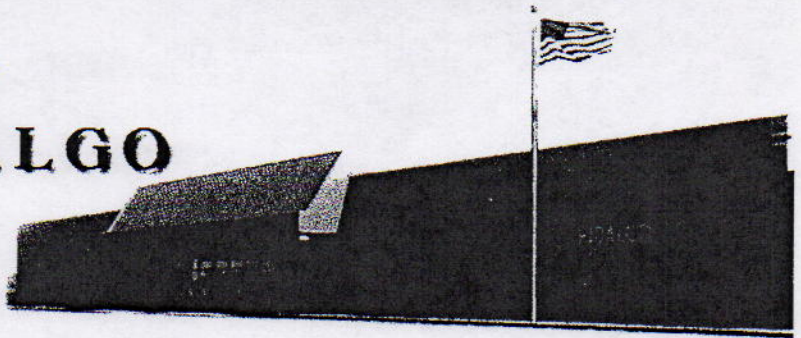


Office of Tax Assessor-Collector  
**COUNTY of HIDALGO**



*Armando Barrera Jr., RTA*

Assessor and Collector

May 3, 2012

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.

When completed, please return the attached to this office.

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

Very truly yours,

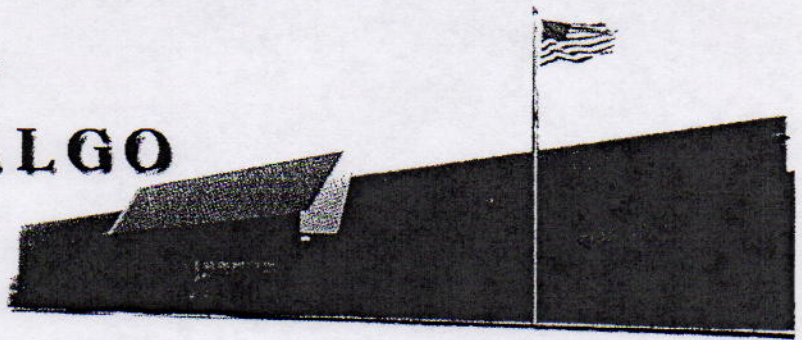
Armando Barrera, Jr. RTA

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
1.00017.90.150.0005.40	EL PASO E&P COMPANY LP	\$ 5,142.71
2.B4304.00.000.0032.00	CORELOGIC	\$ 3,157.52
3.C2263.00.000.0030.00	CORELOGIC	\$ 4,635.38
4.C4440.04.023.0006.00	CORELOGIC/GMAC MORTGAGE	\$ 4,867.93
5.C9525.03.000.0020.00	CORELOGIC	\$ 5,846.47
6.D7111.01.000.0052.00	CANDIDA V OR ROBERTO RAMOS	\$ 2,881.29
7.E2050.00.000.0027.00	CORELOGIC/BBVA COMPASS	\$ 5,401.77
8.H2070.03.000.0114.00	CORELOGIC C/O CITIMORTGAGE	\$ 2,774.78
9.I4044.00.000.0030.00	CORELOGIC C/O OCWEN LOAN SERVICING	\$ 3,627.92
10.L2450.00.000.0031.00	CORELOGIC C/O GMAC	\$ 2,953.70
11.L6448.02.000.0042.00	CENLAR C/O CORELOGIC	\$ 5,938.94
12.M1200.00.000.0009.05	CORELOGIC	\$ 3,136.07
13.M3197.00.000.0094.00	CORELOGIC	\$ 2,600.86
14.T3800.00.000.0014.00	CORELOGIC/CHASE	\$ 3,028.07
15.V0564.03.000.0224.00	CORELOGIC	\$ 2,946.62
16.W3800.00.208.0000.08	GMAC/CORELOGIC	\$ 4,510.39
17.W4290.03.000.0073.00	CORELOGIC/CHASE	\$ 6,614.12
18.W7384.01.000.0047.00	BBVA COMPASS BANK c/o CORELOGIC	\$ 2,692.30

# 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

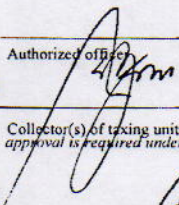
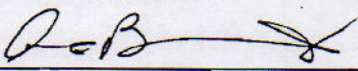
<b>Step 1:</b> Owner's name and address	Owner's name <b>EL PASO E&amp;P COMPANY LP †</b>
	Present mailing address (number and street) <b>P.O. BOX 4372 †</b>
	City, town or post office, state, ZIP code <b>HOUSTON, TX 77210 †</b>
	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **MONTE CHRISTO N END**

