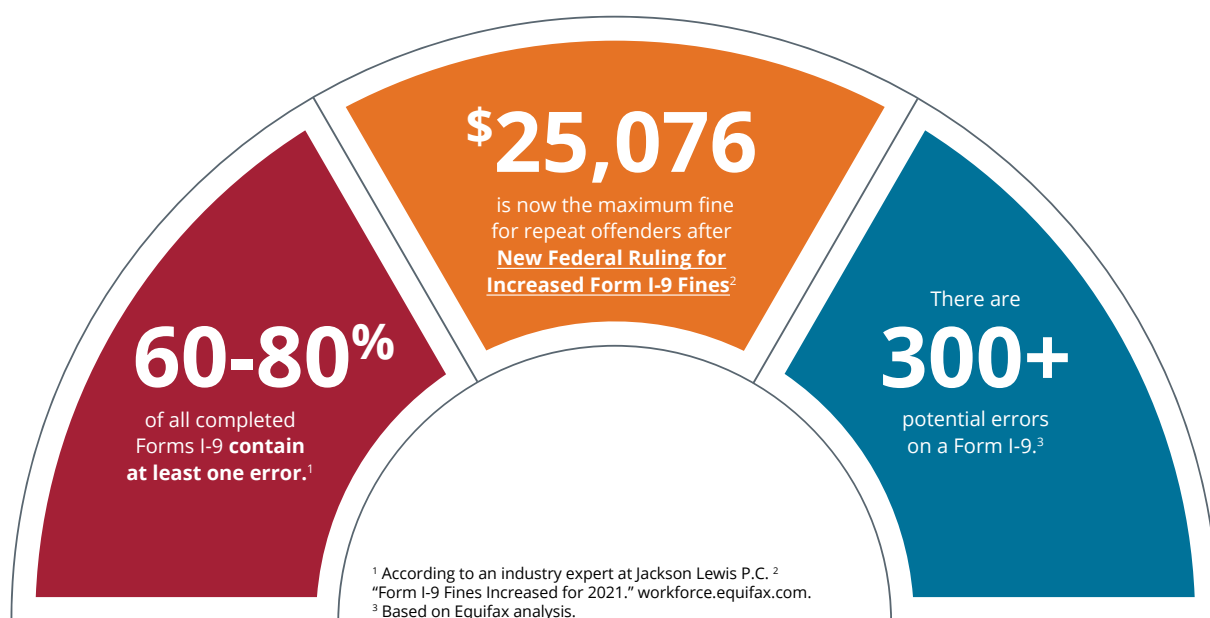


Take better control of your I-9 records

Equifax data suggests errors can be costly for your business

If you haven't been paying much attention to your company's Forms I-9, there are plenty of reasons to start.

While I-9 compliance may seem like a small piece of the HR puzzle, our experience has shown that employers of all sizes have long struggled to complete the form on time and correctly – with errors often proving difficult to catch. And as fines are increasing, sometimes even the smallest mistakes in your records can add up to a significant hit to your bottom line.

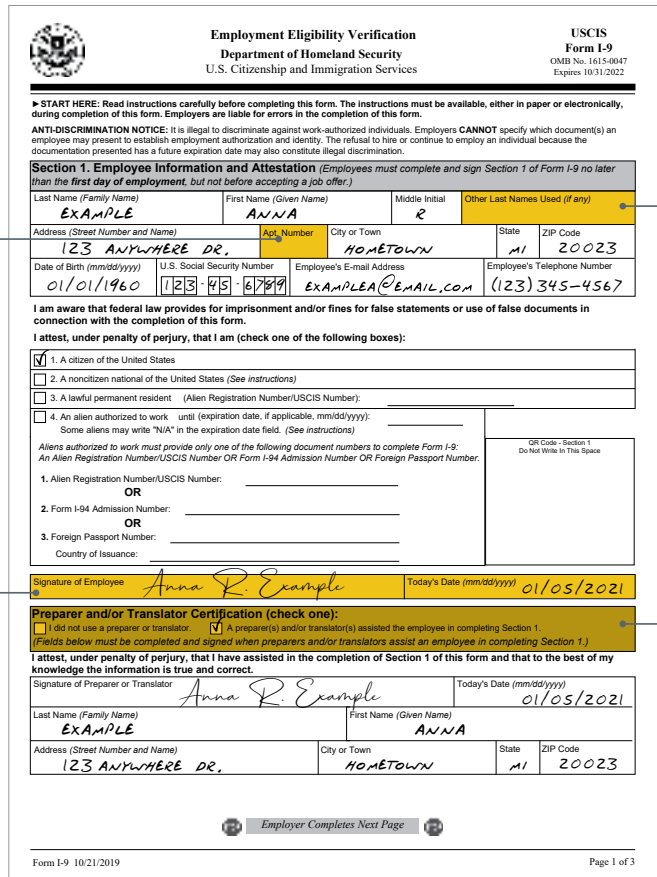


In other words, it's a good time to re-evaluate your I-9 processes – but don't worry, we're here to help!

