

STATE OF NEW YORK  
STATE TAX COMMISSION  
ALBANY, NEW YORK 12227

PAUL B. COBURN  
SECRETARY  
Telephone: (518) 457-6162

November 4, 1983

Baldwinsville Softball Association, Inc.  
c/o Helmetag & Miller  
600 Oswego St.  
Liverpool, NY 13088

Gentlemen:

Please take notice of the Default Order of the State Tax Commission enclosed herewith.

Please take further notice that pursuant to Section(s) 1138 of the Tax Law, any proceeding in court to review this decision must be commenced within 4 months from the date of this notice.

Inquires concerning the computation of tax due or refund allowed in accordance with this decision may be addressed to the undersigned.

Very truly yours,

PAUL B. COBURN  
SECRETARY TO THE  
STATE TAX COMMISSION

cc: Petitioner's Representative  
E. Scott Brown  
Cooper & Farnholtz  
50 Oswego St.  
Baldwinsville, NY 13027  
Taxing Bureau's Representative

STATE OF NEW YORK  
STATE TAX COMMISSION

In the Matter of the Petition :  
of :  
Baldwinsville Softball Association, Inc. : DEFAULT ORDER  
 : 83-P-34  
for Revision or for Refund of Sales & Use Tax :  
under Article(s) 28 & 29 of the Tax Law :  
for the . :

Petitioner(s) Baldwinsville Softball Association, Inc. filed a petition for revision or for refund of Sales & Use Tax under Article(s) 28 & 29 of the Tax Law for the . File No. 43961.

Under Section 601.5 of the State Tax Commission Rules of Practice and Procedure, a notice was served on the petitioner(s) representative, to file a perfected petition. Notice to file the perfected petition was sent to the representative's last known address. Petitioner(s) failed to file a perfected petition. A default has been duly noted.

Now on motion of the Secretary to the State Tax Commission, it is

ORDERED that the petition of Baldwinsville Softball Association, Inc. be and the same is hereby denied.

DEFAULT ORDER  
 ADOPTED BY THE STATE TAX COMMISSION  
 ALBANY, NEW YORK  
 NOVEMBER 4, 1983

P 470 316 208  
**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED—  
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>E Scott Brown / Cooper &amp; Son</i>	
Street and No. <i>50 Oswego St</i>	
P.O., State and ZIP Code <i>Baldwinsville NY 13029</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt Showing to whom, Date, and Address of Delivery	
<b>TOTAL Postage and Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, Feb. 1982

P 470 316 207  
**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED—  
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Baldwinsville Softball Club Inc</i>	
Street and No. <i>1600 Oswego St</i>	
P.O., State and ZIP Code <i>Campbell NY 13088</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt Showing to whom, Date, and Address of Delivery	
<b>TOTAL Postage and Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, Feb. 1982