PUUTSI

For Discour Act and Dancounty Deduction Assets	17 ZIP Code	16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)	16 Employee Required Contribution (see instructions)	14 Offer of Coverage (enter required code)		Part II Emp	4 City or town St. Louis	3 Street address (including apartment no.) 4202 Little Piney Drive Lake	1 Name of employee (first name, mk Veera Venkat Sai Kotla	Paril Employee	Form 1095-C Dopartment of the Tressury Internal Revenue Service	
d Dononius			es ·		All 12 Months	loyee Offe		iney Drive	e (first name, r t Sai Kotl	loyee	Sessury vice	
t Badudian		25	\$370.24	1E	Jan		6 State or province MO	nent no.) e Lake	Name of employee (first name, middle initial, tast name) /eera Venkat Sai Kotla		Employer-Provided Health Insurance Offer and  > Do not attach to your tax return. Keep for your records.  > Go to www.frs.gov/Form1095C for instructions and the latest linfo	
		유	\$0.00	Ħ	Feb							
		22	\$0.00	Ħ	Mar		US		2 Social security number (SSN) XXX-XX-4876			
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COMPANY SECTIONS		2F	\$0.00	1É	May						nsuranc return. Keep instructions	
	n av State et Literatur	2두	\$0.00	Ħ	June			9 Street address ( 500 ALEXA)	SILICON STAFF IT	Applicable Large Employer Member (Employer)	oyer-Provided Health Insurance Offer and Coverage  > Do not attach to your tax return. Keep for your records.  > Go to www.frs.gov/Form1086C for instructions and the latest information.	
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		24	\$0.00	Ħ	Aug		NJ State or p	9 Street address (including room or suite no.) 500 ALEXANDER PARK STE 102 11 City or town 12 State or province	TAFF IT SERVICES INC	arge Emp		
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STATE OF THE PARTY		2F	\$0.00	ΙΈ	Oct	t number): 03	SU	26)	26	per (Empire	CORRECTED	
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