

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

May 29, 2012

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.A7030.01.000.0003.00	GMAC/CORELOGIC	\$ 2,806.53
2.C9538.02.000.0121.00	GMAC/CORELOGIC	\$ 2,978.37
3.I7027.81.521.1600.00	LUCIO ROSE LEE	\$ 11,259.77
4.I7027.82.000.4492.00	CHESAPEAKE OPERATING	\$ 84,556.48
5.I7027.83.394.8100.00	HEINTZ WILLIAM A JR %EDWARD JONES C	\$ 2,979.39
6.L3384.00.000.0008.00	BBVA COMPASS BANK/CORELOGIC	\$ 2,967.69
7.P4000.00.000.0048.00	FIRST AMERICAN	\$ 3,671.98
8.R0540.00.000.0001.00	JEMA ENTERPRISES LLC	\$ 6,621.00
9.T2100.00.241.0010.02	HERMAN SKLOSS/SASCON INC	\$ 3,228.53
10.T3659.00.000.0003.00	PNIC MORTGAGE/CORELOGIC	\$ 3,121.62
11.V3053.01.000.0040.00	INDYMAC MORTGAGE SERVICING/CORELO	\$ 2,710.50
12.W0100.00.042.0010.01	HERMAN SKLOSS/SASCON INC	\$ 4,719.12





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

021612143

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 05-17-12
UT 5/20/12



Account Number A7030-01-000-0003-00 ✗ HCAD No. 578077 ✗
Legal Description of the Property AZUCAR ESTATES PH I LOT 3 432 BOWIE ST OWNER: SANCHEZ ANNETTE

CORELOGIC

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

2011 OVERAGE AMOUNT \$2,806.53

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 4: EMS DIST #2, 23: CITY OF ELSA, 42: EDCOUCH-ELSA 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	GMAC/CoreLogic		Relationship to Property Owner	owner
	Mailing Address	P.O. Box 961219		Daytime Telephone Number	817-619-2717
	City, State, Zip Code	Fort Worth, Texas 76161			
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	2980.40			
	Total tax, penalty, and interest amount owed for the year	-			
	Amount of refund claimed	2806.53			
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	<u>Melanie Perez</u> ✗		<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>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <u>[Signature]</u> ✗ Date: <u>5/9/12</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

021612106

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

Print Date: 01/04/2012

RECEIVED
 APR 20 2012
 HIDALGO COUNTY TAX OFFICE
 COLLECTION DEPT MAIL

Account Number C9538-02-000-0121-00 *
HCAD No. 648290 *
Legal Description of the Property CRYSTAL ESTATES PH 2 LOT 121 *
3603 MOCKINGBIRD AVE *
OWNER: HOLLIS BILLY & KARIN *
2011 OVERAGE AMOUNT \$2,978.37*

CORELOGIC

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

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 5-18-12 5/24/12

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.

Step 1: Identify the Payer requesting the refund if different than shown above	Name	GMAC/CoreLogic		Relationship to Property Owner	lienholder
	Mailing Address	P.O. Box 961219		Daytime Telephone Number	817-6992717
	City, State, Zip Code	Fort Worth, Texas 76161			
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	2978.37			
	Total tax, penalty, and interest amount owed for the year	-			
	Amount of refund claimed	2978.37*			
Step 5: How should the refund be processed?	<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			
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>Melaw Leje</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>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <u>[Signature]</u> Date: <u>5/24/12</u>

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

5/16

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5/25/12 4/5/29/12	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		Phone (area code and number) (956) 318-2157
City, town or post office, state, ZIP code EDINBURG TX 78540-0178		

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

Step 1: Owner's name and address	Owner's name LUCIO ROSE LEE *
	Present mailing address (number and street) 5835 E TEXAS RD *
	City, town or post office, state, ZIP code EDINBURG, TX 78542
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2011 NON EXISTENT PER OPERATOR**

Step 2: Describe the property	Address or location of property: 799447*
	Account number of property: 17027.81.521.1600.00
	Tax receipt number: OR

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	\$ 11259.77	\$ 11259.77
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 11259.77*
Taxpayer's reason for refund (attach supporting documentation): SUBMITTED/ENTERED WRONG DIVISION					
ORDER UPDATED ON 12/02/2011 BY OPERATOR*					
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."	
	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	
	Authorized officer sign here	Date 5/29/12
	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 5/25/12*

