TO SCHOOLS

Failure to comply with 8 CFR 214.3(k) and 8 CFR 214.4 when issuing Forms I-20 will subject you and your school to criminal prosecution. If you issue this form improperly, provide false information, or fail to submit required reports, DHS may withdraw its certification of your school for attendance by nonimmigrant students.

ISSUANCE OF FORM I-20. DSOs may issue a Form I-20 for any nonimmigrant your school has accepted for a full course of study if that person: 1) plans to apply to enter the United States in F-1 status; 2) is in the United States as an F-1 nonimmigrant and plans to transfer to your school; or 3) is in the United States and will apply to change nonimmigrant status to F-1. DSOs may also issue the Form I-20 to the spouse or child (under the age of 21) of an F-1 student to use to enter or remain in the United States as an F-2 dependent. DSOs must sign where indicated at the bottom of page 1 of the Form I-20 to attest that the form is completed and issued in accordance with regulations.

ENDORSEMENT OF PAGE 2 FOR REENTRY. If there have been no substantive changes in information, DSOs may endorse page 2 of the Form I-20 for the student and/or the F-2 dependents to reenter the United States. If there have been substantive changes, the DSO should issue and sign a new Form I-20 that includes those changes.

RECORDKEEPING. DHS may request information concerning the student's immigration status for various reasons. DSOs should retain all evidence of academic ability and financial resources on which admission was based, until SEVIS shows the student's record completed or terminated.

AUTHORITY FOR COLLECTING INFORMATION. Authority for collecting the information on this and related student forms is contained in 8 U.S.C. 1101 and 1184. The Department of State and DHS use this information to determine eligibility for the benefits requested. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

REPORTING BURDEN. U.S. Immigration and Customs Enforcement collects this information as part of its agency mission under the Department of Homeland Security. The estimated average time to review the instructions, search existing data sources, gather and maintain the needed data, and complete and review the collection of information is 30 minutes (.50 hours) per response. An agency may not conduct or sponsor, and a person is not required to respond to an information collection unless a form displays a currently valid OMB Control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Office of the Chief Information Officer/Forms Management Branch, U.S. Immigration and Customs Enforcement, 801 I Street NW Stop 5800, Washington, DC 20536-5800. Do not send the form to this address.

THIS PAGE INTENTIONALLY LEFT BLANK

 For: **MARINA THESSING BANDEIRA**



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: 709533440A4

Arrival/Issued Date: 2025 September 05

Class of Admission: B2

Admit Until Date: 2026 March 04

Details provided on the I-94 Information form:

Last/Surname: THESSING BANDEIRA

First (Given) Name: MARINA

Birth Date: 1995 April 30

Document Number: GM199748

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.

View Travel History

Travel history includes up to 100 arrivals and departures spanning the last ten years

Travel History Results

Document Number: **GM199748**

Document Country of Issuance: **Brazil**

Row	DATE	TYPE	LOCATION
1	2025-09-05	Arrival	CHI
2	2025-07-26	Departure	CHI
3	2025-04-29	Arrival	NYC
4	2024-10-12	Departure	MIA
5	2024-09-26	Arrival	MIA
6	2024-03-09	Departure	NYC
7	2024-02-22	Arrival	MIA

Row	DATE	TYPE	LOCATION
-----	------	------	----------

OMB No. 1651-0111 Expiration Date: 02/28/2026

 For: **RODRIGO VEIGA DA CUNHA**



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: 395882933A4

Arrival/Issued Date: 2025 February 10

Class of Admission: F1

Admit Until Date: D/S

Details provided on the I-94 Information form:

Last/Surname: VEIGA DA CUNHA

First (Given) Name: RODRIGO

Birth Date: 2001 May 12

Document Number: GC227872

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.

View Travel History

Travel history includes up to 100 arrivals and departures spanning the last ten years

Travel History Results

Document Number: **GC227872**

Document Country of Issuance: **Brazil**

Row	DATE	TYPE	LOCATION
1	2025-02-10	Arrival	CHI
2	2024-12-15	Departure	MIA
3	2024-08-27	Arrival	MIA
4	2024-08-11	Departure	NYC
5	2024-01-17	Arrival	NYC
6	2023-12-11	Departure	NEW
7	2023-08-22	Arrival	CHI

Row	DATE	TYPE	LOCATION
8	2023-02-16	Departure	NYC
9	2023-01-10	Arrival	ATL
10	2022-12-22	Departure	NYC
11	2022-08-27	Arrival	MIA
12	2022-05-11	Departure	NYC
13	2022-03-16	Arrival	NEW
14	2022-03-03	Departure	NEW
15	2022-01-21	Arrival	NYC
16	2021-12-24	Departure	NYC
17	2021-08-11	Arrival	MIA
18	2020-03-04	Departure	NYC
19	2020-01-13	Arrival	CHI

Row	DATE	TYPE	LOCATION
20	2019-12-21	Departure	CHI
21	2019-08-17	Arrival	CHI
22	2018-06-07	Departure	ATL
23	2017-08-15	Arrival	ATL
24	2016-07-30	Departure	HOU
25	2016-07-15	Arrival	HOU

OMB No. 1651-0111 Expiration Date: 02/28/2026



Receipt Number IOE9111235261	USCIS Account Number 018223562162	Case Type I765 - APPLICATION FOR EMPLOYMENT AUTHORIZATION
Received Date 12/02/2025	Priority Date 12/02/2025	Applicant A141 526 545 VEIGA DA CUNHA, RODRIGO
Notice Date 01/16/2026	Page 1 of 1	

VEIGA DA CUNHA, RODRIGO
1360 N LAKE SHORE DR APT. 806
CHICAGO IL 60610-8449

Notice Type: Approval Notice
Class: C03C
Valid from 02/03/2026 to 02/02/2028

We have approved your application for employment authorization. We will send your Employment Authorization Document (EAD) (also known as an EAD card or Form I-766) to you separately. Your EAD card should be produced within one to two weeks. Your EAD card will be mailed via U.S. Postal Service (USPS) Priority Mail with Delivery Confirmation to the address you designated. The time frame in which you will receive your EAD card may vary, depending on USPS delivery times. Please allow a total of 30 days from approval before inquiring with USCIS. We encourage you to use Case Status Online <https://egov.uscis.gov/> to find your USPS tracking number for EAD card delivery. If you have not received your EAD card within this time frame, please visit <https://egov.uscis.gov/e-request/Intro.do> for instructions on how to submit an inquiry.

Your EAD card is proof that you are allowed to work in the United States. Show the card to your employer to verify your authorization to work during the dates on the card. You cannot use this approval notice as proof of your employment authorization.

When you receive your EAD card, please check that all the information on the card is correct. If you need to change any information on the card, please mail all of the following to the office listed below:

- A letter explaining what information needs to be corrected,
- Your EAD card,
- A photocopy of this notice, and
- Evidence to show what the correct information should be. For example, if you need to correct your name, submit a copy of your birth certificate or official name change.

If You Have a Pending Form I-485

If you have a pending or approved Form I-140 and a pending Form I-485, you may request to change employers if your Form I-485 has been pending for at least 180 days. In order to do so, you need to submit documentation about your new job offer. For more information on how to request a change of employers and what information you must submit, please visit the USCIS website at www.uscis.gov.

If your EAD card expires before we make a final decision on your Form I-485, you may apply for a new EAD card.

THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA OR EVIDENCE OF EMPLOYMENT AUTHORIZATION.

NOTICE: Although this application or petition has been approved, USCIS and the U.S. Department of Homeland Security reserve the right to verify this information before and/or after making a decision on your case so we can ensure that you have complied with applicable laws, rules, regulations, and other legal authorities. We may review public information and records, contact others by mail, the internet or phone, conduct site inspections of businesses and residences, or use other methods of verification. We will use the information obtained to determine whether you are eligible for the benefit you seek. If we find any derogatory information, we will follow the law in determining whether to provide you (and the legal representative listed on your Form G-28, if you submitted one) an opportunity to address that information before we make a formal decision on your case or start proceedings.

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>.

SCOPS TEXAS FACILITY
U.S. CITIZENSHIP & IMMIGRATION SVC
6046 N BELT LINE RD.
IRVING TX 75038-0001



USCIS Contact Center: www.uscis.gov/contactcenter

UNITED STATES OF AMERICA
EMPLOYMENT AUTHORIZATION

VEIGA DA CUNHA RODRIGO 12 MAY 2001



Surname

VEIGA DA CUNHA

Given Name

RODRIGO

USCIS#

141-526-545

Category Card#

C03C IOE9111235261

Terms and Conditions

Stu: Stem Opt E-Verify Empl

Date of Birth

12 MAY 2001

Sex

M

Country of Birth

Brazil

Valid From:

02/03/26

C

27

Expires:

02/02/28

NOT VALID FOR REENTRY TO U.S.

UNITED STATES OF AMERICA
EMPLOYMENT AUTHORIZATION



Surname
VEIGA DA CUNHA

Given Name
RODRIGO

USCIS#
141-526-545

Category Card#
C03B IOE9200468230

Terms and Conditions

Stu: Post-Completion Opt

Date of Birth Sex
12 MAY 2001 M

Country of Birth
Brazil

Valid From: **02/03/25**

Card Expires: **02/02/26**

NOT VALID FOR REENTRY TO U.S.

50659515



This card is not evidence of U.S. citizenship or permanent residence.
This document is void if altered, and may be revoked by the U.S. Government.
The person identified is authorized to work in the U.S. for the validity of this card.

31L If found, drop in any US Mailbox. USPS: Mail to 7 Product Way, Lees Summit, MO 64002

I A U S A 1 4 1 5 2 6 5 4 5 9 I O E 9 2 0 0 4 6 8 2 3 0 <<
0 1 0 5 1 2 3 M 2 6 0 2 0 2 8 B R A <<<<<<<<<<<<< 0
V E I G A < D A < C U N H A << R O D R I G O <<<<<<<<

**Evidence of Ongoing
Employment and
Lawful Maintenance
of F-1 STEM OPT
Status**

January 26, 2026

Rodrigo Veiga da Cunha

The information in this letter reflects your personal employment details from our internal electronic records system. The following details are provided for your reference.

Name:	Rodrigo Veiga da Cunha
Address:	1360 N Lake Shore Dr Apt 806, Apt, Chicago, Illinois - 60610
Title:	Tax Consultant II
Entity:	Deloitte Tax LLP
Most recent hire date:	February 16, 2025
Assigned Office:	USA-Chicago
Full-time or Part-time (employee status):	Full-time

To the extent there are any specific questions relating to this individual's employment based immigration status, please refer to the documentation the individual may present as evidence of their status.

This letter is provided as a courtesy, and is information from our internal electronic records system. No modifications can be made to this template.

Sincerely,



Sheela Pande
Lead Specialist
Employee Life Cycle Events
Core Talent Services

8/23/24

Page 1 of 30



Deloitte Tax LLP
30 Rockefeller Plaza
41st Floor
New York, NY 10112-0015
USA
Tel: +1 212.492.4000
www.deloitte.com

Rodrigo Veiga Da Cunha

Dear Rodrigo:

On behalf of Deloitte Tax LLP and Katie Zinn, it is my pleasure to formally confirm our offer to you to join Deloitte Tax LLP as a Tax Consultant in the Tax group, based in our Chicago office. This offer, and the opportunity it represents, is extended with great confidence in your ability. We are excited about the possibility of you joining Deloitte Tax LLP.

Deloitte is a place where we grow leaders to thrive. We focus on maximizing your strengths so you grow in the areas where you are energized and at your best. Rodrigo, we believe in your potential and we hope that you accept the opportunity to join our high-performing organization.

The details below include further details about your offer, your potential career development, and your personal rewards. Please read the information carefully and let us know if you have any questions.

If you currently hold a CPA license (whether active or inactive), on your first day of employment with Deloitte, that license must be active in the state in which your assigned Deloitte office is located.

Deloitte Tax LLP Accreditation policy states that all Tax candidates must have or obtain an appropriate accreditation for their practice area prior to being hired or promoted to a position at the manager level or above. In most cases this means being a licensed attorney or CPA in good standing. Your continued employment with Deloitte Tax LLP is contingent on your successfully achieving an appropriate certification or accreditation in compliance with Deloitte Tax LLP Accreditation policy. Failure to comply can result in disciplinary action, up to and including termination of employment.

We look forward to hearing from you. For planning purposes, we would appreciate your response to this offer by August 30, 2024, or the offer decision deadline recommended by your school, whichever is later. Our offer will be valid through this date. Please contact your recruiter if you would like to discuss any aspect of this offer prior to making your decision.

We're looking forward to your acceptance and the chance to welcome you to Deloitte Tax LLP.

Sincerely yours,

Deloitte Tax LLP
By:

A handwritten signature in cursive script that reads "Carin a. Giuliante".

Carin Giuliante
Chairman & CEO

8/23/24

Page 2 of 30

Offer Summary

Category	Details
<p>Salary</p>	<p>Your salary will be at the annual rate of \$72,000.00, payable in bi-weekly installments, on alternating Fridays, less applicable taxes and deductions.</p>
<p>Signing Bonus</p> <p><i>To Do: Please complete the attached Agreement to Repay Signing Bonus</i></p>	<p>As an incentive to join Deloitte Tax LLP, you will receive a one-time signing bonus of \$3,500.00.</p> <p>You will receive your signing bonus with your first paycheck, subject to and after the successful completion of your background investigation. Receipt of your signing bonus is also subject to the terms of the enclosed Agreement to Repay Signing Bonus which you need to sign and return to us.</p>
<p>Interest-Free Advance</p> <p><i>To Do: Please complete the attached Promissory Note.</i></p>	<p>Beginning your new career with Deloitte Tax LLP, you may take advantage of an interest-free advance of \$1,500.00 in order to ease your transition. If you choose to receive this advance, you will have an obligation to repay your advance, without interest, as set forth in the enclosed Promissory Note which you need to sign and return to us.</p>
<p>Performance and Compensation Reviews</p>	<p>You will receive periodic performance and compensation reviews in accordance with Deloitte Tax LLP's administrative practices.</p>
<p>Benefits</p>	<p>You will be eligible for benefits provided to Deloitte Tax LLP employees, subject to Deloitte Tax LLP policies and any applicable terms and conditions of Deloitte Tax LLP plans as they may be amended from time to time. For a full description of Deloitte Tax LLP current employee benefits, go to https://www2.deloitte.com/us/en/pages/careers/articles/life-at-deloitte-benefits-and-rewards.html.</p>
<p>Start Date</p>	<p>Your tentative start date will be Winter 2025, or an alternate date acceptable to Deloitte Tax LLP. You will be provided more information regarding specific start date options once written acceptance of your offer has been received.</p>

8/23/24

Page 3 of 30

<p>CPA Licensing</p>	<p>If you currently hold a CPA license (whether active or inactive), on your first day of employment with Deloitte, that license must be active in the state in which your assigned Deloitte office is located.</p> <p>Deloitte Tax LLP Accreditation policy states that all Tax candidates must have or obtain an appropriate accreditation for their practice area prior to being hired or promoted to a position at the manager level or above. In most cases this means being a licensed attorney or CPA in good standing. Your continued employment with Deloitte Tax LLP is contingent on your successfully achieving an appropriate certification or accreditation in compliance with Deloitte Tax LLP Accreditation policy. Failure to comply can result in disciplinary action, up to and including termination of employment.</p>
<p>Professional Development</p>	<p>Deloitte Tax LLP encourages your professional development and provides financial incentives and support through the Deloitte Tax Professional Accreditation Policy or the CPA/Bar Incentive Program (CPA Program), to pursue certifications that are required for promotion to Manager.</p>
<p>Travel</p>	<p>You should expect that many of your assignments with Deloitte Tax LLP will require travel to its clients' places of business, and may require out-of-town overnight stays.</p>
<p>Independence & Compliance</p>	<p>As you know, our affiliated Entity, Deloitte & Touche LLP and certain clients may be subject to requirements from governing bodies such as, but not limited to, Securities and Exchange Commission (SEC), the Public Company Accounting Oversight Board (PCAOB), and the American Institute of Certified Public Accountants (AICPA). These requirements mandate that certain of Deloitte Tax LLP's professionals and their relatives disclose and/or be independent of certain clients and activities as described in the pages to follow.</p>
<p>Code of Ethics</p>	<p>You will also be expected to abide by professional, ethical, and Deloitte Tax LLP's requirements, rules, regulations, policies, and practices, including, without limitation, the Code of Ethics and Professional Conduct applicable to Deloitte Tax LLP.</p>
<p>Background Investigation</p>	<p>This offer and your employment with Deloitte Tax LLP are conditional upon the successful completion of a background investigation.</p>
<p>Immigration</p>	<p>In order to comply with the Immigration Reform and Control Act of 1986, it will be necessary for you to provide documentation verifying your identity and employment eligibility. Should you require Deloitte Tax LLP's sponsorship for an employment-based visa (e.g. H-1B, L-1, TN), your employment and start date with the Deloitte Tax LLP are contingent upon your obtaining the requisite permission to work in the United States (U.S.) and your availability to work in the U.S. consistent with Deloitte Tax LLP's business needs. If you require sponsorship and have disclosed this through the recruitment process, you will be contacted by Deloitte Tax LLP's designated immigration counsel once you have accepted our offer. Regardless of any preceding immigration conversations, you must respond to the requests of your designated immigration specialist in order to initiate the appropriate visa process. Your cooperation with your designated immigration specialist will facilitate the timely commencement of and your continued employment with Deloitte Tax LLP.</p>

8/23/24

Page 4 of 30

**Other Important
Matters**

Please note this offer and your continued employment are also contingent upon the successful completion of your degree and maintenance of your academic standing.

8/23/24

Page 5 of 30

Salary

Your salary will be at the annual rate of \$72,000.00, payable in bi-weekly installments, on alternating Fridays, less applicable taxes and deductions.

Initial


Initial Required

Signing Bonus

As an incentive to join Deloitte Tax LLP, you will receive a signing bonus of \$3,500.00 (less applicable taxes) with your first paycheck, subject to and after the successful completion of your background investigation.

Receipt of your signing bonus is also subject to the terms of the enclosed Agreement to Repay Signing Bonus which you need to sign and return to us.

Interest Free Advance

Beginning your new career with Deloitte Tax LLP, you may take advantage of an interest-free advance of \$1,500.00 in order to ease your transition. If you choose to receive this advance, you will have an obligation to repay your advance, without interest, as set forth in the enclosed Promissory Note which you need to sign and return to us.

Performance and Compensation Reviews

You will receive periodic performance and compensation reviews in accordance with Deloitte Tax LLP's administrative practices. Among other factors, Deloitte Tax LLP's performance, your individual performance, the portion of the fiscal year you worked, market conditions, and your compensation relative to your peers, are all considered in compensation reviews.

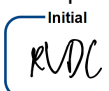
Initial


Initial Required

CPA Licensing

If you currently hold a CPA license (whether active or inactive), on your first day of employment with Deloitte, that license must be active in the state in which your assigned Deloitte office is located.

Deloitte Tax LLP Accreditation policy states that all Tax candidates must have or obtain an appropriate accreditation for their practice area prior to being hired or promoted to a position at the manager level or above. In most cases this means being a licensed attorney or CPA in good standing. Your continued employment with Deloitte Tax LLP is contingent on your successfully achieving an appropriate certification or accreditation in compliance with Deloitte Tax LLP Accreditation policy. Failure to comply can result in disciplinary action, up to and including termination of employment.

