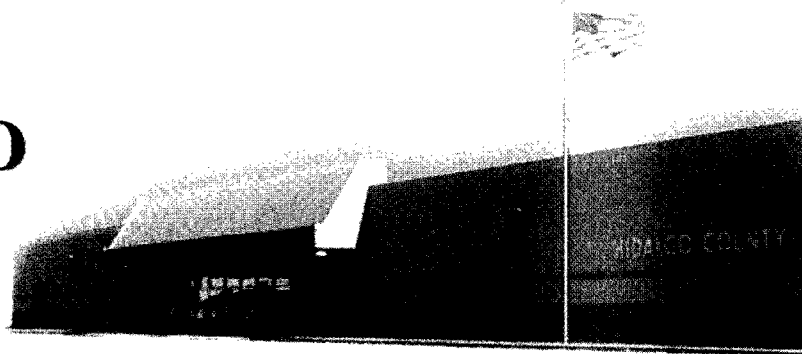


Office of Tax Assessor - Collector
COUNTY of HIDALGO
Pablo "Paul" Villarreal, Jr. RTA



July 2, 2014

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

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

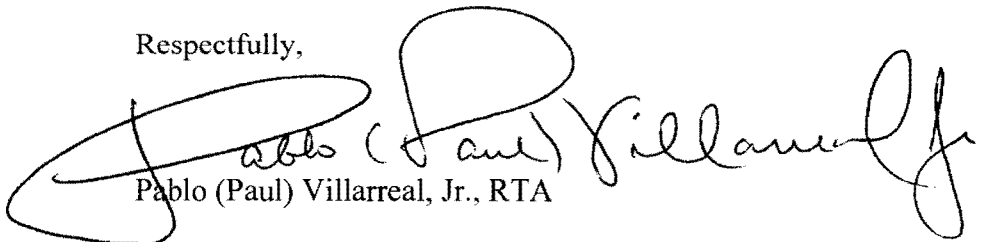
Re: See attached list

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,

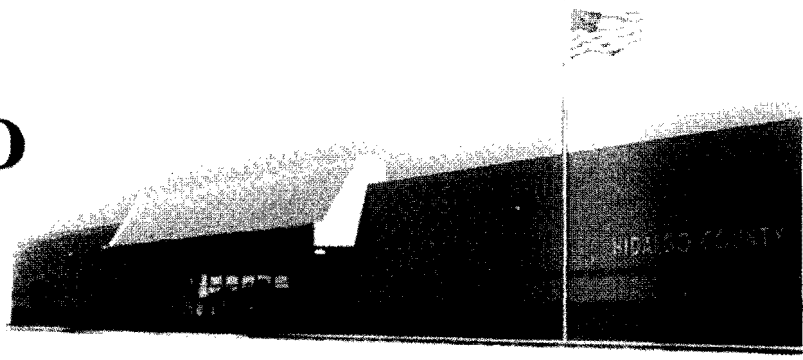

Pablo (Paul) Villarreal, Jr., RTA

nlr

Enclosure

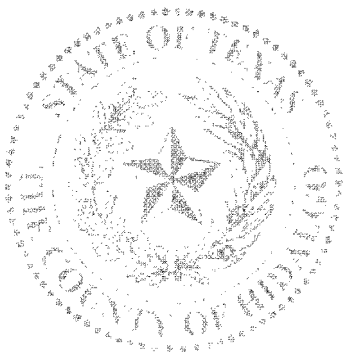


Office of Tax Assessor - Collector
COUNTY of HIDALGO
Pablo "Paul" Villarreal, Jr. R7A



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ACCOUNT NUMBER	PAYER	AMOUNT
H3900.01.000.00A1.00	GMRI Texas LP Paid by: GMRI Inc	\$3,513.89
M2075.00.000.003C.00	Rare Hospitality International Inc Paid by: GMRI Inc	\$3,783.85
M2280.02.000.001A.00	420 East Expressway LLC Paid by: Petsmart	\$5,436.67
P7400.1A.000.005A.00	Darden SW LLC Paid by: GMRI Inc	\$3,213.96
R1370.00.000.0001.00	Red Lobster Inns of America Paid by: GMRI Inc	\$3,075.10



