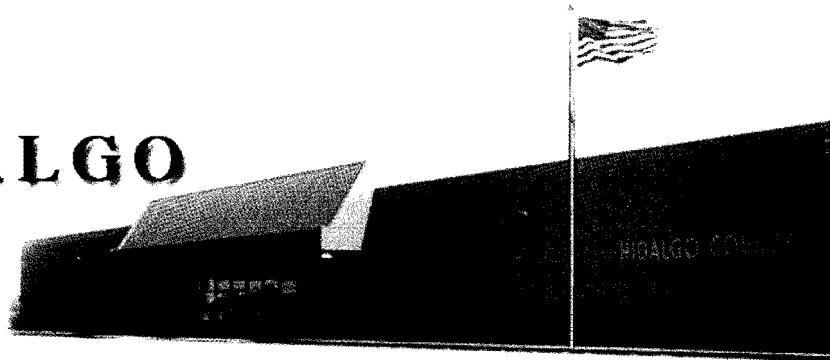


Office of Tax Assessor-Collector  
**COUNTY of HIDALGO**



*Armando Barrera Jr., RTA*  
Assessor and Collector

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

July 24, 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,

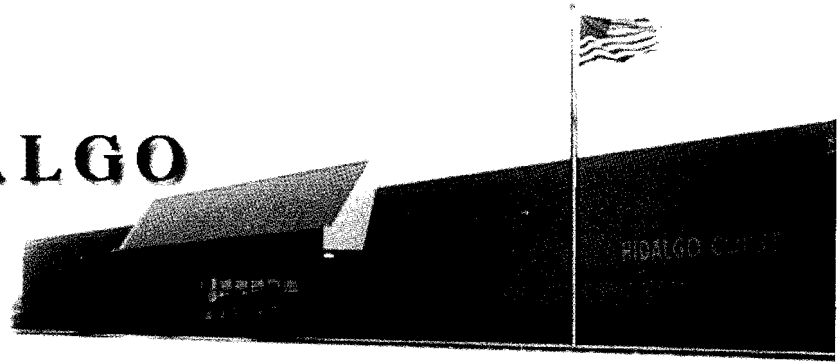
Armando Barrera, Jr. RTA

Abj: mm

Enclosure

Xc: Hidalgo County Auditor  
Raymundo Eufracio, CPA

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



*Armando Barrera Jr., RTA*  
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ACCOUNT NUMBER	PAYER	AMOUNT
G4510.01.000.0027.00	FIRST AMERICAN	\$ 2,784.51
L5330.01.000.0106.00	FIRST AMERICAN	\$ 3,929.41
L6225.02.000.0042.00	WELLS FARGO	\$ 6,137.33
W7360.03.000.0088.00	CORELOGIC	\$ 3,026.66



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

082411069  
 Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733

Print Date: 12/23/2009

1021183502

Payer:  
 FIRST AMERICAN  
 8435 N STEMMONS FREEWAY  
 DALLAS, TX 75247-390

Account Number G4510-01-000-0027-00
Legal Description of the Property GLORIA VISTA PH 1 LOT 27 N 25TH ST 711377

2009 OVERAGE AMOUNT \$2,784.51

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 52: VALLEY VIEW ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$500.

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 7/5/12

APPLICATION FOR PROPERTY TAX REFUND

<b>Step 1. Identify the refund recipient.</b> Show information for whomever will be receiving the refund.	Who should the refund be issued to			
	Name: Chan Corelogic			
	Address: 1 Corelogic Dr			
	City, State, Zip: Westlake, TX 76262			
Daytime Phone No.: 817-699-2293		E-Mail Address: dalmanza@corelogic.com		
<b>Step 2. Provide payment information.</b> Please attach copies of cancelled checks or original receipts for all cash payments you made.	Payment made by	Check No	Date Paid	Amount Paid
	Chan Corelogic	60328576	12/23/09	\$2784.51
	TOTAL AMOUNT PAID (sum of the above amounts)			\$2784.51
<b>Step 3. Provide reason for this refund.</b> Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.			
This payment should have been applied to other tax account(s) and/or year(s) (listed below):				
<b>Step 4. Sign the form.</b> Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		DATE	
A. Jackson		12-14-11		
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature]	Date: 7/18/12	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: [Signature]	Date: 7/2/12	

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

082411073



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

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

Print Date: 12/23/2009

Payer:  
FIRST AMERICAN &  
8435 N STEMMONS FREEWAY  
DALLAS, TX 75247-390

<b>Account Number</b> L5330-01-000-0106-00 &
<b>Legal Description of the Property</b> LOMA VERDE PH I, SHARYLAND PLANTATION VILLAGE LOT 106 3509 SAN GABRIEL & 623911

LN# 1547427304

2009 OVERAGE AMOUNT \$3,929.41 &

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$500.

