



Guardian Receipt I-9 Remote Processing

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FAQ

➤ **What are Receipt I-9s?**

This term is used for Electronic and New Hire Paper I-9s for which a receipt for a lost, stolen or damaged document is presented in lieu of the actual document, for purposes of Section 2 completion.

➤ **How is a receipt indicated in Section 2?**

Within the Section 2 interface is a receipt checkbox for each corresponding document list (A, B, and C). When selected, the listed document is noted as a receipt document.

FAQ

➤ How long is the receipt valid?

The employee has 90 days from the date of hire to present the actual document for which the receipt was issued.

➤ Can the I-9 be completed with a receipt?

Yes, Section 2 may be completed and signed to show timely I-9 completion, but the I-9 may not be **approved** (locked and information submitted to E-Verify, if enabled) until the employee has provided the actual document.

FAQ

➤ **How are Receipt I-9s maintained in Guardian?**

Guardian maintains the original receipt notation within the I-9 document. Utilizing electronic amendment functionality, users are guided through documenting the replacement document(s) within Section 2, resulting in an amended I-9 that reflects the receipt and replacement document information.

➤ **Are receipt I-9s visible on the Dashboard?**

Yes, I-9s that have been completed with a receipt document will display on two different Dashboard panels: Top Pending Tasks and Top I-9s Needing Further Action.

FAQ

➤ **Are users reminded of employees with receipt I-9s?**

Yes, when an I-9 is completed and a receipt provided a task is created automatically for the receipt reminder. Depending on the organization's administrative setup, reminder emails are sent to the users assigned to the employee at intervals leading up to the receipt document expiration.

➤ **Who can update receipt I-9s?**

Any user with access to the I-9 has the ability to note the replacement document information, regardless of that user's permissions or privileges.

FAQ

➤ **How can a Remote Agent update a receipt?**

Form I-9s originally completed by a remote agent are eligible for receipt update by a remote agent. A Guardian user with access to the employee record can enable remote receipt processing.

➤ **Do I have to use the remote processing option for Remote Agent I-9s?**

No, enabling remote receipt processing is optional. If a Guardian system user is available to review the employee's original document(s) in-person they may log into Guardian. Please see the Receipt I-9 Processing tutorial for additional information.

Completing Section 1

This tutorial will focus on the required steps for receipt documentation within **Section 2**. For guidance on **Section 1** completion please see the Section 1 tutorial and/or one of the Workflow tutorials.

Let's Get Started



Employment Eligibility Verification
Department of Homeland Security
U.S. Citizenship and Immigration Services

Form I-9

OMB No. 1615-0047

Expires 10/31/2022

► **START HERE:** Read [Instructions](#) carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

ANTI-DISCRIMINATION NOTICE: It is illegal to discriminate against work-authorized individuals. Employers CANNOT specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

Section 1. Employee Information and Attestation (Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)

Last Name (Family name)

Smith



First Name (Given name)

John



Middle Initial



N/A

Other Last Names Used (If Any)



N/A

Completing Section 2

Using the Agent URL link, Agent accesses employee's I-9 and clicks the **Start** button for **Section 2**.

Welcome Robert Reaume



Please review and complete the form I-9 for John Smith.

You are being asked to serve as a representative of Guardian Company to inspect the identity and employment authorization documents for John Smith by completing Section 2 and electronically signing the form I-9. Access the Instructions link above to review the specific information from Guardian Company.

Section 1

During Section 2 completion you may identify that the employee incorrectly filled out Section 1. To allow the employee to make corrections return here.

Update

Preparer/Translator

If you assisted the employee with completing Section 1 by translating the information or entering data complete this portion of the form.

Start

Section 2

To fulfill the requirements of the I-9 form, please inspect the identity and employment eligibility documents that the employee has provided and enter the information on the form as indicated.

Start

Completing Section 2

Agent selects the **Document Title** for which the receipt is being provided in lieu of.

08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
-------------------------------------	------------------------------------	-----------------------------------	-------------	-------------------------------------

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title <input type="text"/>		Document Title <input type="text"/>
Issuing Authority <input type="text"/>		<input type="text"/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		US Driver's License		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		State Photo Identification Card		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Federal, State, or Local govt ID w/photo		
Issuing Authority <input type="text"/>		School ID w/photo		
Document Number <input type="text"/>		Voter's registration card		
		US Military Card or draft record		
		Military Dependent's ID card		
		US Coast Guard Merchant Mariner Card		
		Native American Tribal Document		
		Canadian Drivers license		

Completing Section 2

Agent selects the **Replacement Receipt** checkbox.