<b>Step 2:</b> Describe the property	Address or location of property: <b>642017 †</b>
	Account number of property: <b>00017-90-150-0005-40 †</b>
	Tax receipt number: <b>OR 13746149</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 †	1/30 / 2009	\$ 8,485.31 †	\$ 5,142.71 †
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 5,142.71 †
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPL 39 - ENITITY CODE CORRECTION</b>					
<b>APPLY BACK TO ACCOUNT MF</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
	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	
	Authorized officer <b>sign here</b> 	Date <b>5/1/12</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) <b>sign here</b> 	Date <b>4/20/12</b>

AUDITED BY: THE HIDALGO COUNTY AUDITOR OFFICE  
DATE: (PM) 4-26-12 



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

021612145

Print Date: 01/04/2012

Payer:  
 CORELOGIC 4

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

<b>Account Number</b> B4304-00-000-0032-00 4 HCAD No. 692105 4
<b>Legal Description of the Property</b> BRISAS DEL NORTE LOT 32 2608 NOTRE DAME AVE 4
OWNER: SALDIVAR MANUEL JR DBA MS INVESTMENTS 4

2011 OVERAGE AMOUNT \$3,157.52 4

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	same as above	Relationship to Property Owner
	Mailing Address	P.O. BOX 961250	Daytime Telephone Number
	City, State, Zip Code	Ft. Worth, TX 76161-0250	817-694-2601
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2011 4 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		\$3,157.52
	Total tax, penalty, and interest amount owed for the year		\$3,157.52
	Amount of refund claimed		\$3,157.52
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		Date of application
	SIGN HERE	<i>Mani as Agent</i>	4-11-12
	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		
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 5/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 4/18/12

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 5/1/12 *[Signature]*



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

02161 2149

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

Print Date: 01/04/2012

Payer:  
 CORELOGIC 4  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

Account Number C2263-00-000-0030-00 4 HCAD No. 681887 4
Legal Description of the Property CASTLE RIDGE ESTATES LOT 30 2405 BILTMORE 4 OWNER: ADAMS ORIN M & EVA 4

2011 OVERAGE AMOUNT \$4,635.38 4

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	same as above	Relationship to Property Owner
	Mailing Address	P.O. BOX 961250	Daytime Telephone Number 817-699-2601
	City, State, Zip Code	Ft. Worth, TX 76161-0250	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2011 4 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		\$3,113,712.42
	Total tax, penalty, and interest amount owed for the year		\$4,635.38
	Amount of refund claimed		\$4,635.38
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	Dennis as Agent	Date of application 4-11-12
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			
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature]	Date: 5/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature]	Date: 2/15/12

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 5/1/12 [Signature]

4/12



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: 01/04/2012

CORELOGIC  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4/26/12

*Handwritten signature and date*  
 4/26/12

Account Number C4440-04-023-0006-00*
HCAD No. 135821*
Legal Description of the Property CIMARRON COUNTRY CLUB SECTN 4 PHASE I & SECTION IV LOT 6 BLK 23
OWNER: ZARATE JOSE M & CRISELLA *

2011 OVERAGE AMOUNT \$4,867.93 \*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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 31.11e 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	GMAC Mortgage		Relationship to Property Owner	Mortgage Co
	Mailing Address	P.O. Box 961219		Daytime Telephone Number	800.729.8426 x2340
	City, State, Zip Code	Ft. Worth TX			76161-0219
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 checked="" type="checkbox"/>	Overpaid the account	<u>H/O has 100% disabled vet exemption</u>		
	<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			4867.93	
	Total tax, penalty, and interest amount owed for the year			0	
	Amount of refund claimed			4867.93*	
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>Allison Stahl *</u>		Date of application <u>4/20/12*</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <u>[Signature]</u> Date: <u>4/25/12*</u>

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

4/25 2012



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

021612139

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

Print Date: 01/11/2012

Payer:  
CORELOGIC &  
-  
1 CORELOGIC DR MAIL CODE: 4-5  
WESTLAKE, TX 76262

Account Number C9525-03-000-0020-004 HCAD No. 5820824
Legal Description of the Property CROWN POINTE PH 3 LOT 20 1615 SHARI LEE DR 4 OWNER: FRANSEN M OLAF & GAIL 4

2011 OVERAGE AMOUNT \$5,846.47 4

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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	Same as above	Relationship to Property Owner
	Mailing Address	P.O. Box 961250	Daytime Telephone Number
	City, State, Zip Code	Ft. Worth, TX 76161-0250	
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> <u>4</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	\$6,243.68	
	Total tax, penalty, and interest amount owed for the year	\$6,243.68	
	Amount of refund claimed	\$5,846.47	
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		Date of application
	SIGN HERE	<i>[Signature]</i> as Agent	4-11-12
	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		
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 5/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 4/18/12

