

Please check only one box, enter your contract number, the 1099-Q year(s) you are requesting a copy of, and complete the appropriate section.
Mail, fax, or email (pdf only) this form to the address or number listed below.

Reprints will be mailed to you within 5 business days.

- ☐ I am the Purchaser requesting a copy of my 1099-Q. Complete Section A
☐ I am the Beneficiary (Student) requesting a copy of my 1099-Q. Complete Section B

8-digit Contract #

Year(s) Requested

SECTION A: PURCHASER

Purchaser Name

Purchaser Phone

Purchaser Address (Number, Street, City, State, Zip)

Purchaser Email

Last 4 SSN

Purchaser Signature

Date

SECTION B: BENEFICIARY(STUDENT)

Beneficiary Name

Beneficiary Phone

Beneficiary Address (Number, Street, City, State, Zip)

Beneficiary Email

Last 4 SSN

Beneficiary Signature

Date

