## **University of Florida**

## **INVOICE FOR**

## U.S. Department of Homeland Security/ U.S. Citizenship and Immigration Services USCIS Processing Fees

Invoice Number:	Date:
Application/Petition	I-140 IMMIGRANT PETITION FOR ALIEN WORKER
Applicant/Petitioner	UNIVERSITY OF FLORIDA
Beneficiary's Name	
Beneficiary's Date of Birth	
REQUESTED BY:	
Department Name	
Campus Address	
Administrator's Name	
Phone	
Fax	
Email	
CHECK FOR:	
	40 payable to <i>U.S. Department of Homeland Security</i>
	07 Premium Processing fee payable to <i>U.S. Department of Homeland Security</i>