

**APPLICATION FOR TAX REFUND**

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Finalized

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	COUNTY AUDITOR 2010 OCT 14 PM 1:06	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>		Phone (area code and number) <b>(956) 318-2157</b>
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>		

**To apply for a tax refund, the taxpayer must complete the following**

**Step 1:**  
**Owner's name and address**  
 Owner's name: **SANTO ANDREI LTD** *for tax year 2003 Currently Satransi Joint Venture*  
 Present mailing address (number and street):  
**1410 DOVE AVE**  
 City, town or post office, state, ZIP code: **MCALLEN, TX 78504-3404**  
 Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **STEELE & PERSHING AN IRR TR N40' S355' E639.96'**

**Step 2:**  
**Describe the property**  
**LOT 6 BLK 14 0.54AC NET**  
 Address or location of property:  
 Account number of property: **S5950.00.014.0006.03** *R2910228* OR **11535840**  
 Tax receipt number:

**Step 3:**  
**Give the tax payment information**

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2007	3/12 / 08	\$ 9126.94	\$ 9126.94
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5.		/	\$ TOTAL	\$ 9126.94

Taxpayer's reason for refund (attach supporting documentation): **ADJUSTMENT**

MM

**Step 4:**  
**sign the form**

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature: **sign here** [Signature]  
 Date of application for tax refund: [Date]

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

**Step 5:**  
**Tax refund Determination**

This tax refund is  Approved  Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: *Oct 10-18-10*  
*J.C. 10/19/10*

Authorized officer: **sign here** [Signature] Date: **10/20/10**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code): **sign here** [Signature] Date: **3/25/08**

*8/10/10 ac*