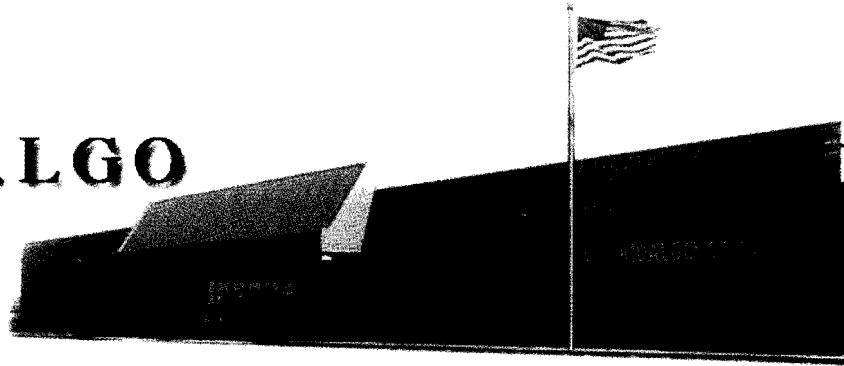


*Office of Tax Assessor-Collector*

**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

December 26, 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

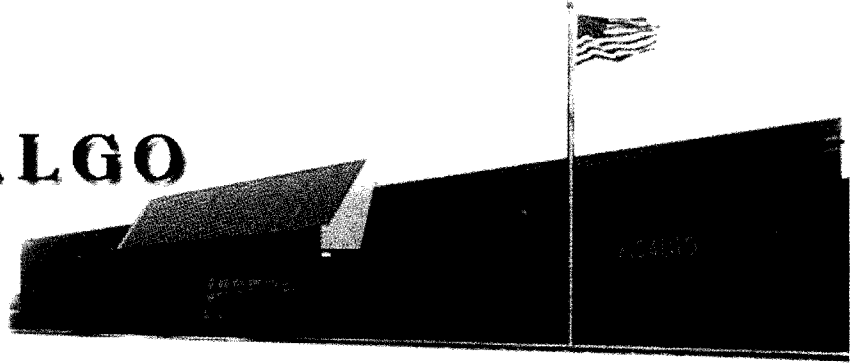
mgf

Enclosure

cc: Raymundo Eufrazio, 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
C9800.00.002.0003.04	Corelogic	\$6,655.64
D6000.01.000.0123.00	Luis Barrera	\$2,516.63
S1700.02.020.0001.00	First National Bank	\$3,557.05

# 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>	
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>PEREZ, RODOLFO &amp; MICAELA M VASQUEZ ( PAID BY: CORELOGIC)</b>
	Present mailing address (number and street) <b>219 S TOWER RD</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78542</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CURRY LOT 3 BLK 2 \***

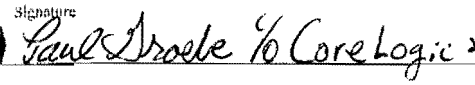
Step 2: Describe the property	<b>N110-S610-E198-SE6.92AC .50AC NET</b>
	Address or location of property: <b>156549 *</b>
	Account number of property: <b>C9800.00.002.0003.04 *</b> OR Tax receipt number: <b>14903258/17142387/19658482</b>

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
		2009 *	12/23 / 2009	\$ 2197.46	\$ 2197.46 *
		2010 *	12/22 / 2010	\$ 2203.90	\$ 2203.90 *
		2011 *	12/29 / 2011	\$ 2254.28	\$ 2254.28 *
			/	\$	\$
			/	\$	\$ 6,655.64 *

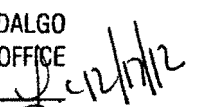
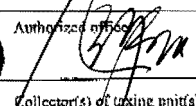
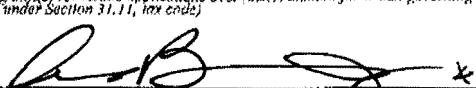
Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT#156549**

