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Health Coverage

VOID OMB N. 1545-2252

Information about Form 1095-B and its separate instructions is at www.irs.gov/form1095b.

Instructions for Recipient TrF1095-B 1095-B, ₽ Part I. Responsible Individual, lines 1-9. PM Lines 2 and 3. Lines 2 and 3. Lines 2 and 3. Lines 2 and 3. Lines (SSN) #1 MARKET H, #1 LINES H, #1

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