

Civil Enforcement Division - Region 3

December 5, 2016

Claude A Simon
71 Tonjes Rd
Callicoon NY 12723-5729

Re: Case ID #: E-027487543-8

Dear Sir or Madam:

Your case has been referred to this office for enforcement action.

The total of your New York State assessed tax liability with accrued statutory charges is \$228,296.34. This balance reflects penalty and interest charges calculated to 12/15/2016. Additional statutory charges will accrue on any remaining balance after this date.

You are directed to remit payment in full payable to the **Commissioner of Taxation and Finance** by check, certified check or money order to the address below. Enter your Case ID# listed above on your payment.

If you prefer to pay by credit card or electronic funds withdrawal, please visit our Web site at www.tax.ny.gov and select "Make a Payment".

If you have sent full payment within the last 10 days, please disregard this notice. If you sent payment more than 10 days ago, provide proof of payment and mail to the following address :

NYS Assessment Receivables
General Post Office
P.O. Box 4128
Binghamton, NY 13902-4128

If you have any questions, please call 518-300-0425, between the hours of 8:30 - 4:30 Monday thru Friday.

Sincerely,



Tax Compliance Manager

Payment Document

If name or address shown is incorrect or has changed, enter correct information and return this **entire** payment document.

E-027487543-8
SIMON-CLAUDE A
71 TONJES RD
CALLICOON NY 12723-5729

Instructions - Use the coupon below to pay your outstanding liability(ies).

- Mark an **X** in the appropriate box(es) and enter the amount to be applied and the payment amount enclosed in the spaces provided.
- If you entered a name or address change above, return this **entire** payment document; **otherwise**, detach the coupon below and return it with your payment.

DTF-968.11 (8/13)

Amount to be applied

- ☐ Payment for **Case ID:** E-027487543-8
- ☐ Payment for other outstanding liabilities; enter
Taxpayer ID: _____

\$ _____

\$ _____

Make your check or money order payable to **Commissioner of Taxation and Finance**. Include your Taxpayer ID number on your payment.

If you prefer to pay by credit card or directly from your bank account, visit our Web site at www.tax.ny.gov and select **Make a payment**.

Enter amount enclosed ➔	\$ _____
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Mail to the address below



**NYS ASSESSMENT RECEIVABLES
PO BOX 4127
BINGHAMTON NY 13902-4127**

For office use only

Form track number	•	
Amount received	•	
Payment effect/rec'd dates	•	

DTF-968.11 (8/13)

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Consolidated Statement of Tax Liabilities

If you have any questions, please call
(518) 457-5434.

E-027487543-8
SIMON-CLAUDE A

This is a statement of your tax liabilities, including the liability(ies) referred to in the enclosed notice. Amounts calculated to 12/15/16.

Each liability listed below is identified by an Assessment ID. Use the enclosed Payment Document to make payment on these liabilities.

Recent adjustments, credits or payments may not be included on this Statement. Also, a payment may have been applied to multiple assessments.

This Consolidated Statement summarizes your tax liabilities with New York State under this account. If you have ever used more than one taxpayer identification number for tax reporting purposes, you may owe additional New York State tax liabilities.

NOTE: To view the current balance of any unpaid tax bills, access our Web site at www.tax.ny.gov/online.

THE FOLLOWING LIABILITIES ARE SUBJECT TO COLLECTION ACTION AND THE ACCRUAL OF ADDITIONAL PENALTY AND/OR INTEREST. To avoid such collection action and additional accruals, they must be paid immediately.

Tax Type	Assessment ID	Tax Period Ended	Tax Amount Assessed	(+) Interest Amount Assessed	(+) Penalty Amount Assessed	(-) Assessment Payments/Credits	(=) Current Balance Due
INCOME	L-044883981-3	12/31/12	314,579.00	91,261.00	5,156.34	182,700.00	228,296.34
TOTAL \$							228,296.34