**APPLY TO ACCT#156550. ACCOUNT PAID REFUND BACK TO 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."	
	sign here  <b>Paul Strode % Core Logic *</b>	Date of application for tax refund <b>11-15-2012 *</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>12-14-12</b> 
	sign here 	Authorized officer	Date <b>12/20/12</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>12/10/12 *</b>	

12/10

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	AUDITED BY: <b>THE HIDALGO COUNTY AUDITOR'S 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>	DATE: <b>DS 11/30/12 / 10/11/12</b> <i>J. C. H. H.</i>	
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>GONZALEZ DAVID &amp; ROSALBA ( PAID BY: LUIS BARRERA) †</b>
	Present mailing address (number and street) <b>1000 PARADISE CIR</b>
	City, town or post office, state, ZIP code <b>PALMVIEW, TX 78572</b>

Phone (area code and number)  
**X956 270 1266**

Legal description (or attach copy of the tax bill or tax receipt): **DOFFING# 1 N11.31 LOT 123**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>159944*</b>
	Account number of property:
	<b>D6000.01.000.0123.00</b>

Tax receipt number:  
**OR 20898143/20898136/20898128/20898118**

<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	2011*	05/14	/ 2012	\$ 1694.13
2.	2010*		/	\$ 822.50	\$ 822.50
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ 2516.63	\$ 2516.63*

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT#159944\***  
**CORRECT ACCT#255441\***  
**NB**

<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 <i>Luis Barrera*</i>	Date of application for tax refund <b>11/27/12*</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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here <i>[Signature]</i>	Date <b>12/20/12</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 <i>[Signature]</i>	Date <b>11-20-12*</b>

11/20

# 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>	
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>GONZALEZ ABEL &amp; URSULA PAID BY: FIRST NATIONAL BANK *</b>
	Present mailing address (number and street) <b>RR15 BOX 2545E *</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78541-7210 *</b>

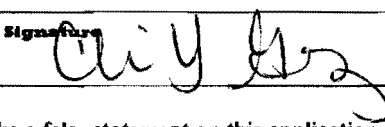
**Phone (area code and number)**

Legal description (or attach copy of the tax bill or tax receipt): **SANTA CRUZ GARDENS #2 E100' - W250'-N435.60' LOT**

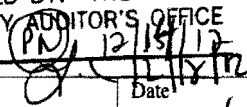

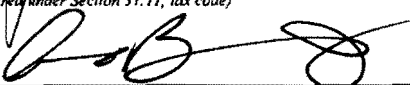
<b>Step 2: Describe the property</b>	1 BLK 20 1.0AC GR 0.94AC NET	
	Address or location of property: <b>JASMIN RD &amp; INGLE RD</b>	
	<b>278044 *</b>	
	Account number of property: <b>S1700.02.020.0001.00 *</b>	Tax receipt number: <b>OR 17090192</b>

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	2010	12/16	/ 2010	\$ 3557.05
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3557.05

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT #278044 \***  
**CORRECT ACCT #524045 (ACCT PD IN FULL) REFUND DUE BACK TO TAXPAYER**  
**GP**

<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."	
	Sign here 	Date of application for tax refund <b>11/30/12</b>

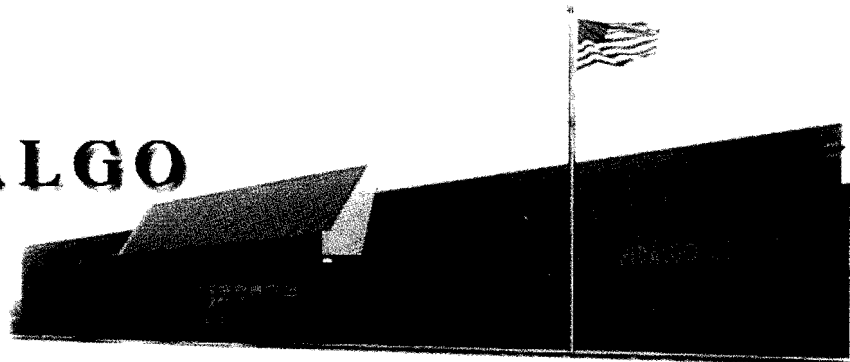
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE:  12/19/12
	sign here 	Authorized officer	Date <b>12/20/12</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>12/19/12</b>

