



New York State Tax Commission

**TAX APPEALS BUREAU**

W.A. Harriman Campus  
Albany, New York 12227

December 15, 1986

John Duenskie  
Off. of Rock-A-Bye Bedding  
205-44 Brian Crescent  
Bayside, NY 11360

Re: File No. 66059

Dear Mr. Duenskie:

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: Taxing Bureau's Representative

Petitioner's Representative:  
Gerald J. Leibowitz  
530 Central Ave.  
Cedarhurst, NY 11516

STATE OF NEW YORK

STATE TAX COMMISSION

---

|   |   |                      |
|---|---|----------------------|
| In the Matter of the Petition                   | : |                      |
| of  | : |                      |
| John Duenskie                                   | : | <u>DEFAULT ORDER</u> |
| Off. of Rock-A-Bye Bedding                      | : | 86-C-29              |
| 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 9/1/84 - 5/31/85. | : |                      |

---

Petitioner(s) John Duenskie, Off. of Rock-A-Bye Bedding 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 9/1/84 - 5/31/85. File No. 66059.

A pre-hearing conference on the petition was scheduled before James Domanico, at the offices of the State Tax Commission, 175 Fulton Avenue - 4th Floor Hempstead, New York 11550 on Friday, October 24, 1986 at 9:00 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 John Duenskie, Off. of Rock-A-Bye Bedding be and the same is hereby denied.

DEFAULT ORDER  
ADOPTED BY THE STATE TAX COMMISSION  
ALBANY, NEW YORK  
DECEMBER 15, 1986

P 319 375 223

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

★ U.S.G.P.O. 1985-480-794

PS Form 3800, June 1985

|   |    |
|---|----|
| Sender  |    |
| John Duerstic   |    |
| Street and No.  |    |
| off. of Rock-a-bye Bldg                                       |    |
| P.O. State and ZIP Code                                       |    |
| 205-44 Brian Crescent   |    |
| 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  |    |

Fold at line over top of envelope to the right of the return address.

P 319 375 224

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

★ U.S.G.P.O. 1985-480-794

PS Form 3800, June 1985

|   |    |
|---|----|
| Sender  |    |
| Herald J. Leibowitz   |    |
| Street and No.  |    |
| 530 Central Ave.  |    |
| P.O. State and ZIP Code                                       |    |
| Cedarhurst, NY 11516  |    |
| 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  |    |

Fold at line over top of envelope to the right of the return address.