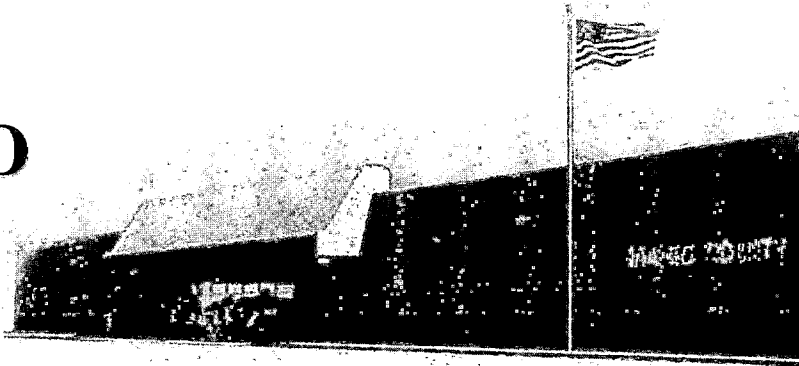


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



September 29, 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

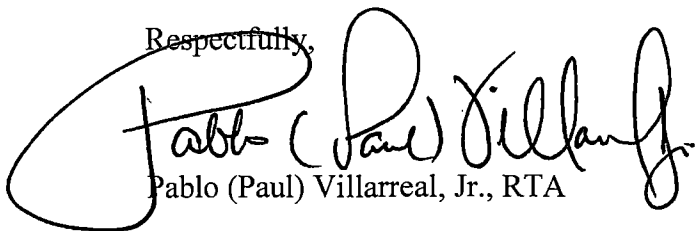
Re: See attached list

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

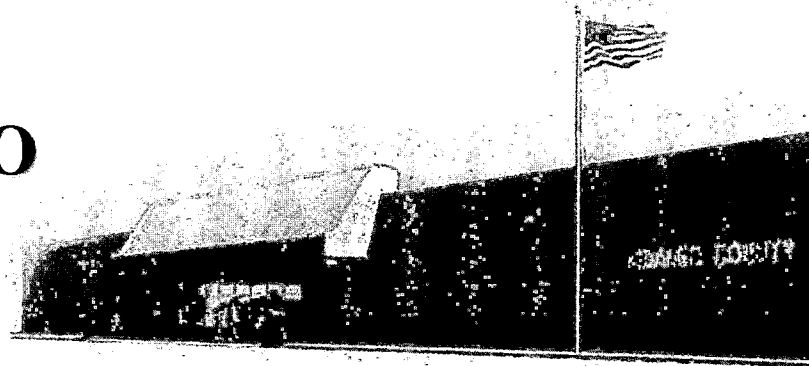
nlr

Enclosure



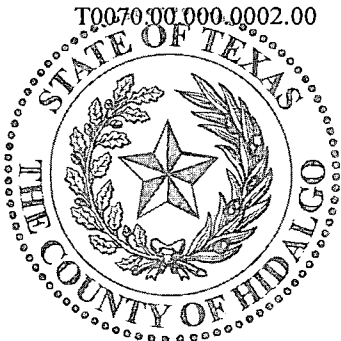
Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



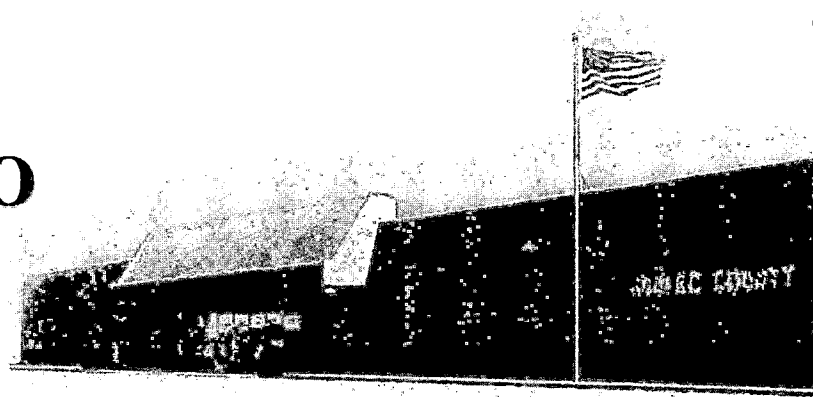
P.O. Box 178
 Edinburg, Texas 78540-0178
 Ph. (956) 318-2157
 Fax (956) 318-2733
www.hidalgocountytax.org

