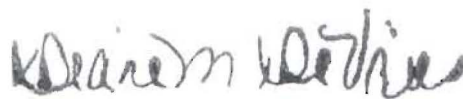




**DATED AND MAILED** this 20th day of May 2016.

**BOARD OF ASSESSMENT APPEALS**

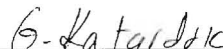


\_\_\_\_\_  
Diane M. DeVries

I hereby certify that this is a true and correct copy of the decision of the Board of Assessment Appeals.



\_\_\_\_\_  
Debra A. Baumbach

  
\_\_\_\_\_  
Gordana Katardzic



*If at any time you decide you DO NOT wish to pursue your appeal and choose to withdraw, please sign this letter and return it to the Board of Assessment Appeals.*

Please do not fill out and file this form if you are entering into a stipulation with the county.

LYONS SEACREST FAMILY TRUST  
5683 SADDLE CREEK TRAIL  
PARKER, CO 80134

2016 MAY 20 AM 8:13

STATE OF COLORADO  
BD OF ASSESSMENT APPEALS

Date: 5/19/16

Docket No.: 68237

Petitioner: LYONS SEACREST FAMILY TRUST -

Hearing Date: 05/24/2016

To: Board of Assessment Appeals  
1313 Sherman Street, Room 315  
Denver, Colorado 80203

Via Facsimile: 303.864.7719

I no longer wish to pursue this matter and request that my property tax appeal be withdrawn. I understand that, by withdrawing this appeal, I relinquish all rights to obtaining a reduction in value for the subject property for tax year(s) 2015. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Douglas County Board Of Equalization resulting in a reduction in value.

#### CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of this document was mailed, faxed, or hand delivered to the Douglas County Board Of Equalization.

  
Signature: LYONS SEACREST FAMILY TRUST