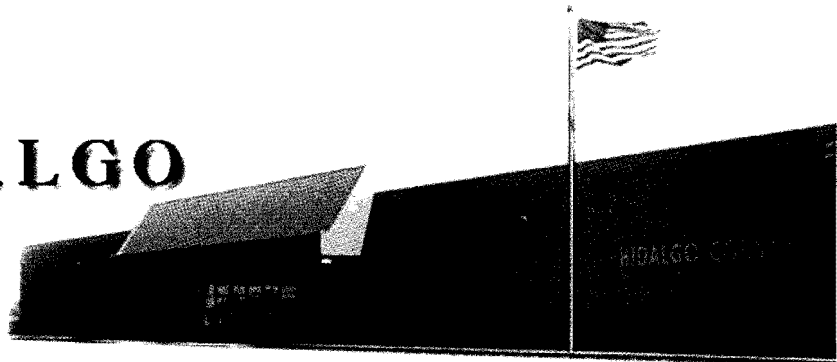


Office of Tax Assessor-Collector
COUNTY of HIDALGO



Armando Barrera Jr., RTA
Assessor and Collector

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

November 7, 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,

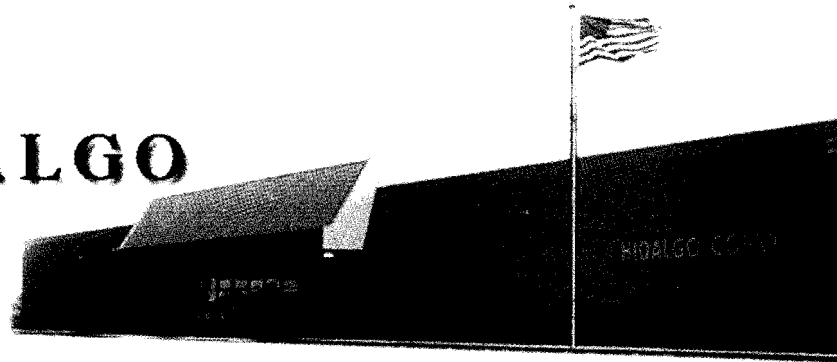
Armando Barrera, Jr. RTA

mgf

Enclosure

cc: Raymundo Eufracio, CPA
Hidalgo County Auditor

Office of Tax Assessor-Collector
COUNTY of HIDALGO



Armando Barrera Jr., RTA
Assessor and Collector

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

ACCOUNT NUMBER	PAYER	AMOUNT
A6370.00.000.0015.00	COMPASS BANK	\$2,584.41
M1950.99.000.0000.R2	GENERAL MOTORS LLC	\$3,863.16
R2431.00.000.000B.00	CORELOGIC	\$2,780.53
R2431.00.000.000B.00	CORELOGIC	\$2,837.77
R2431.00.000.000B.00	CORELOGIC	\$2,501.83
W0100.00.025.0011.06	BARCELONA PROPERTIES LTD	\$3,645.97



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: 12/09/2010

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: Dec 10/23/12
J. C. 10/1/12

COMPASS BANK
 P.O. BOX 10566
 BIRMINGHAM, AL 35296

Account Number A6370-00-000-0015-00 HCAD No. 7042004
Legal Description of the Property AUBURN ESTATES LOT 15 7624 N 26TH ST OWNER: COMPASS BANK

2010 OVERAGE AMOUNT \$2,584.41

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	BBVA Compass <i>x</i> <i>8th</i> 8333 Douglas Ave., 2nd Floor TIM Dept. Dallas, TX 75225 214-346-6415	Relationship to Property Owner
		Daytime Telephone Number <i>214-346-6415</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>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="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	<i>5386.14</i>
	Total tax, penalty, and interest amount owed for the year	<i>2801.73</i>
	Amount of refund claimed	<i>2584.41*</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
	<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>Vickey Burk*</i>	Date of application <i>9-25-12*</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>11/1/12</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>10/12/12*</i>

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

10/22/12



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

SECOND NOTICE

AUG 02 2012

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

Print Date: 02/21/2012

Payer:
GENERAL MOTORS LLC
P O BOX 62530
PHOENIX, AZ 85082-253

AB.

Account Number M1950-99-000-0000-R2 <i>+</i> HCAD No. 20826143 <i>+</i>
Legal Description of the Property LEASED EQUIPMENT AT MCALLEN SCHOOL & MCALLEN CITY/NEW ACCT 2010 VARIOUS LOCATIONS OWNER: GENERAL MOTORS LLC <i>+</i>

2011 OVERAGE AMOUNT \$3,863.16 *+*

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	GENERAL MOTORS LLC		Relationship to Property Owner
	Mailing Address	P.O. BOX 9024		Daytime Telephone Number
	City, State, Zip Code	DETROIT MI 48202-9024		
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	OVERPAYMENT OF \$3,863.16 <i>+</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	\$7,198.57		
	Total tax, penalty, and interest amount owed for the year	3,335.41		
	Amount of refund claimed	\$ 0.00		
Step 5: How should the refund be processed?	<input 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 checked="" 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	09/04/2012
	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			
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 11/1/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 10/15/12

