

UNITED STATES OF AMERICA

I-797A | NOTICE OF ACTION

DEPARTMENT OF HOMELAND SECURITY
U.S. CITIZENSHIP AND IMMIGRATION SERVICES

Receipt Number SRC1900 [REDACTED]		Case Type I129 - PETITION FOR A NONIMMIGRANT WORKER
Received Date 10/10/2018	Priority Date	Petitioner [REDACTED]
Notice Date 08/22/2019	Page 1 of 2	Beneficiary [REDACTED]

[REDACTED] c/o XIAOHUI YU LAW OFFICES OF YU & ASSOCIATES 110 N WASHINGTON ST STE 328E ROCKVILLE MD 20850	Notice Type: Approval Notice Class: L1A Valid from 10/13/2018 to 10/12/2020
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The above petition and extension of stay have been approved. The status of the named foreign worker(s) in this classification is valid as indicated above. The foreign worker(s) can work for the petitioner, but only as detailed in the petition and for the period authorized. Changes in employment or training may require you to file a new Form I-129 petition. Since this employment or training authorization stems from the filing of this petition, separate employment or training authorization documentation is not required. The I-94 attached below may contain a grace period of up to 10 days before, and up to 10 days after the petition validity period for the following classifications: CW-1, E-1, E-2, E-3, H-1B, H-2B, H-3, L-1A, L-1B, O-1, O-2, P-1, P-2, P-3, TN-1, and TN-2. H-2A nonimmigrants may contain a grace period of up to one week before and 30 days after the petition validity period. The grace period is a period of authorized stay but does not provide the beneficiary authorization to work beyond the petition validity period. The decision to grant a grace period and the length of the granted grace period is discretionary, final and cannot be contested on motion or appeal. Please contact the IRS with any questions about tax withholding.

The petitioner should keep the upper portion of this notice. The lower portion should be given to the worker. He or she should keep the right part with his or her Form I-94, *Arrival-Departure Record*. The I-94 portion should be given to the U.S. Customs and Border Protection when he or she leaves the United States. The left part is for his or her records. A person granted an extension of stay who leaves the U.S. must normally obtain a new visa before returning. The left part can be used in applying for the new visa. If a visa is not required, he or she should present it, along with any other required documentation, when applying for reentry in this new classification at a port of entry or pre-flight inspection station. The petitioner may also file Form I-824, *Application for Action on an Approved Application or Petition*, to request that we notify a consulate, port of entry, or pre-flight inspection office of this approval.

The approval of this visa petition does not in itself grant any immigration status and does not guarantee that the alien beneficiary will subsequently be found to be eligible for a visa, for admission to the United States, or for an extension, change, or adjustment of status.

THIS FORM IS NOT A VISA AND MAY NOT BE USED IN PLACE OF A VISA.

The Small Business Regulatory Enforcement and Fairness Act established the Office of the National Ombudsman (ONO) at the Small Business Administration. The ONO assists small businesses with issues related to federal regulations. If you are a small business with a comment or complaint about regulatory enforcement, you may contact the ONO at www.sba.gov/ombudsman or phone 202-205-2417 or fax 202-481-5719.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

Texas Service Center U. S. CITIZENSHIP & IMMIGRATION SVC P.O. Box 851488 - DEPT A Mesquite TX 75185-1488 Customer Service Telephone: 800-375-5283	
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PLEASE TEAR OFF FORM I-94 PRINTED BELOW AND STAPLE TO ORIGINAL I-94 IF AVAILABLE

Detach This Half for Personal Records

Receipt# SRC1900 [REDACTED]
 I-94# [REDACTED]
 NAME [REDACTED]
 CLASS L1A
 VALID FROM 10/13/2018 UNTIL 10/22/2020
 PETITIONER
 [REDACTED]
 [REDACTED]
 [REDACTED]

Receipt Number [REDACTED]
 US Citizenship and Immigration Services

I94 Departure Record

Petitioner: US CENTER FOR CHINESE MEDICINE BY

14. Family Name [REDACTED]	
15. First (Given) Name [REDACTED]	16. Date of Birth [REDACTED]
17. Country of Citizenship CHINA, PEOPLE'S REPUBLIC OF	