

Earning your trust, with dollars and sense



trust  
consulting group

I-9

*"...it's about making your life easier, not more complicated. You don't hire us to tell you how to do it yourself - you hire us to get it done."*



# Electronic I9 on “White Page”.

Access to TRUST Consulting’s electronic documents now available on the McDonalds “White Page” with the latest ISP update, released this week.

- No more confusion about which documents can be accepted (List A, or List B & List C)
- No more worries about notification about expiring work authorization documents
  - The system notifies up to 3 people (Manager, Supervisor, Office Manager) that employee A has an expiring work document
- No more worries about filing and keeping all those documents.
  - Our electronic system is fully searchable and can export any documents necessary.

If you haven’t seen how our new electronic I-9 can benefit you, call today and setup a time to test it out.

Call 512-535-7398 today to gain access to these valuable tools.





# Why TRUST Consulting Group?

- Proven record with McDonalds' franchisees.
- Let our electronic smart system solve your I-9 worries.
- Gain the peace of mind that comes from knowing your I-9's are done correctly and stored securely.
- Lowest price for electronic I-9 in the industry.
  - One time setup fee and then it's \$1 per form filled out.






## Electronic I-9 and WOTC System

Enter I-9 - Section 2  
Please complete the form, then click 'Submit'.

Instructions for this section: [I-9 Instructions](#) [List of Acceptable Documents](#)

Our electronic I-9 looks just like the paper version

The system knows which fields are required based upon employee selections



### Employment Eligibility Verification

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
**Form I-9**  
OMB No. 1615-0047  
Expires 03/31/2016

**▶ START HERE.** Read instructions carefully before completing this form. The instructions must be available during completion of this form.  
**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire 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) test		First Name (Given Name) test		Middle Initial t	Other Names Used (if any)	
Address (Street Number and Name) test			Apt. Number	City or Town test	State tt	Zip Code 44444
Date of Birth (mm/dd/yyyy) 05-02-2000	U.S. Social Security Number 231 - 22 - 2223	E-mail Address			Telephone Number	

**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):**

- A citizen of the United States
- A noncitizen national of the United States *(See instructions)*
- A lawful permanent resident (Alien Registration Number/USCIS Number): \_\_\_\_\_
- An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy) \_\_\_\_\_. Some aliens may write "N/A" in this field. *(See instructions)*

*For aliens authorized to work, provide your Alien Registration Number/USCIS Number OR Form I-94 Admission Number:* \_\_\_\_\_

## 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" on the next page of this form. For each document you review, record the following information: document title, issuing authority, document number, and expiration date, if any.)

Employee Last Name, First Name and Middle Initial from Section 1: test, test t

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"/>		Issuing Authority: <input type="text"/>		Issuing Authority: <input type="text"/>
Document Number: <input type="text"/>		Document Number: <input type="text"/>		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"/>		Expiration Date (if any)(mm/dd/yyyy): <input type="text"/>
Document Title: <input type="text"/>		<div style="border: 1px solid black; padding: 5px; text-align: center;">3-D Barcode Do Not Write in This Space</div>		
Issuing Authority: <input type="text"/>				
Document Number: <input type="text"/>				
Expiration Date (if any)(mm/dd/yyyy): <input type="text"/>				
Document Title: <input type="text"/>				
Issuing Authority: <input type="text"/>				
Document Number: <input type="text"/>				
Expiration Date (if any)(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 <input type="text"/>	Date (mm/dd/yyyy) 06/11/2013	Title of Employer or Authorized Representative <input type="text"/>		
Last Name (Family Name) <input type="text"/>	First Name (Given Name) <input type="text"/>	Employer's Business or Organization Name <input type="text"/>		
Employer's Business or Organization Address (Street Number and Name) <input type="text"/>		City or Town <input type="text"/>	State <input type="text"/>	Zip Code <input type="text"/>

Submit

The manager section is only available to the managers after they verify their password.

If they haven't authorized an I-9 within 3 days of the employee being hired email notifications are sent to up to 3 employees.



## Contact Information

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