Initial


Initial Required

8/23/24

Page 6 of 30

Travel

Deloitte Tax LLP employs a hybrid work model that capitalizes on the benefits of both virtual and in-person experiences by identifying those activities that create the most value for you, your teams, and your clients when performed together in-person. You are expected to indicate your preference for travel and co-location and keep this information current as your circumstances change. We will take your preference information into consideration in addition to the nature of your role, project expectations, clients, and industries/sectors you serve as we work together to match you with staffing opportunities. However, you should expect that there will be assignments with Deloitte Tax LLP that require travel to its clients' places of business and may require out-of-town overnight stays. Due to the nature of Deloitte Tax LLP's business, we cannot predict when an out-of-town assignment may occur, how long it may last, or where the client may be located.

Travel and assignments to out-of-town client locations are based on project expectations and the needs of the client. Local assignments that do not require an overnight stay may require that you commute to the client site and/or Deloitte office. Out-of-town and local travel expenses will be reimbursed in accordance with the Deloitte Tax LLP's Expense Reimbursement Policy. Additionally, all personnel traveling internationally to the U.S. from another country must follow the international travel guidance defined by the CDC, including vaccination and testing requirements in place at the time of travel to the U.S.

Initial


Initial Required

Independence & Compliance

As you know, our affiliated Entity, Deloitte & Touche LLP performs attestation services for certain clients and is subject to the independence requirements of, among others, the Securities and Exchange Commission (SEC), the Public Company Accounting Oversight Board (PCAOB), and the American Institute of Certified Public Accountants (AICPA). These requirements mandate that certain of Deloitte Tax LLP's professionals and their relatives be independent of some or all of those attest clients and their affiliates in accordance with the policies of Deloitte LLP and its subsidiaries (the "Deloitte US Entities").

Upon joining Deloitte Tax LLP, you will be asked to review a listing of the attestation clients and their affiliates and disclose relationships or financial holdings that you or your family may have that could affect the independence of the Deloitte US Entities. Any relationships or holdings that conflict with, among other things, the requirements of the SEC, the PCAOB or the AICPA or the independence or ethics policies of the Deloitte US Entities will need to be resolved immediately. You will be required to comply with these policies throughout your career with Deloitte Tax LLP, including, when applicable, maintaining a current list of certain of your financial relationships (but not their value) in the independence tracking system.

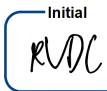
["An Introduction to Independence for Candidates"](http://www2.deloitte.com/us/en/pages/about-deloitte/articles/ethics-common-independence-topics.html) is a tool designed to help you understand some of the independence topics you might face, and what you need to do to comply with independence requirements. You should view the tool online and review a list of common independence topics at <http://www2.deloitte.com/us/en/pages/about-deloitte/articles/ethics-common-independence-topics.html>.

Some of these independence requirements include but are not limited to: other employment or contractual arrangements in which you may provide professional services; part-time or weekend jobs; adjunct professor positions; employment in a family business; officer, trustee, or board positions with for-profit or not-for-profit entities; and, any other paid or unpaid position outside of Deloitte Tax LLP. Any positions you currently have that you plan to continue must be approved, and any new positions you accept prior to starting at Deloitte Tax LLP, will need to be approved. By signing this letter, you acknowledge that upon joining Deloitte Tax LLP you should not have any outside employment or activities other than with Deloitte Tax LLP, unless specifically approved by Deloitte Services LP's Employee Lifecycle Events Compliance group. If you have specific questions, contact our National Office of Independence at complianceonboarding@deloitte.com to have an independence consultant review your specific inquiry.

8/23/24

Page 7 of 30


Our affiliated Entity, Deloitte & Touche LLP is subject to various rules and regulations of agencies such as the Securities and Exchange Commission (SEC), the Public Company Accounting Oversight Board (PCAOB), and the American Institute of Certified Public Accountants (AICPA), that may impact you and/or your family members. Clients of the Deloitte US Firms may also be subject to the rules of their own regulators such as the SEC, New York Stock Exchange, and the Financial Industry Regulatory Authority (FINRA), which may have additional impact on you and/or your family members. In the following pages you will find more details about your obligations and responsibilities for those relationships.

Initial


Initial Required

Code of Ethics

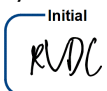
You will also be expected to abide by professional, ethical, and Deloitte Tax LLP's requirements, rules, regulations, policies, and practices, including, without limitation, the Code of Ethics and Professional Conduct applicable to Deloitte Tax LLP. Before accepting this offer of employment, you must fully disclose all contractual and other restrictions or obligations to other parties, including any non-compete or non-solicitation agreements with prior employers, that may or will impose limitations on your professional activities with Deloitte Tax LLP. You are expected to abide by all such restrictions or obligations and to avoid involvement, while employed by Deloitte Tax LLP, in any matter that could pose a conflict of interest as a result of confidential, proprietary or trade secret information obtained by you prior to your employment with Deloitte Tax LLP. You must tell us if any of these restrictions or obligations are inconsistent with your acceptance of this offer of employment or you becoming, and serving as, an employee of Deloitte Tax LLP.

Initial


Initial Required

Background Investigation

This offer and your employment with Deloitte Tax LLP are conditioned upon the successful completion of a criminal history background check. If applicable, your employment also is conditioned upon verification that you have graduated from and obtained a degree from your university/college.

Initial


Initial Required

8/23/24

Page 8 of 30

Immigration

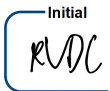
In order to comply with the Immigration Reform and Control Act of 1986, it will be necessary for you to provide documentation verifying your identity and employment eligibility. Should you require Deloitte Tax LLP's sponsorship for an employment-based visa (e.g. H-1B, L-1, TN), your employment and start date with the Deloitte Tax LLP are contingent upon your obtaining the requisite permission to work in the United States (U.S.) and your availability to work in the U.S. consistent with Deloitte Tax LLP's business needs. If you require sponsorship and have disclosed this through the recruitment process, you will be contacted by Deloitte Tax LLPs designated immigration counsel once you have accepted our offer. Regardless of any preceding immigration conversations, you must respond to the requests of your designated immigration specialist in order to initiate the appropriate visa process. Your cooperation with your designated immigration specialist will facilitate the timely commencement of and your continued employment with Deloitte Tax LLP.

Initial


Initial Required

At-Will Employment

Nothing in this Agreement shall create a contract of employment between the Employer and you or a specific term of employment for you. Your employment with the Employer is and shall remain "at will," which means that you may resign your employment, or the Employer may terminate your employment, or change your position pay or duties, for any reason or no reason, with or without notice, with or without cause.

Initial


Initial Required

Ready to Sign?

This letter, the repayment agreement(s), Deloitte Tax LLP's Agreement on Confidential Information and Other Vital Business Interests, and Deloitte Tax LLP employment application are intended to be the final, complete, and exclusive statement of the terms of the offer of employment to you. Your signature accepting and agreeing to the terms of this offer will also signify that you understand and accept the terms and conditions associated with independence and that you have addressed your specific questions concerning independence with an independence consultant prior to accepting the offer.

Join Us!

It is our hope that your acceptance of this offer will be just the beginning of a mutually beneficial relationship with Deloitte Tax LLP.

Accepted. And Agreed To:


6E294725F9AA403...

Signature

Aug 29, 2024

Date

8/23/24

Page 9 of 30

Enclosures:

Agreement to Repay Signing Bonus

Promissory Note

Agreement on Confidential Information and Other Vital Business Interests

FAQs - Agreement on Confidential Information and Other Vital Business Interests

8/23/24

Page 10 of 30

AGREEMENT TO REPAY SIGNING BONUS

This Agreement to Repay Signing Bonus ('Agreement') is made and entered as of Aug 29, 2024 by Rodrigo Veiga Da Cunha.

As an incentive for me to join Deloitte Tax LLP as an employee, Deloitte Tax LLP has agreed to provide me with a signing bonus, less applicable taxes, conditioned on repayment by me under certain circumstances.

In consideration of this, I agree as follows:

1. If I fail to become an employee of Deloitte Tax LLP for any reason by the later of Winter 2025, or alternate start date acceptable to Deloitte Tax LLP ("Start Date"), I will repay the full amount of the signing bonus I receive (the "Total Signing Bonus") which, in the absence of manifest error, shall be the aggregate amount recorded by Deloitte Tax LLP on the Schedule of Signing Bonus Payment(s) that is attached as Exhibit A and made part of this Agreement. If I become an employee of Deloitte Tax LLP, but resign or am terminated for Cause (as defined in Paragraph 2) within the first two (2) years as an employee after the Start Date, my obligation to repay the signing bonus provided will be determined in accordance with the following schedule:

Period Employed By Deloitte Tax LLP After The Start Date	Percentage of Total Signing Bonus I Must Repay
Less than one (1) year	100%
At least one (1) year but less than two (2) years	50%

For purposes of this Agreement, the amount of the signing bonus I must repay shall be referred to as the "Repayable Amount." The Repayable Amount shall be due on (a) the Start Date if I have not then become an employee of Deloitte Tax LLP for any reason (b) the date I cease to be an employee of Deloitte Tax LLP because of resignation or termination for Cause, as the case may be.

2. For purposes of this Agreement, "Cause" shall be determined by Deloitte Tax LLP in its sole but reasonable discretion and shall include, without limitation, my willful breach or neglect of duty or my obligations during my employment; my willful failure or refusal to work or to comply with the orders or directives of Deloitte Tax LLP or the rules, regulations, policies or practices of Deloitte Tax LLP; my willful failure or refusal to relocate as requested (if indicated in my offer letter); my dishonesty, insubordination or any other act of misconduct on my part; or conducting myself in a manner that would tend to bring Deloitte Tax LLP into disrepute or to adversely affect its business.
3. Except as provided by law, if I cease to be an employee of Deloitte Tax LLP due to resignation or termination for Cause before completing two years of employment after the Start Date until the Repayable Amount has been paid in full, I set over and assign to Deloitte Tax LLP all of my right, title, and interest in and to all amounts Deloitte Tax LLP owes me at the time my employment terminates, whether for salary, reimbursable expenses or any other purpose. I acknowledge such set overs and assignments are for my benefit and therefore authorize Deloitte Tax LLP to deduct the amount of such set overs and assignments from Deloitte Tax LLP's payments to me, including, without limitation, Deloitte Tax LLP's final payment to me for compensation, reimbursable expenses or any other purpose, and to apply them in payment of the Repayable Amount.
4. This Agreement shall be governed by the laws of the State of New York, without reference to its choice-of-law rules.
5. If I fail to fully repay the Repayable Amount when due, Deloitte Tax LLP may decide to bring an action in court to recover the Repayable Amount in full. If that occurs, I agree to submit to the

8/23/24

Page 11 of 30

exclusive jurisdiction of the courts of the jurisdiction in which I then reside with regard to any matter related to this Agreement. Unless otherwise provided by law, I hereby waive and agree that I will not assert any right to trial by jury with respect to any matter related to this Agreement. Further, I shall accept service of process from Deloitte Tax LLP when that process is either sent to my last known address by certified mail or served by another means permitted under applicable law.

6. I agree to pay all costs of enforcement of this Agreement and collection of the Repayable Amount, including reasonable attorney's fees.
7. I agree that I will not assert any defenses, rights of set-off or counterclaims as a reason for not fully repaying the Repayable Amount when it is due under this Agreement.
8. Nothing in this Agreement shall create a contract of employment between Deloitte Tax LLP and me or a specific term of employment for me. My employment with Deloitte Tax LLP is and shall remain "at will," which means that I may resign my employment, or Deloitte Tax LLP may terminate my employment at any time, for any reason or no reason, with or without notice, and with or without prior discipline.
9. I agree that if any part of this Agreement is held invalid, the balance of this Agreement shall remain valid and in effect if the balance continues to conform to the requirements of applicable law.
10. Deloitte Tax LLP's rights under this Agreement shall inure to the benefit of Deloitte Tax LLP's successors and assigns. This Agreement is not assignable by me.
11. The waiver by Deloitte Tax LLP of a breach of any provision of this Agreement shall not be taken or held to be a waiver of any succeeding breach of that provision or as a waiver of the provision itself. Any waiver under this Agreement must be in writing and signed by Deloitte Tax LLP. Accordingly, the acceptance by Deloitte Tax LLP of partial or delinquent payments by me of the Repayable Amount, or the failure of Deloitte Tax LLP to exercise any rights under this Agreement, shall not waive any other similar breach of this Agreement by me.
12. This Agreement constitutes the entire agreement between Deloitte Tax LLP and me with respect to repayment of my signing bonus. This Agreement may not be changed, modified or terminated orally, but only by a written agreement signed by Deloitte Tax LLP and me.
13. I have read and understood this Agreement, and voluntarily agree to the terms and conditions in this Agreement. I acknowledge that I have been provided with the opportunity to consult with independent legal counsel of my choice.

Rodrigo Veiga Da Cunha

Signed by:

6E294725F9AA403...

Signature

8/23/24

Page 12 of 30

**EXHIBIT A
SCHEDULE OF SIGNING BONUS PAYMENT(S)**

Date Paid	Gross Amount Before Withholding Taxes
First Paycheck	\$3,500.00
Total	\$3,500.00

8/23/24

Page 13 of 30

PROMISSORY NOTE

Rodrigo Veiga Da Cunha

1. Obligation For value received I, Rodrigo Veiga Da Cunha, hereby promise to pay to Deloitte Tax LLP, having a National Office location at 30 Rockefeller Plaza, 41st Floor, New York, NY 10112, the Principal Sum (as hereinafter defined), payable in 20 consecutive equal bi-weekly installments Seventy Five Dollar (\$75.00), beginning of the third month after I commence employment with Deloitte Tax LLP and continuing, without interest, until fully paid, except as hereinafter paid.

2. Definition "Principal Sum" shall mean the sum of the advances made by Deloitte Tax LLP as loans to me and set forth as to date and amount on the schedule annexed hereto and incorporated herein, which I hereby authorize Deloitte Tax LLP to record and which shall be conclusive on Deloitte Tax LLP and me in the absence of manifest error.

3. Medium of Payment The Principal Sum is payable in lawful money of the United States of America at Deloitte Tax LLP's address set forth below, or at such other address as Deloitte Tax LLP may from time to time designate to me in writing.

4. Pre-payment I may prepay this Note at any time and from time to time, in whole or in part.

5. Set Over and Assignment by Me to Deloitte Tax LLP Until the Note has been paid in full, I hereby set over and assign to Deloitte Tax LLP all of my right, title, and interest in and to Seventy Five Dollar (\$75.00), that may be due and owing to me from Deloitte Tax LLP whether for salary, reimbursable expenses or any other purpose, on each bi-weekly pay date of Deloitte Tax LLP. I deem such bi-weekly set over and assignment to be for my benefit and therefore authorize Deloitte Tax LLP to deduct the amount of such bi-weekly set over and assignment from each bi-weekly payment to me from Deloitte Tax LLP and apply it in payment of amounts due hereunder.

Payment of bi-weekly installments hereunder shall be suspended during any approved personal unpaid leave of absence I may have from Deloitte Tax LLP.

If I cease to be an employee of Deloitte Tax LLP prior to the payment in full of the Principal Sum, until the Principal Sum has been paid in full, I hereby set over and assign to Deloitte Tax LLP all of my right, title, and interest in and to all amounts due and owing to me from Deloitte Tax LLP at the time my employment by Deloitte Tax LLP terminates, whether for salary, reimbursable expenses or any other purpose. I deem such set overs and assignments to be for my benefit and therefore authorize Deloitte Tax LLP to deduct the amount of such set overs and assignments from Deloitte Tax LLP's payments to me, including, without limitation, Deloitte Tax LLP's final payment to me for compensation, and apply them in payment of amounts due hereunder.

6. Events of Default This note shall, at the option of Deloitte Tax LLP, immediately become due and payable without notice or demand: (a) in the event of my death; (b) in the event that I am insolvent, I admit in writing my inability to pay my debts as they become due, a receiver is appointed as to any part of my property, a levy on or attachment of any of my property occurs, or the assignment for the benefit of creditors or commencement of any proceedings under the Bankruptcy Code or any insolvency by or against me occurs; (c) in the event I shall fail to make any payment or pay any installment within 10 calendar days of when due hereunder or I shall default in the payment or performance of any other obligation to or agreement with Deloitte Tax LLP; and (d) in the event I fail to become or cease to be an employee of Deloitte Tax LLP for any reason.

7. My Employment-At-Will Nothing in this Note shall create a contract of employment between Deloitte Tax LLP and me or a specific term of employment for me. My employment with Deloitte Tax LLP is and shall remain "at will", which means that I may resign my employment, or Deloitte Tax LLP may terminate my employment, at any time, for any reason or no reason, with or without notice, and with or without prior discipline.

8. Attorneys' Fee If the indebtedness represented by this Note or any part of thereof is collected in bankruptcy, receivership or other judicial proceedings or if this Note is placed in the hands of attorneys for collection after default, I agree to pay, in addition to the principal payable hereunder, reasonable attorneys'

8/23/24

Page 14 of 30

fees and costs incurred by Deloitte Tax LLP.

9. No Defenses, Set-Offs or Counterclaims By Me My payment of the Principal Sum and of any other amounts due from me under this Note shall not be subject to any defenses, set-offs or counterclaims of any kind whatsoever asserted by me.

10. Taxes If any taxes, duties or other charges shall be levied or imposed on this Note or the proceeds hereof by any government, or any instrumentality, authority or political subdivision thereof, such taxes, duties, and charges shall be the responsibility of, and shall be payable by me.

11. Notices Any notice, other communication or payment required or permitted hereunder shall be in writing and, for purposes of timeliness, shall be deemed to have been given upon delivery if personally delivered or three business days after deposit if deposited in the United States mail for mailing by certified mail, postage prepaid, and addressed as follows:

If to Deloitte Tax LLP:

**Deloitte Campus Recruiting
30 Rockefeller Plaza
41st Floor
New York, NY 10112**

The above addressees may change its address for purposes of this paragraph by giving to the other addressee notice of such new address in conformance with this paragraph.

12. Waivers I hereby waive presentment, demand for performance, notice of non-performance, protest, notice of protest, notice of dishonor, and all other notices, demands, and formalities whatsoever in connection with this Note. No delay on the part of Deloitte Tax LLP in exercising any right hereunder shall operate as a waiver of such right or any other right.

13. Applicable Law This Note is deemed to have been executed in Deloitte Tax LLP's national office location in New York, New York and shall be governed by and construed in accordance with the laws of the State of New York, without reference to its choice-of-law rules. I agree to submit to the exclusive jurisdiction of the Courts of the State of Illinois with regard to any matter related to this Note. Unless otherwise provided by law, I hereby waive and agree that I will not assert any right to trial by jury with respect to any matter related to this Note. Further, I shall accept service of process from Deloitte Tax LLP when that process is either sent to my last known address by certified mail or served by any other means permitted under law.

8/23/24

Page 15 of 30

14. Severability Each provision of this Note shall be interpreted in such manner as to be effective and valid under applicable law, but if any provision of this Note is held to be prohibited by or invalid under applicable law, such provision shall be ineffective only to the extent of such prohibition or invalidity, without invalidating the remainder of this Note.

15. Amendment and Termination This Note constitutes the entire agreement between me and Deloitte Tax LLP with respect to the subject matter hereof. This Note may not be changed, modified or terminated orally, but only by a written agreement signed by me and Deloitte Tax LLP.

16. Voluntary Agreement I have read and understand this Note, and voluntarily agree to the terms and conditions contained in this Note. I acknowledge that I have been provided with the opportunity to consult with independent legal counsel of my choice.

Rodrigo Veiga Da Cunha

YES, I would like to receive the Interest Free Loan.
 NO, I do not want the Interest Free Loan.

Signed by:

6E294725F9AA403...

