



Office of Immigration Compliance

110 Centerview Dr. • Columbia • SC • 29210

P.O. Box 11329 • Columbia • SC 29211-1329

Phone: 803-896-2606 • immigrantinfo@llr.sc.gov

llr.sc.gov/immigration

E-VERIFY COMPLIANCE COMPLAINT FORM

Attach any relevant documentation to support your allegation. You may also attach additional sheets to provide additional information that support your allegation.

Complaints may be submitted by mail, email or fax to the above listed contact information.

All complaints must be written and signed. Anonymous complaints will not be accepted.

COMPLAINANT INFORMATION

First Name: _____ Last Name: _____

Phone Number: _____ Email: _____

Mailing Address: _____

Relationship with employer/business and/or alleged illegal worker: _____

EMPLOYER/BUSINESS ALLEGATIONS ARE BEING MADE AGAINST

Employer/Business Name: _____

Phone Number: _____ Contact Person: _____

Employer/Business Address: _____

Work Site Location (if different): _____

Number of Employees: _____ Owner/Supervisor Name: _____
(If known)

E-VERIFY

Is the employer enrolled in E-Verify? YES NO UNKNOWN

Has the employer e-verified all new hires since January 1, 2012? YES NO UNKNOWN

COMPLAINT INFORMATION

1. When did you first become aware of the information contained in your complaint? _____

2. How did you become aware of this information?

3. Do you believe this employer knowingly or intentionally employed illegal immigrants? YES NO

If yes, detail all information regarding facts and circumstances that led you to believe the employer knowingly or intentionally employed illegal immigrants.

4. If any of the information contained on this complaint form is based on statements made by a third party, whether you overheard a conversation or were directly told, please list the individual and their contact information so information may be verified.

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

ATTESTATION

South Carolina Code of Laws, Section 41-8-70: In addition to other penalties provided for by law, a person who knowingly makes or files any false, fictitious, or fraudulent document, statement, or report pursuant to this chapter is guilty of a felony and, upon conviction, must be fined within the discretion of the court or imprisoned for not more than five years, or both.

I attest that the information I have provided is true, correct and complete to the best of my knowledge.

Signature: _____

Date: _____

Print Name: _____