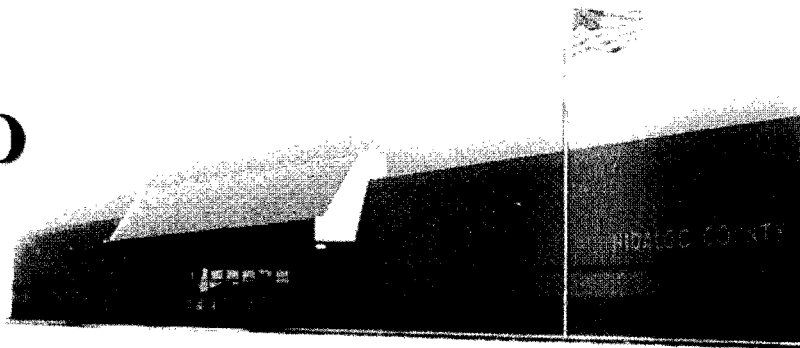


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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

March 17, 2014

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

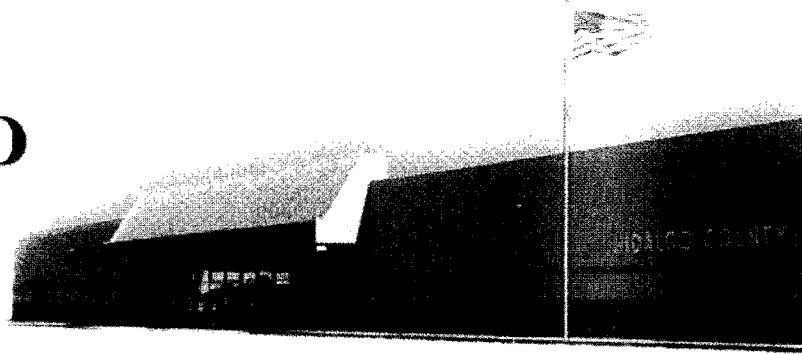
nlr

Enclosure



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
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ACCOUNT NUMBER	PAYER	AMOUNT
H0900.99.040.0022.02	RGV PREVENTATIVE CARE	\$2,509.21
J2260.02.000.0001.00	CORELOGIC COMMERCIAL REAL ESTATE	\$13,599.77
J5700.70.000.0007.00	TRANSMARITIME INC	\$2,720.67
K2400.00.000.0100.02	AUTO ZONE	\$23,260.03
S2332.00.000.0002.00	CAPCOR WESLACO LTD	\$3,913.61
T4545.00.001.0005.00	CORELOGIC COMMERCIAL REAL ESTATE	\$2,790.18
T4545.00.001.0007.00	CORELOGIC COMMERCIAL REAL ESTATE	\$2,757.73





PABLO (PAUL) VILLARREAL 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: 01/08/2014

WTO
 RGV PREVENTATIVE CARE, INC.
 500 S BICENTENNIAL BLVD.
 MCALLEN, TX 78501

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 9/23/14

Account Number H0900-99-040-0022-02 HCAD No. 771639 ←
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 500 SOUTH BICENTENNIAL / NEW ACCT 2008 500 S BICENTENNIAL BLVD 78501 ↑ OWNER: PCI

2013 OVERAGE AMOUNT \$2,509.21 9

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	Name	RGV Preventative Care		Relationship to Property Owner	
	Mailing Address	500 S. Bicentennial Blvd		Daytime Telephone Number	956-971-0077
	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>2013</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	27,601.32			
	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 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			Date of application	1-10-14 T
	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: Date: 3/17/14
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied	By: Date: 2-13-14

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



PABLO (PAUL) VILLARREAL JR., RTA
Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

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

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 06-3-8-14

Print Date: 01/07/2014

1873 / 096000183

J. C. 3-11-14

Account Number V2260-02-000-0001-00 HCAD No. 6875724
Legal Description of the Property JACKSON PLAZA PH 2 LOT 1 2405 W UNIVERSITY OWNER: JACKSON 107 PARTNERS LLC ↑

**CORELOGIC COMMERCIAL REAL ESTATE
 SERVICES, INC.**
 P.O. BOX 961009
 FT. WORTH, TX 76161

2013 OVERAGE AMOUNT \$13,599.77 ↑

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG 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.

CORELOGIC COMMERCIAL TAX SERVICE
 ATTN: EVELYN CHAPA (817) 699-8019
 P. O. BOX 961009
 FT. WORTH, TEXAS 76161-009
 echapa@corelogic.com

Service Agt.

Step 1: Identify the Payer requesting the refund if different than shown above	Name	ATTN: EVELYN CHAPA (817) 699-8019	
	Mailing Address	P. O. BOX 961009	
	City, State, Zip Code	FT. WORTH, TEXAS 76161-009	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.		I paid the taxes for year <u>2013</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		
	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>Evelyn Chapa</i>		Date of application <u>1-24-14</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>3/13/14</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> Date: <u>2/20/14</u>

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



PABLO (PAUL) VILLARREAL 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: 01/02/2014

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 06-3-8-14
J.C. 3.11.14

TRANSMARITIME INC
 14213 TRANSPORTATION AVE
 LAREDO, TX 78045

Account Number J5700-70-000-0007-00 HCAD No. 200447 <i>↑</i>
Legal Description of the Property JOHN CLOSNER POR 70 E460.41'-LOT 7 10AC GR 8.94AC NET 901 E MILITARY HWY OWNER: GALLUS PROPERTIES LTD <i>↑</i>

