

## **1095-C Reissue Request Form** <sup>[1]</sup>

**Please use this form to request 1095-C tax forms.**

We will email a replacement 1095-C no later than **four business days** from receipt of this completed form.

**First Name \***

**Last Name \***

**Email**

**Address**

**City**

**State**



**Zip Code**

**Last four digits of your Social Security Number \***

**Date of Birth \***

Month



Day



**Tax Year Requested \***

**Employee Services**

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**Source URL:** <https://www.cu.edu/employee-services/forms/1095-c-reissue-request-form>

**Links**

[1] <https://www.cu.edu/employee-services/forms/1095-c-reissue-request-form>