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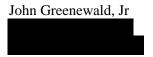
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P.O. Box 648010 Lee's Summit. MO 64064-8010



May 4, 2016 COW2016000340



#### Dear John Greenewald, Jr:

This is in response to your Freedom of Information Act/Privacy Act (FOIA/PA) request received in this office January 28, 2016 regarding change of status documents for Mohamed Atta including I-94, I-130, I-131, I-129, and I-539. The original case number, COW2016000077 was administratively closed. The new case number is COW2016000340.

We were unable to locate the subject's alien file, however, we did locate information regarding the subject in our electronic system and have provided screen-prints. We have completed the review of the screen-prints and have identified ten pages that are responsive to your request. Enclosed are ten pages released in their entirety.

In accordance with Department of Homeland Security Regulations (6 C.F.R. § 5.4(a)), USCIS uses a "cut-off" date to delineate the scope of a FOIA request by treating records created after that date as not responsive to that request. Therefore, in determining which records are responsive to your request, we included only records in the possession of this agency as of January 28, 2015, the date we began the search for records.

The enclosed record consists of the best reproducible copies available. Certain pages may contain marks that appear to be blacked-out information. If so, the black marks were made prior to our receipt of the file and are not information we have withheld under the provisions of the FOIA or PA.

If you wish to appeal this determination, you may write to the USCIS FOIA/PA Appeals Office, 150 Space Center Loop, Suite 500, Lee's Summit, MO 64064-2139, within 60 days of the date of this letter. Both the letter and the envelope should be clearly marked "Freedom of Information Act Appeal."

The National Records Center does not process petitions, applications or any other type of benefit under the Immigration and Nationality Act. If you have questions or wish to submit documentation relating to a matter pending with the bureau, you must address these issues with your nearest District Office.

All FOIA/PA related requests, including address changes, must be submitted in writing and be signed by the requester. Please include the control number listed above on all correspondence with this office. Requests may be mailed to the FOIA/PA Officer at the PO Box listed at the top of the letterhead, or sent by fax to (816) 350-5785. You may also submit FOIA/PA related requests to our e-mail address at uscis.foia@uscis.dhs.gov.

COW2016000340

Page 2

Sincerely,

Jill A. Eggleston Director, FOIA Operations

# **Details for Person**

| Applicant           |                  |
|---------------------|------------------|
| Last Name           | ATTA             |
| First Name          | MOHAMED          |
| Middle Name         | MOHAMED ELAMIR   |
| Date of Birth       | 09-01-1968       |
| Nationality Code    | EGYP             |
| Place of Birth      | Egypt (EGYP)     |
| Passport Number     | 1617066, Regular |
| Visa Control Number | 2000138 958 0003 |
| SEVIS ID            |                  |
| Issuing Post Name   | BERLIN (BRL)     |

|                   | ·          |   |
|-------------------|------------|---|
| Visa              | ,          |   |
| Class             | B1/B2      |   |
| Entries           | M          |   |
| Issue Date        | 05-18-2000 | , |
| Expiration Date   | 05-16-2005 |   |
| Foil Number       | 34137932   |   |
| Annotation Line 1 |            |   |
| Annotation Line 2 |            |   |
| Annotation Line 3 |            |   |
| Annotation Line 4 |            |   |
|                   |            |   |

| Fingerprints         |                    |
|----------------------|--------------------|
| 10 Prints            | Not Available      |
| Fingerprint 1        | Fingerprint Waived |
| Fingerprint 2        | Fingerprint Waived |
| IDENT Fingerprint ID |                    |

| Application Data    |                  |
|---------------------|------------------|
| Appointment Date    |                  |
| Birth Place City    |                  |
| Passport Number     | 1617066, Regular |
| Passport Issue Date |                  |
| Passport Expires    |                  |
| Passport City       |                  |
|                     |                  |

| Passport Country  |       |   |         | . : | <br>• . |   |
|-------------------|-------|---|---------|-----|---------|---|
| Address 1         |       |   |         |     |         |   |
| Address 2         |       |   | '       |     |         |   |
| City              |       |   |         |     |         | · |
| Country           |       |   | :       |     |         |   |
| Postal Code       |       |   |         |     |         |   |
| Barcode Number    |       |   |         |     | <br>    |   |
| Visa Type         |       |   | Regular | - ' |         |   |
| STC Name          | 2     |   |         |     | ٠       |   |
| Telephone (home)  | * 7 . |   | 9       |     |         |   |
| Telephone (work)  |       |   | ÷       |     | ·       |   |
| Telephone (other) |       |   |         |     |         |   |
| Email Address     |       |   |         |     |         |   |
| Contact Name      |       | • | -       |     |         |   |
| Contact Phone(s)  |       |   |         |     |         |   |
| Arrival Date      |       |   |         |     |         |   |
| Misc Data         |       |   |         |     | •       |   |

