

Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS 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 I than the first day of employ				•		es mu	st complete ar	nd sign S	ection 1 c	of Form I-9 no later	
Last Name (Family Name) Firs		First Nar	irst Name (Given Name)				Middle Initial	Other I	er Last Names Used (if any)		
Motel Tyson			a			v	V N/A				
Address (Street Number and Name)			Apt. Number City		City or	Town			State	ZIP Code	
4321 Valley View Ave.			N/A N		Norco	Norco			CA	92860	
Date of Birth (mm/dd/yyyy) U.S. Social Security Num			ber	Employee's E-mail Address					Employee's Telephone Number		
01/27/2010	6 2 5 - 7	9 - 4 0 5 7 vincemotel@gmail.com			9	9512649012					
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 St.		(0.10				.g .com					
2. A noncitizen national of the		(See ins	tructions	:)							
3. A lawful permanent resid		•		<u> </u>	Number):		N/A				
3. A lawful permanent resident (Alien Registration Number/USCIS Number): N/A 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): N/A											
Some aliens may write "N/A" in the expiration date field. (See instructions)											
Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number. 1. Alien Registration Number/USCIS Number: OR QR Code - Section 1 Do Not Write In This Space											
2. Form I-94 Admission Numb	er: N/A						_				
OR 3 Foreign Passport Number:	N/A										
3. Foreign Passport Number: Country of Issuance: N/A											
Signature of Employee (Signed Electronically by Tyson V Motel) Today's Date (mm/dd/yyyy) 10/26/2022						/26/2022					
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 Today's Date (mm/dd/yyyy)											
(Signed Electronically by Vincent Motel)											
Last Name (Family Name) First Name (Given Name)											
Motel Vincent											
ddress (Street Number and Name) City or Town						State	ZIP Code				
4321 Valley View Ave. Norco CA					CA	92860					

STOP

Employer Completes Next Page

STOP

Form I-9 10/21/2019 Page 1 of 3



Employee Info from Section 1

List A

Identity and Employment Authorization

Employment Eligibility Verification Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No. 1615-0047 Expires 10/31/2022

Citizenship/Immigration Status

List C

Employment Authorization

M.I.

V

Section 2. Employer or Authorized Representative Review and Verification

Last Name (Family Name)

OR

Motel

(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 "Lists of Acceptable Documents.")

List B

Identity

Tyson

First Name (Given Name)

AND

Document Title	Document T	Γitle			Documer	nt Title			
Issuing Authority	Issuing Auth	nority			Issuing A	uthority			
Document Number	Document Number				Document Number				
Expiration Date (if any) (mm/dd/yyyy)	Expiration D	Date (if any) (r	mm/dd/yy	ryy)	Expiration	n Date <i>(if an</i>	y) (mm/dd/yyyy)		
Document Title									
Issuing Authority	Additiona	l Information	า				Code - Sections 2 & 3 ot Write In This Space		
Document Number									
Expiration Date (if any) (mm/dd/yyyy)									
Document Title									
Issuing Authority									
Document Number									
Expiration Date (if any) (mm/dd/yyyy)									
(2) the above-listed document(s) appearently employee is authorized to work in the The employee's first day of employer Signature of Employer or Authorized Representations.	United States. nent <i>(mm/dd/yyy)</i>)/26/2022	2(See ii	nstruction	s for exen	nptions)		
Signature of Employer of Authorized Repre	senialive	Today's Date	e (mm/aa	<i>ryyyy)</i> Title	or Employe	r or Authoriz	zed Representative		
Last Name of Employer or Authorized Representative First Name of Employer or Authorized Representative					Employer's Business or Organization Name KHI Solutions Inc.				
Employer's Business or Organization Addre	ss (Street Number a	nd Name)	City or T	own		State	ZIP Code		
9800 Crosspoint Blvd.			Indiana	polis		IN	46256		
Section 3. Reverification and Re	hires (To be com	npleted and	signed b	y employer o	r authorize	ed represer	ntative.)		
A. New Name (if applicable)						B. Date of Rehire (if applicable)			
Last Name (Family Name)	First Name (Given I	M	liddle Initial	Date (mm/dd/yyyy)					
C. If the employee's previous grant of emplo			provide tl	ne information t	for the docu	ment or rece	eipt that establishes		
Document Title		Documer	nt Numbe	er		Expiration D	ate (if any) (mm/dd/yyyy)		
I attest, under penalty of perjury, that t the employee presented document(s),									
Signature of Employer or Authorized Repre	sentative Today's	s Date (mm/de	d/yyyy)	Name of En	nployer or A	uthorized Re	epresentative		

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

LIST A Documents that Establish Both Identity and Employment Authorization		OR	LIST B Documents that Establish Identity AN	LIST C Documents that Establish Employment Authorization			
3.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document		Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth,		A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued		
5.	that contains a photograph (Form I-766) For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and	5	gender, height, eye color, and address S. School ID card with a photograph Voter's registration card U.S. Military card or draft record	5.	by the Department of State (Forms DS-1350, FS-545, FS-240)		
	b. Form I-94 or Form I-94A that has the following:(1) The same name as the passport; and	8. 9.	 Military dependent's ID card U.S. Coast Guard Merchant Mariner Card Native American tribal document 		Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of		
	(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above:		Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security		
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI		School record or report card Clinic, doctor, or hospital record Day-care or nursery school record				

Examples of many of these documents appear in the Handbook for Employers (M-274).

Refer to the instructions for more information about acceptable receipts.

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