Mistakes are more common than you might think.

Although the Form I-9 has only two pages to complete, it contains a lot of opportunities for error. We know firsthand how even the most thoughtful HR practitioner can sometimes miss a detail or mark a section incorrectly.

I-9 Inspect™ analyzes each form, helping you to spot potential issues quickly and easily... And since even a single mistake can result in a potential fine for the employer, we wanted to share a few of the most common (and surprising) pitfalls we've seen:



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.)

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): EXAMPLE, First Name (Given Name): ANNA, Middle Initial: R, Other Last Names Used (if any):

Address (Street Number and Name): 123 ANYWHERE DR., Apt. Number: , City or Town: HOMETOWN, State: MI, ZIP Code: 20023

Date of Birth (mm/dd/yyyy): 01/01/1960, U.S. Social Security Number: 123-45-6789, Employee's E-mail Address: EXAMPLE@EMAIL.COM, Employee's Telephone Number: (123) 345-4567

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

1. A citizen of the United States

2. A noncitizen national of the United States (See instructions)

3. A lawful permanent resident (Alien Registration Number/USCIS Number):

4. An alien authorized to work until expiration date, if applicable, mm/dd/yyyy. Some aliens may write "N/A" in the expiration date field. (See instructions)

Alien authorized to work must provide only one of the following document numbers to complete Form I-9: Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.

1. Alien Registration Number/USCIS Number: OR

2. Form I-94 Admission Number: OR

3. Foreign Passport Number: _____

Country of Issuance: _____

Signature of Employee: Anna R. Example, Today's Date (mm/dd/yyyy): 01/05/2021

Preparer and/or Translator Certification (check one):

I did not use a preparer or translator. A preparer(s) and/or translator(s) assisted the employee in completing Section 1. (Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator: Anna R. Example, Today's Date (mm/dd/yyyy): 01/05/2021

Last Name (Family Name): EXAMPLE, First Name (Given Name): ANNA

Address (Street Number and Name): 123 ANYWHERE DR., City or Town: HOMETOWN, State: MI, ZIP Code: 20023

Employer Completes Next Page

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Apartment number cannot be left blank.

This field must be filled with N/A if there is no apartment number.

Maiden Name/Other Last Names Used cannot be left blank.

This field must be filled with N/A if there is no maiden name or other last name used.

Employee signature date must be on or before hire date.

If the employee's signature date is after the hire date, then the I-9 is considered late.

Employee cannot be preparer on own Form I-9.

If not using a preparer or translator, then the new hire should check that box.

Employee full name should match Section 1 name.

The name at the top of Section 2 must exactly match the full name in Section 1.

Employee Citizenship/Immigration Status should match Section 1.

The documents provided by the new hire must match the status provided in Section 1. For example, an individual attesting to be a citizen of the United States on Section 1 of Form I-9 could not present Form I-766 as a List A document.

Social Security Number (SSN) must be provided.