| Adjudication I    | History                |                 |                |                  |
|-------------------|------------------------|-----------------|----------------|------------------|
| Adjudication Date | Adjudication<br>Status | Refusal<br>Code | Section of Law | OW Approval Date |
| 05-17-2000        | Issued                 |                 | ,              |                  |

| FOIL History |            |              |                       |
|--------------|------------|--------------|-----------------------|
| FOIL Number  | Visa Class | Date Printed | FOIL Status           |
| 34137932     | B1/B2      | 05-18-2000   | Printed and passed QA |

| Nam      | echeck(s) |        |                   |                        | ,  |                    |                                |
|----------|-----------|--------|-------------------|------------------------|----|--------------------|--------------------------------|
| Seq<br># | Status    | Source | DNC/Class<br>Hits | DNC/Class<br>Worst Hit |    | <b>Entry</b>       | Hit<br>Override<br>Description |
| 1        | RECEIVED  | CLASS  | 0                 | NR                     | NR | 05-<br>17-<br>2000 | `                              |



Photograph

The image is unavailable.

Signature

## **Details for Person**

| Claims                           |   |
|----------------------------------|---|
| Receipt Number                   | SRC0027650863                                       |
| Mail Room Received Date          | 09-19-2000  |
| Activity Type                    | I539  |
| Activity Description             | Application To Extend/Change Nonimmigrant Status    |
| *** Applicant Information ***    |   |
| Applicant Last Name              | ATTA  |
| Applicant First Name             | MOHAMED   |
| Applicant Middle Name            |   |
| Applicant Date of Birth          | 09-01-1968  |
| Applicant Country of Birth       | EGYPT   |
| Applicant Alien Number           | N/A   |
| Applicant Social Security Number |   |
| Applicant Marital Status         |   |
| Applicant Address                |   |
| Street Address                   | 516 W LAUREL RD                                     |
| City                             | NOKOMIS   |
| State                            | FL  |
| Province                         |   |
| ZIP                              | 34275   |
| Country                          |   |
| *** Claims3 Information ***      |   |
| Form Number                      | I539  |
| Sequence Number                  | 0   |
| Part 2.1                         | В   |
| Case Status                      | KELA -  |
| Case Status Date                 | 03-12-2002  |
| Priority Date                    |   |
| Action Requested                 | A   |
| Date of Action                   |   |
| Benefit Applied For              | Application To Extend/Change<br>Nonimmigrant Status |
| Issue Code                       |   |
| Card Issue/Denial Date           |   |
| Denial Code                      |   |

| •   | ,                    |
|---|----------------------|
| Eligibility                                 |                      |
| Prov Code                                   |                      |
| Employment Start Date                       |                      |
| Employment End Date                         |                      |
| Person Gender                               |                      |
| Student Education Level                     |                      |
| Date of Entry                               | 06-03-2000           |
| Port of Entry                               |                      |
| Current Status                              |                      |
| Alien Citizenship Country Name              |                      |
| File Control Office                         |                      |
| Location State Name                         | FL                   |
| Location Postal Code                        | 34275                |
| Citizenship Certificate                     |                      |
| Class of Admission (I-817)                  |                      |
| Associated Receipt                          |                      |
| Current Class Status at time of Application | B2                   |
| Preference Code                             | M1                   |
| Form Status Code                            |                      |
| Soundex                                     | A300                 |
| Applicant Country Of Residence              | ,                    |
| Beneficiary County                          | 4.                   |
| Beneficiary Postal Code                     |                      |
| Beneficiary Phone                           |                      |
| Beneficiary Current Class Description       | VISITOR FOR PLEASURE |
| Beneficiary Class of Admission Description  | VISITOR FOR PLEASURE |
| Petitioner Firm Soundex                     |                      |
| Petitioner Soundex                          |                      |
| Petitioner Postal Code                      |                      |
| Action Type Code                            | -                    |
|   |                      |

| <del></del> |
|-------------|
|             |
| -           |

| Attorney Address 2          |  |
|-----------------------------|--|
| Attorney City               |  |
| Attorney State              |  |
| Attorney ZIP                |  |
| Attorney Province           |  |
| Attorney Postal Code        |  |
| Attorney Country            |  |
| Attorney Type of Appearance |  |

| Adjudication                        |   |            |   |   | , |  |
|-------------------------------------|---|------------|---|---|---|--|
| Adjudication Paragraph              | • | 44         | • |   |   |  |
| Adjudication Class                  |   |            |   |   |   |  |
| Adjudication Valid From Date        |   | 12-02-2000 |   |   |   |  |
| Adjudication Valid To Date          |   | 10-01-2001 |   |   |   |  |
| Adjudication Consulate              |   |            |   |   |   |  |
| Adjudication Port of Entry          |   |            | , |   |   |  |
| Adjudication Related Receipt Number |   |            |   | · |   |  |
| Adjudication Related Form Number    |   |            |   |   |   |  |
| Adjudication Date Filed             | 9 |            |   |   |   |  |
| Adjudication Date of Last Decision  |   |            | , |   | · |  |

