

<b>BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO</b> 1313 Sherman Street, Room 315 Denver, Colorado 80203	<b>Docket Number: 74075</b>
Petitioner: <b>SISTERS OF CHARITY OF LEAVENWORTH HEALTH SYSTEM INC</b>  v. Respondent: <b>DENVER COUNTY BOARD OF COUNTY COMMISSIONERS</b>	
<b>ORDER ON WITHDRAWAL</b>	

The Board received Petitioner's request to withdraw the above-captioned appeal on March 12, 2019. The Board has accepted Petitioner's request.

**FINDINGS OF FACT AND CONCLUSIONS:**

1. Subject property is described as follows:  
     **County Schedule No.: 02355-07-039-000**  
     **Category: Abatement Appeal                      Property Type: Commercial**
  
2. Petitioner is protesting the 15-16 actual value of the subject property.

**ORDER:**

Petitioner's request for withdrawal is granted; therefore, the Board will take no further action on this matter.

DATED this 12th day of March 2019.

BOARD OF ASSESSMENT APPEALS

*Diane M. DeVries*

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

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

*Yesenia Araujo*

\_\_\_\_\_  
Yesenia Araujo

*Debra A. Baumbach*

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



*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.

1ST NET REAL ESTATE SERVICES, INC  
MIKE WALTER  
3333 SOUTH WADSWORTH BLVD, SUITE D-105  
LAKEWOOD, CO 80227

STATE OF COLORADO  
BD OF ASSESSMENT APPEALS  
2019 MAR 12 PM 2:00

Date: 3/12/19

Docket No.: 74075  
Petitioner: SISTERS OF CHARITY OF LEAVENWORTH  
Hearing Date: 04/04/2019


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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 15-16. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Denver County Board Of County Commissioners 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 Denver County Board Of County Commissioners.



Signature: MIKE WALTER