

G-28, Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

Part 1. Notice of Appearance as Attorney or Accredited Representative

A. This appearance is in regard to immigration matters before:

I will include form number(s)

I will list the specific matter in which appearance is entered

I will list the specific matter in which appearance is entered

ALL MATTERS

B. I hereby enter my appearance as attorney or accredited representative at the request of:

Petitioner, Applicant, or Respondent. NOTE: Provide the mailing address of Petitioner, Applicant, or Respondent being represented, and not the address of the attorney or accredited representative, except when filed under VAWA.

Principal Petitioner, Applicant, or Respondent

Name (Last, First, Middle)
TARKAN TURGUT

A Number or Receipt Number, if any

AD08777
088737523

Petitioner

Applicant

Respondent

Address - Street Number and Street Name, Apt. No., City, State, Zip Code
2308 188th St SW LYNNWOOD WA 98036

Pursuant to the Privacy Act of 1974 and DHS policy, I hereby consent to the disclosure to the named Attorney or Accredited Representative of any records pertaining to me that appear in any system of records of USCIS, USCIS/IS, or USCIS/EO.

Signature of Petitioner, Applicant, or Respondent

Date 3/22/2012

Part 2. Information about Attorney or Accredited Representative (check applicable items below)

A. I am an attorney and a member in good standing of the bar of the highest court(s) of the following State(s), possession(s), territory(ies), commonwealth, or the District of Columbia.

I am not or am subject to any order of any court or administrative agency disbarring, suspending, enjoining, restraining, or otherwise restricting me to the practice of law (If you are subject to any order(s), explain fully on reverse side).

B. I am an accredited representative of the following qualified non-profit religious, charitable, social service, or similar organization established in the United States, so recognized by the Department of Justice, Board of Immigration Appeals pursuant to 8 CFR 1292.2. Provide name of organization and expiration date of accreditation:

C. I am associated with

The attorney or accredited representative of record previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative is at his or her request. If you check this item, also complete item A or B above in Part 2, whichever is appropriate.

Part 3. Name and Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before the Department of Homeland Security. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

Name of Attorney or Accredited Representative

William Frick WILLIAM FRICK

Attorney Bar Number(s), if any

26648 (WA)

Signature of Attorney or Accredited Representative

Date

22 March 2012

Complete Address of Attorney or Organization of Accredited Representative (Street Number and Street Name, Suite No., City, State, Zip Code)

2900 SE 20th Street SUITE 500 MERCER ISLAND WA 98040

Phone Number (include area code)

206 286 0167

Fax Number, if any (include area code)

206 770 7215

E-Mail Address, if any

William@crossborder.us