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: (P) 5/1/12 *[Signature]*



**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: 02/03/2012

CANDIDA V OR ROBERTO RAMOS  
 3017 N 33<sup>RD</sup> ST  
 MCALLEN, TX 78501

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4-26-12 [Signature]

Account Number D7111-01-000-0052-00 ✕ HCAD No. 544730 ✕
Legal Description of the Property DOS ARBOLITOS PH 1 LOT 52 ✕ 2302 COYOTE AVE ✕ OWNER: VILLARREAL JULIO E MONICA ✕

2011 OVERAGE AMOUNT \$2,881.29 ✕

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 37: CITY OF SAN JUAN, 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 <u>CANDIDA RAMOS</u>	Relationship to Property Owner <u>PARENT</u>
	Mailing Address <u>3017 N. 33<sup>RD</sup> ST.</u>	Daytime Telephone Number <u>956-683-5739</u>
	City, State, Zip Code <u>MCALLEN TX. 78501</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	
	<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>2881.29</u> ✕	
	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 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>Candida Ramos</u> ✕	Date of application <u>04-16-2012</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> ✕ Date: <u>4/25/12</u> ✕

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

4/25



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

021612090

Print Date: 01/04/2012

CORELOGIC  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4-26-12  
*[Signature]*

<b>Account Number</b> E2050-00-000-0027-00 ✕ HCAD No. 599586 ✕
<b>Legal Description of the Property</b> EBONY ESTATES LOT 27 ✕ 1701 SCHOOL LN ✕ OWNER: MIRANDA MARIA E RAZO & CIRILO E HERNANDE ✕

2011 OVERAGE AMOUNT \$5,401.77 ✕

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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</b> requesting the refund if different than shown above	Party <i>DRVA (Compass) Co Corelogic</i> Relationship to Property Owner <i>Property Research</i>
	Mailing Address <i>PO Box 961250</i> Daytime Telephone Number <i>(817) 899-2601</i>
	City, State, Zip Code <i>Fort Worth, TX 76161</i>
<b>Step 2: Refunds are only issued</b> 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.
<b>Step 3: Mark the reason for the</b> refund and provide a brief explanation	<input type="checkbox"/> Overpaid the account
	<input checked="" type="checkbox"/> Duplicate payment
	<input type="checkbox"/> Paid in error (explain)
<b>Step 4: Provide payment</b> information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer <i>\$ 5401.77</i>
	Total tax, penalty, and interest amount owed for the year
	Amount of refund claimed <i>\$ 5401.77 ✕</i>
<b>Step 5: How should the refund</b> 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
<b>Step 6: Sign the application</b> 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 <i>[Signature]</i>
	SIGN HERE _____ Date of application <i>4/16/12 ✕</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>5/1/12</i>	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>[Signature]</i> Date: <i>4/25/12 ✕</i>	

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

021612 119

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

Print Date: 01/04/2012

CORELOGIC  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: AM 4-26-12 10/5/12

Account Number H2070-03-000-0114-00 ✖ HCAD No. 457176 ✖
Legal Description of the Property HERITAGE OAKS PH 3 LOT 114 ✖ 2206 LAUREL OAK WAY RD ✖ OWNER: LOZANO JAYNIE L ✖

2011 OVERAGE AMOUNT \$2,774.78 ✖

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>Corelogic % Citimortgage</u>	Relationship to Property Owner
	Mailing Address <u>1 Corelogic Dr.</u>	Daytime Telephone Number
	City, State, Zip Code <u>Westlake, TX. 76262</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
	<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>2,774.78</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$ <u>2,774.78</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>Ashtley Adams % Corelogic</u>	Date of application <u>9/12/12</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/18/12</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

021612121

Print Date: 01/04/2012

CORELOGIC  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4-30-12 / RS / 5/11/12

Account Number I4044-00-000-0030-00*
HCAD No. 661066*
Legal Description of the Property INSPIRATION ACRES LOT 30*
1908 LEANDRO ST*
OWNER: ROCHA ROSA MARIA*
2011 OVERAGE AMOUNT \$3,627.92*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 49: LA JOYA 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>Corelogic % Owen Loan Servicing</u> Relationship to Property Owner
	Mailing Address <u>1 Corelogic Dr.</u> Daytime Telephone Number
	City, State, Zip Code <u>Westlake, TX - 76262</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
	<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>\$3,627.92</u>
	Total tax, penalty, and interest amount owed for the year
	Amount of refund claimed <u>\$3,627.92*</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>Arley West % Corelogic</u> Date of application <u>4/12/12*</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>4/18/12*</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

