

<b>BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO</b> 1313 Sherman Street, Room 315 Denver, Colorado 80203	<b>Docket Number: 78342</b>
Petitioner: <b>KAISER FOUNDATION HEALTH PLAN OF COLORADO</b> v. Respondent: <b>JEFFERSON COUNTY BOARD OF EQUALIZATION</b>	
<b>ORDER ON WITHDRAWAL</b>	

The Board received Petitioner's request to withdraw the above-captioned appeal on October 27, 2020. The Board has accepted Petitioner's request.

**FINDINGS OF FACT AND CONCLUSIONS:**

1. Subject property is described as follows:  

**County Schedule No.: 300445671**  
**Category: Valuation/Protest Appeal      Property Type: Commercial**
2. Petitioner is protesting the 2019 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 2nd day of November 2020.

**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.

*Debra A. Baumbach*

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

*Martha Hernandez Sanchez*  
Martha Hernandez Sanchez



***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.**

**KAISER FOUNDATION HEALTH PLAN OF COLORADO  
MATTHEW W. POLING  
1999 BROADWAY., SUITE 4100  
DENVER, CO 80202**

Date: 10/26/2020

Docket No.: 78342  
Petitioner: KAISER FOUNDATION HEALTH PLAN OF C  
Hearing Date: 11/30/2020

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

Via Email: baa@state.co.us

I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2019. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Jefferson 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 Jefferson County Board Of Equalization.

  
Signature: MATTHEW W. POLING