



pennsylvania
DEPARTMENT OF REVENUE

**TAXPAYER'S
ACKNOWLEDGEMENT
OF POST AUDIT
CONFERENCE**

Legal Name: Northeastern Pennsylvania Educational
Television Association

Case No.: 100000344412 BP No. 1000964707

Assignment No.: STSCN1644412

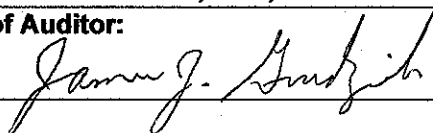
EIN: 231663603 Acct No.: 85350983

Audit Period: 01/01/2014 - 06/30/2016

Instructions:

1. Completion of this form by the taxpayer acknowledges that the audit results have been explained, including areas of deficiency and recommendations for correcting these areas, but does not constitute a waiver of any right to appeal any portion of the assessment resulting from this audit.
2. The audit findings are subject to possible correction upon review.
3. A Notice of Assessment will be issued by the Department with a statement of additions (penalties) and interest, including complete instructions for appeal. Any assessment may be appealed.
4. An Audit Report and Basis of Assessment will be issued by the Department for any audit that results in a change in the net tax due.
5. Any payments received by the Department of Revenue Auditor are to be accepted only for the convenience of the taxpayer.

Audit Period: 01/01/2014 to 06/30/2016	Audit Deficiency: 0.00	Name of Auditor: James Grudzinski, CPA, SRTA
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Date of Post Audit Conference: 11/30/2016	Signature of Auditor: 
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Areas of Deficiency:

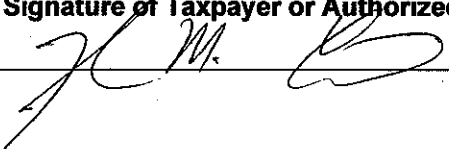
none

Recommendations to Taxpayer for correcting areas of deficiency:

none

- I agree completely with the audit deficiency
 I disagree, only in part (\$ _____), or entirely with the audit deficiency.
 (State the reasons.)

Print Name of Taxpayer or Authorized Representative: Thomas M. Curra	Telephone Number: 570-502-1124
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Signature of Taxpayer or Authorized Representative: 	Title: President + CEO	Date: 11/30/16
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