021612129

Print Date: 01/04/2012

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4-30-12

Account Number L2450-00-000-0031-00 HCAD No. 214235
Legal Description of the Property LAKE JAMES LOT 31 & N8'-LOT 32 2714 LAKESHORE DR OWNER: GARCIA MYRA & PEGGY

2011 OVERAGE AMOUNT \$2,953.70

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>Corelogic eto GMAC</u>	Relationship to Property Owner
	Mailing Address <u>PO Box 961250</u>	Daytime Telephone Number <u>817-699-3162</u>
	City, State, Zip Code <u>Ft. Worth, TX 76161</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 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	<u>8920.07</u>
	Total tax, penalty, and interest amount owed for the year	<u>0</u>
	Amount of refund claimed	<u>2953.70</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 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>[Signature]</u>	Date of application <u>4/10/12</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>2/17/12</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

021412P71

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

Print Date: 01/04/2012

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4-26-12

*[Handwritten signature]*

Account Number L6448-02-000-0042-00 HCAD No. 573061
Legal Description of the Property LOST PINES PH 2 LOT 42 2502 SEQUOIA DR OWNER: DIAZ MARIA & SAMUEL C

2011 OVERAGE AMOUNT \$5,938.94

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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>Central Co Corelogic</u>	Relationship to Property Owner <u>Agent Co Corelogic</u>
	Mailing Address <u>P.O. Box 761250</u>	Daytime Telephone Number <u>817-699-3933</u>
	City, State, Zip Code <u>Ft. Worth TX 76161</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	
	<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 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>Christine K. Witt * Agent Co Corelogic</u>	Date of application <u>4/18/12</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/25/12</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

0214120 <sup>44</sup> Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 01/04/2012

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: RM

4-30-12 *[Signature]*

Account Number  
 M1200-00-000-0009-05 \*  
 HCAD No. 625933 \*

Legal Description of the Property  
 MARSHALL, WAYNE LOT 9 \*

OWNER: ORTIZ ADALBERTO & CORINA \*

2011 OVERAGE AMOUNT \$3,136.07 \*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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	same as above		Relationship to Property Owner	
	Mailing Address	P.O. BOX 961250		Daytime Telephone Number	817-699-2001
	City, State, Zip Code	Ft. Worth, Tx 76161-0250			
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 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	\$197,169.53			
	Total tax, penalty, and interest amount owed for the year	\$3,136.07			
	Amount of refund claimed	\$3,136.07*			
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	<i>[Signature]</i> as Agent *		Date of application	4-11-12*
	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				
AUDITORS USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <i>[Signature]</i> Date: 5/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <i>[Signature]</i> * Date: 4/10/12*

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

02161 2165

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

Print Date: 01/04/2012

CORELOGIC  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4/18/12

<b>Account Number</b> M3197-00-000-0094-00* HCAD No. 708402*
<b>Legal Description of the Property</b> MEADOW RIDGE LOT 94* 4608 VIOLET AVE* OWNER: MUNERLYN CUBBY N & MARIAN D  2011 OVERAGE AMOUNT \$2,600.86*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 51: SHARYLAND 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>same as above</u>	Relationship to Property Owner
	Mailing Address <u>P.O. Box 961250</u>	Daytime Telephone Number <u>817-649-2601</u>
	City, State, Zip Code <u>Ft Worth, TX 76161-0250</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 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	<u>\$332,259.32</u>
	Total tax, penalty, and interest amount owed for the year	<u>\$2,600.86</u>
	Amount of refund claimed	<u>\$2,600.86*</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>Pam as Agent*</u>	Date of application <u>4-12-12*</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/18/12*</u>

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

4/25



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

082411044  
 Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 12/22/2010

**FINAL NOTICE**  
 AUG 17 2011

CORELOGIC

LN# 1911419449

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE

DATE: 4-26-12 still

Account Number  
 T3800-00-000-0014-00 \*  
 HCAD No. 301853 \*

Legal Description of the Property  
 THE VILLAGE LOT 14 \*  
 4608 N 7TH ST \*

OWNER: FEDERAL HOME LOAN MORTGAGE  
 CORP

2010 OVERAGE AMOUNT \$3,028.07 \*

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.

