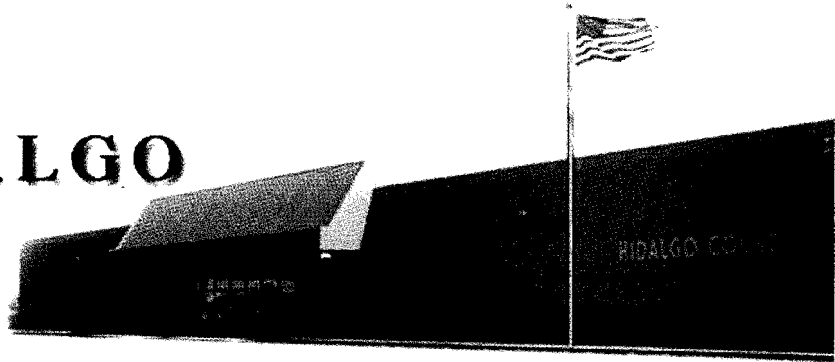


Office of Tax Assessor-Collector  
**COUNTY of HIDALGO**



*Armando Barrera Jr., RTA*  
Assessor and Collector

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

October 10, 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,

Armando Barrera, Jr. RTA

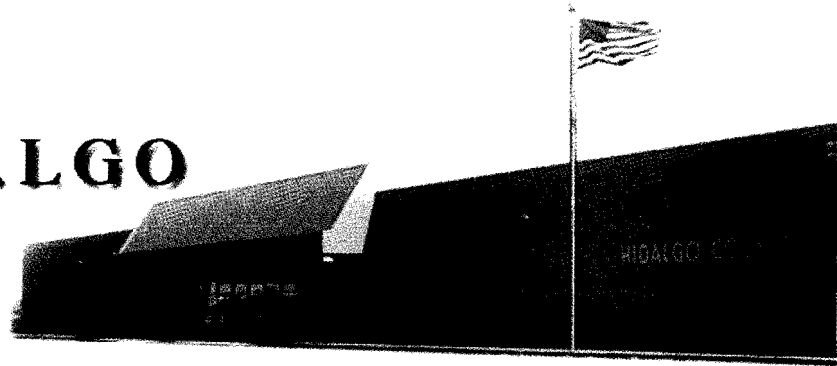
mgf

Enclosure

cc: Raymundo Eufracio, CPA  
Hidalgo County Auditor

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
M2910.99.000.0001.00	MCDONALD'S #26036	\$ 3,161.87
M2910.99.000.0001.00	MCDONALD'S #26036	\$ 3,297.31
M2910.99.000.0001.00	MCDONALD'S #26036	\$ 3,305.13
R1520.00.000.0072.00	BREMAN CONSTRUCTION LLC	\$ 5,124.59
S4847.01.002.0005.00	OCWEN LOAN SERVICING	\$ 7,471.26

# APPLICATION FOR TAX REFUND


Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>Dec 9/12/12</u> <i>J. C. 10/10/12</i>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>		
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>		Phone (area code and number) <b>(956) 318-2157</b>

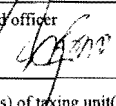
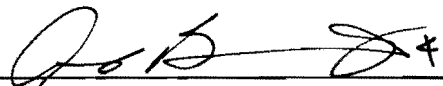
**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1: Owner's name and address</b>	Owner's name <b>MCDONALD'S #26036 *</b>	
	Present mailing address (number and street) <b>1102 N PARKER RD *</b>	
	City, town or post office, state, ZIP code <b>LA FERIA, TX 78559</b>	Phone (area code and number)

<b>Step 2: Describe the property</b>	Legal description (or attach copy of the tax bill or tax receipt): <b>FURNITURE FIXTURES &amp; EQUIPMENT AT 1018</b>	
	<b>EAST FRONTAGE EXPRESSWAY 83/ NEW ACCT 2001</b>	
	Address or location of property: <b>617054 *</b>	
	Account number of property: <b>M2910.99.000.0001.00</b>	Tax receipt number: <b>OR 9095120</b>

<b>Step 3: Give the tax payment information</b>	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	2006 *	01/31 / 2007	\$ 9162.62	\$ 3161.87
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3161.87 *
Taxpayer's reason for refund (attach supporting documentation): <b>C-1785-04-C *</b>					
<b>NB</b>					

<b>Step 4: sign the form</b>	"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.		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here 	Date <b>10/10/12</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date <b>9/7/12 *</b>

9/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>DS 9/12/12</u> <u>J.C. 10/10/12</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) <b>P O BOX 178</b>	City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>


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

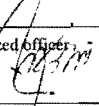
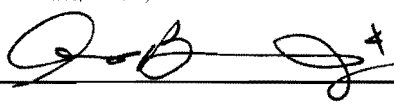
<b>Step 1:</b> Owner's name and address	Owner's name <b>MCDONALD'S RESTAURANT #26036 *</b>	
	Present mailing address (number and street) <b>1102 N PARKER RD *</b>	
	City, town or post office, state, ZIP code <b>LA FERIA, TX 78559</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **FURNITURE FIXTURES & EQUIPMENT AT 1018**