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	
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 GMRI TEXAS LP PAID BY: GMRI INC &
	Present mailing address (number and street) PO BOX 695019 &
	City, town or post office, state, ZIP code ORLANDO, FL 32869-5019 &

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **HOLIDAY #1 LOT A-1**


Step 2: Describe the property	Address or location of property:
	498309 &
	Account number of property: H3900.01.000.00A1.00 &
	Tax receipt number: OR 25739955

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	2013	1/31	/ 14	\$ 34,262.39
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,513.89



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

Per Order Pay by: 07/09/14

MM

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	Date of application for tax refund

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
	sign here  Authorized officer	Date: 7/2/14
	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: 6/4/14

6/9

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	
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 RARE HOSPITALITY INTERNATIONAL INC PAID BY: GMRI INC 4
	Present mailing address (number and street) 1000 DARDEN CENTER DR 4
	City, town or post office, state, ZIP code ORLANDO, FL 32837-4032 4

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCALLEN CONVENTION CENTER LOT 3C**


Step 2: Describe the property	Address or location of property:
	720063 4
	Account number of property: M2075.00.000.003C.00 4
	Tax receipt number: OR 25739955

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	2013 4	1/31	/ 14	\$ 33,507.40 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,783.85 A



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

Per Order Pay by 07/09/14

MM

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	Date of application for tax refund

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: 7/2/14
	sign here  Authorized officer	Date 7/2/14
	sign here  Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.01, tax code)	Date 6/4/14

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Unit) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-ICC
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 420 EAST EXPRESSWAY LLC PAID BY: PETSMART A
	Present mailing address (number and street) 115 FREDERICK ST A
	City, town or post office, state, ZIP code SAN FRANCISCO, CA 94117-4009 A

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCALLEN PAVILION #2 LOT 1A**

Step 2: Describe the property	Address or location of property:
	561380 A
	Account number of property: M2280.02.000.001A.00 A
	Tax receipt number: OR 25149836

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	2013 A	1/21	/ 14	\$ 58,509.63 A
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 5,436.67 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5205-13A**

Per Order Pay by: 07/09/14

MM

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."	
	Signature sign here	Date of application for tax refund
	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	APPROVED BY: THE HIDALGO COUNTY TAX OFFICE DATE: 7/2/14
	Authorized officer sign here	Date 7/2/14
	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	Date 8/4/14

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	
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 DARDEN SW LLC PAID BY: GMRI INC *
	Present mailing address (number and street) 1000 DARDEN CENTER DR *
	City, town or post office, state, ZIP code ORLANDO, FL 32837-4032 *

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PLAZA DEL NORTE PH 1A LOT 5A**

Step 2: Describe the property	Address or location of property:
	20406933 *
	Account number of property: P7400.1A.000.005A.00 *
	Tax receipt number: OR 25739955

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	2013 4	1/31	/ 14	\$ 32,937.51 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,213.96 4

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

Per Order Pay by: 07/09/14

MM

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."	
	Signature sign here	Date of application for tax refund

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 CLERK DATE: 7/2/14
	Authorized office: sign here	Date 7/2/14
	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	Date 6/4/14

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 RED LOBSTER INNS OF AMERICA PAID BY: GMRI INC 4	
	Present mailing address (number and street) PO BOX 695011 *	
	City, town or post office, state, ZIP code ORLANDO, FL 32869-5011 A	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RED LOBSTER LOT 1**

Step 2: Describe the property	Address or location of property:	
	267922 &	
	Account number of property:	Tax receipt number:
	R1370.00.000.0001.00 &	OR 25739955

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	2013 4	1/31	/ 14	\$ 30,953.74 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,075.10 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4950-13-E**
Per Order Pay by 8/07/09/14
MM

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."	
	Signature sign here	Date of application for tax refund
	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	
	Authorized officer sign here	AUDITED BY: THE HIDALGO COUNTY AUDITORS DATE: 7/2/14
	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	Date 6/4/14