

DECLARATION OF FEE PAYMENT

I, _____ do hereby
[your name]

declare under penalty of perjury, that a fee of \$ _____ was paid to the

Department of Homeland Security (DHS) for (please check one):

_____ motion _____
[type of motion]

_____ application _____
[form number]

on _____
DATE

A copy of the (circle one) check / money order used to pay this fee is / is not attached.

SIGNATURE

CERTIFICATE OF SERVICE

I, _____ do hereby certify that I mailed / hand delivered (circle one) a true and correct copy of this document to the Office of Chief Counsel / ICE, 1220 SW Third Avenue, Suite 300; Portland, OR 97204 on _____ (date).

SIGNATURE
