

Office of Tax Assessor-Collector

# COUNTY of HIDALGO



*Armando Barrera, Jr. RTA*  
February 8, 2012  
Assessor and Collector

P.O. Box 178  
Edinburg, Texas 78540-0178  
(956) 318-2157 • Fax (956) 318-2733

The Honorable Ramon Garcia  
Hidalgo County Commissioners  
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

An application for a refund must be made within three years after the date of the payment or the taxpayer waives the right to the refund. The governing body of the taxing unit may extend the deadline provided by Subsection (c) for a single period not to exceed two years on a showing of good cause by the taxpayer.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

Armando Barrera, Jr. RTA

Abj: mm

Enclosure

Xc: Hidalgo County Auditor  
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



*Armando Barrera Jr., RTA*

Assessor and Collector

P.O. Box 178  
Edinburg, Texas 78540-0178  
(956) 318-2157 • Fax (956) 318-2733

ACCOUNT NUMBER	PAYER	AMOUNT
1.E3300.00.276.0011.00	FIRST NATIONAL BANK	\$ 8,037.01
2.L0450.00.051.0000.00	REPUBLIC SERVICES INC	\$ 7,129.61
3.K2400.00.000.0236.10	INTER NATIONAL BANK	\$ 10,601.18
4.M1120.00.002.005B.00	BBVA COMPASS	\$ 3,249.75
5.M5840.01.000.0054.00	BAKER, MERLIN & LORRAINE	\$ 3,492.08
6.M5840.01.000.0090.00	CORELOGIC	\$ 2,809.26
7.R3190.01.000.0025.01	TOMAC JOHN P	\$ 2,644.12
8.R3190.01.000.0025.01	TOMAC JOHN P	\$ 2,808.88
9.S3092.00.000.0034.00	INTERNATIONAL BANK	\$ 3,352.07
10.S3092.00.000.0034.00	RIO PROP VENTURES	\$ 4,125.73
11.T3256.00.000.0009.00	MENDEL PETER	\$ 4,318.46
12.T4040.02.000.0036.00	MUNOZ MARIA ALMA	\$ 2,550.34





**ARMANDO BARRERA JR., RTA**  
**Hidalgo County Tax Assessor - Collector**  
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 12/15/2011

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 02/27/12

*J. C. 2/27/12*

FIRST NATIONAL BANK  
 P.O. BOX 810  
 EDINBURG, TX 78540

Account Number E3300-00-276-0011-00 HCAD No. 165149
Legal Description of the Property EDINBURG ORIGINAL TOWNSITE LOT 11-12 BLK 276  122 E CANO  OWNER: FNBG FINANCIAL GROUP LP

**2011 OVERAGE AMOUNT \$8,037.01**

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

**APPLICATION FOR PROPERTY TAX REFUND**

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>First National Bank</u>	Relationship to Property Owner
	Mailing Address <u>PO Box 810</u>	Daytime Telephone Number <u>(456) 385-3508</u>
	City, State, Zip Code <u>Edinburg, TX 78540</u>	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2011</u> and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input type="checkbox"/> Overpaid the account	
	<input checked="" type="checkbox"/> Duplicate payment <u>taxes were paid twice; by Landtitle USA + First National Bank</u>	
	<input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	<u>\$8,037.01</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$8,037.01</u>
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input checked="" type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account For tax year	
	<input type="checkbox"/> Escrow for next year's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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	
	SIGN HERE <u>Setora Quintana</u>	Date of application <u>1/18/12</u>
	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	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>2/7/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>1-26-12</u>

This application must be completed, signed, and submitted with supporting documentation to be valid.

