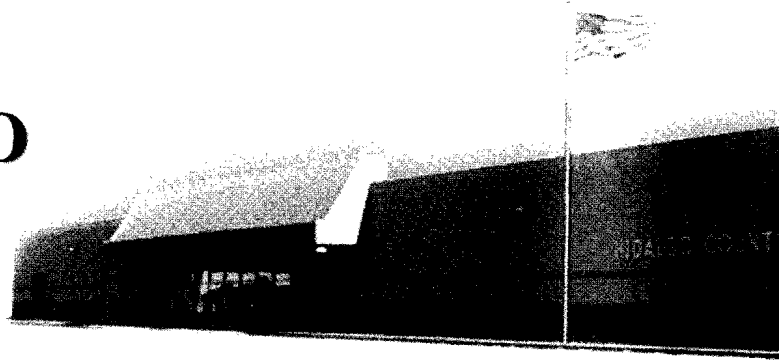


Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. RTA*



P.O. Box 178  
Edinburg, Texas 78540-0178  
Ph. (956) 318-2157  
Fax (956) 318-2733  
[www.hidalgocountytax.org](http://www.hidalgocountytax.org)

September 10, 2013

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(are) 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.

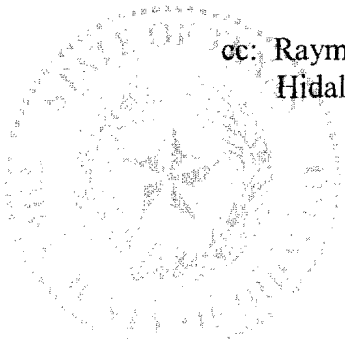
Respectfully,

Pablo (Paul) Villarreal, Jr., RTA

nlr

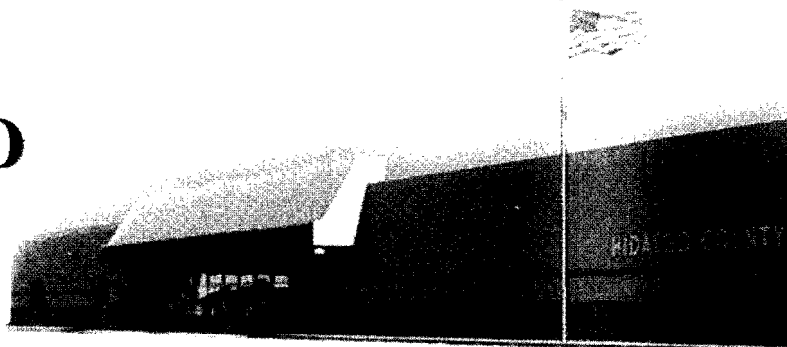
Enclosure

cc: Raymundo Eufrazio, CPA  
Hidalgo County Auditor



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ACCOUNT NUMBER	PAYER	AMOUNT
M1200.00.000.0010.00	CORELOGIC	\$2,707.88
W0100.00.030.0001.03	WELLS FARGO	\$4,552.35



070913024

**APPLICATION FOR TAX REFUND**

Collecting 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>

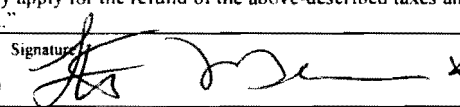
To apply for a tax refund, the taxpayer must complete the following

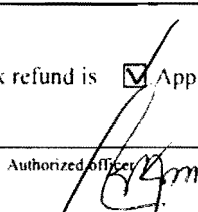
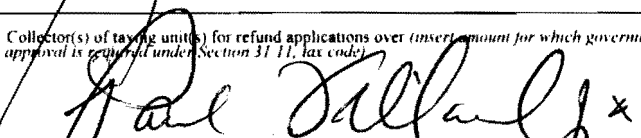
<b>Step 1:</b> Owner's name and address	Owner's name <b>ARREGOITIA NABOR &amp; YVONNE</b>	<b>PAID BY: CORELOGIC</b>
	Present mailing address (number and street) <b>2013 LAMBETH WAY</b>	
	City, town or post office, state, ZIP code <b>MISSION, TX 78572</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MARSHALL, WAYNE LOT 10**

<b>Step 2:</b> Describe the property	Address or location of property: <b>2015 Lambeth way</b>	
	<b>227418</b>	
	Account number of property: <b>M1200.00.000.0010.00</b>	Tax receipt number: <b>OR 19658573</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	12/29 / 2011	\$ 2,707.88	\$ 2,707.88
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,707.88
Taxpayer's reason for refund (attach supporting documentation): <b>AS PER HOMEOWNER SHE HAS ALWAYS PAID HER OWN TAXES - DOES NOT HAVE MORTGAGE WITH CORELOGIC MF</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 	Date of application for tax refund <b>8/1/13</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 DATE: <del>8/18/13</del> <b>9-4-13</b>
	Authorized officer 	Date <b>9/4/13</b>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code) 	Date <b>8-20-13</b>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>		Collecting tax for: (Tax Units) GIID-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: Owner's name and address</b>	Owner's name <b>RAMMIE'S ROPA USADA INC ( PAID BY: WELLS FARGO )</b>						
	Present mailing address (number and street) <b>8109 S 23<sup>RD</sup> ST</b>						
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78503</b>		Phone (area code and number)				
Legal description (or attach copy of the tax bill or tax receipt): <b>WEST ADDN. TO SHARYLAND S 10AC - 14.12 *</b>							
<b>Step 2: Describe the property</b>	LOT 30-1 10.0AC NET						
	Address or location of property:						
	<b>317332*</b>						
	Account number of property: <b>W0100.00.030.0001.03*</b>		Tax receipt number: <b>OR 22050702</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		2012	12/28	/ 2012	\$ 4,552.35	\$ 4,552.35
	2.				/	\$	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5. TOTAL				/	\$	\$ 4,552.35*
	Taxpayer's reason for refund (attach supporting documentation): <b>AS PER HOMEOWNER THEIR ARE RESPONSIBLE FOR THEIR TAXES</b>						
<b>NR</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."						
	sign here	Signature <b>Robbi Solley *L553</b>					Date of application for tax refund <b>7-29-13*</b>
	<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: 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: <b>8-29-13</b> <b>J. C 9-4-13</b>				
	sign here	Authorized officer <b>[Signature]</b>					Date <b>9/9/13</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) <b>[Signature]</b>					Date <b>8-8-13*</b>

8/13