| History        | •                          |                    |          |                |           |
|----------------|----------------------------|--------------------|----------|----------------|-----------|
| Action<br>Code | Description                | Date               | Location | User           | Timestamp |
| KELA           |                            | 03-<br>12-<br>2002 | SRC      | SRCJKW01<br>06 | 17:51:00  |
| KE             | DATA CHANGED IN<br>RECORD  | 03-<br>12-<br>2002 | SRC      | SRCJKW01<br>05 | 17:51:00  |
| IEA            | APPROVAL NOTICE SENT       | 07-<br>17-<br>2001 | SRC      | SRCBATCH<br>04 | 15:14:00  |
| DA             | APPROVED/NOTICE<br>ORDERED | 07-<br>17-<br>2001 | SRC      | SRCMCA01<br>03 | 13:10:00  |
| IAA            | RECEIPT NOTICE             | 09-<br>22-         | SRC      | SRCBATCH       | 10:38:00  |

|    | SENT     | 2000                   | 02                      |
|----|----------|------------------------|-------------------------|
| AA | RECEIVED | 09-<br>22- SRC<br>2000 | SRCCDD02<br>01 09:56:00 |

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## **Details for Person**

| Person Information |            |   |
|--------------------|------------|---|
| Last Name          | ATTA       |   |
| First Name         | MOHAMED    |   |
| Middle Name        |            |   |
| Date of Birth      | 09-01-1968 |   |
| Alien Number       |            |   |
| SSN                |            |   |
| Gender             |            | _ |
| Last Arrival Date  |            |   |

| Details                           |                           |
|-----------------------------------|---------------------------|
| Receipt Number                    | SRC0027650863             |
| Receive Date                      | 09-19-2000                |
| Decision Date                     |                           |
| Form Number                       |                           |
| Current Status                    | Approval - Notice Ordered |
| Mother's First Name               |                           |
| Father's First Name               |                           |
| Card Type                         |                           |
| Naturalization Certificate Number |                           |
| Sequence Number                   |                           |
| Country of Citizenship            |                           |
| Current Class                     |                           |
| Class Expires                     | :                         |
| Job Code                          |                           |
| Class Granted                     |                           |
| Education Code                    |                           |
| Field of Study                    |                           |
| Beneficiary Comp. Paid            | •                         |
| Person Type                       |                           |
| Service Center                    | TSC                       |
| Provision of Law                  |                           |
| Class Preference                  |                           |
| Valid From                        |                           |
| Valid To                          |                           |
| Part 2 1                          |                           |

| Part 2 2                         |   |
|----------------------------------|---|
| Number of Beneficiaries          |   |
| Consulate                        |   |
| Port Of Entry                    |   |
| Beneficiary Country of Birth     | : |
| Beneficiary Class of Admission   |   |
| Beneficiary Place of Last Entry  |   |
| Beneficiary Country of Residence |   |
| Beneficiary Marital Status       |   |
| Beneficiary Telephone Number     |   |
| Beneficiary Admission Number     |   |
| Representative Attorney ID       |   |
| Representative Firm Name         |   |
| Representative Volag Number      |   |

| Address     |   |          |   |   |      |  |
|-------------|---|----------|---|---|------|--|
| In Care Of  |   | <u> </u> |   |   |      |  |
| Street      | r |          |   | · |      |  |
| Street 2    |   |          |   |   |      |  |
| City        |   |          |   | • | <br> |  |
| State       |   |          |   |   |      |  |
| Zip Code    |   |          | · |   |      |  |
| Province    |   |          |   |   |      |  |
| Postal Code |   |          |   |   | ·    |  |
| Country     |   | <br>     |   |   |      |  |

| Events     |                            |                    |                |          |
|------------|----------------------------|--------------------|----------------|----------|
| Event Type | Event Description          | Date               | Receipt Number | User Id  |
| KELAB      |                            | 03-<br>12-<br>2002 | SRC0027650863  | SRCJKW01 |
| IEA        | APPROVAL NOTICE<br>SENT    | 07-<br>17-<br>2001 | SRC0027650863  | SRCBATCH |
| DA         | APPROVED/NOTICE<br>ORDERED | 07-<br>17-<br>2001 | SRC0027650863  | SRCMCA01 |
| PAYMENT    |                            | 09-<br>22-         | SRC0027650863  |          |

| ,      |                        | 2000               |               |          |
|--------|------------------------|--------------------|---------------|----------|
| IAA    | RECEIPT NOTICE<br>SENT | 09-<br>22-<br>2000 | SRC0027650863 | SRCBATCH |
| AA     | RECEIVED               | 09-<br>22-<br>2000 | SRC0027650863 | SRCCDD02 |
| DATEIN |                        | 09-<br>19-<br>2000 | SRC0027650863 |          |

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