12/14

*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

December 26, 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

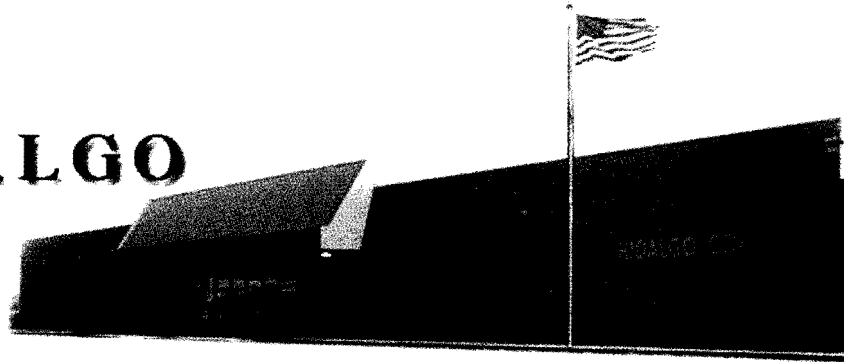
mgf

Enclosure

cc: Raymundo Eufrazio, 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
P3650.02.000.0033.00	Flagstar Bank C/O Corelogic	\$2,920.97
S2950.00.000.0292.16	CitiMortgage Inc.	\$2,526.99



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: 01/11/2012

CORELOGIC

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

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: ~~11-30-12~~ / ~~01-12-12~~ / 12-17-12

*J.C. 12/20/12*

Account Number P3650-02-000-0033-00 *
HCAD No. 699171 *
Legal Description of the Property PARK MEADOWS UT 2 LOT 33 *
119 PALO BLANCO LN *
OWNER: CANTU PEDRO & MARY LOU

2011 OVERAGE AMOUNT \$2,920.97 \*

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.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Flagstar Bank Co Corelogic</i>	Relationship to Property Owner <i>Mortgage Company</i>
	Mailing Address <i>Corelogic Dr</i>	Daytime Telephone Number <i>817-699-3874</i>
	City, State, Zip Code <i>Westlake TX 76262</i>	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <i>2011</i> 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 <i>taxes paid by title then disb from</i>	
	<input type="checkbox"/> Paid in error (explain) <i>no escrow acct</i>	
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	<i>2920.27</i>
	Total tax, penalty, and interest amount owed for the year	<i>0.00</i>
	Amount of refund claimed	<i>2920.97 *</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>Sharonda Laine *</i>	Date of application <i>11/22/12 *</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>12/20/12</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> *Date: <i>11-15-12 *</i>

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

11/20



**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: 08/04/2010

**CORE LOGIC TAX REAL ESTATE**  
**ATTN: REFUND DEPARTMENT**  
**95 METHODIST HILL RD SUITE 100**  
**ROCHESTER, NY 14623**

**AUDITED BY: THE HIDALGO**  
**COUNTY AUDITOR'S OFFICE**  
 DATE: ~~07/12/12~~

*J. Martinez*

<b>Account Number</b> S2950-00-000-0292-16 ✱ HCAD No. R281532 ✱
<b>Legal Description of the Property</b> JOHN H SHARY W359.5'-E809.92'-S290' LOT ✱ 292 2.40AC GR 2.23AC NET 0 2 MI LINE; 1/8 W GLA OWNER: CAZARES, LEONEL JR & LETICIA G  <b>2009 OVERAGE AMOUNT \$2,526.99 ✱</b>

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.

**CITIMORTGAGE INC.**  
**P.O. BOX 23689**  
**ROCHESTER, NY 14692**

Step 1: Identify the Payer requesting the refund if different than shown above	<input type="checkbox"/> N	Relationship to Property Owner
	<input type="checkbox"/> M	
	City, State, Zip	Daytime Telephone Number
		800-969-8787
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year _____ 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	
	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 <i>E. Hartwig ✱</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	Date of application 9-24-12 ✱
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 12/20/12
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> ✱ Date: 12/10/12 ✱

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

12/10