ACCOUNT NUMBER	PAYER	AMOUNT
H3900.99.000.00A2.00	DRURY HOTELS	\$3,353.37
H3900.01.000.00A2.00	DRURY HOTELS	\$15,444.57
H3900.01.000.00A2.00	DRURY HOTELS	\$32,819.99
H3900.01.000.00A2.00	DRURY HOTELS	\$21,420.44
J0600.00.000.001A.00	DRURY HOTELS	\$9,055.81
J0600.00.000.001A.00	DRURY SOUTHWEST INC	\$13,349.73
R3297.00.000.002B.00	NATIONAL TAX SEARCH LLC	\$8,199.69
R3297.00.000.0003.00	NATIONAL TAX SEARCH LLC	\$17,348.43
S2950.00.000.0175.10	WEINGARTEN SHARY NORTH JV	\$6,042.76
S2950.00.000.0185.10	WEINGARTEN SHARY NORTH JV	\$3,373.99
S2979.00.00A.0001.00	HEB	\$22,919.55
S2979.00.00A.0002.00	SHARY RETAIL LTD	\$11,325.93
S2979.00.00A.0004.00	SHARY RETAIL LTD	\$13,856.88
S2979.00.00A.0006.00	SHARY RETAIL LTD	\$3,494.27
S2979.00.00A.0011.00	SHARY RETAIL LTD	\$2,555.27
T0070.00.000.0002.00	DRURY HOTELS	\$7,330.71



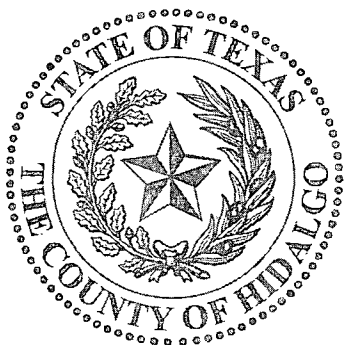
Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



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

ACCOUNT NUMBER	PAYER	AMOUNT
T0070.00.000.0002.00	DRURY SOUTHWEST INC	\$18,849.93
T0070.00.000.0002.00	DRURY HOTELS	\$11,709.70
T0070.02.000.0001.00	DRURY HOTELS	\$5,101.74
V0535.00.001.0002.00	UPTOWN PARTNERS LTD	\$4,894.68
V0535.00.001.0004.00	UPTOWN PARTNERS LTD	\$8,199.60
V0535.00.001.0006.00	UPTOWN PARTNERS LTD	\$8,199.60



2804 S. Bus. Hwy 281 • Edinburg, Texas 78539

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 DRURY SUITES / DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) 4
	Present mailing address (number and street) P.O. BOX 1214
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63702-1214
	Phone (area code and number)

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

Step 2: Describe the property	AT 228 WEST EXPRESSWAY 83 / NEW ACCT 2002
	Address or location of property: 631407 &
	Account number of property: H3900.99.000.00A2.00 4 OR 18063699
	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	2010 4	01/31 / 2011	\$ 13,413.45 4	\$ 3,353.37 4
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,353.37 4
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-3026-10-A					
PER ORDER PAY BY 11-13-2014					
NR					

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 AUDITOR'S OFFICE DATE: 9/23/14 <i>J.C. 9.25.14</i>
	Authorized officer sign here 	Date 9/26/14
	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 9-19-14

9/19

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) A
	Present mailing address (number and street) 101 FARRAR DR A
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905 A
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **HOLIDAY#1, LOT A-2**

Step 2: Describe the property	Address or location of property:
	498310 A
	Account number of property: Tax receipt number:
	H3900.01.000.00A2.00 A OR 20488924

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	2011 A	01/31 / 2012	\$ 70,571.05 A	\$ 15,444.57 A
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 15,444.57 A
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-2698-11-A					
PER ORDER PAY BY 11-13-2014					
NR					

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 AUDITOR'S OFFICE
	Authorized officer sign here 	Date	DATE: 9/23/14 9.25.14
	Collector(s) of taxing unit(s) for refund applications over approval is required under Section 31.11, tax code sign here 	Date	9-19-14

9/19

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) 4
	Present mailing address (number and street) 101 FARRAR DR 4
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905 4
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **HOLIDAY #1, LOT A-2**


Step 2: Describe the property	Address or location of property:
	498310 4
	Account number of property: Tax receipt number:
	H3900.01.000.00A2.00 4 OR 22969510

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 4	01/31 / 2013	\$ 93,857.06 4	\$ 32,819.99 4
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 32,819.99 4

