

Employer-Provided Health Insurance Offer and Coverage
Information about Form 1095-C and its separate instructions
is at www.irs.gov/form1095c

☐ VOID
☐ CORRECTED

600120
OMB No. 1545-2251
2020

Part I Employee		
1 Name of employee (first name, middle initial, last name) RAHUL KUMAR MAHAJAN		2 Social security number (SSN) 772-39-9730
3 Street address (including apartment no.) 1668 Sheldrake Drive Apt 2B		
4 City or town Wheeling	5 State or province IL	6 Country and ZIP or foreign postal code 60090

Part II Employee Offer and Coverage						
	All 12 Months	Jan	Feb	Mar	Apr	May
14 Offer of Coverage (enter required code)	1E					
15 Employee Required Contribution (see instructions)	\$184.72					
16 Section 4980H Safe Harbor and Other Relief (enter code, if applicable)	2C					
17 ZIP Code						

Part III Covered Individuals If Employer Provided self-insured coverage check the box and enter the information for each covered individual <input type="checkbox"/>
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(a) Name of covered individual(s) First name, middle initial, last name			(b) SSN	(c) DOB (if SSN is not available)	(d) Covered all 12 months
18					<input type="checkbox"/>
19					<input type="checkbox"/>
20					<input type="checkbox"/>
21					<input type="checkbox"/>
22					<input type="checkbox"/>
23					<input type="checkbox"/>

Applicable Large Employer Member (Employer)													
7 Name of employer North Fork Holdings, LLC						8 Employer Identification Number (EIN) 27-1627713							
9 Street address (including room or suite no.) 1933 N Meacham Rd, Ste 220						10 Contact Telephone Number (224) 532-2140							
11 City or town Schaumburg			12 State or province IL			13 Country and ZIP or foreign postal code 60173							
Employee's Age on January 1					Plan Start Month: 12								
June		July		Aug		Sept		Oct		Nov		Dec	
(e) Months of Coverage													
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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North Fork Holdings, LLC
1933 N Meacham Rd, Ste 220
Schaumburg, IL 60173

40332 219 **1095-C**
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