5/25

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	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	DATE: <u>5/25/12</u>	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	4/5/2010	Phone (area code and number) (956) 318-2157

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

Step 1:	Owner's name CHESAPEAKE OPERATING*
Owner's name and address	Present mailing address (number and street) PO BOX 18496*
	City, town or post office, state, ZIP code OKLAHOMA CITY, OK 73154-0496
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2011 NON EXISTENT PER OPERATOR**

Step 2:	Describe the property
	17027,GARZA ET AL UNIT 3
	Address or location of property: 797028*
	Account number of property: 17027.82.000.4492.00 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	2011*	01/31 / 2012	\$ 84556.48	\$ 84556.48
		2.		/	\$	\$
		3.		/	\$	\$
		4.		/	\$	\$
		5. TOTAL		/	\$	\$ 84556.48*
Taxpayer's reason for refund (attach supporting documentation): SUBMITTED/ENTERED WRONG DIVISION						
ORDER UPDATED ON 12/02/11 BY OPERATOR* Apply to Acct 818551*						
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."
	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
	Authorized officer sign here
	Date 5/29/12
	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 5/25/12*

5/25

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 05/25/12 4/25/12	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

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

Step 1: Owner's name and address	Owner's name HEINTZ WILLIAM A JR %EDWARD JONES CO †
	Present mailing address (number and street) PO BOX 260777 †
	City, town or post office, state, ZIP code CORPUS CHRISTI, TX 78426

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2011 NON EXISTENT PER OPERATOR**

Step 2: Describe the property	17027,GARZA ET AL UNIT 3	
	Address or location of property:	
	799394 †	Tax receipt number:
	Account number of property: I7027.83.394.8100.00	OR

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 †	11/18 / 2011	\$ 2979.39	\$ 2979.39
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2979.39 †
Taxpayer's reason for refund (attach supporting documentation): SUBMITTED/ENTERED WRONG DIVISION ORDER UPDATED ON 12/02/11 BY OPERATOR †					
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."	
	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	
	Authorized officer sign here	Date 5/29/12
	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 5/25/12 †

5/25



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

021612/09

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: 5-18-12 5/20/12

Account Number L3384-00-000-0008-00 ✗ HCAD No. 682095 ✗
Legal Description of the Property LAS VILLAS AT AUTUMN RIDGE LOT 8 ✗ 3615 MONETTE ✗ OWNER: SAMPILO RHEA P

2011 OVERAGE AMOUNT \$2,967.69 ✗

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	BBVA Compass Bank		Relationship to Property Owner	Mortgage Company
	Mailing Address	701 S 32nd St		Daytime Telephone Number	205 247 6906
	City, State, Zip Code	Bham AL 35233			
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	2967.69		
	<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	2967.69			
	Total tax, penalty, and interest amount owed for the year				
	Amount of refund claimed	2967.69 ✗			
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	Pam Williams ✗		Date of application	4/20/12 ✗
	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: <u>[Signature]</u> Date: <u>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: <u>[Signature]</u> Date: <u>5/9/12 ✗</u>

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

5/16

AK# 169386990

082411090

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>5/16/12</u> <u>07/27/12</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

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

Step 1: Owner's name and address	Owner's name JULIA, LUIS MANUEL & KATHERINE D (PAID BY: FIRST AMERICAN) *
	Present mailing address (number and street) 2420 PARK CIR
	City, town or post office, state, ZIP code MCALLEN, TX 78501

Legal description (or attach copy of the tax bill or tax receipt): **PARKLAND ESTATES LOT 48**

Step 2: Describe the property	Address or location of property: R256984 *
	Account number of property: P4000.00.000.0048.00
	Tax receipt number: OR 12805745

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	2008 *	12/30	/ 2008	\$ 3671.98
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3671.98 *

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

CK# 71937034 * 11/25/08

NB

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 K Jackson Clo Chase *	Date of application for tax refund 12-7-11 *

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.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer [Signature]	Date 5/25/12
	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) [Signature]	Date 4/4/12 *

4/12 5/16

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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



Step 1: Owner's name and address	Owner's name JEMA ENTERPRISES LLC &
	Present mailing address (number and street) 2424 S 23rd ST
	City, town or post office, state, ZIP code MCALLEN, TX 78503
	Phone (area code and number)

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

Step 2: Describe the property	RAMIREZ N110'-S119.19'-W526.83'-E731.83' LOT 1	
	Address or location of property:	
	711681 &	
	Account number of property: R0540.00.000. 0001.00 &	Tax receipt number:
OR SEVERAL		

