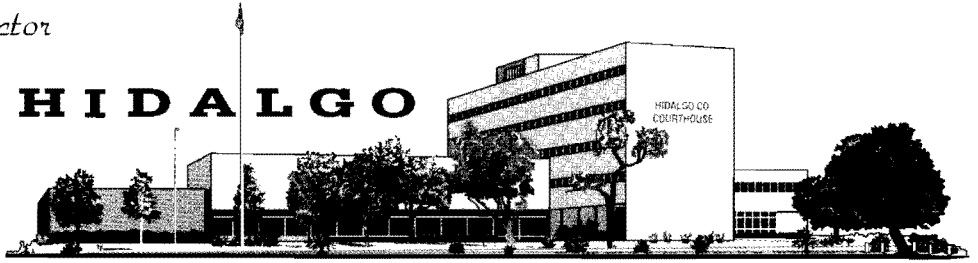


Office of Tax Assessor-Collector

**COUNTY** *of* **HIDALGO**



*Armando Barrera Jr. RTA*

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

September 11, 2012

The Honorable Ramon Garcia  
Hidalgo County Commissioners  
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

Our office has determined that the attached application(s) for a tax refund over \$2,500.00 dollars is erroneous and/or excessive. The County Auditor has also agreed with our determination. As a result, I respectfully request that the Commissioner's Court approve the enclosed application(s) for a tax refund as required by Property Tax Code Section 31.11, Refunds of Overpayments or Erroneous Payments.

When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

A handwritten signature in black ink, appearing to read 'Armando Barrera, Jr.' with a stylized flourish at the end.

Armando Barrera, Jr. RTA

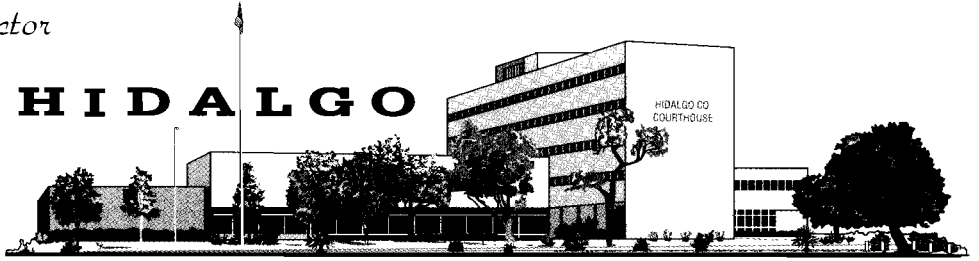
mgf

Enclosure

cc: Raymundo Eufracio, CPA  
Hidalgo County Auditor

Office of Tax Assessor-Collector

**COUNTY** *of* **HIDALGO**



*Armando Barrera Jr. RJA*

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

ACCOUNT NUMBER	PAYER	AMOUNT
C8535-00-000-0007-10	WARREN L. WALSH & LOUELLA G. BARRIS	\$ 3,498.57
L2085-93-000-0001-06	SOUTH TEXAS SPOKES LLC	\$ 5,995.31
L2550-01-004-0011-00	ALANIZ FELIX JR	\$ 5,666.12
S0163-00-000-0002-00	PEREZ MATTRESS COMPANY	\$ 3,735.16
W0100-00-031-0011-06	CORELOGIC / GMAC MORTGAGE	\$ 2,734.39



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

APR 18 2011  
**FINAL NOTICE**

WARREN L. WALSH  
 LOUELLA G. BARRIS  
 4592 AVENUE E.  
 WHITE CITY, OR 97503

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 08/24/12

Account Number C8535-00-000-0007-10 (604039)
Legal Description of the Property COUNTRY BREEZE NW PORTION-IRR TR BNG 217.90' X 304.58' LOT 7
5206 N STEWART RD

2009 OVERAGE AMOUNT \$3,498.57

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 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.

**SECOND  
 NOTICE**

APR 27 2010

**APPLICATION FOR PROPERTY TAX REFUND**

<b>Step 1. Identify the refund recipient.</b> Show information for whomever will be receiving the refund.	Name: <u>WARREN L. WALSH</u>	
	Address: <u>4592 AVE E</u>	
	City, State, Zip: <u>White City OR 97503</u>	
	Daytime Phone No.: <u>5418314084</u>	E-Mail Address: <u>Louecountry.net</u>
<b>Step 2. Provide payment information.</b> Please attach copies of cancelled checks or original receipts for all cash payments you made.	<u>\$3498.57</u>	
	<b>TOTAL AMOUNT PAID (sum of the above amounts)</b>	
<b>Step 3. Provide reason for this refund.</b> Please list any accounts and/or years that you intended to pay with this overage.	<input checked="" type="checkbox"/> I paid this account in error and I am entitled to the refund.	
	<input type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.	
	<input type="checkbox"/> 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) <u>Warren L. Walsh</u>	DATE <u>8-3-12</u>
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/10/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>8/8/12</u>