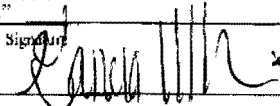
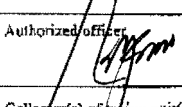
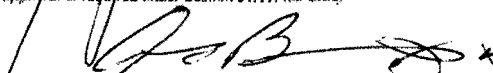
AUDITED BY: THE HIDALGO  
COUNTY AUDITOR'S OFFICE  
DATE: PN 7/6/12  
g.c. m/r

APPLICATION FOR PROPERTY TAX REFUND

<b>Step 1. Identify the refund recipient.</b> Show information for whomever will be receiving the refund.	Who should the refund be issued to			
	Name: Chase I Corelogie			
	Address: 1 Corelogie Dr			
	City, State, Zip: Westlake, TX 76262			
Daytime Phone No.: 817-699-2293		E-Mail Address: dalmarza@corelogie.com		
<b>Step 2. Provide payment information.</b> Please attach copies of cancelled checks or original receipts for all cash payments you made.	Payment made by	Check No	Date Paid	Amount Paid
	Chase I Corelogie	60328592	12-23-09	\$3,929.41
	TOTAL AMOUNT PAID (sum of the above amounts)			\$3,929.41
<b>Step 3. Provide reason for this refund.</b> Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.			
This payment should have been applied to other tax account(s) and/or year(s) (listed below):				
<b>Step 4. Sign the form.</b> Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)			DATE
Chase I Corelogie			12-14-11	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: [Signature]	Date: 2/18/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: [Signature]	Date: 2/12/12

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

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>		Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC				
Present mailing address (number and street) <b>P O BOX 178</b>		Phone (area code and number) <b>(956) 318-2157</b>				
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>						
<b>To apply for a tax refund, the taxpayer must complete the following</b>						
<b>Step 1:</b> Owner's name and address	Owner's name <b>MONTEMAYOR JULIO ( PAID BY: WELLS FARGO )</b>					
	Present mailing address (number and street) <b>1915 FORMOSA AVE</b>					
	City, town or post office, state, ZIP code <b>DONNA, TX 78537</b>		Phone (area code and number)			
<b>Step 2:</b> Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>LOS LAGOS PH 2 LOT 42 2</b>					
	Address or location of property: <b>647306 2</b>					
	Account number of property: <b>L6225.02.000.0042.00 2</b>		Tax receipt number: <b>OR 19482381</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		2011 2	12/28 / 2011	\$ 6137.33	\$ 6137.33
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 6137.33 2
Taxpayer's reason for refund (attach supporting documentation): <b>PAID IN ERROR ON ACCT# 647306</b>						
<b>REFUND BACK TO MORTGAGE.</b>						
<b>NB</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."					
	sign here	Signature 				Date of application for tax refund <b>5-22-12 25/24/12 2</b>
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.						
<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE			
	sign here	Authorized officer 				Date <b>2/18/12</b>
	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 <b>6/15/12 2</b>

6/19 6/18



ARMANDO BARRERA JR., RTA  
 Hidalgo County Tax Assessor - Collector  
 PO BOX 178 WILLOW, TX 78390-0178

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

Print Date: 01/04/2012

# SECOND NOTICE

CORELOGIC

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

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE

DATE: AM  
7-10-12

Account Number  
 W7360-03-000-0088-00  
 HCAD No. 520864

Legal Description of the Property  
 WOODHOLLOW PH 3 LOT 88

1904 CORNELL AVE

OWNER: SMITH DAVID

2011 OVERAGE AMOUNT \$3,026.66

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 31.11e 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	DAVID SMITH	Relationship to Property Owner
	Mailing Address	6573 GARDEN RD	Daytime Telephone Number
	City, State, Zip Code	BOYNTON BEACH, FL 33472-7313	
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		\$3,026.66
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		\$3,026.66
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		Date of application 6/20/12
	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: Date: 2/18/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: Date: 2/27/12

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

7/3