

**Coverage Exemptions for Individuals Claimed on Your Return**

**MUST have either Form 1095-A or 1095-C**

Name of Individual	SSN	Form 1095 A or C?	Full Yr	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
<b>TAXPAYER</b>															
<b>SPOUSE if applies</b>															

**NOT providing Form 1095-A or Form 1095-C WILL delay your refund**