

Employer-Provided Health Insurance Offer and Coverage

Do not attach to your tax return. Keep for your records.
Go to www.irs.gov/Form1095C for instructions and the latest information.

VOID
 CORRECTED

Part I Employee

1 Name of employee (first name, middle initial, last name) PAVAN KUMAR R SANDHIRI			2 Social security number (SSN) XXX-XX-1842			7 Name of employer DELL USA L.P.			8 Employer identification number (EIN) 74-2616802		
3 Street address (including apartment no.) 3104 BOUCHETTE CV						9 Street address (including room or suite no.) ONE DELL WAY			10 Contact telephone number 8559011222		
4 City or town LEANDER		5 State or province TX		6 Country and ZIP or foreign postal code US 78641		11 City or town ROUND ROCK		12 State or province TX		13 Country and ZIP or foreign postal code US 78682	

Part II Employee Offer of Coverage

	Employee's Age on January 1:												Plan Start Month (enter 2-digit number): 01													
	All 12 Months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	All 12 Months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
14 Offer of Coverage (enter required code)	1E																									
15 Employee Required Contribution (see instructions)	\$ 126.23	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)	2C																									
17 ZIP Code																										

Part III Covered Individuals

If Employer provided self-insured coverage, check the box and enter the information for each individual enrolled in coverage, including the employee.

	(a) Name of covered individual(s) First name, middle initial, last name			(b) SSN or other TIN	(c) DOB (if SSN or other TIN is not available)	(d) Covered all 12 months	(e) Months of coverage																		
	Jan	Feb	Mar				Apr	May	June	July	Aug	Sept	Oct	Nov	Dec										
18	PAVAN KUMAR	R	SANDHIRI	XXX-XX-1842		X																			
19	HARINI	R	SANDHIRI	XXX-XX-3849		X																			
20	SAHANA	R	SANDHIRI	XXX-XX-8207		X																			
21	SUPRIYA		PATANCHERU		02-10-1990	X																			
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