Signature

8/23/24

Page 16 of 30

Deloitte Tax LLP

Promissory Note Loan Schedule

Date of Loan/Advance	Amount of Loan/Advance
8 to 10 weeks prior to start date	\$1,500.00
Total Sum Advanced:	\$1,500.00

8/23/24

Page 17 of 30



Rodrigo Veiga Da Cunha

Chicago, IL

**AGREEMENT ON CONFIDENTIAL INFORMATION
AND OTHER VITAL BUSINESS INTERESTS**

In consideration of my employment by Deloitte Tax LLP (the "Employer") as a Tax Consultant and other valuable consideration, I acknowledge and agree that:

PRELIMINARY MATTERS

- 1. Defined Terms.** The italicized terms in this Agreement are defined in **Exhibit A** hereto.
- 2. Pre-existing Agreements or Arrangements.** I have listed on **Exhibit B** all *Pre-existing Agreements or Arrangements*. The Employer expects me to abide by all restrictions or obligations that are contained in such *Pre-existing Agreements or Arrangements* and to avoid involvement, while employed by the Employer, in any matter that could pose a conflict as a result of confidential information or intellectual property obtained by me prior to my *Employment*. None of these restrictions or obligations, including those set forth in any non-compete agreements with prior employers, is inconsistent with my acceptance of the Employer's offer of *Employment* or my becoming, and serving as, a Tax Consultant of the Employer.

PROTECTION OF OUR BUSINESS

- 3. Reporting of Proceedings.** Except as provided by law and except as I have disclosed in writing on **Exhibit C** to this agreement, I represent and warrant that I have no *Proceedings* to report. Should I become a subject of any *Proceedings* during my association with the Employer, I agree to immediately report, in writing, all relevant facts to the Chief Talent Officer and the Chief Ethics and Compliance Officer. I understand that my responses are subject to audit and review by the Employer and others in accordance with applicable professional, ethical, legal or Employer requirements, rules, regulations, policies, practices or other requests.
- 4. Confidentiality.** By virtue of my *Employment*, I will acquire and be exposed to, have access to, make use of and/or create *Confidential Information*. Therefore, I agree to hold in trust and confidence all such *Confidential Information*. I will not disclose any such *Confidential Information* to anyone outside a *Deloitte Entity* without the prior written approval of an *Authorized Signatory*, except as required by my authorized duties for the Employer, nor use any such *Confidential Information* for any purpose other than for the benefit of a *Deloitte Entity*. However, I understand that this paragraph does not prohibit the reporting, without prior notice to the Employer, of violations of federal, state or local law or regulation to, or discussing any such possible violations with, any governmental agency or entity authorized to receive such information, such as the Equal Employment Opportunity Commission, the Securities and Exchange Commission, the Occupational Safety and Health Administration, or the Department of Defense, including by initiating communications directly with or responding to any inquiry from or providing testimony before any such agency or entity, or to otherwise

8/23/24

Page 18 of 30

make disclosures protected under whistleblower provisions of federal law or regulation. I further understand that I do not need prior authorization to report or disclose violations of federal law or regulation to any such governmental agency or entity and I am not required to notify the Deloitte U.S. Firms that I have made such reports or disclosures.[1]

5. Third Party Information and Property. During my *Employment*, I shall not use or disclose any confidential information or intellectual property of any former employer or other person or entity without the prior written authorization of such employer, person or entity and the prior written consent of an *Authorized Signatory*.

[1]Notice of Immunity Under the Defend Trade Secrets Act: Pursuant to 18 U.S.C. § 1833(b), nothing in this agreement shall be interpreted to expose me to criminal or civil liability under Federal or state trade secret law for disclosure, in confidence, of trade secrets (i) to Federal, state, and local government officials, directly or indirectly, or to an attorney, solely for the purpose of reporting or investigating a suspected violation of law, or (ii) in a complaint or other document filed in a lawsuit or other proceeding, provided the filing is made under seal and otherwise protected from disclosure except pursuant to court order. If I file a lawsuit for retaliation against the Employer for reporting a suspected violation of law, I may disclose trade secrets to my attorney and use the trade secret information in a court proceeding, provided that I file any document containing the trade secret under seal and I do not disclose the trade secret, except pursuant to court order.

6. Competing Activities and Conflict of Interest. During the period of my *Employment* I will not, directly or indirectly, participate in or in any way render services or assistance to any business that is or may be competitive with a *Deloitte Entity*, whether or not for compensation, or engage in any conduct which might result in, or create the appearance of using my position for private gain or other than for the benefit of a *Deloitte Entity*, or otherwise create a conflict, or the appearance of a conflict, of interest with a *Deloitte Entity*. Such conduct shall include, but not be limited to, having an undisclosed financial interest in any vendor or supplier of a *Deloitte Entity*, accepting payments of any kind or gifts other than of a nominal value from vendors, clients or suppliers, or having an undisclosed relationship with a family member or other individual who is employed or associated with any entity in active or potential competition with a *Deloitte Entity*, and which creates a conflict of interest. I am not currently aware of any present or past violation of this provision.

7. Authorization to Access Systems and Electronic Communications. While employed with a *Deloitte Entity*, I will use and have access to the *Systems*. I acknowledge that a *Deloitte Entity* has the right at any time to access, retrieve, delete, monitor, examine, use and/or disclose my *Electronic Communications* and information from (or about) me and the content, without notice to me, and that such *Electronic Communications* are considered part of a *Deloitte Entity's* business and client records and are not to be considered private or personal to me or any other *Personnel*. This right extends to *Electronic Communications* transmitted for either a business or personal purpose. My authorization to access the *Systems* is only for approved business purposes and occasional personal use if such use does not interfere with my work responsibilities and other required business activities, business operations, or *Systems* performance. Such occasional personal use does not create an expectation of privacy as to any of my personal *Electronic Communications* and, as such, are *Deloitte Property*. I am not authorized to access the *Systems* for personal gain or any illegal or unethical use. Under no circumstances am I authorized to access any of the *Systems* for the purpose of obtaining *Deloitte Property* for a competitor of a *Deloitte Entity*, transmitting *Deloitte Property* to me (e.g., emailing *Confidential Information* to my personal email address) or to a third party for purposes other than furthering the business objectives of a *Deloitte Entity*. I am not authorized to access the *Systems* to download a *Deloitte Entity's Confidential Information* or other *Deloitte Property* to removable media such as a CD Rom, disk or thumb drive other than as authorized for furthering the business objectives of a *Deloitte Entity*. Upon request from a *Deloitte Entity* that is based on its reasonable belief that a) I may have *Deloitte Property* in electronic form in my possession, custody or control or b) I may not be in compliance with one or more professional, ethical, and Employer requirements, rules, regulations, policies and practices, I agree to allow a *Deloitte Entity* to inspect any of my personal or home computers, including smart phones, or tablet computers, or any device, media or location capable of storing electronic data, to determine whether any *Deloitte Property* resides on such computers, devices, media or locations and to permit a *Deloitte Entity* to remove such *Deloitte Property*.

8. Ownership of Works.

a. The Employer owns all rights, title and interest in and to all *Works*.

8/23/24

Page 19 of 30

b. All *Works* are deemed works made for hire under the United States copyright laws or equivalent laws of any applicable foreign jurisdiction, and all *Intellectual Property Rights* therein vest automatically in the Employer upon creation of the *Works*. To the extent any *Work* is held not to be a work made for hire, I hereby irrevocably assign all *Intellectual Property Rights* in the *Work* to the Employer.

c. I will at all times, even after termination of my *Employment*, do whatever the Employer reasonably requests of me, at the Employer's expense, to assist the Employer in pursuing, renewing, extending or assigning any *Intellectual Property Rights*, and otherwise perfecting, protecting and enforcing said *Intellectual Property Rights* in, any *Works*. As between me and the Employer, the Employer shall be the sole author, inventor, and owner of all such *Works* and *Intellectual Property Rights* therein throughout the world, and that the Employer shall have the sole right to seek copyright registrations, patents or trademark registrations, including all extensions and renewals thereof. I waive all moral rights in any *Works*.

d. During a 12 month period after termination of my *Employment*, any *Intellectual Property* I create or conceive that results from and is related to any work assigned to or performed by me for the Employer, or that was created using *Deloitte Property*, is a *Work* that is subject to Paragraph 7(b) above.

9. Pre-existing Creations ; Personal Creations. My obligations in Paragraph 7 do not apply to *Pre-existing Creations* and *Personal Creations*. I have listed on **Exhibit B** all *Pre-existing Creations*. I will not assert any ownership rights against the *Deloitte Entities*, or their respective clients, with respect to any *Pre-existing Creations* unless they appear on **Exhibit B**, and **Exhibit B** has been accepted and agreed to by an *Authorized Signatory* who has signed at the bottom of such **Exhibit B**. I shall not use any *Pre-existing Creations* or *Personal Creations* in connection with my *Employment* without the prior written consent of an *Authorized Signatory*. To the extent that I use any *Pre-existing Creations* or *Personal Creations* in connection with my *Employment* except as otherwise provided in a written agreement executed by me and the Employer, I hereby grant to the Employer an irrevocable, royalty free, perpetual, fully paid up, transferable, sublicensable license to use, reproduce, distribute, display, perform, modify and create derivative works of and otherwise exploit such *Pre-existing Creations* or *Personal Creations* for any purpose including, but not limited to, client engagements.

10. Future Employment with Clients. Except as provided herein, I understand that I am not prohibited from accepting employment with a client (or an affiliate of such client) of a *Deloitte Entity*. However, because of, among other things, the importance of the *Deloitte Entities* remaining in compliance with applicable independence rules, I have an obligation during my *Employment* and for five years thereafter to notify *Independence* before accepting an employment opportunity with any *Attest Client*. In addition, before entering into substantive discussions about an employment opportunity with an *Attest Client* for which I was a member of (or consulted with) the audit engagement team in the preceding two years I must first notify and receive approval from *Independence*. Note, *Independence* may withhold approval if my employment with an *Attest Client* would be inconsistent with the provisions of *Rule 2-01* or jeopardize the independence of a *Deloitte Entity*.

11. [INTENTIONALLY OMITTED]

12. Post-Employment Restrictions re: Deloitte Property. Upon termination of my *Employment*: (a) I will not use or disclose *Deloitte Property*, including, but not limited to, *Confidential Information* and *Works*, for any purpose; (b) I will not retain or take with me any *Deloitte Property*; (c) I will immediately deliver to a *Deloitte Entity* at any location that it designates, at my expense, within five (5) business days after the termination of my *Employment* or on an alternate date designated by a *Deloitte Entity*, any *Deloitte Property* that I may then or thereafter hold or control; and (d) Upon request from a *Deloitte Entity* that is based on its reasonable belief that I may have *Deloitte Property* in electronic form in my possession, custody or control, I agree to allow a *Deloitte Entity* to inspect any of my personal or home computers, including smart phones, or tablet computers, or any device, media or location capable of storing electronic data, to determine whether any *Deloitte Property* resides on such computers, devices, media or locations and to permit a *Deloitte Entity* to remove such *Deloitte Property*.

OTHER POST- EMPLOYMENT OBLIGATIONS

13. Transition of Work and Cooperation. Upon termination of my *Employment* for any reason, I will cooperate with a *Deloitte Entity* in all matters relating to the completion of pending work and its orderly transfer. I will also cooperate fully with a *Deloitte Entity* in connection with any threat of or actual legal

8/23/24

Page 20 of 30

proceeding against a *Deloitte Entity* or any client, customer or licensor of a *Deloitte Entity* arising out of any matter with or of which I had contact or knowledge during my *Employment*.

14. Notification of Post- Employment Obligations. Prior to accepting employment or affiliation with another firm or business I will advise such firm or business of my duties and obligations under this Agreement. After my *Employment* ends, a *Deloitte Entity* shall be permitted to advise any firm or business with which I have accepted an offer of employment or affiliation concerning my duties and obligations under this Agreement.

15. Certification. During or after my *Employment* I will, if requested, provide written certification in such form as the Employer may require that I have complied with my obligations hereunder, including, without limitation, those obligations set forth in Paragraphs 3, 4, 5, 6, 7, 8, 9, and 10, of this Agreement.

OUR ENFORCEMENT RIGHTS AND REMEDIES IN THE EVENT OF A BREACH

16. Equitable Relief and Attorney's Fees. My breach of this Agreement, including, but not limited to, a breach of my duties and obligations under the terms and conditions of Paragraphs 3, 4, 5, 6, 7, 8, 9, 10, and 11, would cause irreparable harm to the *Deloitte Entities* and would entitle the Employer on behalf of itself or another *Deloitte Entity* to a temporary restraining order, an injunction or other equitable relief to prevent any such breach, in addition to other remedies.

MISCELLANEOUS

17. Governing Law. This Agreement is deemed to have been executed in the Employer's national office in New York, New York and will be construed and governed in accordance with the laws of the State of New York, without regard to its conflicts-of-law principles.

18. Modifications. My obligations hereunder may not be changed or modified, released, discharged, abandoned or terminated, in whole or in part, except by an instrument in writing which expressly refers to and attaches this agreement and is signed by an *Authorized Signatory*.

19. Severability. Every provision of this Agreement is intended to be severable. If any term or provision is illegal or invalid for any reason whatsoever, such term or provision will be enforced to the maximum extent permitted by law and, in any event, such illegality or invalidity shall not affect the validity of the remainder of the Agreement.

20. Blue-Penciling. If any court determines that any provision of this Agreement, or any part hereof, or the application of any such provision, or any part hereof, to any person or circumstance is unenforceable or void, such court shall have the power to modify such provision, or any part hereof, to the extent necessary to render it legal and enforceable while preserving its intent, or if such modification is not possible, by substituting therefore another provision that is legal and enforceable and that achieves the same objective.

21. Waiver. None of my obligations under this Agreement shall be deemed to have been waived by the Employer except by an instrument in writing which expressly refers to and attaches this agreement and is signed by an *Authorized Signatory*. No such waiver shall be deemed to be a waiver of any other or further obligation I have under this Agreement.

22. Integration. This Agreement, the Employer's employment application, and any documentation hiring me or transferring me to the Employer, contain the entire understanding between me and the Employer or any other *Deloitte Entity* with respect to the subject matter hereof and supersedes all prior representations, warranties, and agreements with respect to such subject matter, and no representations, warranties or other covenants exist with respect to such subject matter that are not contained or expressly referred to herein. Notwithstanding the foregoing, any written agreement between a *Deloitte Entity* and me with respect to the subject matter hereof that was signed by me prior to the effective date of this Agreement shall remain valid and enforceable according to the terms of such agreement with respect to all acts and omissions occurring prior to the effective date of this Agreement.

23. Transfer and Assignment. Unless as the Employer shall otherwise determine, the rights, obligations and benefits of the Employer under this Agreement, including but not limited to those rights and benefits relating to my post-Employment obligations set forth in this Paragraph 22 and in Paragraphs 3, 4, 6, 7,

8/23/24

Page 21 of 30

8, 9, 10, 11, 12, and 13 above, are transferred and assigned, in whole or in part (as the Employer shall determine) and without the need for my consent or the formality of documentation or prescribed processes, to (a) any *Deloitte Entity* in connection with my transfer to that *Deloitte Entity* or (b) any entity that acquires all or a part of the assets or business of the Employer. All provisions of this Agreement shall inure to the benefit of and be binding upon the respective heirs, executors, administrators, representatives, successors, and assigns of the Employer and me, and any *Deloitte Entity* to which I may transfer during my *Employment*, provided, however, none of my duties or obligations under this Agreement may be assigned or transferred by me to any other person or entity without the Employer's prior written approval of such assignment or transfer. Any purported assignments in violation of this Paragraph 22 shall be null and void.

24. At Will. Nothing in this Agreement shall create a contract of employment between the Employer and me or a specific term of employment for me, or change the basis of my employment with the Employer which is and shall remain "at will" employment.

25. Headings. The headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

I have read the foregoing, understand it, and agree to comply with its terms.

Signed by:
Rodrigo Veiga Da Cunha
6E294725F9AA403...

Aug 29, 2024

Signature

Date

Rodrigo Veiga Da Cunha

Print Name

8/23/24

Page 22 of 30

EXHIBIT A

The definitions below apply to the italicized terms that appear in the Agreement (including the exhibits):

Attest Client – attest client (or an affiliate of such client) of Deloitte & Touche LLP or a *Deloitte Entity*.

Authorized Signatory – a partner, principal, officer or other person who is authorized to sign on behalf of a *Deloitte Entity*.

Confidential Information – any information not generally known to the public, in any *Form*, that (1) relates to the operation of a *Deloitte Entity* or provides the *Deloitte Entities* with a competitive advantage, (2) consists of *PII* or other personal information about *Personnel*, client and other third party personnel, independent contractors, subcontractors, agents, vendors, suppliers or others which the Employer or another *Deloitte Entity* receives in the course of business, and (3) all other information entrusted to the Employer or another *Deloitte Entity* by clients and other third parties. *Confidential Information* includes, but is not limited to, *Intellectual Property*, supplier information, designs, business or marketing plans, forecasts and financial information, tax returns, tax identification numbers, agreements, client or prospective client lists, specific information about clients or prospective clients such as preferences for specific products and services, client or prospective client needs based on financial history and past purchases of services, client or prospective client development plans, specific rates charged to a client or offered to a prospective client and other business or client records. *Confidential Information* also includes, but is not limited to, debit or credit card information, employment applications, organization charts, performance ratings and other personnel records.

Deloitte Entity – the Employer, Deloitte LLP, Deloitte USA LLP, and any corporation, company, partnership, limited liability company or other entity (a) that (i) is owned, directly or indirectly, in whole or in part, by Deloitte LLP (the “Deloitte U.S. Firms”), the Deloitte Touche Tohmatsu verein, Deloitte Global Services Limited, Deloitte Global Services Holdings Limited, Deloitte Touche Tohmatsu Limited (“DTTL”) or any member firm of DTTL or affiliate thereof (collectively, the “DTTL Member Firms”) or (ii) controls, is controlled by or is under common control with any of the entities listed in clause (i); or (b) in which any *Personnel* participated on its behalf, or carried out any duties with respect to its affairs. For purposes of this Agreement, the term “control” (including the terms “controlled by” and “under common control with”) means the possession, directly or indirectly, of the power to direct or cause the direction of the management and policies of a person or entity, whether through the ownership of voting securities, by contract, or otherwise.

Deloitte Property – *Confidential Information*, *Systems*, equipment, debit and credit cards issued in connection with my *Employment*, furniture, facilities and any and all other materials owned, licensed or leased by a *Deloitte Entity*, including, without limitation, computerized or electronic information and all copies thereof in any form or media, created by, furnished to, obtained by or prepared by me in the course of my employment in any capacity.

Electronic Communications – all text, audio, video, images, information, data, files and attachments created, displayed, sent, received, posted, accessed or stored, whether deleted or not, by means of the *Systems*.

Employment – the nature of my relationship with the Employer or a *Deloitte Entity* when I work as a Tax Consultant pursuant to this Agreement. Alternatively, and depending on context, *Employment* is the period of time during which this relationship persists.

Form - paper, computer disc, USB drive, website; any other tangible or electronic medium by which information may be stored or accessed; and human memory.

Independence – Independence & Conflicts Professional Network of Deloitte LLP.

Intellectual Property - works of authorship (including, without limitation, books, articles, data compilations, software and other copyrightable materials), materials, patents, inventions, designs, techniques, methodologies, processes, discoveries, know-how, ideas, trade secrets, moral rights, trademarks and other indicia of origin together with the goodwill therein, and all patent applications, copyright and trademark applications and registrations, and extensions and renewals thereof, throughout the world.

8/23/24

Page 23 of 30

Intellectual Property Rights – all rights, title and interest, including copyright, trade secret, patent, trademark, and other intellectual property rights.

