

JOHN J. SOLLECȚTO
DIRECTOR

Telephone: (518) 457-1723

March 4, 1983

Queens Theatrical Circuit, Inc. P.O. Box 120 Corona Station Queens, NY 11368

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

Taxing Bureau's Representative

In the Matter of the Petition

of

Queens Theatrical Circuit, 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 6/20/80

Petitioner(s) Queens Theatrical Circuit, Inc. filed a petition for revision or for refund of Sales & Use Tax under Article 28 & 29 of the Tax Law for the Period 6/20/80. File No. 36743.

A pre-hearing conference on the petition was scheduled before Joseph Belfiore, at the offices of the State Tax Commission, 97-77 Queens Blvd., Rego Park, New York 11374 on Tuesday, October 26, 1982 at 2:45 p.m. Notice of said pre-hearing conference was given to petitioner(s). 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 Queens Theatrical Circuit, Inc. be and the same is hereby denied.

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

P 389 758 645 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL

| (See Reverse) | | |
|---|--|--------|
| Sent to | | \Box |
| Queens Theatric | O Circu | ± 7 |
| PA BOY 120 | | 1 |
| Corcha Static | n | _ |
| P.O., State and ZIP Code | 2100 | - (|
| Queens, WY 113 | 568 | _ |
| Postage | \$ | |
| Certified Fee | 1 | 7 |
| Special Delivery Fee | | - |
| Restricted Delivery Fee | | 7 |
| Return Receipt Showing to whom and Date Delivered | | 7 |
| Return Receipt Showing to whom | + | 4 |
| Date, and Address of Delivery | ' } | - 1 |
| | + | - |
| TOTAL Postage and Fees | \$ | I |
| Postmark or Date | · | ┥. |
| | | |
| | | |
| T_{ij} | | |
| 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / | | |
| 4.5 | er er er er er er | 1 |
| | 481 | 14 |