

**Arizona Department of  
Economic Security**



**Appeals Board**

Appeals Board No. T-1009974-001-B

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In the Matter of:

XXXXX X. XXXXXXXX, XXXXXXXXXX  
XXX XXXXXXXX XXXXXXXXXX  
XXXXXXXX XXXXXXXX, XXX.  
XXXX X. XXXX XXXX XXX. X-XXX  
XXXXXXXX, XX XXXXX-XXXX

ESA TAX UNIT  
C/O ROBERT DUNN, ASSISTANT  
ATTORNEY GENERAL CFP/CLSA  
1275 WEST WASHINGTON  
PHOENIX, AZ 85007

Employer

Department

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**DECISION**  
**DISMISSED**

THE **EMPLOYER** has asked to withdraw its petition for hearing pursuant to A.R.S. § 23-674(A) and Arizona Administrative Code, Section R6-3-1502(A).

The Appeals Board has jurisdiction in this matter pursuant to A.R.S. § 23-724.

Arizona Administrative Code, Section R6-3-1502(A) provides in pertinent part:

A. The Board or a hearing officer in the Department's Office of Appeals may informally dispose of an appeal or petition without further appellate review on the merits:

1. By withdrawal, if the appellant withdraws the appeal in writing or on the record at any time before the decision is issued; ... (emphasis added).

We have carefully reviewed the record.

THE APPEALS BOARD FINDS there is no reason to withhold granting the request. Accordingly,

THE APPEALS BOARD **DISMISSES** the petition. Any scheduled hearing is cancelled. This decision does not affect any agreement entered into between the Employer and the Department, either concurrently with the withdrawal or subsequent thereto.

DATED:

APPEALS BOARD

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HUGO M. FRANCO, Chairman

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WILLIAM G. DADE, Member

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MARILYN J. WHITE, Member

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**PERSONS WITH DISABILITIES:** Under the Americans with Disabilities Act, the Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service, or activity. For example, this means that if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. Please contact the Appeals Board Chairman at (602) 229-2806.

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## **RIGHT TO FURTHER REVIEW BY THE APPEALS BOARD**

Pursuant to A.R.S. § 23-672(F), the final date for filing a request for review is \_\_\_\_\_.

### **INSTRUCTIONS FOR FILING A REQUEST FOR REVIEW OF THE BOARD'S DECISION**

1. A request for review must be filed in writing within 30 calendar days from the mailing date of the Appeals Board's decision. A request for review is considered filed on the date it is mailed via the United States Postal Service, as shown by the postmark, to any public employment office in the United States or Canada, or to the Appeals Board, 1140 E. Washington, Box 14, [Suite 104], Phoenix, Arizona 85034. Telephone: (602) 229-2806. A request for review may also be filed in person at the above locations or transmitted by a means other than the United States Postal Service. If it is filed in person or transmitted by a means other than the United States Postal Service, it will be considered filed on the date it is received.
  
  2. Parties may be represented in the following manner:  
  
An individual party (either claimant or opposing party) may represent himself or be represented by a duly authorized agent who is not charging a fee for the representation; an employer, including a corporate employer, may represent itself through an officer or employee; or a duly authorized agent who is charging a fee may represent any party, providing that an attorney authorized to practice law in the State of Arizona shall be responsible for and supervise such agent.
  
  3. The request for review must be signed by the proper party and must be accompanied by a memorandum stating the reasons why the appeals board's decision is in error and containing appropriate citations of the record, rules and other authority. Upon motion, and for good cause, the Appeals Board may extend the time for filing a request for review. The timely filing of such a request for review is a prerequisite to any further appeal.
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A copy of the foregoing was mailed by certified mail on  
to:

(x) Er: XXXXXXXX XXXXXXXXXXXX Acct. No: XXXXXXXX-XXX  
XXXXXXXX XXXXXXXX, XXX.

(x) ROBERT DUNN III  
ASSISTANT ATTORNEY GENERAL, CFP/CLA  
1275 W. WASHINGTON – SITE CODE 040A  
PHOENIX, AZ 85007

(x) JOHN B. NORRIS, CHIEF OF TAX  
EMPLOYMENT SECURITY ADMINISTRATION  
P. O. BOX 6028 - SITE CODE- 911B  
PHOENIX, AZ 85005

By: \_\_\_\_\_  
For The Appeals Board