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

10/12

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 10-23-12 *[Signature]*

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHID-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 MELISSA D GONZALES (PAID BY CORELOGIC) #
	Present mailing address (number and street) 3007 SOL LN, UNIT B #
	City, town or post office, state, ZIP code MCALLEN, TX 78502 #
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RF COONDOMINIUMS UNIT B #**

Step 2: Describe the property	RF COONDOMINIUMS UNIT B
	Address or location of property: 1307 FIG AVE UNIT B
	730324 #
	Account number of property: R2431.00.000.000B.00 # OR 14903305
	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		2009 #	12/23 / 2009	\$ 2780.53
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2780.53 #

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT 730324 (R2431.00.000.000B.00). SEND REFUND TO MORTGAGE CO.**

JN

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: <i>Frankie Lawson</i> Date of application for tax refund: 9/14/12
	If you make a false taxing 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: 9/25/12 <i>P.C. 10/10/12</i>
	sign here	Authorized officer: <i>[Signature]</i> Date: 10/01/12
	sign here	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 11.11, tax code): <i>[Signature]</i> Date: 9/19/12

9/11

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		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 RF CONSTRUCTION LLC (PAID BY CORELOGIC) &						
	Present mailing address (number and street) 810 W FERGUSON &						
	City, town or post office, state, ZIP code PHARR, TX 78577 &		Phone (area code and number)				
Legal description (or attach copy of the tax bill or tax receipt): RF COONDOMINIUMS UNIT B &							
Step 2: Describe the property	RF COONDOMINIUMS UNIT B						
	Address or location of property: 1307 FIG AVE UNIT B						
	730324 &						
	Account number of property: R2431.00.000.000B.00 &		Tax receipt number: OR 17142603				
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		2010 &	12/22	7 2010	\$ 2837.77	\$ 2837.77 &
	2.				/	\$	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5. TOTAL				/	\$	\$ 2837.77 /
	Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR ON ACCT 730324 (R2431.00.000.000B.00). SEND REFUND TO MORTGAGE CO.						
JN							
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 <i>Frankie Dawson</i>				Date of application for tax refund 9/14/12	
	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 AUDITOR'S OFFICE DATE: 9/25/12			
	sign here	Authorized officer <i>[Signature]</i>				Date 10/10/12	
	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 9/19/12	

9/21

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		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 RT CONSTRUCTION INC <i>⊕</i> (PAID BY: CORE LOGIC)						
	Present mailing address (number and street) 2501 STIRLING AVE <i>⊕</i>						
	City, town or post office, state, ZIP code EDINBURG, TX 78539 <i>⊕</i>		Phone (area code and number)				
Legal description (or attach copy of the tax bill or tax receipt): RF COONDOMINIUMS UNIT B							
Step 2: Describe the property	RF COONDOMINIUMS UNIT B <i>⊕</i>						
	Address or location of property: 1307 FIG AVE UNIT B						
	730324 <i>⊕</i>						
	Account number of property: R2431.00.000.000B.00 <i>⊕</i>		Tax receipt number: OR 19658617				
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 <i>⊕</i>	12/29	/ 2011	\$ 2501.83	\$ 2501.83 <i>⊕</i>
	2.				/	\$	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5. TOTAL				/	\$	\$ 2501.83 <i>⊕</i>
	Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR ON ACCT 730324 (R2431.00.000.000B.00). SEND REFUND TO MORTGAGE CO.						
JN							
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: <i>Frankie Dawson</i>				Date of application for tax refund: 9/14/12	
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 AUDITOR'S OFFICE DATE: 9/25/12 <i>J. C. D. 10/10/12</i>				
	sign here	Authorized officer: <i>[Signature]</i>				Date: 10/10/12	
	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, applicable)				Date: 9/19/12	

9/14



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

SECOND NOTICE

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

Print Date: 01/27/2012

AUG 15 2012

Very Important!

TO: Gracie

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: Dec 10/23/12
J. C. Miller

BARCELONA PROPERTIES LTD
1022 E GRIFFEN PRKWY STE 108
MISSION, TX 78572

Account Number W0100-00-025-0011-06 HCAD No. 317027*
Legal Description of the Property WEST ADDN. TO SHARYLAND-W264-S330' LOT 25-11 2.0AC GR 1.55AC NET 2300 N BRYAN RD OWNER: BARCELONA PROPERTIES LTD

2011 OVERAGE AMOUNT \$3,645.97

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.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Gracie Sturdivant *</u>	Relationship to Property Owner <u>50% owner</u>
	Mailing Address <u>6316 N. 10th St. Bldg. K *</u>	Daytime Telephone Number <u>956-682-6114</u>
	City, State, Zip Code <u>McAllen, TX. 78504</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>\$ 3,645.97</u>	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed <u>\$ 3,645.97 *</u>	
Step 5: How should the refund be processed?	<input checked="" 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>8/31/12 *</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 type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>11/1/12</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>10/21/12 *</u>

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

10/22