Personal Creations – *Intellectual Property* that meet all of the following criteria: (1) it is conceived, developed, and created by me on my own time without using *Deloitte Property* or *Personnel* (during work hours), facilities, *Confidential Information* or *Works* of a *Deloitte Entity*, (2) it is unrelated to the actual or reasonably anticipated business or research and development of a *Deloitte Entity*, and (3) it does not result from any work performed by me and the *Personnel* (during work hours) for a *Deloitte Entity*.

Personnel – partners, principals, members, officers and employees of a *Deloitte Entity*.

PII – information (excluding business contact information such as an individual's name and one or more of the following: organization name, organizational title, organizational role, business address, business telephone number (including business cell phone number and business email address) relating to an identified or identifiable natural person. An identifiable natural person is a natural person who can be identified, directly or indirectly, by reference to an identification number or factors specific to his or her physical, physiological, mental, economic, cultural or social identity. Set forth below is a non-exclusive list of information that constitutes *PII* when such information relates to an identified or identifiable natural person:

- Account number (bank account, credit card, etc.)
- Address
- Biometric identifier
- Certificate or license number
- Date of birth
- Government identifiers (such as social security numbers or driver's license numbers)
- Name*
- Personnel Number
- Photograph or video identifiable to an individual
- Vehicle identifier or serial number
- Other information related to an individual that may directly or indirectly identify that individual (e.g., salary, performance rating, purchase history, call history, etc.)

* Note: When an individual's name is used with *PII* that is not business contact information, it is included in the definition of *PII*.

Pre-existing Agreements or Arrangements – agreements or arrangements that (1) relate to any *Pre-existing Creations*; or (2) may affect my ability to comply with the requirements of this Agreement, including all contractual and other restrictions or obligations with other parties, including any post-employment restrictions and required notifications to the extent applicable under 18 U.S.C. §207 and 48 CFR 3.104-4, that may or will impose limitations on my professional activities during my *Employment* (such as any non-compete agreements with prior employers and the one-year ban on lobbying contacts).

Pre-existing Creations – any *Intellectual Property* and *Intellectual Property Rights* that were developed or created by me, alone or with others, or otherwise acquired by me, before the period of my employment in any capacity with the Employer, in which I claim any ownership or right.

Proceedings – past or pending (1) actual or threatened claims or complaints of, or arising out of service to, present or former clients, (2) regulatory, self-regulatory, disciplinary, administrative, civil or criminal investigations, inquiries, charges, actions, sanctions, alternative dispute resolution proceedings, other proceedings or matters (other than misdemeanors which relate solely to the operation of a motor vehicle) of any kind or nature, in or outside the United States, against me, including criminal proceedings arising out of my provision of professional services, proceedings brought by a professional association, or proceedings involving the Securities and Exchange Commission or the *PCAOB*, or (3) matters of any kind or nature which could adversely affect my association with the Employer or my ability to perform my duties or responsibilities to the Employer, whether set forth in this Agreement or otherwise, or my registration with or licensure by any governmental, quasi-governmental, or other regulatory agency, body or entity, in or outside the United States.

Prospective Client – persons and entities (A) about which I have obtained *Confidential Information* as a result of my *Employment* with a *Deloitte Entity*; (B) with which I have had material business-related contact or for which I was involved in responding to a Request for Proposal (RFP) or other formal or informal proposal, negotiation, or other communications on behalf of a *Deloitte Entity* during the last two years of my

8/23/24

Page 24 of 30

Employment; or (C) with which I am aware a *Deloitte Entity* otherwise has a reasonable expectation of doing business in the future based on proposals, negotiations, or other communications that have been engaged in with the person or entity at issue.

Rule 2-01 – Securities and Exchange Commission Rule 2-01 of Regulation S-X.

Systems – the communications systems or any part of such systems that a *Deloitte Entity* owns, licenses or operates and approves for use, including, but not limited to, e-mail, text messaging, Lotus Notes, Deloitte Online (eRoom), instant messaging, local area network, wide area network, Intranet (e.g., DeloitteNet, DeloittePeopleNetwork), Internet, extranet, collaborative tools (e.g., blogs, wikis), computers (laptop, desktop, or tablet), servers, air cards, Personal Digital Assistants, cell phones, telephones, smart phones, voicemail, or any device, media or location capable of storing electronic data.

Works - all *Intellectual Property*, in any *Form*, created by me, alone or with other others, during the period of my *Employment* that (1) is created within the scope of my *Employment*; (2) relates in any manner to the actual or anticipated business, research, or development of a *Deloitte Entity*; (3) results from any work assigned to or performed by me, alone or with others, for the Employer; or (4) is created with the use of *Deloitte Property*.

8/23/24

Page 25 of 30

EXHIBIT B

Pre-existing Creations; Pre-existing Agreements or Arrangements

I understand and agree that the Employer makes no attempt to verify my claim of ownership to any of the *Pre-existing Creations* listed, and makes no admission that any *Pre-existing Creations* listed are owned by me.

[If yes, please enter details below]

Yes, I do have *Pre-existing Creations, Pre-existing Agreements or Arrangements*

X

No, I do not have *Pre-existing Creations, Pre-existing Agreements or Arrangements*

<u>Title</u>	<u>Date</u>	<u>Brief Description</u>
---------------------	--------------------	---------------------------------

Signed by:

6E294725F9AA403...

Aug 29, 2024

Signature

Date

Rodrigo Veiga Da Cunha

Name (Print)

ACCEPTED AND AGREED TO:

DELOITTE TAX LLP

By: _____
Signature

Its: *Authorized Signatory* _____
Date

An *Authorized Signatory's* signature is required only if *Pre-existing Creations* or *Pre-existing Agreements or*

8/23/24

Page 26 of 30

Arrangements are listed pursuant to Paragraphs 2 and 8 of this Agreement. The signature of an *Authorized Signatory* indicates his or her judgment made in light of Paragraph 2 that *Pre-existing Creations*, if any, are described and explained in sufficient detail so that the likelihood of confusion between the Tax Consultant's *Pre-existing Creations* and the *Intellectual Property* of a *Deloitte Entity* can be avoided or minimized in the future and further indicates that the *Pre-existing Agreements or Arrangements* have been obtained and reviewed and that the *Authorized Signatory* is satisfied that such *Pre-existing Agreements or Arrangements* will not interfere with the Tax Consultant's ability to comply with the requirements of this Agreement.

8/23/24

Page 27 of 30

EXHIBIT C

Proceedings

[none, unless otherwise specified]

Yes, I do have *Proceedings* to report

x

No, I do not have *Proceedings* to report

My signature below certifies that to the best of my knowledge, the information I have provided above, pursuant to Paragraph 3, is complete and accurate.

Signed by:
Rodrigo Veiga Da Cunha
6E294725F9AA403...

Aug 29, 2024

Signature

Date

Rodrigo Veiga Da Cunha

Name (Print)

8/23/24

Page 28 of 30

FREQUENTLY ASKED QUESTIONS ("FAQ")

AGREEMENT ON CONFIDENTIAL INFORMATION AND OTHER VITAL BUSINESS INTERESTS ("AGREEMENT") OF DELOITTE LLP AND ITS SUBSIDIARIES (COLLECTIVELY THE "DELOITTE U. S. FIRMS," INDIVIDUALLY A "DELOITTE U. S. FIRM."

NOTE: *Italicized terms in these FAQs are defined in Exhibit A of the Agreement. The term Employer shall mean the Deloitte U.S. Firm that employs you. ADDITIONALLY, CERTAIN PROVISIONS IN YOUR AGREEMENT MAY DIFFER BASED ON STATE LAW. YOU SHOULD BE GUIDED BY THE LANGUAGE IN YOUR SPECIFIC AGREEMENT.*

GENERAL FAQs

1. What is the purpose of these FAQs?

These FAQs are being provided for your information only. They try to capture the most common inquiries about the Agreement.

2. Are these FAQs intended to give me legal advice or to legally interpret the Agreement for me?

No. You are always free to consult with legal counsel and others concerning the Agreement for legal advice and a legal interpretation.

3. Why do the Deloitte U.S. Firms use a standardized Agreement?

A standardized Agreement provides a set of uniform expectations and obligations for you and everyone similarly situated throughout our organization (without exception) in order to protect the most valuable assets of the Deloitte U.S. Firms – their clients, people and Intellectual Property.

4. What would be the consequences to the Deloitte U.S. Firms if they suffered losses of their clients, personnel and Intellectual Property through a breach of the Agreement?

Significant losses of any of these assets could cause irreparable harm to the business of one or more of the Deloitte U.S. Firms.

5. Do the FAQs attempt to provide me with a comprehensive summary of my obligations under the Agreement?

No. The definitive expressions of your obligations are the provisions of the Agreement whose terms and conditions speak for themselves.

6. Why is the Agreement worded the way it is?

The Agreement tries to balance two sets of interests in a fair and reasonable way. First, the Deloitte U.S. Firms seek to protect their own legitimate business interests which in turn benefit their personnel who rely on clients and highly trained colleagues for their livelihood. Second, the Agreement recognizes the interests that you and your colleagues have to continue to succeed after you leave our organization and therefore avoids placing any undue burden on those interests.

7. Why am I being asked to sign the Agreement at this time?

Your signature is a condition of your hiring. By signing, you become bound to the obligations in the Agreement during and/or after the period of your Employment.

8. What are the consequences of not signing the Agreement?

The refusal or failure to sign will make you ineligible for Employment.

9. Do the continuing obligations in the Agreement apply only if I voluntarily resign from the Employer?

No. The continuing obligations in the Agreement apply no matter what the circumstances behind your departure from the Employer.

8/23/24

Page 29 of 30

10. Are the post-Employment obligations in the Agreement intended to prevent me from earning a living in the event I leave the organization?

No. After your departure you will be able to make use of the same skills and competencies that made you attractive to us in the first place.

FAQs RE: PROTECTION OF OUR BUSINESS

1. How long does my duty of confidentiality last?

Your duty of confidentiality never expires. At any time after your departure you may not disclose, use or retain Confidential Information of the applicable Deloitte U.S. Firm or another Deloitte Entity so long as that information is not generally known to the public.

2. Do the restrictions in the Agreement on competing activities prohibit me from looking for another job or going into business for myself?

No. Problems have come about only when efforts to explore external opportunities while still employed by the Employer are coupled with other activities that are or may be prohibited under the Agreement such as trying to persuade colleagues to follow you.

3. If I use the Systems to send occasional personal emails, am I guaranteed privacy with respect to these emails?

No. All Electronic Communications transmitted using the Systems, including occasional personal emails, are considered part of the Deloitte U.S. Firms' business records and are not considered private or personal to you. If a personal email is intended to be truly "confidential" or "privileged," alternative means of transmission should be used.

4. Does the Agreement permit me to claim ownership of what I conceived, developed, and created before joining the Employer?

Yes, but you must list your Pre-existing Creations with sufficient specificity on Exhibit B (Exhibit B1 for employees in California) and have that Exhibit executed by an Authorized Signatory.

5. Does the Agreement permit me to claim ownership of what I conceive, develop, and create after joining the Employer?

Yes, if what you claim ownership to satisfies the definition of Personal Creations.

6. What kinds of activities does the Agreement have in mind when it prohibits indirectly soliciting Personnel?

An example of indirect solicitation would be if a recently resigned employee subject to the Agreement supplied his or her new employer with the complete background on one or more partners, principals or employees of the Employer or another Deloitte Entity and provided advice on the best recruiting approach to use with each. The new employer uses this information and advice to attempt to recruit one or more of these potential candidates.

Another example of indirect solicitation would be if a current Deloitte U.S. Firm employee subject to the Agreement provides similar kinds of background information and advice to a retained search firm that is recruiting him or her to accept a position with an organization that has additional openings. One of the referred candidates as well as the referring employee ultimately joins the same new organization.

7. Does the Agreement only place restrictions on solicitations that are directed to Personnel of the Employer or another Deloitte Entity?

No. The Agreement also prohibits you from causing a contractor of the Employer to cease providing services to, with, or on behalf of the Employer or another Deloitte Entity during your Employment with, and for one year after your departure from the Employer.

FAQs RE: OTHER POST-EMPLOYMENT OBLIGATIONS

8/23/24

Page 30 of 30

1. Do I have obligations to cooperate with the Deloitte U.S. Firms when or after I leave?

Yes. The Deloitte U.S. Firms expect you to conduct yourself as a professional in all matters relating to the completion and orderly transfer of pending work on behalf of the Employer or another Deloitte Entity. You are also obligated to cooperate fully in connection with any actual or threatened litigation relating to any matter that you were involved with or know about as a result of your Employment.

2. Do I have to tell my new employer about my continuing obligations under the Agreement?

Yes. Prior to accepting a job offer from a new firm or business you must advise your new employer about your continuing obligations.

3. Do the Deloitte U.S. Firms have the right to tell my new employer about the Agreement?

Yes. After your Employment ends, the Deloitte U.S. Firms may tell your new employer about your continuing obligations.

FAQ's RE: OUR ENFORCEMENT RIGHTS AND REMEDIES IN THE EVENT OF A BREACH

1. What happens if I breach the Agreement?

The Deloitte U.S. Firms take a breach or the threat of a breach seriously. The Agreement therefore entitles them to pursue enforcement of their rights through an injunction or other equitable relief to prevent any breach that would cause irreparable harm, as well as the pursuit of the other legal remedies that may be available.

FAQ's RE: MISCELLANEOUS

1. Do my obligations under the Agreement continue to apply if I transfer to another Deloitte Entity?

Yes. Your duties under the Agreement are automatically assigned or transferred in connection with a transfer unless the Employer tells you otherwise.

2. Does the Agreement affect the at-will nature of my Employment?

No. The Agreement does not create a contract or specific term of Employment. Your Employment remains at will. This FAQ does not apply to employees in Puerto Rico or India.

Compensation Statement - Effective 6/1/2025

Deloitte cares about you. That's why we deliver competitive compensation and rewards - so you can thrive financially. This statement provides an overview of your **total compensation for Fiscal Year (FY) 2025** (the period from 6/2/2024 to 5/31/2025), including any Base Pay changes, incentives provided through the Annual Incentive Program (AIP) and additional awards you received during the FY ending 5/31/2025, **and** your New Base Pay as of 6/1/2025.

Personal Summary

Name	Rodrigo Veiga da Cunha
Business (FY25)	TAX
Talent Model	Traditional
Office	Chicago
Job Title (FY26)	Tax Consultant II
Compensation Communicator	Eva Parenti

Base Pay Summary

Current Base Pay 5/31/2025:	\$72,000
Base Pay Change \$ / %: ⁽¹⁾	\$17,200 / 23.9%
New Base Pay at beginning of FY26 6/1/2025:	\$89,200

Your New Base Pay effective 6/1/2025 is \$89,200, a change of \$17,200 / 23.9%.

Additional Awards Received

Reward Excellence received 6/2/2024 to 5/31/2025: ⁽²⁾	\$2,000
Total Additional Awards received:	\$2,000

Your total compensation including the Additional Awards received in FY25, plus your New Base Pay beginning FY26 is \$91,200*.

Compensation Statement - Notations & General Definitions

The notations and general definitions, if applicable, below link to the details in your compensation statement.

Base Pay Summary Detail

1) The change in base pay is calculated based on a full-time equivalent base pay @ 100%.

Additional Awards Received

2) Reward Excellence includes Applause and Outstanding Performance Awards received beginning 6/2/2024 through 5/31/2025 and excludes any tax gross-up made.

General Compensation Definitions:

Your Total Compensation*: Inclusive of new FTE base pay increases, AIP (if applicable), awards and bonuses awarded in the current fiscal year.

Base Pay: Considers relevant skills, credentials, experience, level, historical and current performance.

Merit: Merit increase, if any, is determined by your current base pay, your level and your performance.

Bonus/AIP Awarded: Variable discretionary component for eligible job levels that reflects individual and Firm/Business fiscal year performance.

Reward Excellence last fiscal year: Outstanding performance and/or applause awards (Vantage points) received.

Additional Awards Received: Generally populated when special payments are issued.

Your [performance dashboard](#) includes any applicable performance indicators (i.e., your impact made this year, including snapshot summaries, metrics, and compliance) that may impact your overall compensation.

In addition to base pay and AIP, Deloitte's Rewards, Recognition, and Well-being package includes a range of other benefits related to retirement, health care, and well-being. Visit [Talent on Demand](#) to review the key components of your [total rewards summary](#) available from the Compensation card.

For questions about this statement, contact the Global Contact Center at 1 800 DELOITTE (+ 1 800 335 6488) for assistance. Specialists are available Monday through Friday from 8 a.m. to 8 p.m. ET. You may also submit a non-urgent request using the "Have a question" link on [Talent on Demand](#).

Virtual Wallet Spend Statement

PNC Bank



PO Box 609
Pittsburgh, PA 15230-9738

Primary account number: XX-XXXX-7901

Page 1 of 2

Number of enclosures: 0

For the period 12/12/2025 to 01/14/2026

RODRIGO VEIGA DA CUNHA
APT 806
1360 N LAKE SHORE DR
CHICAGO IL 60610-8449

For 24-hour banking, and transaction or interest rate information, sign-on to

PNC Bank Online Banking at pnc.com

For customer service call 1-888-762-2265

PNC accepts Telecommunications Relay Service (TRS) calls.

Para servicio en español, 1-866-465-2762

Moving? Please contact us at 1-888-762-2265

PO Box 609
Pittsburgh, PA 15230-9738

Visit us at pnc.com



PNC accepts Telecommunications Relay Service (TRS) calls.

Virtual Wallet Spend Account Summary

RODRIGO VEIGA DA CUNHA

Account number: XX-XXXX-7901

Overdraft Protection Provided By: XXXXXX7928
XXXXXX7936

Overdraft Coverage
- Your account is currently
Opted-Out.

Balance Summary

Beginning balance	Deposits and other additions	Checks and other deductions	Ending balance
143.79	11,532.11	10,767.39	908.51
		Average monthly balance	Charges and fees
		2,542.93	.00

Transaction Summary

Checks paid/withdrawals	Debit Card POS signed transactions	Debit Card/Bankcard POS PIN transactions
0	0	1
Total ATM transactions	PNC Bank ATM transactions	Other Bank ATM transactions
2	2	0

Activity Detail

Deposits and Other Additions

Date	Amount	Description
12/12	2,259.13	Direct Deposit - Payroll Dep DELOITTE TAX LLP 00842737
12/23	470.00	Direct Deposit - Payments DELOITTE XXXXXXXXXXXX3332
12/23	2,203.60	Direct Deposit - Payroll Dep DELOITTE TAX LLP 00842737
12/30	1,000.00	ATM Deposit 1231 N Wells St Chicago Il
01/06	500.00	Direct Deposit - Cashout Venmo XXXXXXXXXX7693
01/06	600.00	Deposit Reference No. 037559493

There were 12 Deposits and Other Additions totaling \$11,532.11.

Deposits and Other Additions continued on next page

Virtual Wallet Spend Statement

For 24-hour information, sign on to PNC Bank Online Banking
on pnc.com

Account Number: XX-XXXX-7901 - continued

For the period 12/12/2025 to 01/14/2026

RODRIGO VEIGA DA CUNHA

Primary account number: XX-XXXX-7901

Page 2 of 2

Deposits and Other Additions - continued

Date	Amount	Description
01/08	1,100.00	RTP Received Wealthfront Brokerage 01/08 38279
01/09	2,256.64	Direct Deposit - Payroll Dep DELOITTE TAX LLP 00842737
01/09	100.00	Zelle From Xiya Liu
01/09	118.87	Direct Deposit - Hertz Wise US Inc Hertz
01/12	700.00	ATM Deposit 1231 N Wells St Chicago Il
01/13	223.87	Direct Deposit - Angela Zol WISE US INC ANGELA ZOL

Banking/Debit Card Withdrawals and Purchases

Date	Amount	Description
01/12	20.25	POS Purchase Vcn*Cookcovita Chicago Il

There was 1 Debit Card/Bank card
PIN POS purchase totaling \$20.25.