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

8/15



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

# SECOND NOTICE

JUL 31 2012

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

Print Date: 03/30/2012

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 09/23/12 10/29/12

Account Number  
 L2085-93-000-0001-06  
 HCAD No. 702785\*

Legal Description of the Property  
 SPECIAL INVENTORY AT 1201 SOUTH BENTSEN ROAD (SEE L2085-99-000-0001-06)/ NEW ACCT 2010

1201 S BENTSEN RD  
 OWNER: RGV HARLEY-DAVIDSON ✓

2011 OVERAGE AMOUNT \$5,995.31\*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 80: CITY OF MCALLEN(X)

### 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	South Texas Spokes LLC*		Relationship to Property Owner	tenant
	Mailing Address	1201 S. Bentsen Rd.*		Daytime Telephone Number	956-687-4646
	City, State, Zip Code	McAllen, TX 78501			
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>Sent out twice.*</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				
	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>Armando Barrera Jr.*</u>		Date of application	<u>8-3-2012*</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>9/11/12</u>	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u>	Date: <u>8/14/12*</u>	

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

8/15



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

# SECOND NOTICE

JUL 31 2012

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

Print Date: 01/13/2012

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: ~~Dec 8/20/12~~ *10/4/12*

ALANIZ FELIX JR  
 PO BOX 176  
 LA JOYA , TX 78560-0176

Account Number  
 L2550-01-004-0011-00  
 HCAD No. 214466 *f*

Legal Description of the Property  
 LAKEVIEW #1 LTS 11 & 12 BLK 4

200 W 2ND ST

OWNER: ALANIZ FELIX JR

2011 OVERAGE AMOUNT \$5,666.12

1: HIDALGO COUNTY, 35: CITY OF LA JOYA, 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 <i>Felix Alaniz Jr</i>	Relationship to Property Owner <input checked="" type="checkbox"/>
	Mailing Address <i>P.O. Box 176 A</i>	Daytime Telephone Number <i>956 585 6571</i>
	City, State, Zip Code <i>La Joya TX 78560</i>	<i>585-6571</i>
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 <i>\$5,666.12</i>	
	<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 <i>\$5,666.12</i>	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed <i>5,666.12</i>	
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 <i>2011</i>
	<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>	Date of application <i>08-07-2012</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>9/10/12</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>8/18/12</i>

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

8/15



**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:  
 PEREZ MATTRESS COMPANY  
 DBA MATTRESS FIRM  
 5425 S PADRE ISLAND DR STE 178  
 CORPUS, CHRISTI, TX 78411

<b>Account Number</b> S0163-00-000-0002-00 HCAD No. 533596
<b>Legal Description of the Property</b> SALINAS, RENE LOT 2 911 RENE ST OWNER: JAM RESIDENTIAL PROPERTIES LLC

2011 OVERAGE AMOUNT \$3,735.16

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.

<b>Step 1: Identify the Payer</b> requesting the refund if different than shown above	Name	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number
	City, State, Zip Code	
<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>2010</u> and am the party entitled to the refund.	
<b>Step 3: Mark the reason for the refund</b> and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account <input type="checkbox"/> Duplicate payment <input checked="" type="checkbox"/> Paid in error (explain) <u>should have pd a different acct</u>	
	<b>Step 4: Provide payment information</b> 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	
<b>Step 5: How should the refund be processed?</b>	<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 form.</b> 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	
	SIGN HERE <u>Mary Helen Perez</u>	Date of application <u>2-10-12</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	
<b>AUDITORS USE ONLY:</b>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>9/10/12</u>	
<b>TAX OFFICE USE ONLY:</b>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>8/21/12</u>	

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 8/24/12

8/21



ARMANDO BARRERA JR., RTA  
 Hidalgo County Tax Assessor - Collector  
 PO BOX 178 EDINBURG, TX 78140-0178

# SECOND NOTICE

052912 | 29

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 01/04/2012

# 0810306296399

GMAC  
(INACTIVE)

GMAC Mortgage  
CORELOGIC

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 8/29/12

*[Handwritten signature]*  
8/29/12

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

<b>Account Number</b> W0100-00-031-0011-06 HCAD No. 317515
<b>Legal Description of the Property</b> WEST ADDN. TO SHARYLAND AN IRR TR E196.47'-W398.28'-N224.60' 1.00 AC NET  4020 N BRYAN RD  OWNER: FEDERAL HOME LOAN MORTGAGE CORP

2011 OVERAGE AMOUNT \$2,734.39\*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 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.

loan 306296399

Step 1: Identify the Payer requesting the refund if different than shown above	Name	GMAC Mortgage* <i>by cc</i>		Relationship to Property Owner	Mortgage
	Mailing Address			Daytime Telephone Number	Allison 800-229-8426
	City, State, Zip Code				X2340
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		2734.39		
	Total tax, penalty, and interest amount owed for the year				
	Amount of refund claimed		2734.39*		
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	Allison Stahl* <i>for GMAC Mortgage</i>		Date of application	8/13/12*
	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: <i>[Signature]</i>	Date: 9/10/12	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 8/8/12*	

40697847

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

8/15