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	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>	DATE: <u>02/2/12</u>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>		Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>NAVARRO, HECTOR DBA NAVARROS TTOPS &amp; TOWERS PD BY: REPUBLIC SERVICES, INC.†</b>
	Present mailing address (number and street) <b>638 RAIVEN DR</b>
	City, town or post office, state, ZIP code <b>DONNA, TX 78537</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt):

**LA BLANCA "B" NW 1.0AC FOR IMPS-39.95AC BLK 51 1.0AC NET**

Address or location of property:

**206952\***

Account number of property: **L0450.00.051.0000.00** OR Tax receipt number: **13439428, 15195490, 19373239, 17606222**

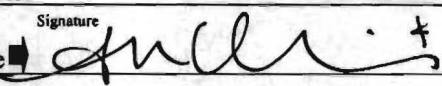
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2011 *	12/16	/ 2011	\$ 2454.60
2.	2010 *	01/19	/ 2011	\$ 2382.75	\$ 2,382.75 *
3.	2009 *	01/08	/ 2010	\$ 1313.43	\$ 1,313.43 *
4.	2008 *	01/29	/ 2009	\$ 978.83	\$ 978.83 *
5. TOTAL			/	\$	\$ 7,129.61

Taxpayer's reason for refund (attach supporting documentation): **ACCT# 206952\* WAS PAID IN ERROR 2008-2011, PLEASE REFUND BACK TO REPUBLIC SERVICES, INC.**

**MG**

**Step 4: sign the form**

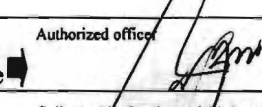
"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

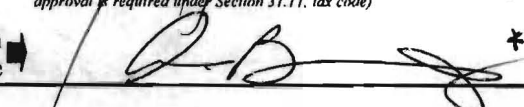
Signature:  Date of application for tax refund: **01/17/12\***

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

Authorized officer:  Date: **2/7/12**

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):  Date: **1-26-12\***

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>GILBERTO BADILLO PAID BY: INTER NATIONAL BANK †</b>
	Present mailing address (number and street) <b>2800 S. CAGE BLVD †</b>
	City, town or post office, state, ZIP code <b>PHARR, TX 78577 †</b>
	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt):


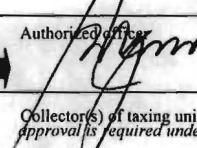

<b>Step 2: Describe the property</b>	KELLY PHARR TRACT N165'-S660' & N42.5'-S495'-E333'EXC NE0.26AC FOR IMP--W786.72'-S660'&EXC N85'-S660'-E333' 4.40AC GR 4.27AC NET	
	Address or location of property:	
	450823 †	
	Account number of property: <b>K2400.00.000.0236.10 †</b>	Tax receipt number: <b>OR 19472276</b>

<b>Step 3: Give the tax payment information</b>	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 ENTITITES	2011 †	12/27	/	2011	\$ 22555.71 †
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5. TOTAL			/		\$	\$ 10,601.18 ^

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT 4 - NON CLERICAL ERROR FOR 2011 YEAR. SECTION 25.25(D)**

MG

<b>Step 4: sign the form</b>	"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 	Date of application for tax refund
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.		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE:  2/3/12
	Authorized officer sign here 	Date 2/2/12	
	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 	Date 2/2/12	

# 30974



ARMANDO BARRERA JR., RTA  
Hidalgo County Tax Assessor - Collector  
PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157  
Fax No.: 956-318-2733

Print Date: 06/15/2010

**COPY**

APR 21 2011  
FINAL NOTICE

BBVA COMPASS \*  
ATTN: JASON QUALLS  
P.O. BOX 4444 \*  
HOUSTON, TX 77210

AUDITED BY: THE HIDALGO  
COUNTY AUDITOR'S OFFICE  
DATE: Dec 21/12

*J. Cahill*

Account Number M1120-00-002-005B-00 HCAD No. R615931*
Legal Description of the Property MARKET CENTER LOT 5B BLK 2 1408 E JASMINE AVE OWNER: LALO CAVAZOS CONSTRUCTION INC

2009 OVERAGE AMOUNT \$3,249.75

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 43: PHARR,SAN JUAN,ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