08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
-------------------------------------	------------------------------------	-----------------------------------	-------------	-------------------------------------

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/> <input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		Document Title <input type="text"/>
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value=""/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		Document Number <input type="text" value=""/>		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value=""/> <small>The expiration date on this field must be recorded, and not expired.</small>		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				

Completing Section 2

An **Expiration Date** of 90 days from the date of hire will be automatically entered.

08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
-------------------------------------	------------------------------------	-----------------------------------	-------------	-------------------------------------

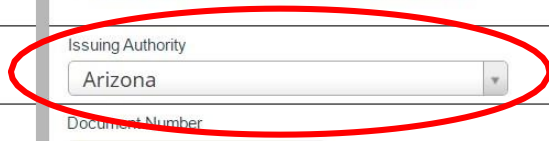
List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/>		Document Title <input type="text"/>
		<input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value=""/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		Document Number <input type="text" value=""/>		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/> <small>Auto-calculated based on validity of receipt</small>		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				

Completing Section 2

Agent selects the appropriate **Issuing Authority** for the document.

08

Section 2. Employer or Authorized Representative Review and Verification				
<i>(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")</i>				
Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/> <input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		Document Title <input type="text"/>
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value="Arizona"/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		Document Number <input type="text" value=""/> <small>Auto-calculated based on validity of receipt</small>		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				



Completing Section 2

Agent enters the **Document Number** from the receipt.

08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
-------------------------------------	------------------------------------	-----------------------------------	-------------	-------------------------------------

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/> <input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		Document Title <input type="text"/>
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value="Arizona"/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		Document Number <input type="text" value="123456789"/>		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/> <small>Auto-calculated based on validity of receipt</small>		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				

Completing Section 2

The system will automatically prepend **Receipt:** to the **Document Number** field.

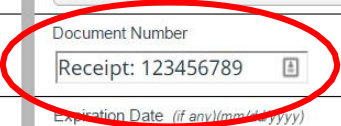
08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR examine a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents")

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	M.I. N/A	Citizenship/Immigration Status 1
-------------------------------------	------------------------------------	-----------------------------------	-------------	-------------------------------------

List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/>		Document Title <input type="text"/>
		<input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value="Arizona"/>		Issuing Authority <input type="text"/>
Document Number <input type="text"/>		Document Number <input type="text" value="Receipt: 123456789"/>		Document Number <input type="text"/>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/> <small>Auto-calculated based on validity of receipt</small>		Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				



Completing Section 2

The previous steps may be repeated for another document, if the employee provided multiple document receipts to satisfy the Section 2 requirements (i.e., both List B and List C).

08

Section 2. Employer or Authorized Representative Review and Verification

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee providing a document from List A OR examine a combination of one document from List B and one document from List C as indicated below.)

Employee Info from Section 1	Last Name (Family Name) Andrews	First Name (Given Name) Robert	W-1 N/A	Citizenship/Immigration Status 1
List A Identity and Employment Authorization	OR	List B Identity	AND	List C Employment Authorization
Document Title <input type="text"/>		Document Title View Sample Document <input type="text" value="US Driver's License"/> <input checked="" type="checkbox"/> Replacement Receipt <input type="checkbox"/> I Confirm List B Document Contains Valid Photo		Document Title View Sample Document <input type="text" value="Social Security Card (Unrestricted)"/> <input checked="" type="checkbox"/> Replacement Receipt
Issuing Authority <input type="text"/>		Issuing Authority <input type="text" value="Arizona"/>		Issuing Authority <input type="text" value="Social Security Administration"/>
Document Number <input type="text"/>		Document Number Receipt: 123456789 <input type="button" value="🔗"/>		Document Number Receipt: 123456789 <small>Social Security Number</small>
Expiration Date (if any)(mm/dd/yyyy) <input type="text"/>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/> <small>Auto-calculated based on validity of receipt</small>		Expiration Date (if any)(mm/dd/yyyy) <input type="text" value="4/3/2017"/> <input type="checkbox"/> N/A <small>Auto-calculated based on validity of receipt</small>
Document Title <input type="text"/>		Additional Information <input type="text"/>		
Issuing Authority <input type="text"/>				

Completing Section 2

Agent enters their information into the **Signature** section.