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	NOV / 2011	\$ 1,750.00	\$
	2. ALL ENTITIES	2011	FEB / 2012	\$ 19,009.85	\$
	3. ALL ENTITIES	2011	MARCH / 2012	\$ 9,069.34	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 6,621.00 &
Taxpayer's reason for refund (attach supporting documentation): SUPPL 7 - VALUE DECREASED					MF

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: <u>05/24/12</u> <u>UTS/25/12</u>
	Authorized officer sign here 	Date	<u>5/29/12</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) sign here 	Date	<u>5/16/12 &</u>

5/22 5/23



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: 03/20/2012

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 05/11/12
4/5/12

Account Number T2100-00-241-0010-02 HCAD No. 295553 †
Legal Description of the Property TEX-MEX SURVEY S 6 1/4-W25AC EXC E328'-W353'-N111.6'-S236.60' LOT 10 SEC 241 5.41AC GR 5.25AC NET 1220 N CLOSNER OWNER: SKLOSS HERMAN A

SASCON INC.
 HERMAN SKLOSS, CAROL SKLOSS
 JASON SKLOSS
 2302 N BRYAN
 MISSION, TX 78574

2011 OVERAGE AMOUNT \$3,228.53 †

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 31.11e 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 <u>Herman Skloss †</u> Relationship to Property Owner <u>Owner</u>
	Mailing Address <u>2302 N Bryan Rd †</u> Daytime Telephone Number <u>956 821-6942</u>
	City, State, Zip Code <u>Mission Tx 78574</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>11576.58</u>
	Total tax, penalty, and interest amount owed for the year
	Amount of refund claimed
Step 5: How should the refund be processed?	<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
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>Carol Skloss †</u> Date of application <u>4-03-12 †</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>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>4/12/12 †</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

021612172

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

Print Date: 01/04/2012

pop

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 05-17-12
UP 5/20/12

CORELOGIC

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

Account Number T3659-00-000-0003-00 & HCAD No. 580261 &
Legal Description of the Property THE ROCKS LOT 3 8210 N 23RD LN OWNER: VARGAS GUADALUPE JR & MARISELA

2011 OVERAGE AMOUNT \$3,121.62

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>FNIC mortgage / Core Logic</u>	Relationship to Property Owner
	Mailing Address <u>P.O. Box 96250</u>	Daytime Telephone Number
	City, State, Zip Code <u>St. Wolff TX</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>[Signature]</u>	Date of application <u>4/26/12</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>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>5/11/12</u>

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

5/16



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

1 021612164

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

Print Date: 01/04/2012

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: of 5-12-12
of 5/21/12

CORELOGIC

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

Account Number
 V3053-01-000-0040-00 *
 HCAD No. 683323 *

Legal Description of the Property
 Ventana Del Sol Ph 1 Lot 40

4019 N 42ND LN

OWNER: MATUTTE ISIDRO R

2011 OVERAGE AMOUNT \$2,710.50

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	IndyMac Mortgage Servicing	
	Mailing Address	6900 Beatrice Dr. Kalamazoo, MI 49009	
	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 <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	2710.50	
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed	2710.50	
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>Michele Achto</u> *	Date of application <u>4-17-12</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>5/25/12</u> *
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>5/9/12</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: 03/20/2012

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 05/16/12
4/17 5/22/12

Account Number W0100-00-042-0010-01 HCAD No. 318412 *
Legal Description of the Property WEST ADDN. TO SHARYLAND S10AC-N20AC LOT 42-10 OWNER: SKLOSS HERMAN

SASCON INC.
 HERMAN SKLOSS, CAROL SKLOSS
 JASON SKLOSS
 2302 N BRYAN
 MISSION, TX 78574

2011 OVERAGE AMOUNT \$4,719.12

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 21: CITY OF ALTON, 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 <u>Herman Skloss *</u>	Relationship to Property Owner <u>Owner</u>
	Mailing Address <u>2302 N Bryan Rd</u>	Daytime Telephone Number <u>956 821-6942</u>
	City, State, Zip Code <u>Mission TX 78574</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>19889.53</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	
Step 5: How should the refund be processed?	<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	
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>Carol Skloss *</u>	Date of application <u>4/03-12*</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>5/25/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/12/12*</u>

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

4/18 5/16