



Department of Taxation and Finance
Respond to Department Notice

DLN: RTDN1026201814952

RTDN-5
2524
TEXTATT

10/20 V8

Taxpayer information

Taxpayer ID: **XXX-XX-1158** Taxpayer name: **CLAUDE A SIMON**

Issue information

Assessment ID number: **DTF-973.56-0**
Notice description: **Case number:**

Case number:

Reason for response

Provide explanation. You can only enter 1000 characters:

Attachment information

Document type	File name
Proof of Income	CS-2019-W2.pdf

Contact information

Home phone number: **Cell phone number:**

Work phone number: **Extension:**
(212)683-9300

Best time to call: **Designee's name:**

Designee's phone number: **Extension:**

PIN:

Transaction details

Confirmation number: **RTDN1026201814952** Transaction date/time:
10/26/2020 09:24 AM

Submitted by:
CLAUDE SIMON