Online and Electronic Banking Deductions

Date	Amount	Description
12/15	1,200.00	Web Pmt- EDI Pymnts Wealthfront 08Eab2Be08964C
12/30	1,139.01	Web Pmt- Ccpymt Wells Fargo Card 90803033669851
12/30	60.00	Direct Payment - Cable Svcs Comcast-Xfinity 9854245
12/31	75.00	Web Pmt- Web Pmts Pl*Plannedproper 4Zw2B8
12/31	.95	Web Pmt- Web Pmts Pl*Paylease 7Xt2B8
01/05	1,155.04	Web Pmt- E-Payment Discover 7560
01/05	500.00	Web Pmt- EDI Pymnts Wealthfront E1A2735Fa47B41
01/06	1,715.19	Web Pmt- Rent Pmt Biltpymts 90803033669851
01/09	2,151.00	Web Pmt- Web Pmts Pl*Plannedproper Gq58D8
01/09	.95	Web Pmt- Web Pmts Pl*Paylease Lz38D8
01/12	1,250.00	Web Pmt- EDI Pymnts Wealthfront B90Ad85Ed2684B
01/14	1,500.00	Web Pmt- Yousa Law Yousa Law St- G3Q3M111B8F7

There were 12 Online or Electronic
Banking Deductions totaling
\$10,747.14.

Daily Balance Detail

Date	Balance	Date	Balance	Date	Balance	Date	Balance
12/12	2,402.92	12/30	3,677.51	01/06	1,331.33	01/12	2,184.64
12/15	1,202.92	12/31	3,601.56	01/08	2,431.33	01/13	2,408.51
12/23	3,876.52	01/05	1,946.52	01/09	2,754.89	01/14	908.51



ACCOUNT INFORMATION

Rodrigo Veiga da Cunha
Individual Cash Account

ACCOUNT NUMBERS

Wealthfront: 8W1459X0
UMB Bank: 9320763812458

ACCOUNT HOLDER

Rodrigo Veiga da Cunha
1360 N Lake Shore Dr
Unit 806
Chicago, IL 60610-2181

Monthly Statement for December 1 - 31, 2025

Individual Cash Account

I. Holdings

December 1, 2025

Starting Balance

\$16,053.30

II. Account Activity

December 31, 2025

Ending Balance

\$16,698.00

CONTACT WEALTHFRONT BROKERAGE LLC

support@wealthfront.com
844.995.8437

YOUR CUSTODIAN

Wealthfront Brokerage LLC
261 Hamilton Ave
Palo Alto, CA 94301
Member SIPC

I. Holdings as of December 31, 2025

BANK SWEEP PROGRAM BALANCES¹

Bank Name	Description	Opening Balance	Ending Balance
Israel Discount Bank	FDIC Insured Deposit. Not Covered by SIPC.	\$0.00	\$0.00
UMB Bank	FDIC Insured Deposit. Not Covered by SIPC.	\$0.00	\$0.00
Wells Fargo NA	FDIC Insured Deposit. Not Covered by SIPC.	\$16,053.30	\$16,698.00
Total		\$16,053.30	\$16,698.00
Total Holdings			\$16,698.00

1. Balances held at participant banks are FDIC insured within applicable Program limits. The balances are not SIPC insured. Please reference Disclosures for further information.

II. Account Activity

Deposits/Credits to Wealthfront Brokerage

Date	Method	Status	Amount
12/15/2025	ACH	Received	\$1,200.00
Total			\$1,200.00

Withdrawals/Debits from Wealthfront Brokerage

Date	Method	Status	Amount
12/2/2025	RTP/FedNow ²	Disbursed	67 -\$600.00
Total			-\$600.00

TRANSFERS³

Date	Security	Symbol/CUSIP	Type	Shares	Share Price	Value
12/3/2025	--	--	Transfer in	--	--	\$0.03
Total						\$0.03

Transfer between Wealthfront and Program Banks⁴

Date	Method	Amount
12/2/2025	Transfer from Program Banks	\$600.00
12/3/2025	Transfer to Program Banks	-\$0.03
12/15/2025	Transfer to Program Banks	-\$1,200.00
Total		-\$600.03

INTEREST⁵

Date	Interest Period	Amount
12/1/2025	November 2025	\$44.67
Total		\$44.67

2. Same day withdrawals and Instant Withdrawals may be processed through the Real-Time Payments (RTP) network or the FedNow service, enabling same day withdrawals. The specific processing method may vary.

3. Transfers refers to brokerage-to-brokerage transfers and may include cash and/or securities.

4. Program Bank transactions are FDIC Insured.

5. Interest is paid on the first business day of each month for interest earned during the prior month. Please reference Disclosures for additional information.

Balance and Interest Rate Details

Date	Amount	APR	APY
11/1/2025	\$15,653.27	3.68%	3.75%
11/2/2025	\$15,653.27	3.68%	3.75%
11/3/2025	\$15,053.27	3.68%	3.75%
11/4/2025	\$15,053.27	3.68%	3.75%
11/5/2025	\$15,053.30	3.68%	3.75%
11/6/2025	\$15,053.30	3.68%	3.75%
11/7/2025	\$15,053.30	3.44%	3.50%
11/8/2025	\$15,053.30	3.44%	3.50%
11/9/2025	\$15,053.30	3.44%	3.50%
11/10/2025	\$15,053.30	3.44%	3.50%
11/11/2025	\$15,053.30	3.44%	3.50%
11/12/2025	\$15,053.30	3.44%	3.50%
11/13/2025	\$15,053.30	3.44%	3.50%
11/14/2025	\$15,053.30	3.44%	3.50%
11/15/2025	\$15,053.30	3.44%	3.50%

6

Date	Amount	APR	APY
11/16/2025	\$15,053.30	3.44%	3.50%
11/17/2025	\$16,053.30	3.44%	3.50%
11/18/2025	\$16,053.30	3.44%	3.50%
11/19/2025	\$16,053.30	3.44%	3.50%
11/20/2025	\$16,053.30	3.44%	3.50%
11/21/2025	\$16,053.30	3.44%	3.50%
11/22/2025	\$16,053.30	3.44%	3.50%
11/23/2025	\$16,053.30	3.44%	3.50%
11/24/2025	\$16,053.30	3.44%	3.50%
11/25/2025	\$16,053.30	3.44%	3.50%
11/26/2025	\$16,053.30	3.44%	3.50%
11/27/2025	\$16,053.30	3.44%	3.50%
11/28/2025	\$16,053.30	3.44%	3.50%
11/29/2025	\$16,053.30	3.44%	3.50%
11/30/2025	\$16,053.30	3.44%	3.50%

70

Miscellaneous Credits⁶

Date	Description	Amount
Total		\$0.00

71

6. This Miscellaneous Credits section relates to cash credits applied to your account by Wealthfront for any reason, including pursuant to promotions and contests conducted by Wealthfront. Wealthfront reserves the right to amend the amount of any cash credit, including subtracting some or all of the credit from your account, if it deems there was an error in the application of the credit. Please note, such cash credits may constitute taxable income, and you are responsible for all applicable federal, state, and local taxes and all fees and expenses related to the acceptance of such credits. You should confer with your personal tax advisor regarding the tax consequences of your receipt of cash credits. If applicable, Wealthfront will issue to you the appropriate IRS Form 1099 (or other appropriate form) that includes the value of any cash credits.

Disclosures

Cash Account is offered by Wealthfront Brokerage LLC ("Wealthfront Brokerage"), a member of FINRA/SIPC. Neither Wealthfront Brokerage nor any of its affiliates are a bank, and Cash Account is not a checking or savings account. We convey funds to partner banks who accept and maintain deposits, provide the interest rate, and provide FDIC insurance. Investment management and advisory services are provided by Wealthfront Advisers LLC ("Wealthfront Advisers"), an SEC registered investment adviser.

The cash balance in the Cash Account is swept to one or more banks (the "program banks") where it earns a variable rate of interest and is eligible for FDIC insurance. FDIC insurance is not provided until the funds arrive at the program banks. FDIC insurance coverage is limited to \$250,000 per qualified customer account per banking institution. Wealthfront uses more than one program bank to ensure FDIC coverage of up to \$8 million for your cash deposits. For more information on FDIC insurance coverage, please visit www.FDIC.gov. Customers are responsible for monitoring their total assets at each of the program banks to determine the extent of available FDIC insurance coverage in accordance with FDIC rules. The deposits at program banks are not covered by SIPC.

Your Cash Account has a variable interest rate that is subject to change at any time without notice. Interest is calculated daily based on the Annual Percentage Rate ("APR") at our program banks and compounds monthly. Interest is paid during the beginning of the month for the previous month's accrual. The Annual Percentage Yield ("APY") for the Wealthfront Cash Account represents the weighted average of the APY on the aggregate deposit balances of all clients at the program banks. Deposit balances are not allocated equally among the participating program banks. This monthly account statement should not be used for tax reporting purposes. Following each calendar year end, you will receive a Form 1099 for annual tax reporting.

Funds invested after the cash sweep cutoff may be held as a free credit balance until the next sweep on the following business day and will not earn interest.

You could lose money by investing in the Wealthfront Treasury Money Market Fund (the "Fund"). Although the Fund seeks to preserve the value of your investment at \$1.00 per share, the Fund is not a bank account and is not insured or guaranteed by the Federal Deposit Insurance Corporation or any other government agency. The Fund's sponsor is not required to return the Fund for losses, and you should not expect that the sponsor will provide financial support to the Fund at any time, including during periods of market stress. At any time, you can choose to liquidate your money market shares and have the proceeds either returned to your securities account or remitted to you.

Wealthfront Strategies LLC acts as the investment adviser to the Wealthfront Treasury Money Market Fund (ticker: WLTX). The Wealthfront Treasury Money Market Fund is distributed by IMST Distributors, LLC.

A monthly account statement will be provided summarizing transactions in your money market fund holding. Separate confirmations for individual transactions may also be sent.

Your cash balance is the amount of funds you can withdraw. You have the right to receive any cash balance to which you are entitled, less any amounts you owe on any of your accounts (such as advisory fees or interest). Your cash balance is not segregated and may be used by Wealthfront Brokerage in its business, subject to the limitations of U.S. Securities Exchange Commission Rule 15c3-3. What this means is that although your cash balance is not segregated, a bank account for the exclusive benefit of Wealthfront Brokerage customers has a cash balance set aside to ensure that your funds are safe.

Report any inaccuracies, discrepancies, or errors on your account or electronic transfers as soon as possible—no later than 10 business days after your statement becomes available for general account issues, and within 60 days of the first statement showing an electronic transfer error. Contact us at 844-995-8437 or support@wealthfront.com, and follow up any verbal communications in writing. Any oral communications should be re-confirmed in writing to further protect your rights, including your rights under the Securities Investor Protection Act (SIPA).

(1) Tell us your name.

(2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.

(3) Tell us the dollar amount of the suspected error.

We will investigate your dispute and will correct any error promptly. You will receive an email from us within 10 business days letting you know if your dispute was granted, denied, or if we need more time to research. We may take up to 45 days to investigate your dispute (90 days if this is a new account). If we take more than 10 business days to do this, we may provisionally credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. In order to provide a provisional credit, we request that you fill out and return the Wealthfront Written Statement of Unauthorized Debit form, which will be provided at your request. This form serves as written confirmation of the dispute. While we do not need this form returned to begin the investigation, we do need it to provisionally credit your account, and we appreciate your willingness to send us this information.

We will tell you the results of our investigation within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

View Wealthfront Brokerage LLC's most recent Statement of Financial Condition https://www.wealthfront.com/static/documents/WB_Financial_Statement.pdf.

Wealthfront Advisers, Wealthfront Brokerage and Wealthfront are wholly owned subsidiaries of Wealthfront Corporation.



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 09/21/2025	Period End 10/04/2025	Date Paid 10/03/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,436.15	Pre-Tax Ded 346.46	Tax Deduction 767.48	After-Tax Ded 63.07	Net Pay 2,259.14		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
10/04 Regular Salary		\$3,430.77	\$51,646.16	10/04 401(k) Contribution	\$274.46	\$4,347.06
Well-Being Subsidy			819.21	10/04 HSA Contribution	10.00	140.00
Recognition Award			2,000.00	10/04 Aetna High Deductibl	56.00	896.00
10/04 Imp Inc Core Life		0.92	11.85	10/04 Metlife Preferred De	6.00	96.00
10/04 Imp Inc Core LTD		4.46	65.34	TAXABLE EARNINGS (FED) :	\$3,089.69	\$52,563.50
Sign Bn Ln Pymt G&T			3,500.00	TAX DEDUCTION(S):		
TOTAL GROSS		\$3,436.15	\$58,042.56	FED TX Withholding Tax	357.19	6,213.51
				FED TX EE Social Securit	208.57	3,528.45
				FED TX EE Medicare Tax	48.78	825.20
				IL TX Withholding Tax	152.94	2,360.09
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				Well-Being Subsidy		819.21
				10/04 Imp Inc Core Life	0.92	11.85
				10/04 Imp Inc Core LTD	4.46	65.34
				Rec Adv Pyt		-1,500.00
				10/04 Rec Adv Ln Repymt	57.69	865.35
				NET PAY	\$2,259.14	\$39,037.95

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2259.14



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 10/05/2025	Period End 10/18/2025	Date Paid 10/17/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,436.15	Pre-Tax Ded 346.46	Tax Deduction 767.49	After-Tax Ded 63.07	Net Pay 2,259.13		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
10/18 Regular Salary		\$3,430.77	\$55,076.93	10/18 401(k) Contribution	\$274.46	\$4,621.52
Well-Being Subsidy			819.21	10/18 HSA Contribution	10.00	150.00
Recognition Award			2,000.00	10/18 Aetna High Deductibl	56.00	952.00
10/18 Imp Inc Core Life		0.92	12.77	10/18 Metlife Preferred De	6.00	102.00
10/18 Imp Inc Core LTD		4.46	69.80			
Sign Bn Ln Pymt G&T			3,500.00	TAXABLE EARNINGS (FED) :	\$3,089.69	\$55,653.19
TOTAL GROSS		\$3,436.15	\$61,478.71	TAX DEDUCTION(S):		
				FED TX Withholding Tax	357.19	6,570.70
				FED TX EE Social Securit	208.58	3,737.03
				FED TX EE Medicare Tax	48.78	873.98
				IL TX Withholding Tax	152.94	2,513.03
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				Well-Being Subsidy		819.21
				10/18 Imp Inc Core Life	0.92	12.77
				10/18 Imp Inc Core LTD	4.46	69.80
				Rec Adv Pyt		-1,500.00
				10/18 Rec Adv Ln Repymt	57.69	923.04
				NET PAY	\$2,259.13	\$41,297.08

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2259.13



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 10/19/2025	Period End 11/01/2025	Date Paid 10/31/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,515.28	Pre-Tax Ded 346.46	Tax Deduction 794.87	After-Tax Ded 142.20	Net Pay 2,231.75		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
11/01 Regular Salary		\$3,430.77	\$58,507.70	11/01 401(k) Contribution	\$274.46	\$4,895.98
11/01 Well-Being Subsidy		79.13	898.34	11/01 HSA Contribution	10.00	160.00
Recognition Award			2,000.00	11/01 Aetna High Deductibl	56.00	1,008.00
11/01 Imp Inc Core Life		0.92	13.69	11/01 Metlife Preferred De	6.00	108.00
11/01 Imp Inc Core LTD		4.46	74.26			
Sign Bn Ln Pymt G&T			3,500.00	TAXABLE EARNINGS (FED) :	\$3,168.82	\$58,822.01
TOTAL GROSS		\$3,515.28	\$64,993.99	TAX DEDUCTION(S):		
				FED TX Withholding Tax	374.60	6,945.30
				FED TX EE Social Securit	213.49	3,950.52
				FED TX EE Medicare Tax	49.93	923.91
				IL TX Withholding Tax	156.85	2,669.88
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				11/01 Well-Being Subsidy	79.13	898.34
				11/01 Imp Inc Core Life	0.92	13.69
				11/01 Imp Inc Core LTD	4.46	74.26
				Rec Adv Pyt		-1,500.00
				11/01 Rec Adv Ln Repymt	57.69	980.73
				NET PAY	\$2,231.75	\$43,528.83

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2231.75



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 11/02/2025	Period End 11/15/2025	Date Paid 11/14/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,568.42	Pre-Tax Ded 346.46	Tax Deduction 813.24	After-Tax Ded 195.34	Net Pay 2,213.38		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
11/15 Regular Salary		\$3,430.77	\$61,938.47	11/15 401(k) Contribution	\$274.46	\$5,170.44
11/15 Well-Being Subsidy		132.27	1,030.61	11/15 HSA Contribution	10.00	170.00
Recognition Award			2,000.00	11/15 Aetna High Deductibl	56.00	1,064.00
11/15 Imp Inc Core Life		0.92	14.61	11/15 Metlife Preferred De	6.00	114.00
11/15 Imp Inc Core LTD		4.46	78.72	TAXABLE EARNINGS (FED) :	\$3,221.96	\$62,043.97
Sign Bn Ln Pymt G&T			3,500.00	TAX DEDUCTION(S):		
TOTAL GROSS		\$3,568.42	\$68,562.41	FED TX Withholding Tax	386.29	7,331.59
				FED TX EE Social Securit	216.77	4,167.29
				FED TX EE Medicare Tax	50.70	974.61
				IL TX Withholding Tax	159.48	2,829.36
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				11/15 Well-Being Subsidy	132.27	1,030.61
				11/15 Imp Inc Core Life	0.92	14.61
				11/15 Imp Inc Core LTD	4.46	78.72
				Rec Adv Pyt		-1,500.00
				11/15 Rec Adv Ln Repymt	57.69	1,038.42
				NET PAY	\$2,213.38	\$45,742.21

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2213.38



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 11/16/2025	Period End 11/29/2025	Date Paid 11/28/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,966.62	Pre-Tax Ded 346.46	Tax Deduction 951.03	After-Tax Ded 593.54	Net Pay 2,075.59		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
11/29 Regular Salary		\$3,430.77	\$65,369.24	11/29 401(k) Contribution	\$274.46	\$5,444.90
11/29 Well-Being Subsidy		530.47	1,561.08	11/29 HSA Contribution	10.00	180.00
Recognition Award			2,000.00	11/29 Aetna High Deductibl	56.00	1,120.00
11/29 Imp Inc Core Life		0.92	15.53	11/29 Metlife Preferred De	6.00	120.00
11/29 Imp Inc Core LTD		4.46	83.18	TAXABLE EARNINGS (FED) :	\$3,620.16	\$65,664.13
Sign Bn Ln Pymt G&T			3,500.00	TAX DEDUCTION(S):		
TOTAL GROSS		\$3,966.62	\$72,529.03	FED TX Withholding Tax	473.90	7,805.49
				FED TX EE Social Securit	241.47	4,408.76
				FED TX EE Medicare Tax	56.47	1,031.08
				IL TX Withholding Tax	179.19	3,008.55
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				11/29 Well-Being Subsidy	530.47	1,561.08
				11/29 Imp Inc Core Life	0.92	15.53
				11/29 Imp Inc Core LTD	4.46	83.18
				Rec Adv Pyt		-1,500.00
				11/29 Rec Adv Ln Repymt	57.69	1,096.11
				NET PAY	\$2,075.59	\$47,817.80