Expiration Date <i>(if any)</i> (mm/dd/yyyy)	
Document Title	
Issuing Authority	
Document Number	
Expiration Date <i>(if any)</i> (mm/dd/yyyy)	

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): 01/17/2017 ⓘ (See instructions for exemptions)

Signature of Employer or Authorized Representative		Date (mm/dd/yyyy):	Title of Employer or Authorized Representative		
Last Name of Employer or Authorized Representative		First Name of Employer or Authorized Representative		Employer's Business or Organization Name	
				Guardian Company	
Employer's Business or Organization Address (Street Number and Name)			City or Town	State	Zip Code
123 Elm			Phoenix	AZ	85201

Go Back

Sign

Completing Section 2

Agent clicks the **Sign** button once Section 2 has been completed.

Expiration Date <i>(if any)</i> (mm/dd/yyyy)	<input type="text"/>
Document Title	<input type="text"/>
Issuing Authority	<input type="text"/>
Document Number	<input type="text"/>
Expiration Date <i>(if any)</i> (mm/dd/yyyy)	<input type="text"/>

Certification: I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

The employee's first day of employment (mm/dd/yyyy): (See instructions for exemptions)

Signature of Employer or Authorized Representative		Date (mm/dd/yyyy):	Title of Employer or Authorized Representative <input type="text" value="HR Manager"/>	
Last Name of Employer or Authorized Representative <input type="text" value="Doe"/>	First Name of Employer or Authorized Representative <input type="text" value="John"/>	Employer's Business or Organization Name <input type="text" value="Guardian Company"/>		
Employer's Business or Organization Address (Street Number and Name) <input type="text" value="123 Elm"/>		City or Town <input type="text" value="Phoenix"/>	State <input type="text" value="AZ"/>	Zip Code <input type="text" value="85201"/>

[Go Back](#) [Sign](#)

Completing Section 2

Agent verifies their name and accepts the Signature agreements by clicking the provided checkboxes.

Employer's business or organization Address (Street number and name)

123 Elm

City or town

Phoenix

Electronic Signature

To electronically sign this document, please read and check the boxes next to the following statements, enter the pin number provided, and click the **Electronically Sign** button.

- My name is **John Doe**, and I am acting as the authorized representative of the employer, **Guardian Company**, for purposes of completing section 2 of this Form I-9.
- I attest under penalty of perjury that I have examined the document(s) presented by **John Smith**, the documents I entered in Section 2 appear to be genuine and to relate to the employee named, and to the best of knowledge the employee is authorized to work in the United States.
- I understand that by typing the pin number indicated below and clicking on the **Electronically Sign** button, that I am electronically signing this document. My electronic signature will be binding as though I had physically signed this document by hand.

Your PIN:

1112

Enter PIN:

1112

Electronically Sign

Go Back

Completing Section 2

Agent enters the generated PIN number.

Employer's business or Organization Address (Street Number and Name)	City or town	State	Zip Code
123 Elm	Phoenix	AZ	85201

Electronic Signature

To electronically sign this document, please read and check the boxes next to the following statements, enter the pin number provided, and click the **Electronically Sign** button.

- My name is **John Doe**, and I am acting as the authorized representative of the employer, **Guardian Company**, for purposes of completing section 2 of this Form I-9.
- I attest under penalty of perjury that I have examined the document(s) presented by **John Smith**, the documents I entered in Section 2 appear to be genuine and to relate to the employee named, and to the best of knowledge the employee is authorized to work in the United States.
- I understand that by typing the pin number indicated below and clicking on the **Electronically Sign** button, that I am electronically signing this document. My electronic signature will be binding as though I had physically signed this document by hand.

Your PIN:

1112

Enter PIN:

1112

Electronically Sign

Go Back

Completing Section 2

Agent clicks **Electronically Sign**.

Employer's business or Organization Address (Street Number and Name)	City or town	State	Zip Code
123 Elm	Phoenix	AZ	85201

Electronic Signature

To electronically sign this document, please read and check the boxes next to the following statements, enter the pin number provided, and click the **Electronically Sign** button.

