

**1095-C DUPLICATE STATEMENT REQUEST FORM****IMPORTANT INFORMATION—PLEASE READ BEFORE COMPLETING THIS FORM**

Use this form to request a replacement copy of your 1095-C Statement. Do not use this form to request corrections to your statement—those should be submitted in writing to IU Human Resources at the email or postal address listed at the bottom of this form. Requests will only be accepted when submitted by the employee or primary statement recipient.

SECTION 1—CONTACT INFORMATION			
Name:		University 10-Digit ID:	
Phone:	Email:		
Statement Year: <input type="checkbox"/> 2015 <input type="checkbox"/> 2016 <input type="checkbox"/> 2017 <input type="checkbox"/> 2018 <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021			
Delivery Method: <input type="checkbox"/> U.S. mail to my home address on file <input type="checkbox"/> U.S. mail to other address* <input type="checkbox"/> Email to IU email address			
*Other Address:	City:	State:	Zip:

SECTION 2 AUTHORIZATION & SIGNATURE	
By signing this form, I certify that I am the primary statement recipient, and that the information provided on and in connection with this form is true, accurate, and complete.	
Signature:	Date:

*To sign and submit this form digitally you must first save it to your device.*

*This form may also be scanned and emailed to [askhr@iu.edu](mailto:askhr@iu.edu); or mailed to IU Human Resources, 420 N. Walnut Street, Bloomington, IN, 47404.*