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2075.59



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 11/30/2025	Period End 12/13/2025	Date Paid 12/12/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,436.15	Pre-Tax Ded 346.46	Tax Deduction 767.49	After-Tax Ded 63.07	Net Pay 2,259.13		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
12/13 Regular Salary		\$3,430.77	\$68,800.01	12/13 401(k) Contribution	\$274.46	\$5,719.36
Well-Being Subsidy			1,561.08	12/13 HSA Contribution	10.00	190.00
Recognition Award			2,000.00	12/13 Aetna High Deductibl	56.00	1,176.00
12/13 Imp Inc Core Life		0.92	16.45	12/13 Metlife Preferred De	6.00	126.00
12/13 Imp Inc Core LTD		4.46	87.64	TAXABLE EARNINGS (FED) :	\$3,089.69	\$68,753.82
Sign Bn Ln Pymt G&T			3,500.00	TAX DEDUCTION(S):		
TOTAL GROSS		\$3,436.15	\$75,965.18	FED TX Withholding Tax	357.19	8,162.68
				FED TX EE Social Securit	208.58	4,617.34
				FED TX EE Medicare Tax	48.78	1,079.86
				IL TX Withholding Tax	152.94	3,161.49
				PA TX Withholding Tax		149.96
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				Well-Being Subsidy		1,561.08
				12/13 Imp Inc Core Life	0.92	16.45
				12/13 Imp Inc Core LTD	4.46	87.64
				Rec Adv Pyt		-1,500.00
				12/13 Rec Adv Ln Repymt	57.69	1,153.80
				NET PAY	\$2,259.13	\$50,076.93

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2259.13



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 12/14/2025	Period End 12/27/2025	Date Paid 12/23/2025
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,596.65	Pre-Tax Ded 346.46	Tax Deduction 823.02	After-Tax Ded 223.57	Net Pay 2,203.60		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
12/27 Regular Salary		\$3,430.77	\$72,230.78	12/27 401(k) Contribution	\$274.46	\$5,993.82
12/27 Well-Being Subsidy		160.50	1,721.58	12/27 HSA Contribution	10.00	200.00
Recognition Award			2,000.00	12/27 Aetna High Deductibl	56.00	1,232.00
12/27 Imp Inc Core Life		0.92	17.37	12/27 Metlife Preferred De	6.00	132.00
12/27 Imp Inc Core LTD		4.46	92.10	TAXABLE EARNINGS (FED) :	\$3,250.19	\$72,004.01
Sign Bn Ln Pymt G&T			3,500.00	TAX DEDUCTION(S):		
TOTAL GROSS		\$3,596.65	\$79,561.83	FED TX Withholding Tax	392.50	8,555.18
				FED TX EE Social Securit	218.53	4,835.87
				FED TX EE Medicare Tax	51.11	1,130.97
				IL TX Withholding Tax	160.88	3,339.50
				PA TX Withholding Tax		139.33
				PA TX EE Unemployment T		3.42
				PBKX TX Withholding Tax		183.17
				OTHER DEDUCTION(S):		
				Tax Advance		-6.50
				12/27 Well-Being Subsidy	160.50	1,721.58
				12/27 Imp Inc Core Life	0.92	17.37
				12/27 Imp Inc Core LTD	4.46	92.10
				Rec Adv Pyt		-1,500.00
				12/27 Rec Adv Ln Repymt	57.69	1,211.49
				NET PAY	\$2,203.60	\$52,280.53

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	031000053	XXXXXX7901	\$ 2203.60



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 12/28/2025	Period End 01/10/2026	Date Paid 01/09/2026
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,436.34	Pre-Tax Ded 350.15	Tax Deduction 766.29	After-Tax Ded 63.26	Net Pay 2,256.64		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
01/10 Regular Salary		\$3,430.77	\$3,430.77	01/10 401(k) Contribution	\$274.46	\$274.46
01/10 Imp Inc Core Life		1.11	1.11	01/10 HSA Contribution	7.69	7.69
01/10 Imp Inc Core LTD		4.46	4.46	01/10 Aetna High Deductibl	62.00	62.00
TOTAL GROSS		\$3,436.34	\$3,436.34	01/10 Metlife Preferred De	6.00	6.00
				TAXABLE EARNINGS (FED) :	\$3,086.19	\$3,086.19
				TAX DEDUCTION(S):		
				FED TX Withholding Tax	356.43	356.43
				FED TX EE Social Securit	208.36	208.36
				FED TX EE Medicare Tax	48.73	48.73
				IL TX Withholding Tax	152.77	152.77
				OTHER DEDUCTION(S):		
				01/10 Imp Inc Core Life	1.11	1.11
				01/10 Imp Inc Core LTD	4.46	4.46
				01/10 Rec Adv Ln Repymt	57.69	57.69
				NET PAY	\$2,256.64	\$2,256.64

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	03100053	XXXXXX7901	\$ 2256.64



Deloitte Tax LLP

Deloitte - 4022 Sells Drive, Hermitage, TN 37076
(1-800-DELOITTE)

Name Rodrigo Veiga da Cunha	Personnel Number 50776030	Period Begin 01/11/2026	Period End 01/24/2026	Date Paid 01/23/2026
Rate/Salary 3,430.77	Cost Center 120045543	Company FEIN 86-1065772	Employee Address 1360 N Lake Shore Dr Apt 806,Chicago,IL,60610	

Total Earnings 3,436.34	Pre-Tax Ded 350.15	Tax Deduction 766.29	After-Tax Ded 63.26	Net Pay 2,256.64		
	Hours	Rate	Current	Year-to-Date	Current	Year-to-Date
GROSS EARNING(S):			PRE-TAX DEDUCTION(S):			
01/24 Regular Salary		\$3,430.77	\$6,861.54	01/24 401(k) Contribution	\$274.46	\$548.92
01/24 Imp Inc Core Life		1.11	2.22	01/24 HSA Contribution	7.69	15.38
01/24 Imp Inc Core LTD		4.46	8.92	01/24 Aetna High Deductibl	62.00	124.00
TOTAL GROSS		\$3,436.34	\$6,872.68	01/24 Metlife Preferred De	6.00	12.00
				TAXABLE EARNINGS (FED) :	\$3,086.19	\$6,172.38
				TAX DEDUCTION(S):		
				FED TX Withholding Tax	356.43	712.86
				FED TX EE Social Securit	208.36	416.72
				FED TX EE Medicare Tax	48.73	97.46
				IL TX Withholding Tax	152.77	305.54
				OTHER DEDUCTION(S):		
				01/24 Imp Inc Core Life	1.11	2.22
				01/24 Imp Inc Core LTD	4.46	8.92
				01/24 Rec Adv Ln Repymt	57.69	115.38
				NET PAY	\$2,256.64	\$4,513.28

Payment Type	Bank Location	Bank Number	Amount
Direct Deposit	03100053	XXXXXX7901	\$ 2256.64

SUMMARY OF RIGHTS FOR SAFER HOMES

Landlords (owners of the building or someone working for them to rent residences) are required under Illinois law to give this summary to all Illinois housing tenants as the first page of their written lease, whether the lease is new or a renewal. Access, download, or translate this summary on the Illinois Department of Human Rights website at dhr.illinois.gov/safer-homes.

If you or a member of your household are a survivor of domestic violence, dating violence, sexual assault, or stalking, you have special rights relating to your housing to make you safer.

1) Under the Illinois Safe Homes Act, you have the right to end your lease early and not pay future rent when you move from your rental place because of a threat of domestic violence or sexual violence.

- To end your lease early, you must give written notice that you are leaving to your landlord before or within three days of permanently leaving (for example, by removing all of your belongings and turning over your keys to the landlord or property manager) or have left your rental place because you are under an imminent threat of domestic violence or sexual violence there. You can also end your lease early by written notice and documentation because sexual violence occurred at your rental place within the last 60 days or later, if circumstances prevented you from telling the landlord sooner.
- You are responsible for paying rent for the period prior to providing written notice and then permanently leaving, but you are not responsible for future rent after that and cannot be charged an “early lease break fee.” Your landlord should also return your security deposit if there is no previous unpaid rent or damage to your rental place beyond normal wear and tear.

2) You also have the right to change your locks to prevent further domestic violence or sexual violence at your rental place.

- To exercise this right, you need to provide written notice to the landlord that you are under an imminent threat of domestic or sexual violence; the landlord must change or give you permission to change the locks within 48 hours of your notice, at your reasonable expense. If your landlord does not change the locks within 48 hours, you can change the locks and give your landlord the new key within 48 hours.

3) Your landlord will be liable to you for your actual damages up to \$2,000 and reasonable attorney’s fees if they disclose to a prospective landlord that you used the Safe Homes Act or share any information you provided when using the Safe Homes Act.

[Learn more about the Safe Homes Act \(765 ILCS 750\) from Illinois Legal Aid at ilao.info/dvleases](http://ila.illinois.gov/dvleases)

Each tenant acknowledges receipt of this Page 1 of this Summary by signing below and should retain a copy for their records. See also and Sign at bottom of p. 2-4.

Printed Name: Rodrigo Veiga da Cunha as Signature: Rodrigo Veiga da Cunha Date: 01/06/2026
Printed Name: _____ Signature: _____ Date: _____
Printed Name: _____ Signature: _____ Date: _____
Printed Name: _____ Signature: _____ Date: _____
Printed Name: _____ Signature: _____ Date: _____
Printed Name: _____ Signature: _____ Date: _____

4) If your landlord tries to evict you, and the eviction is based upon you or a household member experiencing domestic violence, dating violence, sexual assault, or stalking, you may be able to stop the eviction.

You cannot be evicted solely because:

- You or your household members are a victim of an actual incident of domestic violence, dating violence, sexual assault, or stalking
- You or your household members received threats of domestic violence, dating violence, sexual assault, or stalking
- Criminal activity in the form of domestic violence, dating violence, sexual violence, or stalking against you or a member of your household
- You did not knowingly consent to a person entering your rental place that the landlord had barred, or if the barred person is permitted by court order to enter your rental place

When asserting any of these defenses to eviction you must provide at least one form of evidence of your status (such as medical, court or police records, or a statement from a victim services organization that you sought help from).

The landlord may still be able to evict you if they prove that your continued presence in your rental place poses an actual and imminent threat to others there.

It is recommended that you seek legal assistance if facing an eviction action.

5) A landlord cannot discriminate against you under the Illinois Human Rights Act because you have an order of protection, a stalking no contact order, or a civil no contact order.

The Illinois Human Rights Act protects against discrimination, harassment, and retaliation in housing based on certain protected categories. A housing provider cannot refuse to rent to you, refuse to make repairs, or charge you additional fees because you have protections under any of the above court orders. Possible remedies include your actual damages and attorney's fees. If you are using a federal housing subsidy, you have additional protections under the Violence Against Women Act (VAWA) (42 U.S.C. Ch. 136, Subchapter III), which prevents housing providers from denying housing due to domestic violence, dating violence, sexual assault, and stalking.

Each tenant acknowledges receipt of this Page 2 of this Summary by signing below and should retain a copy for their records. See also and Sign at bottom of p. 3-4.

Printed Name: Rodrigo Veiga da Cunha as Signature: Rodrigo Veiga da Cunha Date: 01/06/2026

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

You can file a charge of housing discrimination with the Illinois Department of Human Rights within one year after the discrimination occurred or with the appropriate circuit court not later than two years from the date of the last discrimination.

For more information on filing a charge of housing discrimination under the Illinois Human Rights Act, visit dhr.illinois.gov/filing-a-charge/housing

6) Illinois prohibits counties and municipalities from creating or enforcing laws that penalize tenants who are survivors of domestic violence or sexual violence when they (or their landlord) contact police or other emergency services to prevent or respond to this conduct.

Illinois does not allow counties or municipalities to create or enforce laws that penalize tenants for:

- (1) Calling the police or emergency services to prevent or respond to domestic violence or sexual violence;
- (2) Incidents of domestic or sexual violence against a tenant, their household member, or guest at your rental place; or
- (3) Criminal activity at your rental place that is related to domestic violence or sexual violence.

If you are penalized by being evicted, terminated from your housing, or otherwise assessed fees or fines, you may file a complaint in circuit court under Section 1-2-1.5 of the Illinois Municipal Code (65 ILCS 5) & Section 5-1005.10 of the Illinois Counties Code (55 ILCS 5)

7) Utility companies are required to defer the initial credit and deposit requirements for a period of 60 days for a residential customer or applicant who is a victim of domestic violence

To exercise this right under Section 8-201.6 of the Public Utilities Act (220 ILCS 5/8-201), provide evidence of the domestic violence from an order of protection, a certifying letter from a medical provider or domestic violence shelter, or law enforcement personnel.

8) Please note that if you apply for or reside in federally subsidized housing there are additional housing rights under the Federal Violence Against Women Act (VAWA) relating to domestic violence, sexual assault, dating violence, and stalking.

Each tenant acknowledges receipt of this Page 3 of this Summary by signing below and should retain a copy for their records. See also and Sign at bottom of p. 4.

Printed Name: Rodrigo Veiga da Cunha as Signature: Rodrigo Veiga da Cunha Date: 01/06/2026

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Below is a list of free legal service providers:

Ascend Justice – Legal aid organization that provides free legal representation to survivors of gender-based violence who need to break their lease or change their locks under the Safe Homes Act. Go to ascendjustice.org/finances-housing

CARPLS – Legal hotline helps low and moderate-income residents of Cook County with free legal advice and referrals to legal organizations. CARPLS provides assistance to tenants facing eviction; helps survivors with Safe Homes Act letters; and covers private and all types of subsidized housing.

- Go to carpls.org/services/cook-county-hotline
- CARPLS Legal Hotline: (312) 738-9200

Cook County Legal Aid for Housing and Debt Hotline - Provides free legal assistance for tenants facing eviction in Cook County.

- (855) 956-5763.

Eviction Help Illinois – Provides free legal help for Illinois residents facing an eviction.

- Go to evictionhelpillinois.org

Illinois Legal Aid Online – Provides free legal information and resources in English and Spanish, including easy legal forms, sample letters and referrals to legal aid organizations.

- Go to illinoislegalaid.org

Land of Lincoln Legal Aid – Legal aid organization that provides free legal representation to survivors under the Safe Homes Act and has an eviction hotline. Land of Lincoln Legal Aid has five offices and four satellite offices that serve 65 counties throughout central and southern Illinois.

- Go to lincolnlegal.org/apply-for-legal-services
- Eviction Hotline: (855) 601-9474
- Other housing issues, call Legal Advice and Referral Center: (618) 394-7300

Legal Aid Chicago – Legal aid organization that provides free legal representation for low-income renters in Chicago and suburban Cook County. Legal Aid Chicago has a Fair Housing Project and is a HUD enforcement agency. Legal Aid Chicago provides assistance with housing issues including: subsidized housing; breaking a lease or changing locks under the Safe Homes Act; and eviction defense.

- Go to legalaidchicago.org/get-help
- Fair Housing Intake Line: (312) 423-5909

Life Span – Legal aid organization that provides free legal services to survivors of domestic violence and sexual assault who need to break their lease or change their locks under the Safe Homes Act. Life Span provides services to survivors in Chicago and suburban Cook County.

- Go to life-span.org/get-help
- Legal assistance: (312) 408-1210

North Suburban Legal Aid Clinic – Legal aid organization that provides free legal representation for low-income renters in Lake County and north suburban Cook County who are facing eviction, need to break a lease under the Safe Homes Act, or have other landlord/tenant issues. Go to nslegalaid.org/get-help/housing

Prairie State Legal Services – Provides free legal assistance to survivors under the Safe Homes Act. Prairie State Legal Services has 11 offices located in Bloomington, Galesburg, Joliet, Kankakee, Moline, Ottawa, Peoria, Rockford, Waukegan, West Suburban (West Chicago) and Woodstock.

- Go to pslegal.org/How-To-Get-Started
- Domestic Violence Line: (844) 388-7757

Each tenant acknowledges receipt of this Page 4 of this Summary by signing below and should retain a copy for their records. Sign this last page 4 and keep this summary.

Printed Name: Rodrigo Veiga da Cunha as Signature: Rodrigo Veiga da Cunha Date: 01/06/2026

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

Printed Name: _____ Signature: _____ Date: _____

E-SIGNATURE CERTIFICATE



bluemoon
SOFTWARE

This certificate is the electronic equivalent of a signature during the signing of this Document.

DOCUMENT INFORMATION

Status	Completed
Document ID	553343544
Date Submitted	01/08/2026
Total Pages	65
Forms Included	CHICAGO Apartment Lease Form, Additional Special Provisions, Addendum for Rent Concession, Additional Provisions, Liability Insurance Addendum, All-In-One Utility Addendum, Parking Addendum, Remote Control, Card or Code Access, Community Policies, Rules, & Regulations, Short-Term Subletting or Rental Prohibited, CHICAGO Animal Addendum, Addendum Regarding Recreational and Medical Marijuana Use and Landlord's Commitment to Enforcement of Chicago Drug Free Housing Addendum, Construction Addendum, Disclosure of Information on Flooding, CHICAGO Residential Ordinance Summary, Chicago Security Deposit Rate Disclosure & Acknowledgment, Lead Hazard Disclosure Addendum, Mold Information and Prevention Addendum, IEMA-OHS Radon Guide for Tenants

SIGNING PARTIES

Name	Rodrigo Veiga da Cunha
Signer Key	45d664b55d601c85e76022c2e8d4b068
IP Address	38.124.64.254
Signing Method	Blue Moon eSignature Services
Authentication Method	eSignature by email rodrigoveigac@hotmail.com
Browser	Mozilla/5.0 (Macintosh; Intel Mac OS X 10_15_7) AppleWebKit/537.36 (KHTML, like Gecko) Chrome/143.0.0.0 Safari/537.36
Signature	<i>Rodrigo Veiga da Cunha RVC</i>

Name	Laura A Vander Heyden (Resident Services Manager)
Signer Key	20428058d7c9c1e5ccf82a07e1ed0970
IP Address	23.123.95.81
Signing Method	Blue Moon eSignature Services
Authentication Method	eSignature by email laurav@ppmapartments.com
Signature	<i>Laura A Vander Heyden LVH</i>

DOCUMENT AUDIT

1	01/06/2026 07:32:24 PM CST	Rodrigo Veiga da Cunha accepted Consumer Disclosure
2	01/06/2026 07:33:21 PM CST	Rodrigo Veiga da Cunha signed CHICAGO Apartment Lease Form
3	01/06/2026 07:33:23 PM CST	Rodrigo Veiga da Cunha dated CHICAGO Apartment Lease Form

**Evidence of Bona
Fide Marital
Relationship and
Intent to Comply with
Nonimmigrant Status**

ELECTRONIC TICKET FOR MARINA THESSINGBANDEIRA

19 Jul 2025

Order ID
BIMTFD

 **Manage your
Reservation**





Thank you for choosing Copa Airlines for your travel plans. Please read these important details about your reservation and itinerary.