- My name is **John Doe**, and I am acting as the authorized representative of the employer, **Guardian Company**, for purposes of completing section 2 of this Form I-9.
- I attest under penalty of perjury that I have examined the document(s) presented by **John Smith**, the documents I entered in Section 2 appear to be genuine and to relate to the employee named, and to the best of knowledge the employee is authorized to work in the United States.
- I understand that by typing the pin number indicated below and clicking on the **Electronically Sign** button, that I am electronically signing this document. My electronic signature will be binding as though I had physically signed this document by hand.

Your PIN:

1112

Enter PIN:

1112

Electronically Sign

Go Back

Completing Section 2

Agent clicks **Done**.



I-9 Verification Completed



Congratulations, you successfully completed the Form I-9 process for the employee.

Thank you for assistance with this process. Please click the **Done** button to notify the organization that the I-9 is complete, then close the window

Done

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Monitoring Receipt I-9s

Receipt I-9s can be monitored from the Dashboard with the **Top I-9s Needing Further Action** or the **Top Pending Tasks** panel.

Guardian Company: Reaume, Robert



Dashboard:

- Employee Group
- Location

My Managed Groups

Refresh All

I-9 and E-Verify Compliance System

Top I-9s Needing Further Action

View All

	Date I-9 Created	Employee Name	Reason	Date Expires	Days Left
	01/03/2017	Andrews, Robert	Receipt	04/03/2017	90

Top Pending Tasks

View

	Reminder Date	Subject	Employee Name	Expiry Date
	03/04/2017	Receipt Reminder	Andrews, Robert	04/03/2017



Dashboard

Start I-9

E-Verify

Reports

Employees

I-9 Forms

Tasks

Charts & Graphs

Announcements

Help

My Settings

Administration

Logout

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Monitoring Receipt I-9s

Once the employee has received their original document(s) click the **Date I-9 Created**, or search for the employee's I-9 by using the **Employees** or **I-9 Forms** tabs on the left navigation menu.

Guardian Company: Reaume, Robert

acme® Dashboard: Employee Group Location Refresh All

I-9 and E-Verify Compliance System

Top I-9s Needing Further Action

Date I-9 Created	Employee Name	Reason	Date Expires	Days Left
01/03/2017	Andrews, Robert	Receipt	04/03/2017	90

Top Pending Task


Reminder D	Receipt Reminder	Andrews, Robert	04/03/2017
03/04/2017			

- Dashboard
- Start I-9
- E-Verify
- Reports
- Employees
- I-9 Forms
- Tasks
- Charts & Graphs
- Announcements
- Help
- My Settings
- Administration
- Logout

Enabling Remote Processing

From the I-9 Details tab, click the **Enable** button if you would like to have an **Agent** conduct the review and amendment of the employee's document information. If you instead wish to process the Receipt in-person, see the Receipt I-9 Processing tutorial.

Guardian Company: Reaume, Robert

acme  I-9 for Andrews, Robert

I-9 and E-Verify Compliance System

- Dashboard
- Start I-9
- E-Verify
- Reports
- Employees
- I-9 Forms
- Tasks
- Charts & Graphs
- Announcements
- Help
- My Settings
- Administration
- Logout

Details | OnDocs | Issues | Amendments


I-9 Overview

This I-9 is not ready for Approval.

This I-9 has a pending receipt attached to it, and cannot be approved at this time. Please process each receipt by clicking the **Update List** button in the **Receipts** section below. Then **Approve Receipt Changes** in that section in order to finalize the update.

Since this I-9 has been processed by a **Remote Agent** you may enable or disable remote processing of receipts by clicking the button in the **Receipts** section.

I-9

 I-9 No: **198,620 (Primary)** Version: **1/19/17**
Type: **Electronic I-9** Expires: **04/04/2017**
Date Completed: **01/04/2017**
Date approved:


Receipts

List B Receipt has not been updated

Update List B Receipt

Remote processing of Receipts: **Enable**

Section 2

 **Andrews, Robert**
Hired: 01/04/2017

Signed: **John Doe**
01/04/2017 @ 06:53:22

View Section 2

Sending Agent Instructions

Click the **Generate Agent E-Mail** button.