**APPLICATION FOR PROPERTY TAX REFUND**

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above	Name	BBVA Compass - TIMS		Relationship to Property Owner	
	8333 Douglas Ave, 2nd Floor City, State, Zip Coa	Dallas TX 75225		Daytime Telephone Number	214-346-6415
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2009*</u> and am the party entitled to the refund.				
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/>	Overpaid the account			
	<input type="checkbox"/>	Duplicate payment			
	<input type="checkbox"/>	Paid in error (explain)			
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	29,811.98			
	Total tax, penalty, and interest amount owed for the year	26,562.23			
	Amount of refund claimed	3249.75*			
Step 5: How should the refund be processed?	<input type="checkbox"/>	Mail to Property Owner			
	<input checked="" type="checkbox"/>	Mail to Payer at address in Step 1			
	<input type="checkbox"/>	Transfer this amount to account	For tax year <u>2009</u>		
	<input type="checkbox"/>	Escrow for next year 's taxes			
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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			Date of application	
	SIGN HERE	<i>[Signature]</i>		7-26-11*	
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					
AUDITORS USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <i>[Signature]</i> Date: <u>2/7/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <i>[Signature]</i> Date: <u>1-26-12*</u>

This application must be completed, signed, and submitted with supporting documentation to be valid.

# APPLICATION FOR TAX REFUND


Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

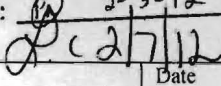
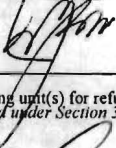

**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1: Owner's name and address</b>	Owner's name <b>BAKER, MERLIN &amp; LORRAINE *</b>
	Present mailing address (number and street) <b>3404 N LONNY LN *</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78541 *</b>
	Phone (area code and number)

<b>Step 2: Describe the property</b>	Legal description (or attach copy of the tax bill or tax receipt): <b>MONTE CRISTO GOLF &amp; COUNTRY CLUB PH 1, LOT 54</b>
	Address or location of property: <b>674510 *</b>
	Account number of property: <b>M5840.01.000.0054.00 *</b>
	Tax receipt number: <b>2049207, 16741652</b>
	<b>OR</b>

<b>Step 3: Give the tax payment information</b>	<b>Name Of Taxing Unit from Which Refund is Requested</b>	<b>Year for Which Refund is Requested</b>	<b>Date of the Tax Payment</b>	<b>Amount of Taxes Paid</b>	<b>Amount of Tax Refund Requested</b>
	1. ALL ENTITITES	2010 *	11/09 / 2010	\$ 2592.48	\$ 2592.48 *
	2. CITY OF EDINBURG	2010 *	11/05 / 2010	\$ 899.60	\$ 899.60 *
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3492.08 A
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT 4 - GRANT DVHS FILED LATE</b>					
<b>MG</b>					

<b>Step 4: sign the form</b>	"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 	Date of application for tax refund
<b>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.</b>		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>2-3-12</b> 
	Authorized officer sign here 	Date <b>2/2/12</b>
	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 	Date <b>2/2/12</b>

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>


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


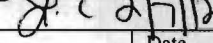


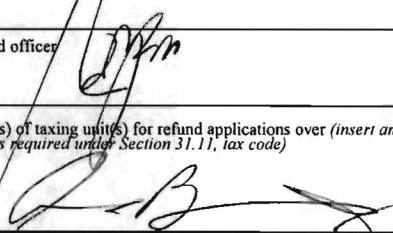
Step 1: Owner's name and address	Owner's name <b>JOHN WAYNE KARST † PAID BY: CORELOGIC †</b>
	Present mailing address (number and street) <b>3334 CNTRY CLB DR. †</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78542 †</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt):

Step 2: Describe the property	<b>MONTE CRISTO GOLF &amp; COUNTRY CLUB PH 1, LOT 90</b>	
	Address or location of property:	
	<b>674546 †</b>	
	Account number of property: <b>M5840.01.000.0090.00 †</b>	Tax receipt number: <b>OR 19658579</b>

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	2011 †	12/29 / 2011	\$ 2809.26 †
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.	TOTAL		/	\$	\$ 2809.26 †
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT 4 - VETERAN CHANGED</b>					
<b>MG</b>					

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 	Date of application for tax refund
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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE:  2/3/12 
	Authorized officer sign here 	Date <b>2/2/12</b>	
	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 		

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1:</b> Owner's name and address	Owner's name <b>TOMAC JOHN P *</b>	Phone (area code and number)
	Present mailing address (number and street) <b>2507 LESLIE *</b>	
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539 *</b>	

