



New York State Tax Commission
TAX APPEALS BUREAU
W.A. Harriman Campus
Albany, New York 12227

October 24, 1985

Shubinder Puri
Anesthesia Dept. Norwalk Hospital
Norwalk, CT 06851

Dear Dr. Puri:

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
George J. Lepofsky
Lepofsky, Lepofsky & Lang
P.O. Box 511
Norwalk, CT
Taxing Bureau's Representative

STATE OF NEW YORK

STATE TAX COMMISSION

| | | |
|---|---|----------------------|
| In the Matter of the Petition | : | |
| of | : | |
| Shubinder Puri | : | <u>DEFAULT ORDER</u> |
| | : | 85-C-24 |
| 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 12/1/83 - 5/31/84. | : | |

Petitioner(s) Shubinder Puri 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 12/1/83 - 5/31/84. File No. 58016.

A pre-hearing conference on the petition was scheduled before E. A. Williams, at the offices of the State Tax Commission, State Office Bldg., Veterans Memorial Hwy., Rm. 1B7, Hauppauge, New York 11787 on Tuesday, August 20, 1985 at 3:00 p.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 Shubinder Puri be and the same is hereby denied.

DEFAULT ORDER
ADOPTED BY THE STATE TAX COMMISSION
ALBANY, NEW YORK
OCTOBER 24, 1985

P 153 385 636

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982

★ U.S.G.P.O. 1984-446-014

| | | |
|---|----------------------------|--|
| Sent to | <i>George J. Lepofsky</i> | |
| Street and No. | <i>Lepofsky, Lemington</i> | |
| P.O., State and ZIP Code | <i>PO Box 511</i> | |
| Postage | <i>Norwalk, CT</i> | |
| Certified Fee | | |
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| Return receipt showing to whom, Date, and Address of Delivery | | |
| TOTAL Postage and Fees | \$ | |
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P 153 385 635

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| | | |
|---|---------------------------------|--|
| Sent to | <i>Shubinder Puri</i> | |
| Street and No. | <i>Anesthesia Dept. Norwalk</i> | |
| P.O., State and ZIP Code | <i>Ho-P.</i> | |
| Postage | <i>Norwalk, CT 06851</i> | |
| 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 | | |