Guardian Company: Reaume, Robert

acme®

I-9 for Andrews, Robert

I-9 and E-Verify
Compliance System

View Employee

Refresh

Update and Go Back

Update Info

Go Back

Delete

Details

OnDocs

Issues

Amendments

I-9 Overview

This I-9 is not ready for Approval.

This I-9 has a pending receipt attached to it, and cannot be approved at this time.

Please process each receipt by clicking the **Update List** button in the **Receipts** section below.

Then **Approve Receipt Changes** in that section in order to finalize the update.

Since this I-9 has been processed by a **Remote Agent** you may enable or disable remote processing of receipts by clicking the button in the **Receipts** section.

I-9



I-9 No: **198,620 (Primary)**

Version: **1/19/17**

Expires: **04/04/2017**

Date Completed: **01/04/2017**

Date approved:

Type: **Electronic I-9**

Receipts

List B Receipt has not been updated

Update List B Receipt

Remote processing of Receipts:

Agent Instructions:

E-Mail History: None

- Dashboard
- Start I-9
- E-Verify
- Reports
- Employees
- I-9 Forms
- Tasks
- Charts & Graphs
- Announcements
- Help
- My Settings
- Administration
- Logout

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Sending Agent Instructions

A customizable email template is displayed that includes the URL for the Agent to amend the employee's document information. Enter the Agent's email address in the **To/Regarding** field.

Guardian Company: Reaume, Robert

acme[®]

I-9 and E-Verify
Compliance System



Dashboard

Start I-9

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Charts & Graphs

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Logout



E-Mail

Details

Employee: **Andrews, Robert**

Date/Time Entered: 01/04/2017 07:16:17.19733 @ 07:16:17

Entered By: Reaume, Robert

Subject/Reference: ~~Remote Agent Instructions~~

To/Regarding:

E-Mail History: This E-Mail has not yet been sent!

Send or Edit E-Mail

[Print Preview](#)



E-Mail

Please use the link below to access the online system to document the receipt replacement documents for form I-9.

https://dev1.perfectcompliance.com/4DCGI/WEB_Log_Login/AGT/bw086a527679a397

Update and Go Back

Update Info

Go Back

Delete This E-Mail

Created: 01/04/2017 @ 07:16:17

Last Modified: 01/04/2017 @ 07:16:17

Sending Agent Instructions

Click the **Send or Edit E-Mail** button.

Guardian Company: Reaume, Robert

acme[®]

I-9 and E-Verify
Compliance System



Dashboard

Start I-9

E-Verify

Reports

Employees

I-9 Forms

Tasks

Charts & Graphs

Announcements

Help

My Settings

Administration

Logout



E-Mail

Details

Employee: **Andrews, Robert**

Date/Time Entered: 01/04/2017 07:16:17.19733 @ 07:16:17

Entered By: Reaume, Robert

Subject/Reference: Remote Agent Instructions

To/Regarding:

E-Mail History: This E-Mail has not yet been sent!

[Send or Edit E-Mail](#) [Print Preview](#)



E-Mail

Please use the link below to access the online system to document the receipt replacement documents for form I-9.

https://dev1.perfectcompliance.com/4DCGI/WEB_Log_Login/AGT/bw086a527679a397

Update and Go Back

Update Info

Go Back

Delete This E-Mail

Created: 01/04/2017 @ 07:16:17

Last Modified: 01/04/2017 @ 07:16:17

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Sending Agent Instructions

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- Announcements
- Help
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- Logout

E-Mail Preview

From: mreaume@lawlogix.com
To: mreaume@lawlogix.com
Subject: Remote Agent Instructions

Body: **B** *I* U **ABC** **x₂** **x⁴** [List Icons] Font Size [Dropdown] Font Family [Dropdown] [Undo] [Redo]

Please use the link below to access the online system to document the receipt replacement documents for form I-9.
https://dev1.perfectcompliance.com/4DCGI/WEB_Log_Login/AGT/bw086a527679a397

Send the E-Mail Save E-Mail Only Cancel

Edit the email if desired. The template can be customized from the **Administration** tab on the left. Click **Send the E-Mail**.

Sending Agent Instructions

Click **Go Back** to return to the employee's I-9 Details tab.

Guardian Company: Reaume, Robert

acme®

I-9 and E-Verify
Compliance System



Dashboard

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Your E-Mail was sent.



