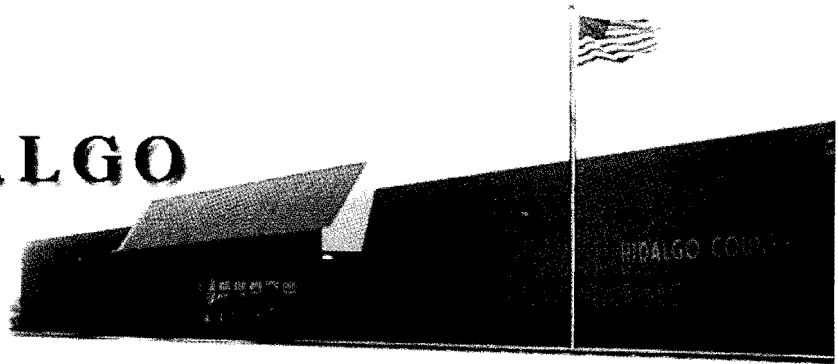


Office of Tax Assessor-Collector
COUNTY of HIDALGO



Armando Barrera Jr., RTA
Assessor and Collector

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

June 28, 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

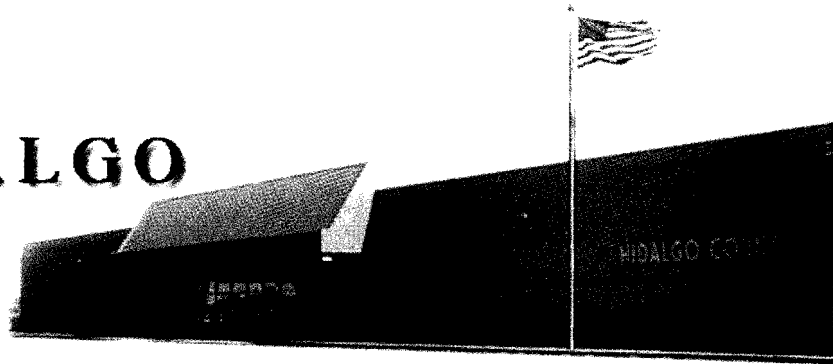
Abj: mm

Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr., R7A

Assessor and Collector

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

ACCOUNT NUMBER	PAYER	AMOUNT
B4965.00.000.0070.00	CORELOGIC	\$ 2,532.84
L5000.00.000.001A.00	FIRST AMERICAN / CORELOGIC TAX REAL ESTATE	\$ 3,220.28
L6050.00.000.0371.00	ANNA GUERRA	\$ 3,000.00
M3961.00.000.0001.01	CANO FAMCO	\$ 7,818.57
O0600.01.000.0003.00	GILBERTO FEDERICO ROMERO CLOUD	\$ 2,669.18
O4510.00.000.0053.00	CORELOGIC	\$ 2,664.23
P0050.00.000.0015.00	JUAN DE DIOS CAVAZOS MA ELENA TREVINO DE CAVAZOS	\$ 13,245.46
Q0950.00.001.0008.00	CORELOGIC	\$ 2,992.60
S4847.04.000.0010.00	COLONIAL SAVINGS	\$ 4,978.28
W7384.01.000.0047.00	BAC TAX SERVICE	\$ 2,692.30



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

082411007

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

Print Date: 12/22/2010

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 22 6-22-12
07-6-13/12

FINAL NOTICE
AUG 17 2011

Washington Mutual
 1-Correllogieway
 Roanoke, TX
 74202

Account Number B4965-00-000-0070-00 & HCAD No. 580472 &
Legal Description of the Property BUCHANAN ESTATES LOT 70 3403 AMARETTO DR OWNER: GUAJARDO PEDRO
2010 OVERAGE AMOUNT \$2,532.84 &

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 LN# 0605989599

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>CHASE</u>	Relationship to Property Owner <u>MFG. Company</u>
	Mailing Address <u>P.O. Box 961227</u>	Daytime Telephone Number <u>817-609-2293</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="radio"/> Overpaid the account	
	<input type="radio"/> Duplicate payment	
	<input type="radio"/> 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>\$ 2532.84</u> <u>CK# 2009174</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$ 2532.84</u>
Step 5: How should the refund be processed?	<input type="radio"/> Mail to Property Owner	
	<input checked="" type="radio"/> Mail to Payer at address in Step 1	
	<input type="radio"/> Transfer this amount to account	For tax year
	<input type="radio"/> 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>Jackson Coleman</u> &	Date of application <u>12-12-11</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 37.00	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>6/27/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>6/15/12</u>

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

6/19

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>Dec 4/22/12</u> <u>4/26/25/12</u>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1:	Owner's name ALEMAN MARIA PAID BY: ANNA GUERRA *
Owner's name and address	Present mailing address (number and street) PO BOX 161 *
	City, town or post office, state, ZIP code ALAMO, TX 78516-0161
	Phone (area code and number)

Step 2:	Legal description (or attach copy of the tax bill or tax receipt): LOS EJIDOS DE REYNOSA LOT 371 0.24AC OUT OF
Describe the property	.30 AC
	Address or location of property: 222863 *
	Account number of property: L6050.00.000.0371.00 OR Tax receipt number: 20547378

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	2000-2011 *	2/17 / 12	\$ 3000.00	\$ 3000.00
		2.		/	\$	\$
		3.		/	\$	\$
		4.		/	\$	\$
		5.		/	\$ TOTAL	\$ 3000.00 *
	Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR. CORRECT PAYEE NAME ON RECEIPT. CLERK FAILED TO CHANGE NAME. *					
	HF Refund Back to Tax Payer. mm.					

