

985 North 900 West Shipshewana, IN 46565

February 25, 2025

IMPORTANT HEALTH COVERAGE TAX DOCUMENTS

The **2024 Form 1095s** are prepared and available upon request. These forms provide information about offers of coverage made to full-time employees as well as coverage details for those who enrolled in **K. Z., Inc.'s** group health plan.

To request a copy of your Form 1095 or for further information, please contact **Human Resources** at:

Email: cstoddard@kz-rv.com

Address: 985 North 900 West Shipshewana, IN 46565

Phone Number: 260-768-2023

Kind Regards,

Chelsea Stoddard, HR Manager KZ Recreational Vehicles