E-Mail

Details

Employee: **Andrews, Robert**

Date/Time Entered: 01/04/2017 07:16:17.19733 @ 07:16:17

Entered By: Reaume, Robert

Subject/Reference: Remote Agent Instructions

To/Regarding: rreaume@lawlogix.com

E-Mail History: Sent 01/04/2017 @ 07:26:06 to rreaume@lawlogix.com

Send or Edit E-Mail

[Print Preview](#)



E-Mail

Please use the link below to access the online system to document the receipt replacement documents for form I-9.

https://dev1.perfectcompliance.com/4DCGI/WEB_Log_Login/AGT/bw086a527679a397

Update and Go Back

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Delete This E-Mail

Created: 01/04/2017 @ 07:16:17

Last Modified: 01/04/2017 @ 07:26:06

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Sending Agent Instructions

The previous steps can be repeated, to re-send the Agent E-Mail, if needed.

Guardian Company: Reaume, Robert

acme®

I-9 for Andrews, Robert

I-9 and E-Verify Compliance System

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I-9 Overview

This I-9 is not ready for Approval.

This I-9 has a pending receipt attached to it, and cannot be approved at this time.

Please process each receipt by clicking the **Update List** button in the **Receipts** section below.

Then **Approve Receipt Changes** in that section in order to finalize the update.

Since this I-9 has been processed by a **Remote Agent** you may enable or disable remote processing of receipts by clicking the button in the **Receipts** section.

I-9



I-9 No: **198,620 (Primary)**

Version: **1/19/17**

Expires: **04/04/2017**

Date Completed: **01/04/2017**

Date approved:

Type: **Electronic I-9**

Receipts

List B Receipt has not been updated

Update List B Receipt

Remote processing of Receipts:

Agent Instructions:

E-Mail History: Sent: 01/04/2017 @ 07:26:06 to rreaume@lawlogix.com

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Updating Receipt I-9

The Agent clicks the URL link provided via email, and carefully inspects the employee's document and enters the **New Values**. Fields can only be amended once, so take care in entering the correct values. Click the **Update Info** button when finished.

I-9 Receipt Replacement

Jane Smith originally provided a receipt for Form I-9 purposes. Now the replacement document information must be provided to **Corporation** to update the employment authorization and/or identity document(s) by providing the document number and expiration date.

Update Receipt Information

Carefully inspect the document and enter the new values. Fields can only be amended once so ensure you are entering the correct values.

List B - Identity Document

Document Type: **US Driver's License**

Issuing Authority: **Arizona**

Document Number

B123456789

Expiration Date

05/05/2031

Document contains valid photo

Update Information

Retaining Document

If enabled, the Agent uploads a copy of the replacement document and clicks **Continue**.

Update Information

Upload New Supporting Document(s)

Please upload an image of the document.

US Driver's License



Delete

Continue

Approving Receipt Changes

The Agent enters their name, accepts the agreement by clicking the checkboxes.

Electronically Sign

Electronic Signature of Authorized Representative

To electronically sign this document, please provide your name, read and check the boxes next to the following statements, and enter a PIN of your choice.

First Name

Emily

Last Name

Agent

- By checking this box, I affirm that I am acting as the authorized representative of the employer, **ABC Corporation**, for purposes of updating this Form I-9.
- By checking this box, I attest under penalty of perjury that I have examined the replacement document(s) presented by **Jane Smith**, and the document(s) appear to be genuine and relate to the employee named.
- By checking this box, I consent to provide an electronic signature in connection with this Form I-9 update. I understand that my electronic signature will be binding as though I had physically signed this document by hand, and my initials and today's date will appear next to each updated entry on the Form I-9.

Please enter a signature PIN of your choice and click 'Electronically Sign' to complete your electronic signature.

Enter PIN



Approving Receipt Changes

The Agent enters a PIN of their choosing and clicks **Electronically Sign** to approve the amendments.

Electronic Signature of Authorized Representative

To electronically sign this document, please provide your name, read and check the boxes next to the following statements, and enter a PIN of your choice.