Step 4:	sign the form	
	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	sign here Signature ANNA GUERRA *	Date of application for tax refund 6/13/12 *
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

Step 5:	Tax refund Determination	
	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	sign here Authorized officer	Date 6/27/12
	sign here Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date 6/15/12 *

6/19

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 RIO GRANDE CONTAINER INC * PAYER: CANO FAMCO †
	Present mailing address (number and street) 1405 E EXPY 83
	City, town or post office, state, ZIP code WESLACO, TX 78596

Phone (area code and number)

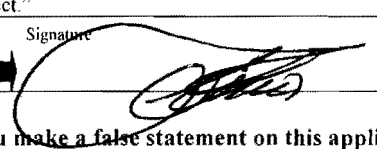
Legal description (or attach copy of the tax bill or tax receipt): **MID VALLEY CMMRCL PLAZA LTS 13&4**

Step 2: Describe the property	2.99 ACS OF LT 1
	Address or location of property: R723296 *
	Account number of property: M3961.00.000.0001.01 *
	Tax receipt number: OR

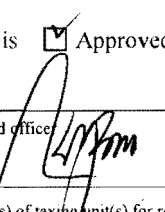
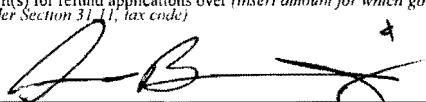
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2008	02/28 / 2012	\$ 7818.57	\$ 7818.57
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 7818.57

Taxpayer's reason for refund (attach supporting documentation): **AS PER MR. CANO PROPERTY DOES NOT BELONG TO HIM SHOULD NOT HAVE PAID THE TAXES FOR 2008**

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  *	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 OFFICE DATE: <u>06-22-12</u> <u>UT 6/25/12</u>
	Authorized office 	Date 6/27/12
	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 6/6/12

6/11/12

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 VALDEZ ROSENDO E & PAYER: GILBERTO FEDERICO ROMERO CLOUD &
	Present mailing address (number and street) PO BOX 720387
	City, town or post office, state, ZIP code MCALLEN, TX 78504
	Phone (area code and number)

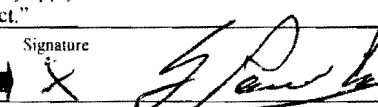
Legal description (or attach copy of the tax bill or tax receipt): **OAK MANOR ESTATES #1 LT 3**

Step 2: Describe the property	Address or location of property:
	250236 &
	Account number of property: O0600.01.000.0003.00 &
	Tax receipt number: OR

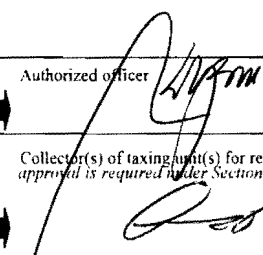
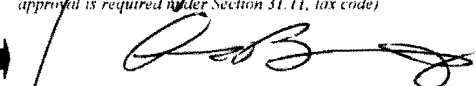
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2009 &	01/28	/ 2010	\$ 2669.18 &
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2669.18 /

Taxpayer's reason for refund (attach supporting documentation): **AS PER OWNER HE IS RESPONSILBE FOR HIS TAXES**

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 6/21/2012

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
	Authorized officer sign here 	Date 4/27/12	DATE: 6/26/12 470120112
	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	

6/25



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

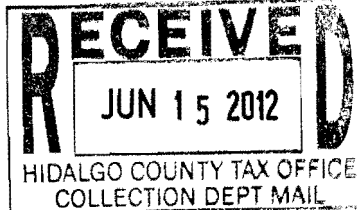
AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: Dec 6/21/12
 47 6/25/10

021412066

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

Print Date: 01/04/2012

421080000
 8452965881



CORELOGIC

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

Account Number 04510-00-000-0053-00 HCAD No. 620645*
Legal Description of the Property ORANGE BLOSSOM LOT 53 1516 OAK DR OWNER: WELLIVER EDWIN

2011 OVERAGE AMOUNT \$2,664.23

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.

