

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				Applicable Large Employer Member (Employer)			
1 Name of employee (first name, middle initial, last name) ABHIRAG REDDY PATHURI		2 Social security number (SSN) XXX-XX-0422		7 Name of employer AMAZON.COM SERVICES LLC		8 Employer identification number (EIN) 82-0544687	
3 Street address (including apartment no.) 1300 CROSSING PLACE APT 611				9 Street address (including room or suite no.) PO BOX 81226		10 Contact telephone number 866-644-2696	
4 City or town AUSTIN		5 State or province TX		6 Country and ZIP or foreign postal code US 78741		11 City or town SEATTLE	
				12 State or province WA		13 Country and ZIP or foreign postal code US 98108	

Part II Employee Offer of Coverage													
Employee's Age on January 1: _____ Plan Start Month (enter 2-digit number): 04													
14 Offer of Coverage (enter required code)	All 12 Months	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
		1H	1H	1H	1H	1E	1E	1E	1E	1E	1E	1E	1E
15 Employee Required Contribution (see instructions)	\$	\$	\$	\$	\$	\$ 33.00	\$ 33.00	\$ 33.00	\$ 33.00	\$ 33.00	\$ 33.00	\$ 33.00	\$ 33.00
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)		2A	2A	2A	2D	2C	2C	2C	2C	2C	2C	2C	2C
7 ZIP Code													

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 60705M Form 1095-C (2022)

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. <input checked="" type="checkbox"/>													
18	ABHIRAG REDDY	PATHURI	XXX-XX-0422								(e) Months of coverage		
											Jan	Feb	Mar
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													