First Name

Emily

Last Name

Agent

- By checking this box, I affirm that I am acting as the authorized representative of the employer, **ABC Corporation**, for purposes of updating this Form I-9.
- By checking this box, I attest under penalty of perjury that I have examined the replacement document(s) presented by **Jane Smith**, and the document(s) appear to be genuine and relate to the employee named.
- By checking this box, I consent to provide an electronic signature in connection with this Form I-9 update. I understand that my electronic signature will be binding as though I had physically signed this document by hand, and my initials and today's date will appear next to each updated entry on the Form I-9.

Please enter a signature PIN of your choice and click 'Electronically Sign' to complete your electronic signature.

Enter PIN

01234546



Electronically Sign

Approving Receipt Changes

The Agent is finished and can close the browser.



✓ Thank you, you have successfully completed the receipt replacement update.

Approving the I-9

Open the employee's I-9 **Details** tab and click **Mark Approved**.

Guardian Company: Reaume, Robert

acme®



I-9 for Andrews, Robert

I-9 and E-Verify Compliance System



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I-9 Overview

View

This I-9 is ready for Approval.

Before clicking the **Mark Approved** button, you should click the [Review the I-9](#) link to review the final I-9 for mistakes.

Please check the documents provided by the employee and compare the information on those documents against the completed I-9.

You can correct errors in Sections I and II by viewing those sections and making changes.

Changes to Section 1 will require the electronic signature of the employee.

Once approved, this form will be permanently locked, and its' data will be sent to E-Verify. Any further changes will require either additional Section III entries or an entirely new I-9 form.

I-9



I-9 No: **198,640 (Primary)**

Type: **Electronic I-9**

Version: **1/19/17**

Expires:

Date Completed: **01/04/2017**

Date approved:

Mark Approved

E-Verify



Employee is eligible for E-Verify

Print Center



View I-9



Employee Receipt



Preparer/Translator Receipt

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Approving the I-9

When ready click **Approve This I-9**, which will “lock” the form. The I-9 cannot be edited after it has been approved, except by using the **Amendments** tool. Approval permissions may be restricted to only certain Guardian users.

Guardian Company: Reaume, Robert

acme® I-9 for Andrews, Robert

I-9 and E-Verify Compliance System

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Details | OnDocs | Issues | Amendments

Approve I-9

Instructions

Please note:


You are about to approve this *Electronic I-9* for **Robert Andrews**.

By clicking the **Approve This I-9** button below you will be making sections 1 & 2 of this I-9 form permanent.

Please make sure you have reviewed the I-9 form completely before approving this submission. Compare the information provided to that of the original documents (if you still have them) or review the I-9 documents listed below (if any).




To view the completed I-9 form one last time, [Review the I-9](#).

Click the **Cancel** button below to return to the previous screen if you need to make changes or further review this I-9.

 Employee is eligible for E-Verify.

[View I-9](#) [Cancel](#) [Approve This I-9](#)

I-9 OnDocs

Date Created	Time Created	File Type	Subject Reference	File Size (KB)
01/04/2017	06:35:55	 Adobe Acrobat	I9 #198619 Snapshot [Mark Completed]	280.3
01/04/2017	06:29:23	 Adobe Acrobat	I9 #198619 Snapshot [Approve Amendments!]	280.3
01/04/2017	06:28:58	 Adobe Acrobat	I9 #198619 Snapshot [Mark Completed]	280.2

Submit to E-Verify

E-Verify

Employees subject to E-Verify are submitted automatically. Utilize the late submission option 'Other' and indicate 'Awaiting actual document.'



Attention Required: Late Submission Reason Required

E-Verify requires a reason why this employee's I-9 is being submitted more than 3 days after start. Please review and inform E-Verify of the reason.

E-Verify Requires a Reason for Late Submission

E-Verify requires new employees to be submitted within 3 days of being hired.

Employee Hired On
07/01/2021

Submitted to E-Verify
On
09/09/2021

Please specify the reason that this submission is overdue:

- Awaiting Social Security Number
- Technical Problems (i.e. system outage, internet down)
- Audit Revealed That New Hire Was Not Run
- Other (must specify reason)

Awaiting actual document

What's next?

If an E-Verify case is submitted a variety of initial case statuses may be returned, including:

- Employment Authorized
- Tentative Non-Confirmation (TNC)
- Verification in Process

Please see the E-Verify tutorials for additional information on handling the different E-Verify case scenarios.

Confidential User Guide

Please do not distribute this document outside of your organization without our written permission.

Thank you.