

Important Health Coverage Tax Information

If you were enrolled in **Chautauqua County School District's self-insured health coverage** during **2025**, you may request a copy of **Form 1095-C**, which reports your health coverage information for tax purposes.

How to Request Your Form 1095-C:

- **Email:** csickles@frewsburgcsd.org
- **Mail:** 26 Institute Street, PO Box 690, Frewsburg, NY 14738
- **Phone:** 716-569-7047

We will provide your Form 1095-C within **30 days of your request**.

Deadline: Requests can be made at any time. This notice will remain available through **October 15, 2026**.