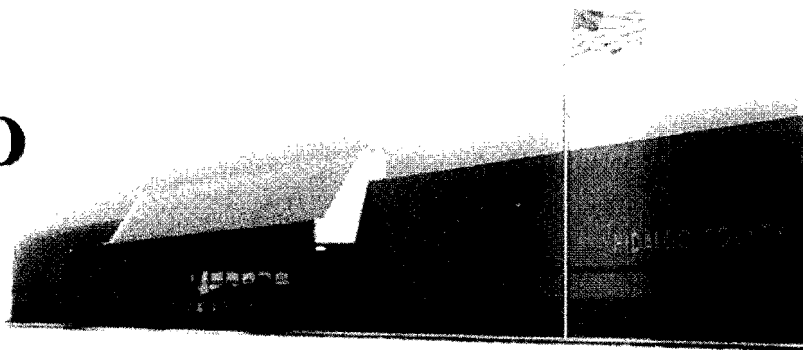


Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**  
*Pablo "Paul" Villarreal, Jr. RTA*



June 25, 2014

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

The Honorable Ramon Garcia  
Hidalgo County Commissioners  
Edinburg, Texas 78539

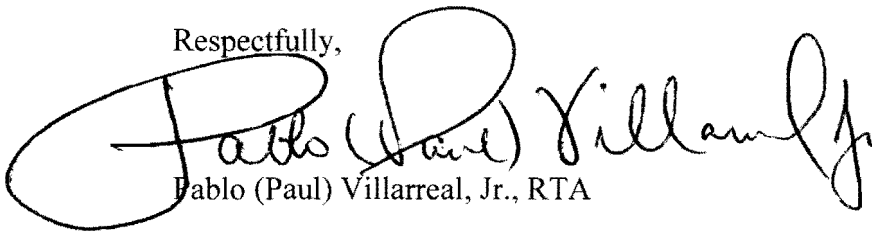
Re: See attached list

Gentlemen:

The Hidalgo County District Court has ordered a correction to the tax roll as allowed by Property Tax Code Section 42.43. This correction decreased the tax liability of the property owner(s). Since taxes had been previously paid, our office determined that the tax roll correction resulted in a tax refund over \$2,500.00 dollars due to the taxpayer(s). 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 recommended by the County Auditor.

When completed, please return the attached to our office. Thank you for your assistance in this matter.

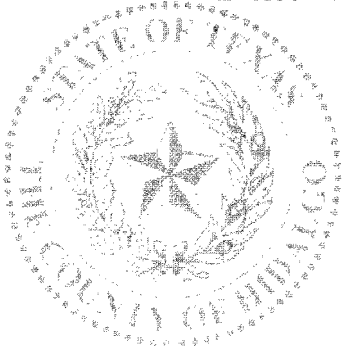
Respectfully,



Pablo (Paul) Villarreal, Jr., RTA

nlr

Enclosure



# 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>RPG GROUP LLC PAID BY: GMRI INC</b>
	Present mailing address (number and street) <b>ATTN: CORPORATE TAX DEPT; 1000 DARDEN CENTER DR</b>
	City, town or post office, state, ZIP code <b>ORLANDO, FL 32837-4032</b>

**Phone (area code and number)**

Legal description (or attach copy of the tax bill or tax receipt): **TRENTON CROSSING SHOPPING CENTER PH 2B**

<b>Step 2: Describe the property</b>	LOT 3
	Address or location of property:  721222 *
	Account number of property: <b>T6835.2B.000.0003.00</b>
	Tax receipt number: <b>OR 25739955</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	2013	1/31	/ 14	\$ 40,484.70
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 6,661.35 *

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4950-13-E \***

*Rev Order Pay by 07/09/14*

MM

<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."	
	<b>sign here</b> <b>Signature</b>	<b>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>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: <i>06-20-14</i> <i>J.C. 4/20/14</i>
	<b>sign here</b> <i>[Signature]</i> Authorized <i>[Signature]</i>	Date <i>4/23/14</i>
	<b>sign here</b> <i>[Signature]</i> 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 <i>6/13/14</i>

6/16

# 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>RARE HOSPITALITY INTERNATIONAL INC PAID BY: GMRI INC †</b>
	Present mailing address (number and street) <b>ATTN: PROPERTY TAX; PO BOX 695019</b>
	City, town or post office, state, ZIP code <b>ORLANDO, FL 32869-5019</b>

**Phone (area code and number)**

Legal description (or attach copy of the tax bill or tax receipt): **VALENCIA MARKETPLACE LOT 3 BLK 1**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>819140</b>
	Account number of property: <b>V0535.00.001.0003.00</b>
	Tax receipt number: <b>OR 25739955</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	2013	1/31 / 14	\$ 32,761.03	\$ 3,857.44
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$ TOTAL	\$ 3,857.44 †

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4950-13-E †**

**Per Order Pay by: 07/09/14**

**MM**

<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."	
	<b>sign here</b> ■ <b>Signature</b>	<b>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>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>06-20-14</b> <b>J.C. U/10/14</b>
	<b>sign here</b> ■ Authorized officer <b>[Signature]</b>	Date <b>6/23/14</b>	
	<b>sign here</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)	<b>[Signature]</b> †	Date <b>6/13/14 †</b>

6/16