

JOHN J. SOLLECITO
DIRECTOR
Telephone: (518) 457-1723

March 4, 1983

Bob Gary, Inc. 91-18 Beach Channel Dr. Rockaway Beach, NY

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.

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

Very truly yours,

Joseph Chyrywaty / Supervisor of Tax Conferences

CC: Petitioner's Representative
 Herbert J. Cohn
 100 E. Old Country Rd.
 Mineola, NY 11501
 Taxing Bureau's Representative

In the Matter of the Petition

of

Bob Gary, Inc.

DEFAULT ORDER

83-C-4

for Revision or for Refund of Sales & Use Tax

under Article 28 & 29 of the Tax Law for the

Period 9/1/74-10/14/77.

Petitioner(s) Bob Gary, Inc. filed a petition for revision or for refund of Sales & Use Tax under Article 28 & 29 of the Tax Law for the Period 9/1/74 - 10/14/77. File No. 22422.

A pre-hearing conference on the petition was scheduled before Robert Healey, at the offices of the State Tax Commission, 97-77 Queens Blvd., Rego Park, New York 11374 on Thursday, December 2, 1982 at 2:45 p.m. Notice of said pre-hearing conference was given to petitioner(s) and petitioner's representative. Petitioner(s) did not appear at the pre-hearing conference. A default has been duly noted.

Now on motion of the State Tax Commission, it is

ORDERED that the petition of Bob Gary, Inc. be and the same is hereby denied.

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

P 389 758 611 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Bob Gary Tr	20.
Street and No.	IC,
GI IS ROLL	1
11-18 Deach C	hannel B
P.O., State and ZIP Code	
Acckaway Beac	6.NY
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	
TOTAL Postage and Fees	\$
Postmark or Date	
<i>*</i>	

P 389 758 612 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDEO— NOT FOR INTERNATIONAL MAIL

(See Reverse)

Herbert J. Coh	0	
Street and No.	.hr.	RI
P.O., State and ZIP Code Moneola, NY 1150	- /	
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		
TOTAL Postage and Fees	\$	
Postmark or Date		