



New York State Tax Commission
TAX APPEALS BUREAU

State Campus
Albany, New York 12227

John J. Sollecito, Director
(518) 457-1723

June 1, 1984

Miquelina Henriquez
P.O. Box 26570
Tamarac, FL 33320

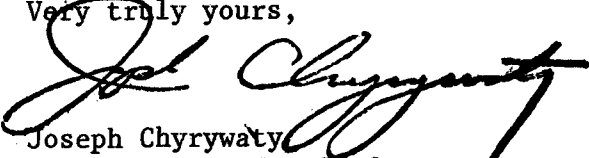
Dear Mr. Henriquez:

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 Chyrywat
Supervisor of Tax Conferences

cc: Petitioner's Representative
Joseph H. Teperman
527 Madison Ave., Suite 1116
New York, NY 10022
Taxing Bureau's Representative

STATE OF NEW YORK

STATE TAX COMMISSION

In the Matter of the Petition :
of :
Miquelina Henriquez : DEFAULT ORDER
: 84-C-17
for Redetermination of a Deficiency or Revision :
of a Determination or Refund of :
Sales & Use Tax under Article 28 & 29 :
of the Tax Law for the Period 8/31/79-5/31/82. :

Petitioner(s) Miquelina Henriquez filed a petition for redetermination of a deficiency or revision of a determination or refund of Sales & Use Tax under Article 28 & 29 of the Tax Law for the Period 8/31/79-5/31/82. File No. 40199.

A pre-hearing conference on the petition was scheduled before John S. Juva, at the offices of the State Tax Commission, 97-77 Queens Blvd., Rego Park, New York 11374 on Friday, February 17, 1984 at 10:30 a.m. Notice of said pre-hearing conference was given to petitioner(s) and the representative of 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 Miquelina Henriquez be and the same is hereby denied.

DEFAULT ORDER
ADOPTED BY THE STATE TAX COMMISSION
ALBANY, NEW YORK
JUNE 1, 1984

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Joseph H. Teperman</i>	
Street and No. <i>527 Madison Ave. Suite 116</i>	
P.O., State and ZIP Code <i>NY, NY 10022</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	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, Feb. 1982

P 440 977 079

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Miguelina Henriquez</i>	
Street and No. <i>P.O. Box 26570</i>	
P.O., State and ZIP Code <i>San Antonio, TX 78220</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	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, Feb. 1982