2013 OVERAGE AMOUNT \$2,720.67

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 57: HIDALGO ISD

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 Transmaritime Inc.	Relationship to Property Owner Tenant / Partner
	Mailing Address 14213 Transportation Ave	Daytime Telephone Number 956 257 7874
	City, State, Zip Code Laredo, Texas 78045	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2013 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 U.S. 2,720.67	
	<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 type="checkbox"/> Mail to Payer at address in Step 1 14213 Transportation Ave, Laredo, TX	
	<input type="checkbox"/> Transfer this amount to account For tax year 78045	
	<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 1/20/14 <i>↑</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: 3/17/14
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 2-13-14 <i>↑</i>

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

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 ARMASA LLC ^ PAID BY: AUTO ZONE ^						
	Present mailing address (number and street) 4716 VERMONT AVE						
	City, town or post office, state, ZIP code MCALLEN TX 78503	Phone (area code and number)					
Legal description (or attach copy of the tax bill or tax receipt): KELLY PHARR TRACT E638.75-W727.28-N377							
Step 2: Describe the property	S707 & E220.8-W660-S330 EXC 5214-E170 LOT 100 6.05AC NET						
	Address or location of property: 202264						
	Account number of property: K2400.00.000.0100.02	OR	Tax receipt number: 22702828				
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		2012	01/29 / 2013	\$ 23260.03	\$ 23260.03	
	2.			/	\$	\$	
	3.			/	\$	\$	
	4.			/	\$	\$	
	5. TOTAL			/	\$	\$ 23260.03 ^	
Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR ACCT#202264							
REFUND TO: AUTO ZONE							
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 Carol Rivalto ^				Date of application for tax refund 1-7-14 ^	
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: 02-08-14			
	sign here	Authorized officer [Signature]				Date 3/13/14	
	sign here	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.1, tax code) [Signature]				Date 2-13-14	



PABLO (PAUL) VILLARREAL 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: 12/27/2013

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 01 28-14
J.C. 11.14

CAPCOR WESLACO LTD
 4808 GIBSON ST THIRD FLOOR
 HOUSTON, TX 77007

Account Number
 S2332-00-000-0002-00
 HCAD No. 20828494

Legal Description of the Property
 SDI WESLACO HOLDINGS, LLC LOT 2 -
 AMENDED

715 E EXPWY 83

OWNER: CAPCOR WESLACO LTD

2013 OVERAGE AMOUNT \$3,913.61

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		Relationship to Property Owner
	Mailing Address		Daytime Telephone Number
	City, State, Zip Code		
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2013</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>54,387.33</u>
	Total tax, penalty, and interest amount owed for the year		<u>58,300.94</u>
	Amount of refund claimed		<u>3,913.61</u>
Step 5: How should the refund be processed?	<input checked="" 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 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>Romy Tejb</u>	Date of application <u>1/28/14</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>3/13/14</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>2/20/14</u>

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



PABLO (PAUL) VILLARREAL JR., RTA
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157
 Fax No.: 956-318-2725

Print Date: 12/20/2013

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 01-3-8-14
J.C. 3-11-14

Account Number T4545-00-001-0005-00 HCAD No. 692996 ¹
Legal Description of the Property THREE MILE NORTH LOT 5 BLK 1 4322 N CONWAY
OWNER: ALEJO/ALVAREZ INVESTMENTS INC ¹
2013 OVERAGE AMOUNT \$2,790.18 ¹

CORELOGIC COMMERCIAL REAL ESTATE SER INC
WELLS FARGO COMMERCIAL MTG.
 P O BOX 961009
 FT. WORTH, TX 76161

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.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Corelogic Commercial Tax - Att. Refunds</i>	Relationship to Property Owner
	Mailing Address <i>P.O. Box 961250</i>	Daytime Telephone Number <i>888-988-0939</i>
	City, State, Zip Code <i>Fort Worth TX 76161-0250</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>2013</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>\$30,441.20</i>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<i>\$2,790.18</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>Richard Freeman</i>	Date of application <i>01/10/2014</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>3/13/14</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> Date: <i>2/20/14</i>

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

2/20



PABLO (PAUL) VILLARREAL 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: 01/07/2014

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 9-3-8-14
J.C. 3.11.14

Corelogic Commercial Real Estate Ser
 Wells Fargo Commercial Mtg
 PO Box 961009
 Ft Worth TX 76161

Account Number T4545-00-001-0007-00 HCAD No. 692998
Legal Description of the Property THREE MILE NORTH LOT 7 BLK 1 4416 N CONWAY OWNER: ALEJO/ALVAREZ INVESTMENTS INC
2013 OVERAGE AMOUNT \$2,757.73

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.

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Corelogic Commercial Tax Att: Refunds</u>	Relationship to Property Owner
	Mailing Address <u>P.O. Box 961250</u>	Daytime Telephone Number <u>888-988-0939</u>
	City, State, Zip Code <u>Ft Worth, TX 76161-0250</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>2013</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>\$28,900.56</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$2,757.73</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 <u>Richard Freeman</u>	Date of application <u>01/16/2014</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>3/13/14</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>2/20/14</u>

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