

1. Прозвішча/Family name Epstein		4. Пол/Sex		Фотадымак/Photo
2. Імя/First name Jeffrey		<input checked="" type="checkbox"/> Мужчына/male		
3. Іншыя імёны, прозвішчы, у тым ліку дзявочае/Other names and (or) maiden name NA		<input type="checkbox"/> Жаночы/female		
5. Дата нараджэння/Date of birth 20 01 1953 day month year		6. Месца нараджэння/Place of birth краіна/country USA горад/city New York вобласць (раён)/region New York		Службовыя адзнакі/ For official use
7. Цяперашняе(ія) грамадзянства(ы)/Current citizenship(s) American Калі Вы мянялі грамадзянства(ы), назавіце грамадзянства(ы), якое(ія) было(і) ў Вас раней, і вызначце дату(ы) яго(іх) змены/If you changed your citizenship(s) specify citizenship(s) you held previously and indicate dates of the change NA				Дата звароту:
8. Тып пашпарта/Type of passport <input checked="" type="checkbox"/> звычайны/ordinary <input type="checkbox"/> дыпламатычны/diplomatic <input type="checkbox"/> службовы/official <input type="checkbox"/> іншы дакумент/other document:		9. Нумар пашпарта/Passport number 516923892		Падставы: <input type="checkbox"/> сапраўды пашпарт <input type="checkbox"/> звычай падтрымка <input type="checkbox"/> фінансавы сродкі <input type="checkbox"/> страхуўка <input type="checkbox"/> інтэр'ю
		10. Кім выдадзены/Issuing authority USA Dept of State		
		11. Дзе выдадзены/Place of issue USA		
		12. Дата выдачы/Date of issue 30 06 2014 day month year		Разшэне по звароту:
		13. Тэрмін дзеяння/Valid until 29 06 2016 day month year		
14. Адрас сталлага месца жыхарства/Permanent home address краіна/country USA вобласць(раён)/region US Virgin Islands горад/city St. Thomas вуліца/street Red Hook Quarters нумар дома/building number 6100 нумар кватэры/apartment number B-3 нумар тэлефона/phone number [redacted] e-mail jeevacation@gmail.com				
15. Месца працы і службовы адрас/Place of work and work address прадпрыемства/company Southern Trust Company (STC) пасада/position President краіна/country USA вобласць (раён)/region US Virgin Islands горад/city St. Thomas вуліца/street Red Hook Quarters, B-3 нумар дома/building number 6100 нумар тэлефона/phone number [redacted]				
16. Катэгорыя візы/Category of visa <input checked="" type="checkbox"/> індывідуальная/individual <input type="checkbox"/> групавая/group		17. Тып візы/Type of visa <input type="checkbox"/> транзітная/transit <input checked="" type="checkbox"/> кароткатэрміновая/short-term <input type="checkbox"/> доўгатэрміновая/long-term		18. Колькасць уездаў/Number of entries <input type="checkbox"/> аднаразовая/single <input type="checkbox"/> двухразовая/double <input checked="" type="checkbox"/> шматразовая/multiple
19. Тэрмін дзеяння візы/Term of visa validity з/from 15 08 2014 на/until 01 09 2014 на тэрмін знаходжання/ day month year day month year for a term of stay 18 days				
20. Назва запрашаючай арганізацыі або імя запрашаючай асобы/Name of inviting organisation or person [redacted] and Fedor Chouliak				
21. Адрас запрашаючай арганізацыі або асобы/Address of inviting organization or person вобласць (раён)/region Belarus горад/city Minsk вуліца/street [redacted] нумар дома/building number [redacted] нумар кватэры/apartment number [redacted] нумар тэлефона/phone number + [redacted] нумар факса/fax number NA e-mail [redacted]				
22. Адрас знаходжання ў Беларусі/Address of stay in Belarus вобласць(раён)/region Belarus горад/city Minsk вуліца/street Internatsionalnaya нумар дома/building number 28 нумар кватэры/apartment number NA гасцініца/hotel Europe Hotel Minsk				
23. Падрабязнае тлумачэнне мэты візиту/Detailed explanation of a purpose of visit Visting a sick friend				
				Мэта візиту: <input type="checkbox"/> транзіт <input type="checkbox"/> дзелавы статус <input type="checkbox"/> удзел у спартыўных/культурных мерапрыемствах <input type="checkbox"/> праца <input type="checkbox"/> гуманітарная <input type="checkbox"/> рэлігійны статус <input type="checkbox"/> з правам працы на найму <input type="checkbox"/> турызм <input type="checkbox"/> на вучобу <input type="checkbox"/> прыватная <input type="checkbox"/> наведванне месцаў гісторыі <input type="checkbox"/> на сталое жыхарства <input type="checkbox"/> службовы <input type="checkbox"/> дыпламатычны
				Віза: № Сапраўдная: з па тэрмін знаходжання Спаганны збор:

з/from **NA** na/til **NA** дзе/where **NA** мэта візиту/purpose of visit **NA**

25. Папярэднія візіты ў Рэспубліку Беларусь на працягу бягучага года і агульны тэрмін часовага знаходжання/Previous stays in the Republic of Belarus within a current year and the aggregate term of temporary stay

1) з/from NA	na/until NA	4) з/from NA	na/until NA	агульны тэрмін часовага знаходжання/ the aggregate term of temporary stay
2) з/from NA	na/until NA	5) з/from NA	na/until NA	
3) з/from NA	na/until NA	6) з/from NA	na/until NA	

NA
days

26. Ці было Вам адмоўлена ў беларускай візе або віза была анулявана/Have your Belarusian visa request been ever refused or your visa was cancelled

так/yes не/no **NA**

27. Ці падпадалі Вы падчас ранейшага знаходжання на тэрыторыі Рэспублікі Беларусь пад адказнасць за парушэнне беларускага заканадаўства/Have you ever been charged with violating the Belarusian law while in Belarus

так/yes не/no **NA**

калі так, вызначце калі/if yes, specify when **NA** і дзе/and where **NA**

Станоўчы адказ на пытанне не вядзе да абавязковай адмовы ў выдачы візы, аднак у гэтым выпадку пажадана Ваша асабістая прысутнасць з мэтай правядзення інтэрв'ю з консульскім работнікам/Positive answer will not necessarily affect negatively the consideration of a visa request, but in this case your presence is requested for an interview with a consular officer

28. Ці былі Вы дэпартаваны з якой-небудзь краіны/Have you ever been deported from any country

так/yes не/no **NA**

калі так, вызначце калі/if yes, specify when **NA** і з якой краіны/and from which country **NA**

29. Транспартны сродак, які прадугледжаны для ўезду ў Рэспубліку Беларусь/Means of transport available for your entrance to the Republic of Belarus
Boeing 727 Private Plane, Tail#N908JE

30. Маршрут руху/Itinerary
Boeing 727 Private Plane, Tail #N908JE. Staying at Hotel Europe Minsk. Visiting sick friend, [REDACTED]

31. Сродкі да існавання падчас знаходжання ў Рэспубліцы Беларусь/Means available for stay in the Republic of Belarus

- наяўныя сродкі/cash
- крэдытныя карткі/credit cards
- дарожныя чэкі/travel cheques
- банкаўскія чэкі/bank cheques
- зваротны білет/return ticket
- пражыванне/accommodation

32. Звесткі аб дагаворы медыцынскага страхавання/Medical insurance information
страховая арганізацыя (назва, адрас, тэлефон)/insurance company (name, address, phone) **United Healthcare, PO Box 740800, Atlanta, GA**
сапраўдны з/valid from **01 11 2004** na/until **NA**

33. Сямейнае становішча/Marital status

знаходжуся ў шлюбе/married не знаходжуся ў шлюбе/single разведзены(а)/divorced удавец (удава)/widow(er)

34. Прозвішча мужа (жонкі)/Spouse's family name **NA**

35. Прозвішча мужа (жонкі) пры нараджэнні/Spouse's last name by birth **NA**

36. Імя і іншыя імёны мужа (жонкі)/Spouse's first and other names **NA**

37. Грамадзянства(ы) мужа (жонкі)/Spouse's citizenship(s) **NA**

38. Дата нараджэння мужа (жонкі)/Spouse's date of birth

39. Месца нараджэння мужа (жонкі)/Spouse's place of birth
краіна/country **NA** горад/city **NA**
вобласць (раён)/region **NA**

40. Калі Вас суправаджаюць дзеці і яны ўнесены ў Ваш пашпарт, запоўніце табліцу/If you are accompanied by children and they are included in your passport fill in the table below

Прозвішча/Family name	Імя/First Name	Дата і месца нараджэння/Date and place of birth
NA	NA	NA
NA	NA	NA
NA	NA	NA

