Employment Eligibility Verification

(Form I-9)

	INFORMATION AND VI	ERIFICATION: (To be continued in the con	ompleted and signed	by employed	e.)
Name: (Print or Type) Last		First	Middle		Birth Name
Smith		William	С		
Address: Street Name and Number		City	State		ZIP Code
432 Belair Strett		Los Angeles	CA		95452
Date of Birth (Month/Day/Year) 03/05/1986			Social Security Numb	ber	
I attest, under penal	ty of perjury, that I am (checl	x a box):			
☐ 1. A citizer	or national of the United State	S.			
☐ 2. An alien	lawfully admitted for permaner	nt residence (Alien Number A	232432982).	
	authorized by the Immigration			es (Alien Num	nber A,
or Admissio	n Number	, expiration of employmen	nt authorization, if any _).
aware that federal l			tements or use of false	documents i	igibility are genuine and relate to me. I am n connection with this certificate.
Signature			Date (Month/Day/Ye	ar)	
	PREPARER/TRANSLATOR CER perjury, that the above was prepare				
	Signature		Name (Print or Type)		
			NA		
	Address (Street Name and Nu	mber)	City	State	Zip Code
Examine one document from List A and check the a Provide the <i>Document Identification Number and I</i> List A Documents that Establish Identity and Employment Eligibility			ent checked. B nat Establish	3 <u>and</u> one fron and	n List C and check the appropriate boxes. List C Documents that Establish Employment Eligibility
 □ 1. United States Passport. □ 2. Certificate of United States Citizenship □ 3. Certificate of Naturalization □ 4. Unexpired foreign passport with attached Employment Authorization □ 5. Alien Registration Card with photograph Document Identification # Expiration Date (if any) 		issued I.D. card w information, inclubirth, height, weig 2. U.S. Military C 3. Other (Specity authority) Document Identification #	document and issuing on		□ 1. Original Social Security Number Card (other than a card stating it is not valid for employment) □ 2. A birth certificate issued by State, county, or municipal authority bearing a seal or other certification. □ 3. Unexpired INS Employment Authorization (Specify form) #
	ndividual named, and that the		knowledge, is eligible		
Signature		Tvaine (1 fillt of	1,pc)		Title
Employer Name		Address			Date
					02/20/2016

Form 1012, Printed by:

Form I-9 (05/07/87)

OMB No. 1115-0136

U.S. Department of Justice Immigration and Naturalization Service