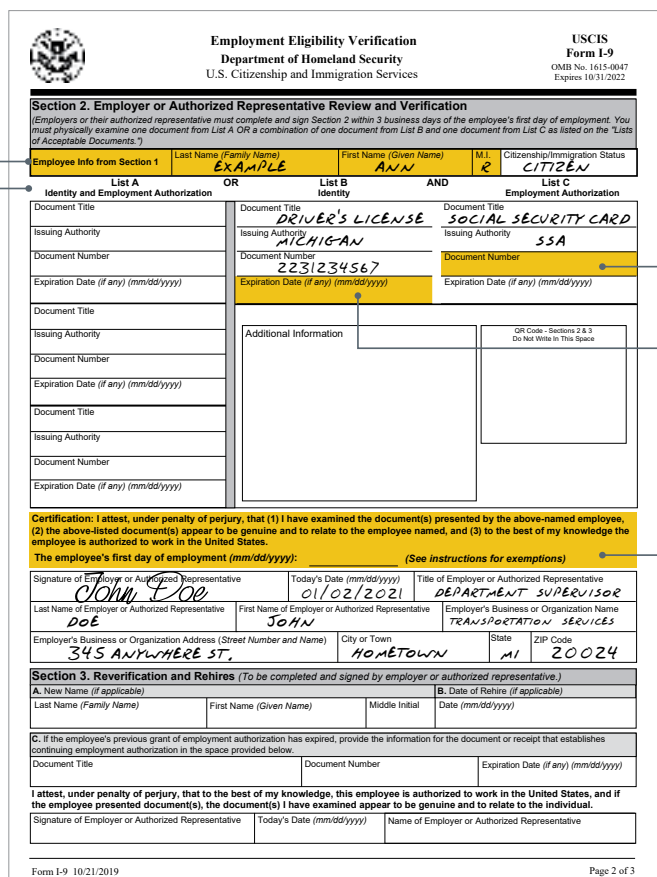
When an employee chooses to provide a Social Security card as the List C document, they must list the SSN number in Section 2.

Document Expiration Date cannot be left blank.

If the document (i.e., passport, driver's license, etc.) has an expiration date, it must be included on the Form I-9.

Date of Hire must be provided.

If the employee's first day of employment is missing, the I-9 is considered incomplete.



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 a combination of one document from List B and one document from List C as listed on the "List of Acceptable Documents.")

Employee Info from Section 1: Last Name (Family Name): EXAMPLE, First Name (Given Name): ANNA, MI: R, Citizenship/Immigration Status: CITIZEN

Identify and Employment Authorization

Document Title: DRIVER'S LICENSE, SOCIAL SECURITY CARD

Issuing Authority: MICHIGAN, Issuing Authority: SSA

Document Number: 2231234567, Document Number:

Expiration Date (if any) (mm/dd/yyyy): , Expiration Date (if any) (mm/dd/yyyy):

Document Title: , Document Title:

Issuing Authority: , Issuing Authority:

Document Number: , Document Number:

Expiration Date (if any) (mm/dd/yyyy): , Expiration Date (if any) (mm/dd/yyyy):

Additional Information: , OR Code (Section 2.B) (Do Not Write in This Box):

Certification (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. (See instructions for exemptions.)

The employee's first day of employment (mm/dd/yyyy):

Signature of Employer or Authorized Representative: JOHN DOE, Today's Date (mm/dd/yyyy): 01/02/2021, Title of Employer or Authorized Representative: DEPARTMENT SUPERVISOR

Last Name of Employer or Authorized Representative: JOHN, First Name of Employer or Authorized Representative: JOHN, Employer's Business or Organization Name: TRANSPORTATION SERVICES

Employer's Business or Organization Address (Street Number and Name): 345 ANYWHERE ST., City or Town: HOMETOWN, State: MI, ZIP Code: 20024

Section 3: Reverification and Rehires (To be completed and signed by employer or authorized representative.)

A. New Hire (if applicable): Last Name (Family Name): , First Name (Given Name): , Middle Initial: , Date (mm/dd/yyyy):

B. Date of Rehire (if applicable):

C. If the employer's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below: Document Title: , Document Number: , Expiration Date (if any) (mm/dd/yyyy):

I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative: , Today's Date (mm/dd/yyyy): , Name of Employer or Authorized Representative:

Form I-9 10/21/2019 Page 2 of 3

Help catch mistakes before they create problems! For more I-9 tips, check out these [HR Insights from the Pros.](#)

Our automated I-9 Management service can help you avoid errors.

There's an easier way to help alleviate the burden of Forms I-9 and get back to running your business. Our I-9 Management suite of services is designed to make completion, storage, and maintenance of your I-9s easier and more streamlined. With plans and pricing to fit your needs, we help cover each aspect of the I-9 process, including:



- Section 1 Completion
- Section 2 Verification
- Section 3 Rehires and Reverifications
- Notifications and In-App Prompts
- Ongoing Records Maintenance

Ask about our products and services today to find out how our automated I-9 Management service combined with our nationwide network of trained I-9 Anywhere® completers can help keep you in control of your I-9s.

The information provided herein is intended as general guidance and is not intended to convey specific legal advice.

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With our new I-9 plans, we make I-9 Management easier and more affordable! [Learn more about how we can help improve your I-9 processes.](#)