

2022 -- 1095-C Forms

Obtaining a Paper Form



Form 1095-C
Department of the Treasury
Internal Revenue Service

Part I Employee

Employer-Provided Health Insurance Offer and Coverage
► Information about Form 1095-C and its separate instructions is at www.irs.gov/1095

1 Name of employee

2 Social security number (SSN)

3 Street address (including apartment no.)

4 City or town

5 State or province

6 Country and ZIP or foreign postal code

7 Name of employer

8 Plan start month

9 Street address (including apartment no.)

10 City or town

Part II Employee Offer and Coverage

	All 12 Months	Jan	Feb	Mar	Apr	May	June
14 Offer of Coverage (enter required code)							
15 Employee Share of Lowest Cost Premium			\$	\$	\$	\$	\$

1095-C Forms are Available Upon Request

If you desire a paper 1095-C form, contact:

Jacob Hartford

Email JacobHartford@johnsonelectric.com

Mobile (734) 366-9028

Please include your:

Name

Address

Phone Number

Email

JE Company that You Worked For

Dates of Employment