41. Дэкларацыя/Declaration

Я заяўляю, што інфармацыя, якая змешчана ў гэтай анкеце, з'яўляецца дакладнай і праўдзівай. Я ведаю, што паведамленне непраўдзівых звестак альбо адмаўленне ад прадстаўлення неабходных дакументаў можа служыць падставай для адмовы ва ўездзе ў Рэспубліку Беларусь. Я таксама папярэджаю, што, калі гэтая інфармацыя будзе прызнана недакладнай, віза можа быць анулявана ў любы момант. Я абавязуюся па прыбыцці ў Рэспубліку Беларусь ва ўстаноўленым парадку аформіць рэгістрацыю і пакінуць яе тэрыторыю да заканчэння тэрміну дзеяння візы. Я папярэджаю аб неабходнасці мець падчас паездкі медыцынскую страхоўку, якая адпавядае заканадаўству Рэспублікі Беларусь /

I declare that information in this application is true and correct. I am aware that any false statements or refusal to submit the necessary documents may lead to withholding a permit to enter Belarus. I am also warned that if this information is found to be incorrect, the visa may be cancelled at any time. On arrival to the Republic of Belarus I will register according to the established procedure and leave the territory of the Republic of Belarus before my visa expires. I am aware that during my travel I need to have a medical insurance that corresponds to the requirements of Belarusian legislation.

42. Асабісты подпіс/Signature

43. Дата падпісання/Date of signature
04 08 2014



VISA APPLICATION

20002-8591602 \ 8/3/2014 12:17:18 AM Completed: visa.kdmid.ru

Destination: Consulate General of Russia in New York;

I declare that all data given in this form is complete and true. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under Russian law. I undertake to leave the territory of Russia upon the expiry of the visa if granted. I understand that possession of a visa does not entitle its bearer to enter Russia automatically. I will not seek compensation if I am refused to enter Russia.

**** - not to be filled by holders of diplomatic and official passports**

1. Nationality (If you formerly had USSR or Russian citizenship, please indicate when and why you lost it) UNITED STATES	6. Purpose of visit BUSINESS
	7. Category and type of visa COMMON BUSINESS

2. Last name (as in passport) EPSTEIN	8. Number of entries Single entry <input type="checkbox"/> Double entry <input type="checkbox"/> Multiple entry <input checked="" type="checkbox"/>
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3. First and middle names (as in passport) JEFFREY EDWARD	9. Date of entry in Russia 20/08/2014 (dd/mm/yy)	10. Date of departure from Russia 29/08/2014 (dd/mm/yy)
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4. Date of birth (dd/mm/yy) 20/01/1953	5. Sex M <input checked="" type="checkbox"/> F <input type="checkbox"/>
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11. Passport No 516923892	Date of issue (dd/mm/yy) 30/06/2014
Issued by US DEPARTMENT OF STATE	Valid until (dd/mm/yy) 29/06/2016

12. Type of passport diplomatic <input type="checkbox"/> official <input type="checkbox"/> tourist <input checked="" type="checkbox"/> other <input type="checkbox"/> please specify
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13. Russian institution or organization to be visited? (for tourists - name and reference number of the host tourist company, for businessmen - name of the host organization and town, for private persons - last name, first name, middle names and home address of the host) MINISTRY OF ECONOMIC DEVELOPMENT OF RUSSIAN FEDERATION, 1,3 1-YA TVERSKAYA-YAMSKAYA, MOSCOW

14. Itinerary (places of visit) MOSCOW
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**15. Do you have a medical insurance valid in Russia? yes <input checked="" type="checkbox"/> Please specify? UNITED HEALTH CARE no <input type="checkbox"/>

16. Who will pay for your trip to and stay in Russia? Independently

17. Marital status married <input type="checkbox"/> single (never married) <input checked="" type="checkbox"/> divorced <input type="checkbox"/> separated <input type="checkbox"/> widowed <input type="checkbox"/>

18. Spouse's full name (if divorced or separated, please indicate maiden name if applicable) NA	19. Spouse's date of birth (dd/mm/yy) NA
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20. Spouse's place of birth NA
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**21. Your father's full name SEYMOUR EPSTEIN	**22. Your mother's full name PAULA EPSTEIN
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23. Have you ever been issued a Russian visa? (When and where?) 01/02/2011, USA