PASSENGER DETAILS




Name	Frequent Flyer #	Star Alliance Status	Ticket Number
MARINA THESSINGBANDEIRA			2302151236281

FLIGHT ITINERARY:





FLORIANOPOLIS(FLN) - PANAMA CITY(PTY) - Flight Number - CM 424 - Economy Class

 Departure	 Arrival	Flight Details
Friday September 5, 2025 1:25 AM FLORIANOPOLIS(FLN)	Friday September 5, 2025 6:44 AM PANAMA CITY(PTY)	Flight Duration: 7h 19m Aircraft: 7M8 Flight Operated by:  Seats Reserved: Yes - Reserve or Change Seats
 Layover Time in : 1h 11m		



PANAMA CITY(PTY) - CHICAGO(ORD) - Flight Number - CM 228 - Economy Class

 Departure	 Arrival	Flight Details
Friday September 5, 2025 7:55 AM PANAMA CITY(PTY)	Friday September 5, 2025 1:41 PM CHICAGO(ORD)	Flight Duration: 5h 46m Aircraft: 738 Flight Operated by:  Seats Reserved: Yes - Reserve or Change Seats

CHICAGO(ORD) - PANAMA CITY(PTY) - Flight Number - CM 236 - Economy Class

 Departure	 Arrival	Flight Details
Thursday November 27, 2025 6:56 AM CHICAGO(ORD)	Thursday November 27, 2025 1:22 PM PANAMA CITY(PTY)	Flight Duration: 5h 26m Aircraft: 738 Flight Operated by:  Seats Reserved: Yes - Reserve or Change Seats
 Layover Time in : 1h 54m		

PANAMA CITY(PTY) - FLORIANOPOLIS(FLN) - Flight Number - CM 423 - Economy Class

 Departure	 Arrival	Flight Details
Thursday November 27, 2025	Friday November 28, 2025	Flight Duration: 7h 14m

3:16 PM PANAMA CITY(PTY)	12:30 AM FLORIANOPOLIS(FLN)	Aircraft:7M8 Flight Operated by:  Seats Reserved: Yes - Reserve or Change Seats
-----------------------------	--------------------------------	--

AIR TRANSPORTATION CHARGES

Description	Rate
Ticket Fare MARINA THESSINGBANDEIRA	734.00 USD
BR	16.20
AH	2.50
AY	5.60
US	45.80
XA	3.71
XF	4.50
XY	7.00
YC	7.20
Total	826.51 USD

To know more about fare family details click here Copa.com

PAYMENT METHOD:

Credit Card	CAXXXXXXXXXXX9851	USD 826.51
	Expiry Date:	0329
	Authorization Code:	01935Z

A non-refundable administrative fee will be charged per-person and added to the total ticket price upon purchase of your tickets at our Sales Offices, Airports and Reservations Centers. In some countries local taxes may apply to the fee. For more information about this administrative fee, please click [here](#)

It is the passenger's responsibility to ensure to obtain and comply with the [travel requirements](#) established by the authorities of the place of origin, transit and destination. Before boarding, Copa Airlines will verify that the passenger has the necessary immigration or health requirements for the place of origin and destination. Any passenger who provides false or misleading information regarding such requirements will be responsible for any expenses incurred or fines imposed on the airline for this reason.

Please review your baggage policy for information about your baggage allowance.

Federal law in U.S. Forbids the carriage of hazardous materials aboard aircraft in your luggage or on your person. A violation can result in five years imprisonment penalties. Hazardous materials include explosives, compressed gases, flammable liquids solids, oxidizers,poisons,Corrosives and radioactive materials. Examples:Paints,lighter fluid,fireworks. There are special exceptions for small quantities (Up to 70 ounces total) of medicinal and toilet articles carried in your luggage and certain smoking materials carried on your person. For further information visit copaair.com.



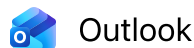
Need help?

For inquiries about reservations, charges, status of your flight and more, please visit Copa.com

Follow Us on Social Media:



This automated email has been sent to marinatbandeira@gmail.com in order to provide you with information about your trip. Please do not reply to this email using the 'Reply' button. For assistance, please contact our [Reservation Center](#). [View our Privacy Policy](#).



Chicago Boat Company: City Winery Retro Boat Reservation #12596 Created

From rentme@chicagoboatcompany.com <rentme@chicagoboatcompany.com>

Date Fri 03-Oct-25 11:54

To rodrigoveigac@hotmail.com <rodrigoveigac@hotmail.com>

**The reservation was made for:**

Customer: Rodrigo Veiga da Cunha

E-mail: rodrigoveigac@hotmail.com

Phone: (267) 902-4660

Address: 1360 N Lake Shore Dr Chicago, Illinois 60610 United States

Reservation info:

Reservation Date: Sunday 10/05/2025 from 3:30 pm to 5:00 pm

Boat: City Winery Retro Boat with capacity 4

Location: City Winery - Downtown

Occasion: Just For Fun

Promo used: none

How did you hear about us: Saw boats

Receipt:

- Card info: mastercard 9851
- Reservation price: \$299.00
- Booking fee (non-refundable): \$17.94
- Addons: \$0.00
- Promotion price: none
- Cancellation protection price: none
- Tips (%): \$
- Subtotal: \$316.94
- Tax (11.00%%): \$32.89

Total: \$349.83

We look forward to seeing you on 10/05/2025 at City Winery - Downtown!

- The Chicago Boat Company Crew

© 2025 Chicago Duffy, LLC - DBA Chicago Boat Company - Chicago Boat Rentals


Your receipt from Airbnb



Receipt ID: RCBA4PY8FR · December 8, 2025

Milwaukee

7 nights in Milwaukee

Sun, Dec 21, 2025 → Sun, Dec 28, 2025 

Entire home/apt · 3 beds · 4 guests · 1 pet

Hosted by Sarah Suzanne Risch

Confirmation code: HMDFPNKXF4

[Go to itinerary](#) · [Go to listing](#)

Travelers: Ângela Zoldan Da Veiga Cunha, Viriato Joao Leal Da Cunha, Rodrigo Veiga Da Cunha

Cancellation policy

Free cancellation before 4:00 PM on December 16. Cancel before check-in at 4:00 PM on December 21 for a partial refund.

Time shown is based on the location of the listing.

Price breakdown

\$426.71 x 7 nights	\$2,987.00
Airbnb service fee	\$421.70
Taxes	\$668.48
Total (USD)	\$4,077.18

Payment

MASTERCARD **** 0695 December 8, 2025, 7:26:10 PM GMT-3	\$4,077.18
Amount paid (USD)	\$4,077.18

Have a question?

Find details about payments and refunds in [your payments](#), or try the [Help Center](#).

About this receipt

This summary includes payment details, Airbnb service fees and taxes for your reservation. It is not intended for tax purposes. Once the trip is completed an invoice will be issued in accordance with Special Regime Authorization - SEI No. 6017.2021/0025032-5. [Learn more](#)

Occupancy taxes

Occupancy Taxes include General Sales and Use Tax (Milwaukee), General Sales and Use Tax (Wisconsin), Basic Room Tax (Wisconsin Center Tax District), Additional Room Tax (Wisconsin Center Tax District).

Airbnb Plataforma Digital Ltda.

Airbnb Plataforma Digital Ltda. is a limited payment collection agent of your Host. It means that upon your payment of the Total Fees to Airbnb Plataforma Digital Ltda., your payment obligation to your Host is satisfied. Refund requests will be processed in accordance with: (i) the Host's cancellation policy (available on the Listing); or (ii) Rebooking and Refund Policy Terms, available at www.airbnb.com/terms.

Payment processed by:

Airbnb Plataforma Digital Ltda.
Rua Aspicuelta, 422, Conjunto 51
São Paulo - SP
05433-010
Brasil

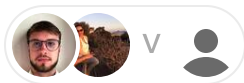
Airbnb Ireland UC
8 Hanover Quay
Grand Canal Dock, Dublin 4
D02 DP23
Ireland
VAT Number: IE 9827384L
www.airbnb.com





Home in Milwaukee

Hosted by Rebecca



Check-in

Sun, Dec 21
2:00 PM

Checkout

Sun, Dec 28
10:00 AM



Message your host

Rebecca



Your place

Lake Charm- 2 King Beds- Incredible Views

THE HERTZ CORPORATION
Web: www.hertz.com



Rental Agreement No: 370089845
Date: 12/30/2025
Document: 935003001302

Direct All Inquiries To:
THE HERTZ CORPORATION
PO BOX 26120
OKLAHOMA CITY, OK 73126-0120

CHARGE DETAIL

Renter: BANDEIRA MARIN THESSING
Account No.: 9851 MC
CDP No.: 2275776
CDP Name: HERTZ MEMBER PROGRAM 202

MARINA THESSING BANDEIRA
26-0120

RENTAL REFERENCE

Rental Agreement No: 370089845
Reservation ID: L3814461212
Frequent Traveler: ZE1

RENTAL DETAILS

Rate Plan: IN: OAUW8 OUT: OAUW8
Rented On: 12/20/2025 09:36 LOC# 226323
CHICAGO DT, IL
Returned On: 12/29/2025 18:10 LOC# 226323
CHICAGO DT, IL
Car Description: CHV TAHOE 4X4 N DDH1489
Veh. No.: 2649937
CAR CLASS Charged: L4 MILEAGE In: 23,700
Rented: T Out: 23,613
Reserved: L4 Driven: 87

MISCELLANEOUS INFORMATION

CC AUTH: STRIPE DATE: 2025/12/20 AMT: 1208.00

RENTAL CHARGES

WEEKS 1 @ 292.99 292.99
EXTRA DAYS 3 @ 58.99 176.97
SUBTOTAL 469.96
DISCOUNT 5.00% -23.50
SUBTOTAL 446.46
DAMAGE WAIVER (CDW/LDW) 262.50
LIABILITY INS. SUPPLEMENT 169.00
VEHICLE LICENSE FEE 19.80
MOTOR VEHICLE LEASE TAX 2.75
TAX 23.00% 107.24

TOTAL CHARGES 1007.75 USD

E-RETURN RECEIPT

THANK YOU FOR RENTING FROM HERTZ

Direct All Inquiries To:
THE HERTZ CORPORATION
PO BOX 26120
OKLAHOMA CITY, OK 73126-0120
UNITED STATES

Rental Agreement No: 370089845
Date: 12/30/2025
Document: 935003001302

Renter: BANDEIRA MARIN THES
Account No.: 9851 MC

Web: www.hertz.com

TOTAL CHARGES 1007.75 USD

Photos in Couple

Rodrigo Veiga and Marina Bandeira



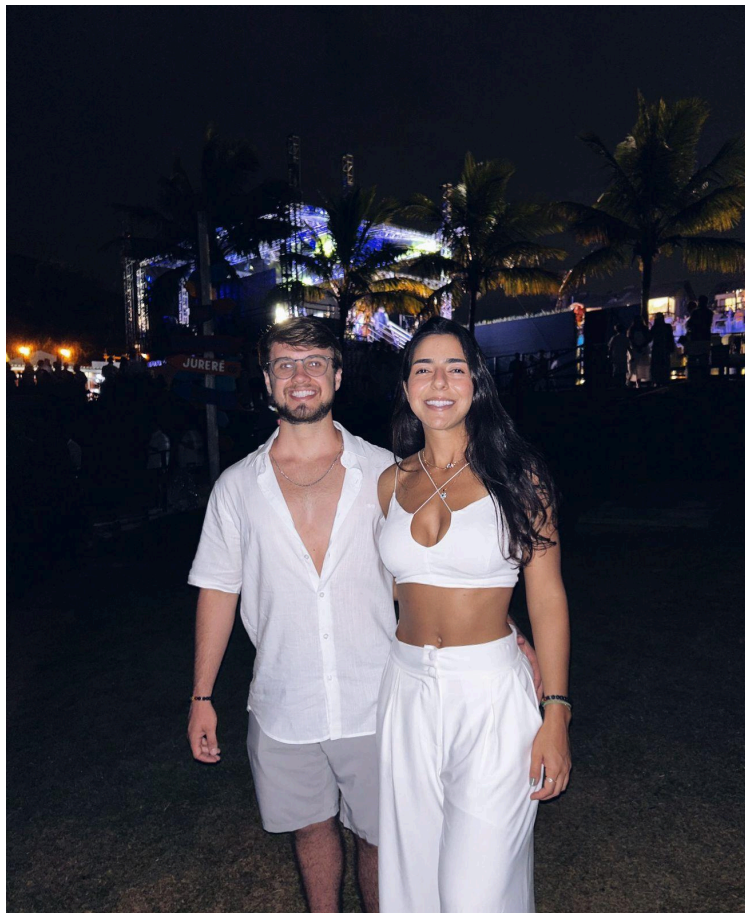
- June 2023 – First party together - Florianópolis, Brazil – Photo 1



- July 2023 – Florianópolis, Brazil – Photo 2



- July 2023 - Florianópolis, Brazil – Photo 3



- New Year's Eve – December 2023 - Photo 4



- February 2024 – New York, USA - Photo 5



- February 2024 – New York, USA - Photo 6



- February 2024 – New York, USA - Photo 7



- March 2024 – Colorado, USA – Photo 8



- March 2024 – Colorado, USA – Photo 9



- August 2024 - Urubici, Brazil - Photo 10



- August 2024 - Urubici, Brazil - Photo 11



- October 2024 – Philadelphia, USA – Photo 12



- New Year's Eve – December 2024 – Photo 13



- January 2025 - Rio Quente, Brazil - Photo 14



- June 2025 - Brazil x Poland Volleyball Game - Photo 15



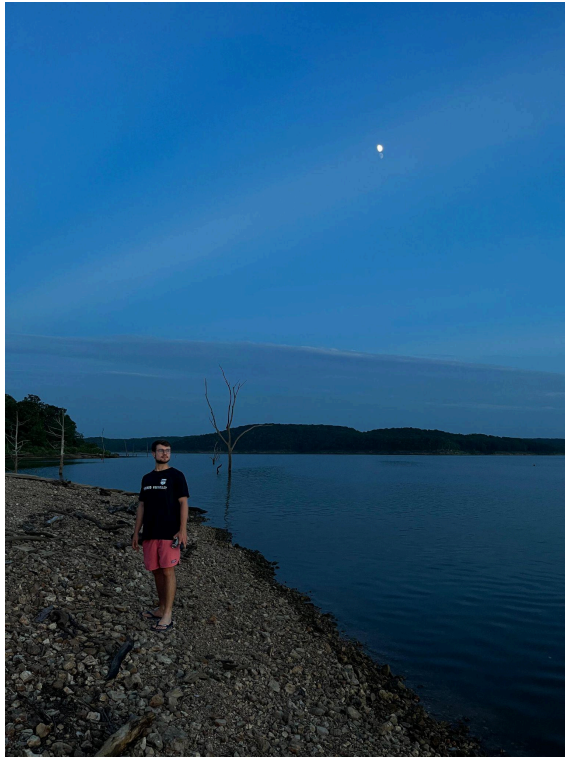
- July 2025 - Lake of the Ozarks - Missouri, USA - Photo 16



- July 2025 - Missouri, USA - Photo 17



- July 2025 - Missouri, USA - Photo 18



- July 2025 - Missouri, USA - Photo 19



- September 2025 - Hockey game, USA - Photo 20



• October 2025 - Chicago River, USA - Photo 21



• October 2025 - Halloween - Chicago, USA - Photo 22



- **November 2025 - Indiana, USA - Photo 23**



- **November 2025 - Lincoln Park Zoo - Chicago, USA - Photo 24**



- November 2025 - Millennium Park - Chicago, USA - Photo 25



- December 2025 - Clark Lake, USA - Photo 26



● December 2025 - Wisconsin, USA - Photo 27



● December 2025 - Cave Point, USA - photo 28



● New Year's Eve December 2025 – Chicago, USA – Photo 29



- **New Year's Eve December 2025 – Chicago, USA – Photo 30**



- **January 2026 - Chicago, USA - Photo 31**



- **January 2026 - Chicago, USA - Photo 32**



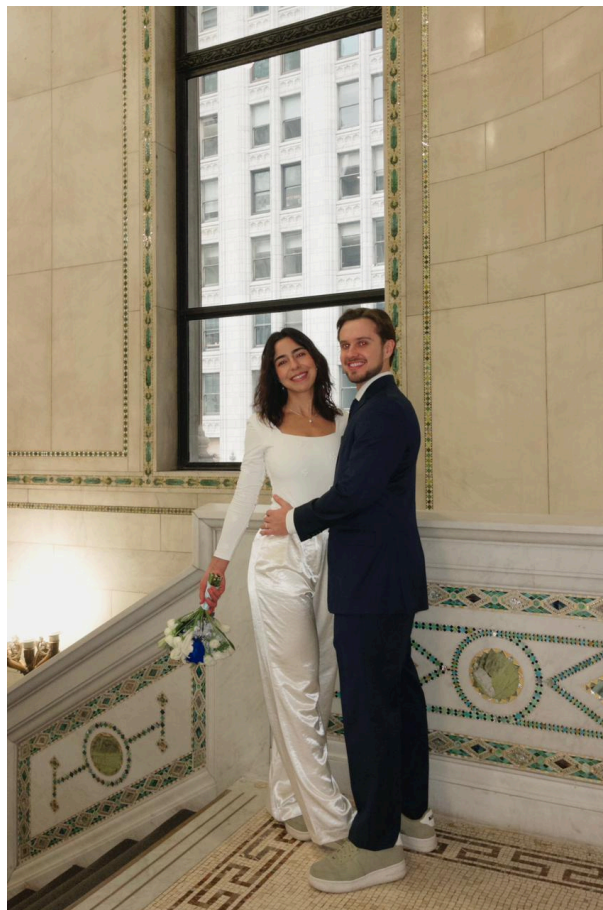
● January 2026 - Chicago, USA - Photo 33



● Marriage January 03, 2026 - Chicago, USA - Photo 34



- **Marriage January 03, 2026 - Chicago, USA - Photo 35**



- **Marriage January 03, 2026 - Chicago, USA - Photo 36**



- **Marriage January 03, 2026 - Chicago, USA - Photo 37**



- **Marriage January 03, 2026 - Chicago, USA - Photo 38**



- Marriage January 03, 2026 - Chicago, USA - Photo 39



- Marriage January 03, 2026 - Chicago, USA - Photo 40



- **Marriage January 03, 2026 - Chicago, USA - Photo 41**



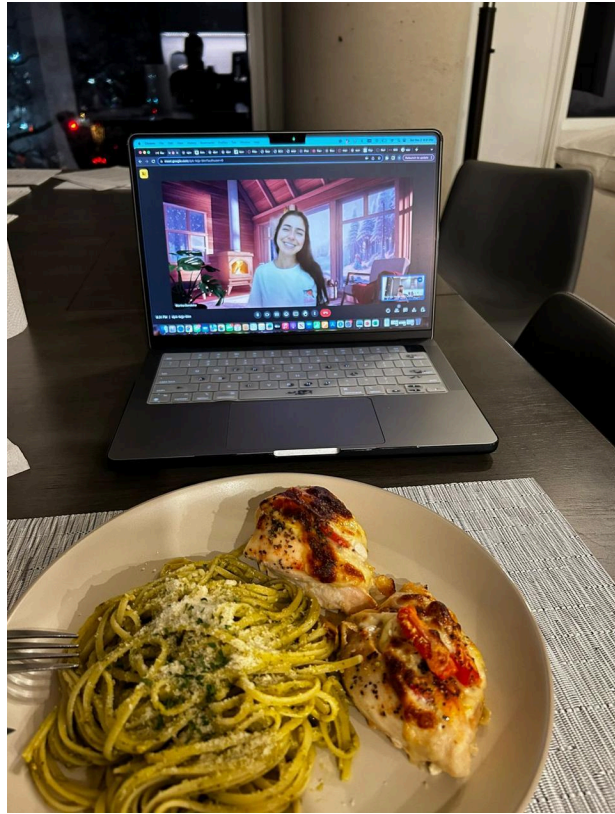
- **Post Wedding January 03, 2026 - Chicago, USA - Photo 42**



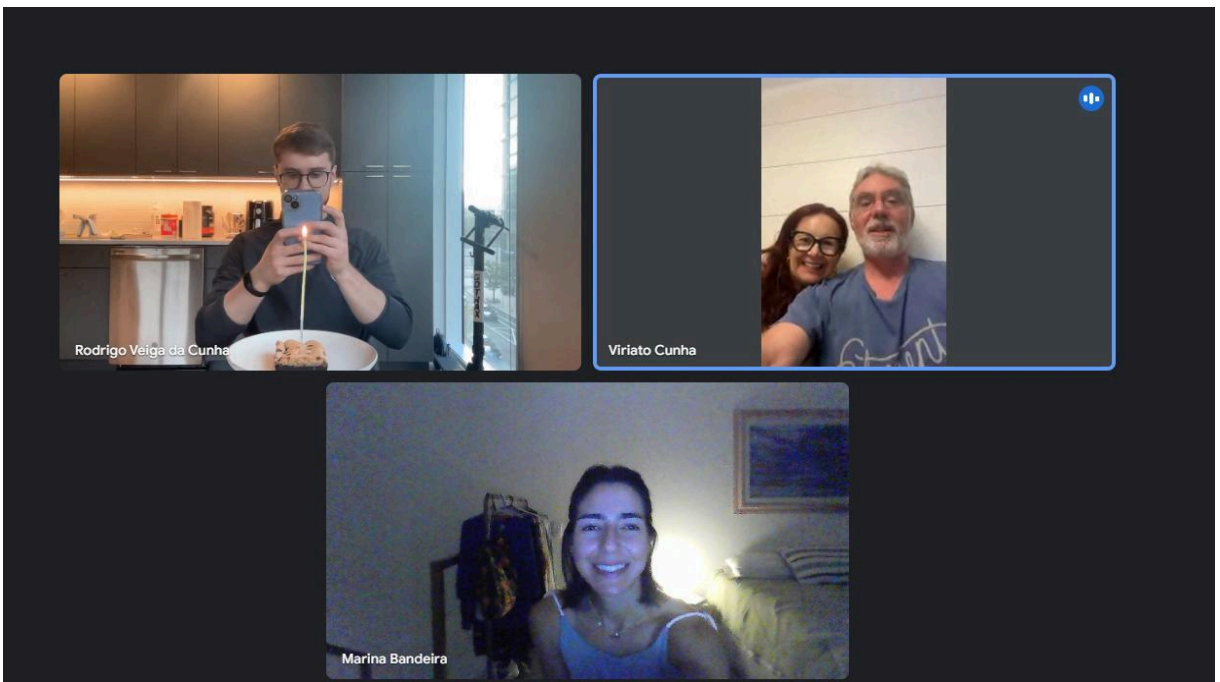
● Post Wedding January 03, 2026 - Chicago, USA - Photo 43
Juliana (friend present at the wedding) on the far left; next to her, Mariana and Rodrigo;
and beside them, Viriato and Ângela (Rodrigo's parents).