Legal description (or attach copy of the tax bill or tax receipt): **RIO VERDE PH 1 LT 25**

**Step 2:**  
Describe the property

Address or location of property:  
**792323 \***

Account number of property: **R3190.01.000.0025.01 \*** OR 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	2010 *	1/31-9/30-12/29 / 2010	\$ 2644.12 *	\$ 2644.12 *
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 2644.12 *

Taxpayer's reason for refund (attach supporting documentation): **SUPP 21 APPLY TO ACCT#680846**

**HF**

**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."


sign here  Signature \_\_\_\_\_ Date of application for tax refund \_\_\_\_\_


**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:  2/6/12

sign here  Authorized officer \_\_\_\_\_ Date **2/7/12**

sign here  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) \_\_\_\_\_ Date **2/2/12**

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>TOMAC JOHN P +</b>	
	Present mailing address (number and street) <b>2507 LESLIE +</b>	
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539 +</b>	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **RIO VERDE PH 1 LT 25**

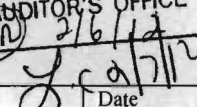


<b>Step 2: Describe the property</b>	Address or location of property:	
	<b>792323 +</b>	
	Account number of property:	Tax receipt number:
	<b>R3190.01.000.0025.01 +</b>	<b>OR</b>

<b>Step 3: Give the tax payment information</b>	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	2009 +	02/28-06/30-9/30	/ 2011	\$ 2808.88 +
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2808.88 A

Taxpayer's reason for refund (attach supporting documentation): **SUPP 31 NEW ACCT#R3190.01.000.0025.00**

**HF**

<b>Step 4: sign the form</b>	"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 	Date of application for tax refund
	<b>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.</b>	

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>2/6/12</b>  Date <b>2/7/12</b>
	Authorized officer sign here 		
	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 	Date <b>2/2/12</b>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1:</b> Owner's name and address	Owner's name <b>SHEA LTD ✕ PAYERS: INTERNATIONAL BANK ✕</b>
	Present mailing address (number and street) <b>217 CONQUEST</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539</b>
	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **SHEAVA LT 34**

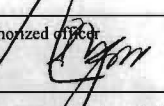

<b>Step 2:</b> Describe the property	Address or location of property: <b>654745 ✕</b>
	Account number of property: <b>S3092.00.000.0034.00 ✕</b>
	Tax receipt number: <b>OR</b>

<b>Step 3:</b> 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	2008	04/30	/ 2009	\$ 9252.92
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3352.07 ✕

Taxpayer's reason for refund (attach supporting documentation): **SUPP 37 VALUE DECREASE ✕**

HF

<b>Step 4:</b> 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 	Date of application for tax refund
	<b>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.</b>	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <i>gr 2/6-12</i> <i>J. C. 2/7/12</i>
	Authorized officer sign here 	Date <i>2/7/12</i>
	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 	Date <i>2/2/12 ✕</i>

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>


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

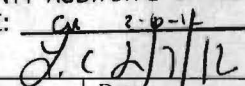
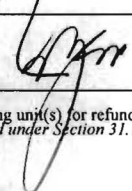

<b>Step 1:</b> Owner's name and address	Owner's name <b>SHEA LTD &amp; PAYERS: RIO PROP VENTURES &amp;</b>
	Present mailing address (number and street) <b>217 CONQUEST</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHEAVA LT 34**

<b>Step 2:</b> Describe the property	Address or location of property:  <b>654745</b>
	Account number of property: <b>S3092.00.000.0034.00</b>
	Tax receipt number:  <b>OR</b>

<b>Step 3:</b> 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	2009	07/30 / 2010	\$ 11425.12	\$ 4125.73
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4125.73 <sup>d</sup>
Taxpayer's reason for refund (attach supporting documentation): <b>SUPP VALUE DECREASE &amp;</b>					
<b>HF</b>					

<b>Step 4:</b> 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 <b>sign here</b> 	Date of application for tax refund
	<b>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.</b>	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		APPROVED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>Feb 20 2012</u> 
	Authorized officer <b>sign here</b> 	Date	<u>2/7/12</u>
	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) <b>sign here</b> 	Date	<u>2/2/12</u>