CK # 80615703 H-10-12

Step 1: Identify the Payer requesting the refund if different than shown above	Name CHASE Refund Dept*	Relationship to Property Owner
	Mailing Address PO Box 961227*	Daytime Telephone Number 817-648-3093
	City, State, Zip Code FORT 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 <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	2664.23
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	2664.23*
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>CHEARN C/O CHASE*</u>	Date of application <u>4-5-12*</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>6/27/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>6/19/12*</u>

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

6/19



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: 01/30/2012

Payer:

JUAN DE DIOS CAVAZOS *
 MA ELENA TREVINO DE CAVAZOS
 9801 SOUTH CAGE BLVD. STE 5
 PHARR, TX 78577

Account Number P0050-00-000-0015-00 * HCAD No. 587448 *
Legal Description of the Property PALAZZO AT CIMARRON LOT 15 1701 PALAZZO DR OWNER: CARDENAS JUAN DE DION CAVAZOS

2011 OVERAGE AMOUNT \$13,245.46 *

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 JUAN DE DIOS CAVAZOS CARDENAS	Relationship to Property Owner OWNER
	Mailing Address 1701 PALAZZO AT CIMARRON	Daytime Telephone Number (956) 802 60 40
	City, State, Zip Code MISSION, TX 78572-7577	
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>MY BANK PAID ON NOV/30/2011</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	\$13,245.46
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$13,245.46
Step 5: How should the refund be processed?	<input checked="" type="checkbox"/> Mail to Property Owner <u>PLEASE CALL TO: (956) 802 60 40</u>	
	<input type="checkbox"/> Mail to Payer at address in Step 1 <u>PICK UP AT THE PROPERTY TAX OFFICE</u>	
	<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 	Date of application 6-13-12
	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>Agm</u> Date: <u>6/27/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>6/25/12</u>

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

6/25

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 6/26/12
LTW/26/12

021412 065



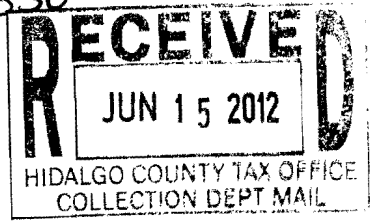
ARMANDO BARRERA JR., RTA
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178

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

421080000

Print Date: 01/04/2012

#0619932856



Payer:
CORELOGIC &

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

Account Number Q0950-00-001-0008-00 & HCAD No. 555940 &
Legal Description of the Property QUAIL HOLLOW LOT 8 BLK 1 872 QUAIL HOLLOW DR OWNER: PITTS JEFFREY L & JENNIFER D &

2011 OVERAGE AMOUNT \$2,992.60 &

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# 80015712 1-10-12

Step 1: Identify the Payer requesting the refund if different than shown above	Name CHASE Refund Dept	Relationship to Property Owner
	Mailing Address PO BOX 961227	Daytime Telephone Number 817-699-3093
	City, State, Zip Code FORT 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	2992.60
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	2992.60
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 CHEAN GO CHASE	Date of application 4-5-12
	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: 6/27/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature] Date: 6/19/12

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 6/21/12

6/19

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-SIB-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 MUNOZ JESUS S & ISABEL C (PAID BY: COLONIAL SAVINGS)
	Present mailing address (number and street) 8660 OCONNOR CRES
	City, town or post office, state, ZIP code NORFOLK, VA 23503

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SOUTHGATE WOODS PH 4 LOT 10**

Step 2: Describe the property	Address or location of property
	680185
	Account number of property: S4847.04.000.0010.00 OR Tax receipt number: 19437218

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	12/22	/ 2011	\$ 4978.28
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4978.28

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT# 680185 - APPLY TO ACCT#680176 AS PER MORTGAGE.**
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 <i>Norma E. Ayala</i>	Date of application for tax refund 6/6/12

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

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITORS OFFICE DATE: 6-22-12 <i>4/6/25/12</i>
	Authorized officer <i>[Signature]</i>	Date 6/22/12	
	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) <i>[Signature]</i>	Date 6/15/12	

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-CW1-SEB-SI.V-SML-SMS-SST-SWI-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 GONZALEZ LUIS RIOS & CRISTINA DEL PILAR ^α PAYER: BAC TAX SERVICE ^ξ
	Present mailing address (number and street) DOMINCO 119 COL CUATAHTEMOC
	City, town or post office, state, ZIP code SAN NICOLAS NL MEXICO 66450

Legal description (or attach copy of the tax bill or tax receipt): **WOODLAND RIDGE PH 1 LT 47**

Step 2: Describe the property	Address or location of property:
	696567 ^α
	Account number of property: W7384.01.000.0047.00 ^α 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	12/09	/ 2011	\$ 2692.30
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2692.30

Taxpayer's reason for refund (attach supporting documentation): **AS PER BAC WAS NOT SUPPOSE TO PAY ON THIS ACCT CORRECT ACCT #M0542.00.000.0002.00 BAC ALREADY SENT IN PAYMENT FOR THE CORRECT ACCT 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 Dorothy Gaar ^α	Date of application for tax refund 6-5-2012 ^α

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 TAX OFFICE DATE: 6-22-12 6/25/12
	Authorized officer sign here [Signature]	Date 6/27/12	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code) sign here [Signature] ^α	Date 6/15/12 ^α	

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