**24. Has your passport ever been lost or stolen? yes <input checked="" type="checkbox"/> no <input type="checkbox"/>
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**25. List all countries you have visited in the last ten years and indicate the year of visit FRANCE, 28/03/2014; NORWAY, 28/11/2013; UNITED ARAB EMIRATES, 09/08/2011; TURKEY, 09/11/2010	**26. List all countries which have ever issued you a passport NONE
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**27. List your last two places of work, excluding the current one	
1. Name EPSTEIN INTERESTS Address 457 MADISON AVE, NYC, NY 10022 Your position CHAIRMAN	Phone number [REDACTED] Your chief's surname SELF Dates of joining - dismissal 01/2007 (mm/yy) 07/2014 (mm/yy)
2. Name NONE Address NONE Your position NONE	Phone number NONE Your chief's surname NONE Dates of joining - dismissal NONE (mm/yy) NONE (mm/yy)

**** - not to be filled by holders of diplomatic and official passports**

****28. List all educational institutions you ever attended, except high schools**

1. Name COOPER UNION	Address and phone number 51 ASTOR PLACE NYC [REDACTED]
Course of study PHYSICS	Dates of admission and graduation 09/1969 (mm/yy) 06/1971 (mm/yy)
2. Name NONE	Address and phone number NONE
Course of study NONE	Dates of admission and graduation NONE (mm/yy) NONE (mm/yy)

****29. List all professional, civil and charity organizations which you are / were a member of or cooperate / cooperated with**
NONE

****30. Do you have any specialized skills, training or experience related to fire-arms and explosives or to nuclear matters, biological or chemical substance? If yes, please specify**
NONE

****31. Have you ever performed a military service? If yes, indicate the country, branch of service, rank, military occupation and dates of service**
NONE

****32. Have you ever been involved in an armed conflicts, either as a member of the military service or a victim? If yes, please specify**
NONE

33. IMPORTANT! EACH APPLICANT MUST READ AND GIVE ANSWERS TO THE FOLLOWING QUESTIONS
A visa may be refused to persons who are within specific categories defined by the law as inadmissible to Russia.

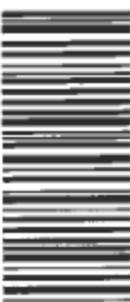
Have you ever been arrested or convicted for any offence? yes <input checked="" type="checkbox"/> When? (dd/mm/yy) 20/07/2008 Where? FLORIDA, US no <input type="checkbox"/>
Have you ever been afflicted with a communicable disease of public health significance or a dangerous physical or mental disorder? Have you ever been a drug abuser or an addict? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever been refused a Russian visa? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input checked="" type="checkbox"/>
Has your Russian visa ever been canceled? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input checked="" type="checkbox"/>
Have you ever tried to obtain or assisted others to obtain a Russian visa or enter Russia by providing misleading or false information? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever overstayed your Russian visa or stayed unlawfully in Russia? yes <input type="checkbox"/> no <input checked="" type="checkbox"/>
Have you ever been deported from Russia? yes <input type="checkbox"/> When? (dd/mm/yy) Where? no <input checked="" type="checkbox"/>

Your answer yes in item 33 does not automatically signify ineligibility for a visa. In this case you may be required to personally appear before a consular officer.

34. Name, address and phone number of a person or hotel in Russia that you plan to stay with
ARARAT PARK HAYATT MOSCOW, 4 NEGLINNAYA STREET MOSCOW, RUSSIA, 109012, [REDACTED]

35. Has this application been completed personally by you? If no, indicate the person completing this application in item 36 yes no

36. Application completed: Surname, first name
Relationship to applicant **NA** Applicant's address **NA**

 <div style="border: 1px solid black; width: 150px; height: 100px; margin: 10px auto; text-align: center; padding: 5px;">Place for photograph</div> <p>I agree to my personal data on this application form being processed and communicated to the appropriate Russian authorities for the issue of a visa.</p> <p>Date (dd/mm/yy), applicant's signature</p>	<p>37. Other names ever used (maiden name, pen-name, holy orders, et...) NONE</p> <p>38. Your permanent address, phone and fax number, E-mail LITTLE ST JAMES, USVI, [REDACTED], [REDACTED], [REDACTED]</p> <p>39. Place of birth (if born in Russia, please indicate when and what country you emigrated to) NEW YORK, USA</p> <p>40. Place of work or study, present position (name, address, phone and fax numbers, E-mail) [REDACTED], 6100 RED HOOK SUITE B3, ST THOMAS, [REDACTED]</p> <p>SIGN → in Russia now? <input type="checkbox"/> (press)</p>
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