● Long Distance Call - Photo 44



● Long Distance Call - Photo 45



● Long Distance Call - Photo 46



● Long Distance Present - Photo 47



● Rodrigo and Marina with Pedro Henrique - Photo 48

I, VLADIMIR SILVA BANDEIRA, father of Marina Thessing Bandeira, hereby report what I have personally witnessed regarding my daughter's relationship with Rodrigo Veiga da Cunha.

Rodrigo and Marina met in Brazil, and from the beginning of their relationship, Rodrigo began participating in our family life. I had direct contact with him on several occasions and was able to closely observe the development of their relationship. During the time they were in Brazil, I witnessed their daily interactions, the respectful way they treated each other, and the genuine bond between them. The relationship always seemed serious and stable to me, and it appeared to be beneficial for both of them.

Even when they began living in different countries, they maintained constant contact and continued to visit each other whenever possible. The decision to get married was, in my view, simply a natural consequence of everything I have witnessed since the beginning of their relationship.

Based on my interactions and experiences with the couple, I affirm that the relationship and marriage of Marina and Rodrigo are genuine and founded on a real bond.

-----//Signature//-----

VLADIMIR SILVA BANDEIRA

SERVIDÃO FRANCISCA PEREIRA, 230, INGLESES, FLORIANÓPOLIS, SANTA CATARINA.

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.



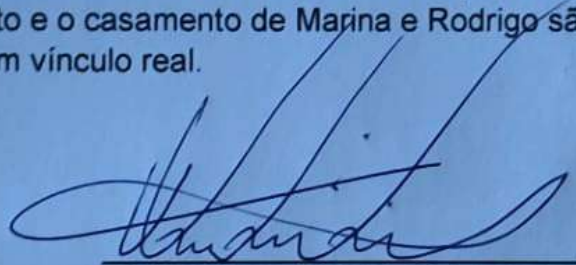
_____ Date: February 11, 2026.

Eu, VLADIMIR SILVA BANDEIRA, pai de Marina Thessing Bandeira, venho por meio desta relatar o que presenciei pessoalmente sobre o relacionamento de minha filha com Rodrigo Veiga da Cunha.

Rodrigo e Marina se conheceram no Brasil, e desde o início do relacionamento Rodrigo passou a frequentar nosso convívio familiar. Tive contato direto com ele em diversas ocasiões e pude acompanhar de perto a evolução da relação entre os dois. Durante o período em que estiveram no Brasil, observei a convivência do casal, a forma respeitosa como se tratavam e o envolvimento real entre eles. O relacionamento sempre me pareceu sério, estável e que fazia bem para os dois.

Mesmo quando passaram a viver em países diferentes, mantiveram contato constante e continuaram visitando-se sempre que possível. A decisão de se casarem foi, para mim, apenas consequência de tudo o que acompanhei desde o início.

Com base no meu convívio e nas experiências que tive com o casal, afirmo que o relacionamento e o casamento de Marina e Rodrigo são verdadeiros e baseados em um vínculo real.



VLADIMIR SILVA BANDEIRA

SERVIDÃO FRANCISCA PEREIRA, 230, INGLESES, FLORIANÓPOLIS, SC.

My name is Juliana Martins Soares de Oliveira, and I am a friend of the couple Rodrigo Veiga da Cunha and Marina Thessing Bandeira.

I was present at Rodrigo and Marina's wedding, which took place on January 3, 2026, in the United States. I attended the ceremony and had contact with family members who were present.

We met at Oak Street Beach in Chicago in May of 2025, and we quickly became close friends.

Based on what I observed during the event and through my contact with the couple, their relationship appeared stable and prosperous.

I declare that the information above is true and reflects what I personally witnessed.

Place and date: Chicago, IL - 01/30/2026



Juliana Martins Soares de Oliveira
USCIS# 214-205-317

My name is Ângela Zoldan da Veiga Cunha, and I am the mother of Rodrigo Veiga da Cunha.

As a mother, I have always been closely involved in my child's personal life, and for this reason, I consider it important to share what I have experienced and observed regarding his relationship with Marina Thessing Bandeira.

Rodrigo met Marina in Brazil in 2023. From the beginning, he spoke to me about her, and over time, I had the opportunity to meet her in person.

In August 2023, I had the pleasure of meeting Marina for the first time, whom Rodrigo introduced as his girlfriend. From that point on, our regular interactions allowed me to recognize that I was in the presence of an exceptional person. I was able to see that she and my son shared a genuine and happy connection as a couple.

Throughout their relationship, I made an effort to be present and attentive, as any mother would. I observed the stages of their relationship, including the periods when they were in different countries, and I always noticed a relationship built on respect, care, and mutual support.

Over time, Marina naturally became part of our family.

Marina began visiting our home regularly, even during the periods when Rodrigo was in the United States completing his degree.

This closer interaction allowed me to recognize how special she is and how well she and Rodrigo complement each other.

During our stay in the United States, from December 21, 2025, to January 9, 2026, I had the opportunity to spend time with Rodrigo and Marina as a couple and observe the care they have for one another.

The marriage, which took place on January 3, 2026, was a decision that, as a mother, I considered mature and consistent with everything I have observed over time. I see this union as a natural step in their lives.

Based on everything I have seen and experienced, I can affirm without a doubt that the love between Rodrigo Veiga da Cunha and Marina Thessing Bandeira is genuine.

Sincerely,

----//Signature//----

Ângela Zoldan da Veiga Cunha

CPF: 378.799.109-30

Rua Vitor Konder, 183 - Apartment 1001 - Itatiaia Building

88.015-400 - Centro - Florianópolis - Santa Catarina- 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: February 5, 2026.

Meu nome é Ângela Zoldan da Veiga Cunha, sou mãe de Rodrigo Veiga da Cunha.

Como mãe, sempre acompanhei de perto a vida pessoal do meu filho e, por isso, considero importante relatar o que vivi e observei em relação ao relacionamento dele com Marina Thessing Bandeira.

Rodrigo conheceu Marina no Brasil, no ano de 2023. Desde o início, ele passou a me falar sobre ela e, com o tempo, tive a oportunidade de conhecê-la pessoalmente.

Em agosto de 2023 tive o prazer de encontrar Marina pela primeira vez, a quem Rodrigo apresentou como sua namorada. A partir de então nosso convívio regular permitiu perceber que estava diante de uma excelente pessoa. Pude constatar que ela e meu filho compartilhavam como casal uma conexão genuína e feliz.

Ao longo do relacionamento, procurei estar presente e atenta, como toda mãe costuma ser. Acompanhei as fases do namoro, inclusive os períodos em que estavam em países diferentes, e sempre percebi uma relação baseada em respeito, cuidado e apoio mútuo.

Com o passar do tempo, Marina começou a fazer parte da nossa família de forma natural.

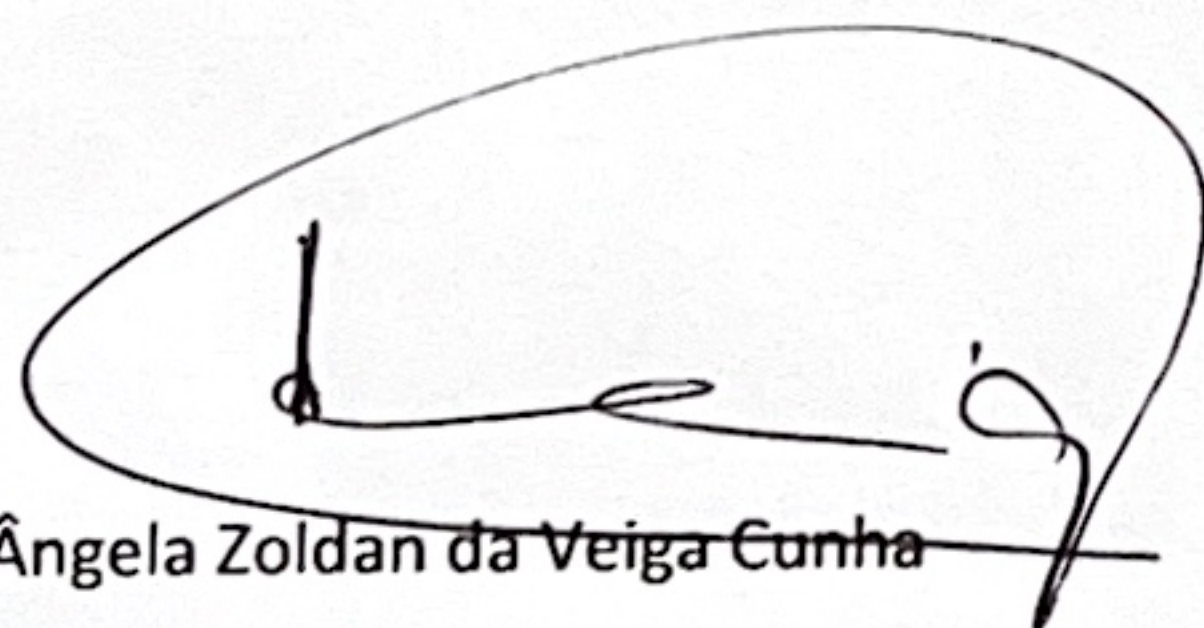
Marina passou a frequentar nossa casa com regularidade e frequência, mesmo durante os períodos em que Rodrigo estava nos Estados Unidos concluindo sua graduação.

Esse convívio mais próximo permitiu constatar o quanto ela é especial e como ela e Rodrigo se complementam.

Durante nossa estadia nos Estados Unidos, entre 21 de dezembro de 2025 e 9 de janeiro de 2026, pude conviver com Rodrigo e Marina como casal e observar o cuidado que têm um com o outro.

O casamento realizado em 3 de janeiro de 2026 foi uma decisão que, como mãe, considerei madura e coerente com tudo o que acompanhei ao longo do tempo. Vejo essa união como um passo natural na vida deles.

Com base em tudo o que vi e vivi, afirmo sem sombra de dúvidas que o amor de Rodrigo Veiga da Cunha e Marina Thessing Bandeira é verdadeiro.



Ângela Zoldan da Veiga Cunha

CPF: 378.799.109-30

Rua Vitor Konder, 183 – Ap. 1001 – Edifício Itatiaia

88.015-400 – Centro – Florianópolis – SC – Brasil

I, Pedro Henrique Malta Côrte, am a friend of Rodrigo Veiga da Cunha and Marina Thessing Bandeira.

I met both of them in Brazil, I studied with Rodrigo throughout my school years and with Marina in college. In 2023, I introduced them in the city of Florianópolis, believing that they had common interests.

The introduction took place after an event, when I invited friends to my beach house, including Marina and Rodrigo. There, they met and started talking. Shortly after, they began a relationship that naturally developed over time, which I have observed from the very beginning.

The decision to get married was consistent with the relationship I have observed since their first meeting.

I declare that this statement reflects what I have personally witnessed.

Sincerely,

January 26, 2026

-----//Signature//-----

Pedro Henrique Malta Côrte

CPF: 12839180995

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: February 5, 2026.

Eu, Pedro Henrique Malta Côrte, sou amigo de Rodrigo Veiga da Cunha e Marina Thessing Bandeira.

Conheci ambos no Brasil, estudei com Rodrigo a vida inteira no colégio, e estudei com a Marina na faculdade. No ano de 2023, fiz a aproximação entre eles, na cidade de Florianópolis, por acreditar que tinham afinidades.

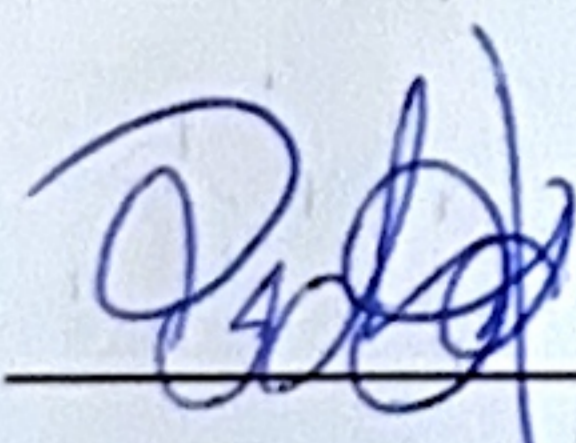
A apresentação ocorreu depois de um evento, onde eu convidei amigos para irem na minha casa de praia, incluindo Marina e Rodrigo. Lá eles se conheceram e começaram a conversar. Após isto, logo iniciaram um relacionamento que evoluiu naturalmente ao longo do tempo, acompanhei desde o início.

A decisão de se casarem foi coerente com a relação que observei desde o primeiro contato entre eles.

Declaro que esta declaração reflete o que presenciei pessoalmente.

Sinceramente,

26 de janeiro de 2026



Pedro Henrique Malta Côrte

CPF: 12839180995

I, Rodrigo Veiga da Cunha, holder of passport number GC227872, hereby declare that I currently reside in the United States under F-1 nonimmigrant status and am lawfully authorized to work pursuant to Optional Practical Training (OPT), including a duly approved STEM extension. I am employed by Deloitte Tax LLP and carry out my professional activities in full compliance with all applicable U.S. immigration laws and regulations.

I am married to Marina Thessing Bandeira, with whom I entered into a lawful marriage on January 3, 2026, in the United States. We currently reside together at 55 W Chestnut St, Unit 1603, Chicago, Illinois, 60610, where we maintain a stable shared household and a genuine marital relationship.

I first met Marina on April 30, 2023, through a mutual friend, Pedro, during a period in which I was temporarily on medical leave from my undergraduate studies at the University of Pennsylvania, recovering from an orthopedic surgery in Brazil. From the outset, our interaction was natural and consistent, marked by ease of communication, mutual respect, and shared interests. Over time, this connection developed organically into a committed relationship.


When I returned to the United States to resume my academic studies in Philadelphia, we mutually decided to continue our relationship on a long-distance basis. During that period, we remained in frequent contact through video calls, messages, and daily conversations, which allowed us to maintain emotional closeness and continuity despite the geographic distance. Whenever feasible, we made efforts to see each other in person, with Marina visiting the United States as a visitor and me traveling to Brazil when circumstances permitted, always in full compliance with applicable immigration laws.

Marina's most recent entry into the United States occurred on September 5, 2025, for the purpose of continuing a prior visit that had been interrupted due to medical reasons and to spend additional time together. At that time, I had recently relocated to Chicago. There was no prior or contemporaneous decision regarding marriage or any change of immigration status at the time of her admission.

As time progressed and through our in-person cohabitation in Chicago, our relationship continued to strengthen. Through shared daily routines and mutual support, it became clear to both of us that our relationship had reached a level of stability and commitment that naturally led us to the decision to marry. Our marriage took place during a visit by my parents to the United States, which allowed them to be present for the occasion.

Our marriage was entered into in good faith, based on mutual commitment and the sincere intent to build a life together, and not for the purpose of obtaining an immigration benefit. I have sufficient lawful income and financial resources to support myself and my spouse while she remains in the United States as my dependent. I submit this affidavit in support of Marina Thessing Bandeira's application for Change of Status from B-2 to F-2.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.



Rodrigo Veiga da Cunha
Passp. GC227872
Chicago, IL, 08/2026

I, Marina Thessing Bandeira, holder of passport number GM199748, hereby declare that I am currently in the United States under B-2 visitor status. I am married to Rodrigo Veiga da Cunha, with whom I entered into marriage on January 3, 2026, in the United States. We currently reside together at 55 W Chestnut St, Unit 1603, Chicago, Illinois, 60610.

I first met Rodrigo on April 30, 2023, my birthday, through a mutual friend, Pedro. From the beginning, our relationship developed in a natural manner, based on compatibility, trust, and consistent interaction.

When Rodrigo returned to the United States to resume his studies in Philadelphia, we decided to maintain our relationship long-distance. During that period, we remained in frequent contact through video calls and messages, and we shared simple aspects of daily life, such as having online dinners together, which helped us maintain closeness despite the distance.

Whenever possible, I visited Rodrigo in the United States as a visitor, and he returned to Brazil when he had the opportunity. On all such occasions, I strictly complied with the terms and conditions of my B-2 status, never exceeding the authorized period of stay.


On April 29, 2025, I entered the United States with the intention of a temporary visit to spend more time with Rodrigo and travel within the country. However, I had to interrupt that trip and return to Brazil to undergo a preventive medical surgery. After my initial recovery and upon receiving medical clearance, I returned to the United States on September 5, 2025. At that time, there was no defined decision regarding marriage or any change of immigration status.

As time passed and through our in-person coexistence, our relationship strengthened naturally. We then concluded that we wished to formalize our union and build a life together. Our marriage took place while Rodrigo's parents were visiting the United States, which allowed them to be present and made the occasion especially meaningful for our family.

I am fully aware that, as an F-2 dependent, I am not authorized to engage in employment in the United States, and I declare my intent to strictly comply with all immigration laws, rules, and limitations applicable to that status. I submit this affidavit in support of my request for Change of Status from B-2 to F-2.

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

February 4, 2026


Marina Thessing Bandeira
Passport No. GM199748