



New York State Department of
Taxation and Finance

NYS Assessment Receivables
PO Box 4127
Binghamton NY 13902-4127

Date: 9/21/2016

IPA ID: E-027487543-D001-4

Monthly payment
amount: \$10,000.00

E-027487543-8
SIMON-CLAUDE A

71 TONJES RD
CALLICOON, NY 12723-5729

**Notice of Approval of Automatic Payment Deductions on
Installment Payment Agreement (IPA)**

Dear Sir or Madam,

We have received your *Authorization Agreement for Automatic Payment Deductions*.
The agreement allows us to automatically deduct payment from your account number
XXXX0938 with CITIBANK NA.
The automatic withdrawal is scheduled to begin with the payment of **\$10,000.00**
due on **10/15/2016**.

Please keep this notice for your records, as we will not mail future billing notices. You
may make additional payments to accelerate repayment of the liability and reduce the
interest accruals. Please include your IPA ID number on your remittance and mail
your payment(s) to:

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

If you have any questions, please contact us at (518) 457-5772.