<b>Step 2:</b> Describe the property	<b>EAST FRONTAGE EXPRESSWAY 83/ NEW ACCT 2001</b>	
	Address or location of property: <b>617054 *</b>	
	Account number of property: <b>M2910.99.000.0001.00</b>	Tax receipt number: <b>OR 6834372</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	2005 *	01/31 / 2006	\$ 9555.10	\$ 3297.31
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3297.31 *
Taxpayer's reason for refund (attach supporting documentation): <b>C-1785-04-C *</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."	
	Signature sign here 	Date of application for tax refund
	<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>	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here 	Date <b>10/10/12</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date <b>9/7/12 *</b>

9/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>09/12/12</u> <i>J. C. 10/10/12</i>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>		City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>


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

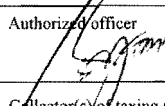
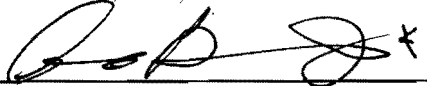
<b>Step 1:</b> Owner's name and address	Owner's name <b>MCDONALD'S #26036*</b>
	Present mailing address (number and street) <b>1102 N PARKER RD*</b>
	City, town or post office, state, ZIP code <b>LA FERIA, TX 78559</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **FURNITURE FIXTURES & EQUIPMENT AT 1018**

<b>Step 2:</b> Describe the property	EAST FRONTAGE EXPRESSWAY 83/ NEW ACCT 2001	
	Address or location of property:	
	<b>617054*</b>	
	Account number of property: <b>M2910.99.000.0001.00</b>	Tax receipt number: <b>OR 45910</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	2004*	01/31 / 2005	\$ 9577.76	\$ 3305.13
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3305.13*
Taxpayer's reason for refund (attach supporting documentation): <b>C-1785-04-C*</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."	
	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.		

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here 	Date <b>10/10/12</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date <b>9/7/12*</b>

9/11



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

# SECOND NOTICE

AUG 08 2012

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/03/2012

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: Dec 9/25/12  
*[Signature]*

BREMAN CONSTRUCTION LLC  
 3901 N GLASSCOCK RD  
 MISSION, TX 78573-8464

Account Number R1520-00-000-0072-00 HCAD No. 701626*
Legal Description of the Property REDSTONE ESTATES LOT 72  DRIFFWOOD  OWNER: BREMAN CONSTRUCTION LLC ✓

2011 OVERAGE AMOUNT \$5,124.59

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

### APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Breman Construction, LLC*</u>	Relationship to Property Owner
	Mailing Address <u>3901 N. Glasscock Rd *</u>	Daytime Telephone Number <u>(956) 232-9185</u>
	City, State, Zip Code <u>Mission, TX 78573</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>\$ 5,124.59</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$ 5,124.59*</u>
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input checked="" type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account For tax year	
	<input type="checkbox"/> Escrow for next year's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this form I hereby apply for the refund of the above described taxes and certify that the information I have given on this form is true and correct	
	SIGN HERE <i>[Signature]</i>	Date of application <u>8/23/12*</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: <i>[Signature]</i> Date: <u>10/10/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>9/26/12*</u>

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

9/26

# 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-ICC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

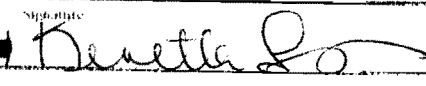
Step 1: Owner's name and address	Owner's name <b>AGUIRRE, ROBERTO &amp; ERIKA E. †</b>	PAYOR: OCWEN LOAN SERVICING †
	Present mailing address (number and street) <b>206 SOUTHGATE BLVD †</b>	
	City, town or post office, state, ZIP code <b>WESLACO, TX 78596 †</b>	

Legal description (or attach copy of the tax bill or tax receipt): **SOUTHGATE WOODS PH 1 LOT 5 BLK 2 †**

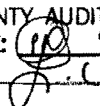
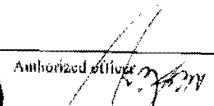
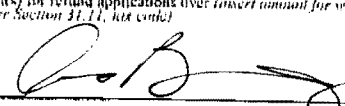
Step 2: Describe the property	Address or location of property:	Tax receipt number:
	<b>570829 †</b>	
	Account number of property:	
	<b>\$4847.01.002.0005.00 †</b>	<b>OR</b>

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	\$ 7471.26
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 7471.26 A

Taxpayer's reason for refund (attach supporting documentation): **P/E AS PER OCWEN MORTGAGE PAID ON WRONG ACCT. CORRECT ACCT# N4855.01.000.0076.00, DIFF SEND BACK TO MORTGAGE**

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 	Date of application for tax refund <b>9/11/12</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.

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: <b>9/25/12</b>  <b>10/10/12</b>
	sign here 	Date <b>10/10/12</b>	
	sign here 	Date <b>9/19/12</b>	

9/21