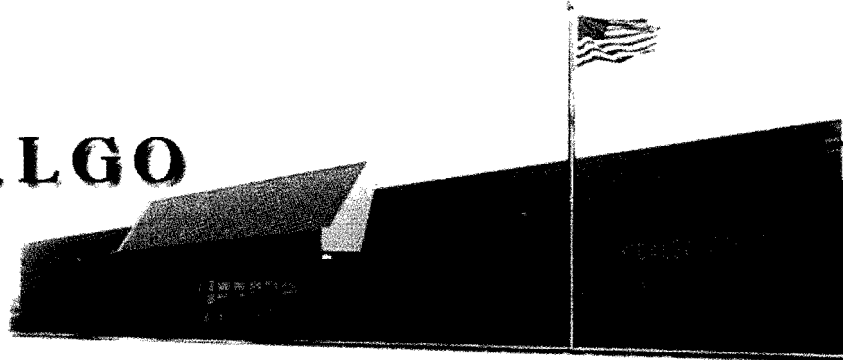


Office of Tax Assessor-Collector

COUNTY of HIDALGO



*Armando Barrera, Jr., RTA*

March 15, 2012

Assessor and Collector

The Honorable Ramon Garcia  
Hidalgo County Commissioners  
Edinburg, Texas 78539

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

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

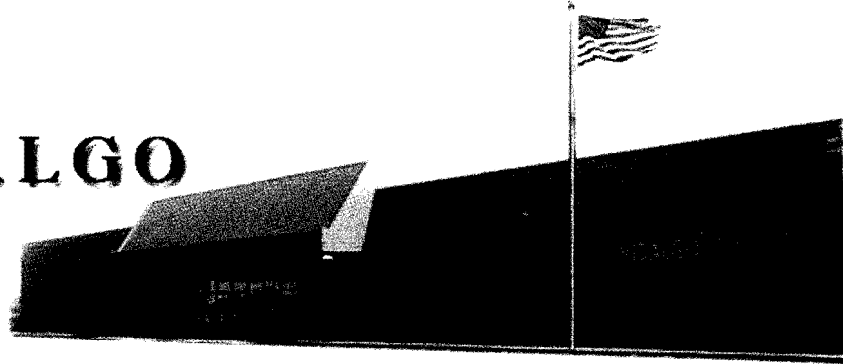
Abj: mm

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  
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ACCOUNT NUMBER	PAYER	AMOUNT
1.B2620.00.000.0024.00	FLOR AREVALO	\$ 3,200.00
2.W1065.00.000.0001.00	TEX BEST TRAVEL CENTERS INC	\$ 5,816.40

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>03/12/12</u>	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) P O BOX 178	City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

<b>Step 1:</b> Owner's name and address	Owner's name PENA ALAIN I PAID BY: FLOR AREVALO*
	Present mailing address (number and street) 2701 N 45 <sup>TH</sup> ST
	City, town or post office, state, ZIP code MCALLEN, TX 78501-3793

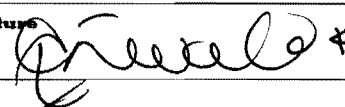
**Phone (area code and number)**  
227-7363

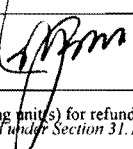
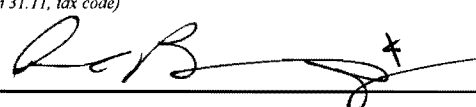
Legal description (or attach copy of the tax bill or tax receipt): BENTSEN ROYAL ESTATES LOT 24

<b>Step 2:</b> Describe the property	Address or location of property:  662695*
	Account number of property:  B2620.00.000.0024.00
	Tax receipt number:  OR 20606618

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	2009*	2/29	/ 12	\$ 3200.00
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3200.00*

Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR.  
 APPLY TO 2011 AS PER TAXPAYER.\*  
 MM

<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."	
	sign here  * Signature	Date of application for tax refund 03/02/12*
	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.	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	sign here  Authorized officer	Date 3/13/12
	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 3/16/12*



**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: 01/17/2012

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: Dec 31/12  
*J.C. 3/14/12*

TEX-BEST TRAVEL CENTERS, INC.  
 P.O. BOX 1810  
 MCALLEN, TX 78505

Account Number W1065-00-000-0001-00 HCAD No. 665708 *
Legal Description of the Property WARE ROAD INVESTMENTS LOT 1  1308 S WARE RD  OWNER: PHILLIPS JEAN G

**2011 OVERAGE AMOUNT \$5,816.40**

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	Name <u>Tex-Best Travel Centers, Inc</u> * Relationship to Property Owner <u>Owner</u>
	Mailing Address <u>P.O. Box 1810 *</u> Daytime Telephone Number <u>956-279-4340</u>
	City, State, Zip Code <u>McAllen, Tx. 78505</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 type="checkbox"/> Duplicate payment
	<input checked="" type="checkbox"/> Paid in error (explain) <u>Company incorrectly made duplicate payment.</u>
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer <u>\$11,632.80</u>
	Total tax, penalty, and interest amount owed for the year <u>5,816.40</u>
	Amount of refund claimed <u>\$5,816.40 *</u>
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 checked="" type="checkbox"/> Transfer this amount to account For tax year <u>PO Box 1810</u>
	<input type="checkbox"/> Escrow for next year's taxes <u>McAllen, Tx. 78505</u>
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>[Signature]</u> * Date of application <u>2/2/12 *</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>3/13/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> * Date: <u>3/2/12 *</u>

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

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