**ARMANDO BARRERA JR., RTA**  
**Hidalgo County Tax Assessor - Collector**  
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 01/09/2012

**MENDEL PETER**  
 1103 S FLAG ST  
 PHARR, TX 78577-4432

**AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE**

DATE: ~~8/12/12~~  
*2/2/12*

<b>Account Number</b> T3256-00-000-0009-00★ HCAD No. 707677★
<b>Legal Description of the Property</b> THE GRAND ESTATES LOT 9★  1103 S FLAG ST  OWNER: MENDEL PETER★

**2011 OVERAGE AMOUNT \$4,318.46★**

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR,SAN JUAN,ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

**APPLICATION FOR PROPERTY TAX REFUND**

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

<b>Step 1: Identify the Payer requesting the refund if different than shown above</b>	Name		Relationship to Property Owner
	Mailing Address		Daytime Telephone Number
	City, State, Zip Code		
<b>Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.</b>	I paid the taxes for year <u>2011★</u> and am the party entitled to the refund.		
<b>Step 3: Mark the reason for the refund and provide a brief explanation</b>	<input type="checkbox"/> Overpaid the account		
	<input checked="" type="checkbox"/> Duplicate payment		
	<input type="checkbox"/> Paid in error (explain)		
<b>Step 4: Provide payment information</b> Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer		<u>8636.92</u>
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		<u>4,318.46★</u>
<b>Step 5: How should the refund be processed?</b>	<input checked="" type="checkbox"/> Mail to Property Owner		
	<input type="checkbox"/> Mail to Payer at address in Step 1		
	<input type="checkbox"/> Transfer this amount to account		For tax year
	<input type="checkbox"/> Escrow for next year's taxes		
<b>Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed</b>	By completing and signing this 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		
	<b>SIGN HERE</b>	<i>[Signature]</i>	Date of application <u>1/13/12★</u>
	<b>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</b>		
<b>AUDITORS USE ONLY:</b>	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>2/7/12</u>
<b>TAX OFFICE USE ONLY:</b>	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>2/2/12★</u>

This application must be completed, signed, and submitted with supporting documentation to be valid.



**ARMANDO BARRERA JR., RTA**  
**Hidalgo County Tax Assessor - Collector**  
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 01/04/2012

**MUNOZ MARIA ALMA**  
 2701 N 43RD ST  
 MCALLEN, TX 78501-3433

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 1/12/12  
*Jc 2/1/12*

<b>Account Number</b> T4040-02-000-0036-00 * HCAD No. 544404 *
<b>Legal Description of the Property</b> THE VILLAGE OF WESTLAKES UT 2 LOT 36 *  2701 N 43RD ST *  OWNER: MUNOZ MARIA ALMA *
<b>2011 OVERAGE AMOUNT \$2,550.34 *</b>

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

**APPLICATION FOR PROPERTY TAX REFUND**

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above <input checked="" type="checkbox"/>	Name	<i>SAA (same as above)</i>		Relationship to Property Owner	<i>Self</i>
	Mailing Address			Daytime Telephone Number	<i>956-460-2121</i>
	City, State, Zip Code				
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year _____ and am the party entitled to the refund.				
Step 3: Mark the reason for the refund and provide a brief explanation	<input type="checkbox"/> Overpaid the account				
	<input type="checkbox"/> Duplicate payment				
	<input type="checkbox"/> Paid in error (explain)				
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer				
	Total tax, penalty, and interest amount owed for the year				
	Amount of refund claimed				
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner				
	<input type="checkbox"/> Mail to Payer at address in Step 1				
	<input type="checkbox"/> Transfer this amount to account			For tax year	
	<input type="checkbox"/> Escrow for next year 's taxes				
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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				
	<input checked="" type="checkbox"/> SIGN HERE	<i>Maria Alma Marquez *</i>		Date of application	<i>man</i> <i>01/31/2012 *</i>
	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				
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: <i>2/1/12</i>	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: <i>1-26-12 *</i>	

This application must be completed, signed, and submitted with supporting documentation to be valid.