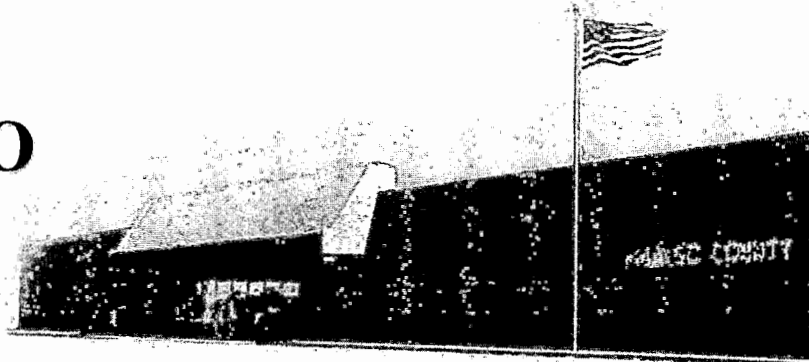


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



September 10, 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

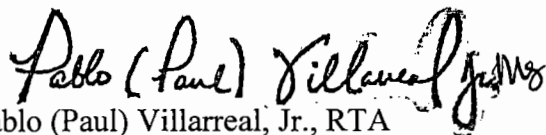
Re: See attached list

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

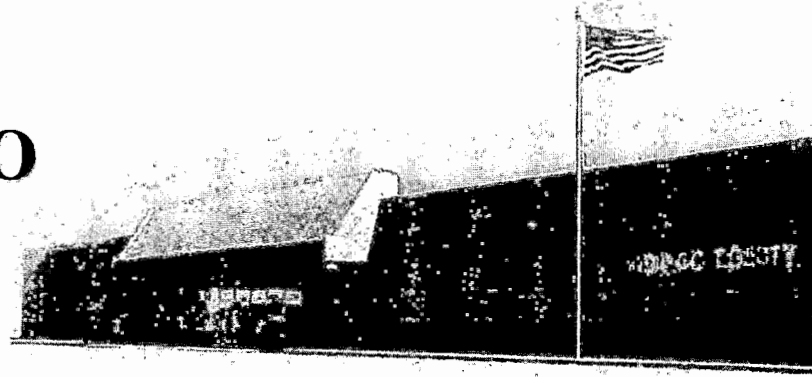
nlr

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RIA



P.O. Box 178
Edinburg, Texas 78540-0178
Ph. (956) 318-2157
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ACCOUNT NUMBER	PAYER	AMOUNT
D0443.99.000.0001.00	CST SERVICES LLC	\$3,126.88
J2004.99.000.0002.00	CST SERVICES LLC	\$5,667.40
M1155.00.000.0001.00	NATIONAL TAX SEARCH LLC	\$4,680.37
M4020.99.000.0001.00	CST SERVICES LLC	\$2,804.50



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

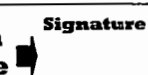

Step 1: Owner's name and address	Owner's name BIG DIAMOND INC PAID BY: CST SERVICES LLC *
	Present mailing address (number and street) PO BOX 690110
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78269-0110
	Phone (area code and number)

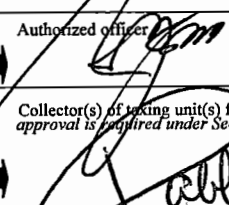
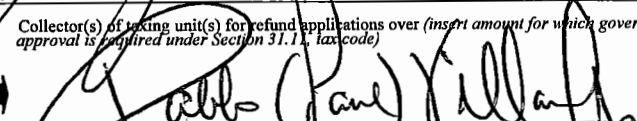
Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FIXTURES & EQUIPMENT AT 3701 WEST**

Step 2: Describe the property	BUSINESS HIGHWAY 83/NEW ACCT 2006
	Address or location of property: 767396 *
	Account number of property: D0443.99.000.0001.00 * OR 24672248
	Tax receipt number:

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	12/30	/ 13	\$ 6,452.61
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,126.88

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER#C-5679-13-A ***
Per Order Pay by 10-30-2014 \$3,126.88
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: 9-8-14 J. C. G. 9.14
	sign here  Authorized officer	Date 9/9/14
	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 9/2/14 *

9/2

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	VALERO CORNER STORE #1542 PAID BY: CST SERVICES LLC
Owner's name and address	Present mailing address (number and street)	PO BOX 690110
	City, town or post office, state, ZIP code	SAN ANTONIO, TX 78269-0110
		Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FIXTURES & EQUIPMENT AT 2204**

Step 2:	Describe the property	WEST TRENTON ROAD
	Address or location of property:	769124
	Account number of property:	J2004.99.000.0002.00
	Tax receipt number:	OR 24672251

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	12/30 / 13	\$ 9,192.92	\$ 5,667.40
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 5,667.40

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER#C-5679-13-A**

Per Order Pay by 10-30-2014

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: <i>09-08-14</i> <i>J.C. 9-9-14</i>
	sign here Authorized officer	Date <i>9/9/14</i>	
	sign here Collector(s) of taxing unit(s) for refund application over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date <i>9/2/14</i>	

9/2

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 RCE DEV-HWY STORAGE LLC PAID BY: NATIONAL TAX SEARCH LLC
	Present mailing address (number and street) 1020 S CLOSNER BLVD
	City, town or post office, state, ZIP code EDINBURG, TX 78539-5660
	Phone (area code and number)

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

Step 2: Describe the property	Address or location of property: 540164
	Account number of property: M1155.00.000.0001.00
	Tax receipt number: 25057356
	OR 25057356

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	1/16 / 14	\$ 44,155.72	\$ 4,680.37
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$ TOTAL	\$ 4,680.37
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-5441-13-J					
2013 COURT ORDER ADJUSTMENT					
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: 9-8-14 9.9.14
	sign here Authorized officer	Date 9/9/14
	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 9/5/14

9/5

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 VALERO CORNER STORE #1536 PAID BY: CST SERVICES LLC
	Present mailing address (number and street) PO BOX 690110
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78269-0110
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FIXTURES & EQUIPMENT AT 3225 EAST**

Step 2: Describe the property	EXPRESSWAY 83/NEW ACCT 2005
	Address or location of property: 762439
	Account number of property: M4020.99.000.0001.00 OR 24672246
	Tax receipt number:

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	12/30	/ 13	\$ 8,921.41
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 2,804.50

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER#C-5679-13-A***

Per Order Pay by 10-30-2014

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 Date
	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: 9-8-14 9-14-14	
	Authorized officer sign here	Date 9/9/14		
	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 9/2/14*		

9/2