

116 Rx 3/31/05

2 OLIVER STREET  
BOSTON MA 02109-4901



TAXFRM TAXMAT TAXBAC  
Office Hours: Mon. thru Fri. 9:00 - 5:00  
1-800-597-0801  
Se habla espanol  
1-800-597-0801

WALKER ASSOCIATES, INC. March 25, 2005

### URGENT COLLECTION AGENCY NOTIFICATION

205-079-11982  
DAVID FONTAINE



Pursuant to Massachusetts General Law (M.G.L. Chapter 14, Section 3A), the Department of Revenue has authorized Walker Associates to proceed with collection activity for the tax matter referenced below.

EDP # 205-079-11982

#### Summary of Taxes Due

Tax Category	Name	FID/SS #	Taxes	Penalty	Interest	Total
INDIVIDUAL INCO	DAVID FONTAINE		189.30	97.77	67.42	354.49
Total due for this listing						354.49

Unless Walker Associates is able to resolve this serious tax matter, your account will be returned to the Department of Revenue for enforced collection activity which can include levy of bank account, garnishment of wages, state tax lien and/or seizure of assets and real property. These actions need not occur if you will work with us in a responsive and timely manner.

Please remit your payment in full immediately to our offices and include your SSN or federal identification number on your check as additional penalties and interest may apply.

If you have an abatement pending with the Department of Revenue or an appeal filed with the Appellate Tax Board, you may not be required to pay the disputed amount until your case is resolved. Taxpayers with this type of appeal will be withdrawn from Walker Associates. Please contact the Department of Revenue at (617) 887-6400 for information regarding your appeal or abatement rights.

Delinquent Tax Unit 1-800-597-0801  
WALKER ASSOCIATES, INC.

See reverse side for important information.

Detach here Insure proper credit by returning this portion with your payment or correspondence. Detach here

Name: DAVID FONTAINE

EDP Number: 205-079-11982

Total due for this listing 354.49

FID#	Tax Due	Penalty	Interest	Total
	189.30	97.77	67.42	354.49

Amount Paid:



Mail to:

WALKER ASSOCIATES, INC.  
2 OLIVER STREET  
BOSTON MA 02109-4901  
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☐ Please check if there is a change in billing address information and complete the reverse side.

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### NOTICE OF IMPORTANT RIGHTS

YOU HAVE THE RIGHT TO MAKE A WRITTEN OR ORAL REQUEST THAT TELEPHONE CALLS REGARDING YOUR TAX NOT BE MADE TO YOU AT YOUR PLACE OF EMPLOYMENT. ANY SUCH ORAL REQUEST WILL BE VALID FOR ONLY TEN (10) DAYS UNLESS YOU PROVIDE WRITTEN CONFIRMATION OF THE REQUEST POSTMARKED OR DELIVERED WITHIN SEVEN (7) DAYS OF SUCH REQUEST. YOU MAY TERMINATE THIS REQUEST BY WRITING TO THE COLLECTION AGENCY.

**This is an attempt to collect a tax.  
Any information obtained will be used for that purpose.**

**Payment is expected upon receipt of this statement.  
Please complete this important questionnaire.**

#### Change of Address

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_

#### Power of Attorney Designation

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Fax Telephone Number \_\_\_\_\_  
Power of Attorney form on file? Yes ☐ No ☐  
Please mail/fax Power of Attorney form? Yes ☐ No ☐