CK# 60726779 11/19/10

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Chase</u>	Relationship to Property Owner <u>mtg company</u>
	Mailing Address <u>P.O. Box 961227</u>	Daytime Telephone Number <u>817-699-4231</u>
	City, State, Zip Code <u>FT. WORTH, TX 76161</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>8010*</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	<u>\$ 3028.07</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$ 3028.07*</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>[Signature]</u>	Date of application <u>1-3-12*</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/18/12*</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

021412 083

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 01/04/2012

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: EM

4-26-12

Account Number V0564-03-000-0224-00 ✱ HCAD No. 685093 ✱
Legal Description of the Property VALLE ALTO NORTHEAST PH 3 Lot 224 ✱  1113 35TH ✱
OWNER: COVARRUBIAS GUILLERMO ✱

2011 OVERAGE AMOUNT \$2,946.62 ✱

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 29: CITY OF HIDALGO, 52: VALLEY VIEW 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>Core Logic</u>	Relationship to Property Owner <u>None</u>
	Mailing Address <u>P.O. Box 961230</u>	Daytime Telephone Number <u>1-877-442-2797</u>
	City, State, Zip Code <u>Fort Worth, TX 76161-9810</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>Intended to pay parcel # V056403000024400</u>	
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	<u>\$ 2,946.62 ✱</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>Paul Droebe for Core Logic ✱</u>	Date of application <u>04/11/2012 ✱</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> ✱Date: <u>4/25/12 ✱</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

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 04-26-11  
*J. C. [Signature]*

Account Number W3800-00-208-0000-08 *
HCAD No. 324871 *
Legal Description of the Property WEST TRACT S1AC-N2.5AC-W3AC-S14.97AC FT 208 1AC GR 0.68AC NET
1620 W MILE 9 1/4 N
OWNER: GARCIA LAURIE ANN & MARCO A *

CORELOGIC  
 -  
 1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

2011 OVERAGE AMOUNT \$4,510.39

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 3: EMS DIST #1, 53: WESLACO 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>EMAC Corelogic</u>	Relationship to Property Owner <u>Lien Holder</u>
	Mailing Address <u>P.O. Box 961219</u>	Daytime Telephone Number <u>8176992717</u>
	City, State, Zip Code <u>Ft. Worth TX 76161</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>Chk# 60697847</u>	<u>11/15/11</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>4510.39</u>
	Total tax, penalty, and interest amount owed for the year	<u>                    </u>
	Amount of refund claimed	<u>4510.39</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>Melanie Ryan</u> *	Date of application <u>3-22-12</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>4/26/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/4/12</u> *

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

4/12



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

082411049

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

Print Date: 12/22/2010

**FINAL NOTICE**  
 AUG 17 2011

LN# 1980 433690

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
 WESTLAKE, TX 76262

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: AM 12/4/12  
 426-12 5112

Account Number W4290-03-000-0073-00*
HCAD No. 539302*
Legal Description of the Property WESTGATE WOODS #3 LOT 73*
2622 WOODLAND DR*
OWNER: BURKET LAURA & FERDIE*
2010 OVERAGE AMOUNT \$6,614.12*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 40: CITY OF WESLACO, 53: WESLACO 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.

CK# 60726767 11-19-10

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Chex</u>	Relationship to Property Owner <u>mtg company</u>
	Mailing Address <u>P.O. Box 961227</u>	Daytime Telephone Number <u>817-699-7221</u>
	City, State, Zip Code <u>Ft. Worth, TX 76161</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>2010</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	<u>\$6614.12</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$6614.12*</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	
	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>[Signature]</u> *	Date of application <u>1-3-12*</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>5/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> *Date: <u>4/18/12*</u>

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

4/1-

021412070



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

AUDITED BY: THE HIDALGO  
COUNTY AUDITOR'S OFFICE  
DATE: 4/17/12

CORELOGIC

1 CORELOGIC DR MAIL CODE: 4-5  
WESTLAKE, TX 76262

Account Number  
W7384-01-000-0047-00  
HCAD No. 696567

Legal Description of the Property  
WOODLAND RIDGE PH I LOT 47  
2607 LINCOLN AVE

OWNER: GONZALEZ LUIS RIOS & CRISTINA  
DEL PILAR

2011 OVERAGE AMOUNT \$2,692.30

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 48: MISSION 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 EBVA Compass Bank to Corelogic	Relationship to Property Owner Agent to Corelogic
	Mailing Address PO Box 94250	Daytime Telephone Number 817-691-3533
	City, State, Zip Code Ft. Worth TX 76161	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2011 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	
	<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 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 Christina Rios Agent to Corelogic	Date of application 4/18/12
	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	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature] Date: 5/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature] Date: 4/25/12

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

4/25