

EXHIBIT C



**Request for Certification
of Military or Naval Service**

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

**USCIS
Form N-426**
OMB No. 1615-0053
Expires 07/31/2019

Persons who are serving or have served under specified conditions in the U.S. Armed Forces are granted certain exemptions from the general requirements for naturalization. To establish eligibility, the law requires the department with custody of the service record to certify whether the service member served honorably, and whether each separation from the service was under honorable conditions. USCIS requests certification of the service member's military service. Recruiters are **not** authorized to certify this request. **Submit this request with Form N-400, Application for Naturalization.**

Instructions: Requestors must complete **Parts 1. - 4.** Certifying officials must complete **Parts 5. - 8.**

Part 1. Information About You

1. Alien Registration Number (A-Number) (if any) 2. Military Service Number
▶ A- [REDACTED] [REDACTED]

3. Names Used During Military Service

List all names you have used, including your maiden name (if any). If you need extra space to complete this section, use the space provided in **Part 9. Additional Information.**

Family Name (Last Name)	Given Name (First Name)	Middle Name
KUTOVAYA	DARYA	[REDACTED]

4. U.S. Social Security Number (if any) 5. USCIS ELIS Account Number (if any) 6. Date of Birth (mm/dd/yyyy)
▶ [REDACTED] [REDACTED] [REDACTED]

7. Place of Birth (city and country)
[REDACTED]

8. Physical Address

Street Number and Name	Apt. Ste. Flr. Number
[REDACTED]	

Province or Region (foreign address only)	Country (foreign address only)	Postal Code (foreign address only)

Part 2. Enlistment Information

1. Where did you enlist?

City	State	Country
MOUNTAIN VIEW	CA	UNITED STATES

2. Have you reenlisted? Yes No

3. Where did you reenlist?

City	State	Country

Part 3. Periods of Military Service (To be completed by requestor)

Provide all periods of service. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

Military Service	Branch of Service	Date Service Began (mm/dd/yyyy)	Date Service Ended (mm/dd/yyyy)	Type of Service (include all active, reserve, and National Guard Service)
Military Service 1	CA NATIONAL GUARD	06/25/2020	N/A	<input type="checkbox"/> Active Duty <input checked="" type="checkbox"/> Selected Reserve of the Ready Reserve*
Military Service 2				<input type="checkbox"/> Active Duty <input type="checkbox"/> Selected Reserve of the Ready Reserve*
Military Service 3				<input type="checkbox"/> Active Duty <input type="checkbox"/> Selected Reserve of the Ready Reserve*

* Selected Reserve of the Ready Reserve Members: (1) participate in at least 48 scheduled drills or training periods during each year and serve on active duty for training at least 14 days a year or (2) participate in training at encampments, maneuvers, outdoor target practice, or other exercises at least 15 days each year. (10 U.S.C. 10143)

Part 4. Requestor's Contact Information, Certification, and Signature

Requestor's Contact Information

- Requestor's Daytime Telephone Number
- Requestor's Mobile Telephone Number (if any)
- Requestor's Email Address (if any)

Requestor's Certification

I authorize release of information contained in this request, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I certify, under penalty of perjury, that all of the information in my request and any document submitted with it were provided by me and are complete, true, and correct.

Requestor's Signature

- Requestor's Signature
 Date of Signature (mm/dd/yyyy)

NOTE TO ALL REQUESTORS: USCIS may deny your request if you do not completely fill out this request or fail to submit required documents listed in the Instructions.

Part 5. Character of Service (To be completed by Certifying Official)

State whether the requestor served honorably or is currently serving honorably for each period of military service the requestor served (refer to **Part 3. Periods of Military Service**). If you answer "No," provide details in **Part 7. Remarks**.

- Honorable Period of Military Service 1 Yes No
- Honorable Period of Military Service 2 Yes No
- Honorable Period of Military Service 3 Yes No

Part 6. Separation Information

- 1. Is the requestor separated? Yes No
 - 2. If separated, select discharge type: Honorable Other (provide details in **Part 7. Remarks**)
 - 3. Was the requestor discharged on account of alienage? Yes No
- If you answer "Yes," provide details in **Part 7. Remarks**.

Part 7. Remarks

Provide any **derogatory information** in your records relating to the service member's character, loyalty to the United States, disciplinary action, convictions, other than honorable discharges, or other matters concerning his or her fitness for citizenship. If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

No derogatory information found.

Part 8. Certification (To be completed by Certifying Official)

I am authorized to certify that the information given here concerning the service of the person named on this request is correct according to the records of the

Dept. of the Army, 165th Infantry Brigade, Fort Jackson, South Carolina

Name of Department

Official Signature

[Redacted Signature]

Name and Title

COL [Redacted] Brigade commander

Daytime Telephone Number

[Redacted Telephone Number]

Email Address (if any)

[Redacted Email Address]

Date (mm/dd/yyyy)

10/27/2020

Seal, if available (No state-issued notary public seals accepted.)

Part 9. Additional Information

If you need extra space to provide any additional information within this request, 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 request or attach a separate sheet of paper. Include 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

2. A-Number (if any) ▶ A-

3. A. Page Number B. Part Number C. Item Number

D. _____

4. A. Page Number B. Part Number C. Item Number

D. _____

5. A. Page Number B. Part Number C. Item Number

D. _____

6. A. Page Number B. Part Number C. Item Number

D. _____