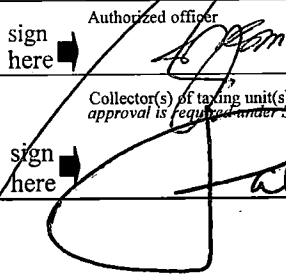
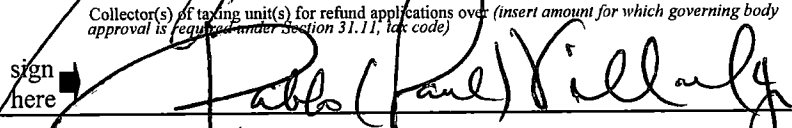
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-2454-12-I**

PER ORDER PAY BY 11-06-2014

NR

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 AUDITOR'S OFFICE
	Authorized officer sign here 	Date	DATE: 9/23/14 G. C. J. S. M.
	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	9/26/14 9-19-14

9/19

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) 4
	Present mailing address (number and street) 101 FARRAR DR 4
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905 4
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **HOLIDAY# 1, LOT A-2**

Step 2: Describe the property	Address or location of property: 498310 4
	Account number of property: H3900.01.000.00A2.00 4
	Tax receipt number: OR 25529200

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	01/31 / 2014	\$ 90,789.06 4	\$ 21,420.44 4
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 21,420.44 A
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-5424-13-H					
PER ORDER PAY BY 11-05-2014					
NR					

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 AUDITOR'S OFFICE DATE: (P.D) 9/25/14 2.C 9.25.14
	Authorized officer sign here 	Date 9/26/14	
	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) Fabio (Paul) Villanueva	Date 9/23/14	

9/23

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) *
	Present mailing address (number and street) 200 FARRAR DR
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905

Phone (area code and number)

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


Step 2: Describe the property	Address or location of property: 456130 *
	Account number of property: J0600.00.000.001A.00 * OR 20488902
	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	2011 4	01/31	/ 2012	\$ 55,067.80 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 9,055.81

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-2696-11-E A**

PER ORDER PAY BY 11-06-2014

NR

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 	Date 9/26/14
	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)  Fallo (Paul) Villar	Date 9-19-14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **9/23/14**
S. C. G. 8.5.14

9/19

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 DRURY SOUTHWEST INC <i>4</i>
	Present mailing address (number and street) 101 S FARRAR DR
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905
	Phone (area code and number)

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

Step 2: Describe the property	Address or location of property:
	456130 <i>A</i>
	Account number of property: J0600.00.000.001A.00 <i>4</i> OR 22969487
	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	2012 <i>4</i>	01/31 / 2013	\$ 59,400.29 <i>4</i>	\$ 13,349.73 <i>4</i>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 13,349.73 <i>A</i>

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-2454-12-I**

PER ORDER PAY BY 11-06-2014

NR

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 <i>[Signature]</i>	Date of application for tax refund <i>[Date]</i>
sign here		
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 <i>[Signature]</i>	Date 9/26/14
	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) <i>[Signature]</i>	Date 9-19-14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: *[Signature]* 9/23/14
[Signature] 9.25.14

9/19

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 AMREIT RIVER VALLEY LP PAID BY: NATIONAL TAX SEARCH LLC 4
	Present mailing address (number and street) 8 GREENWAY PLZ STE 1000 4
	City, town or post office, state, ZIP code HOUSTON, TX 77046-0808 4
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RIVER VALLEY LOT 2B**

Step 2: Describe the property	Address or location of property: 686962 4
	Account number of property: R3297.00.000.002B.00 4 OR 24810633
	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 4	12/30	/ 13	\$ 46,407.55 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 8,199.69 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5421-13-E**

Per Order Pay by: 10-08-2014

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 [Signature]	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	
	Authorized officer sign here [Signature]	Date 9/26/14
	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 [Signature]	Date 9-23-14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **9/25/14**

9/23

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 AMREIT RIVER VALLEY LP PAID BY: NATIONAL TAX SEARCH LLC A
	Present mailing address (number and street) 8 GREENWAY PLZ STE 1000 A
	City, town or post office, state, ZIP code HOUSTON, TX 77046-0808 A

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RIVER VALLEY LOT 3**

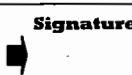

Step 2: Describe the property	Address or location of property: 660192 A
	Account number of property: R3297.00.000.0003.00 A
	Tax receipt number: OR 24810633

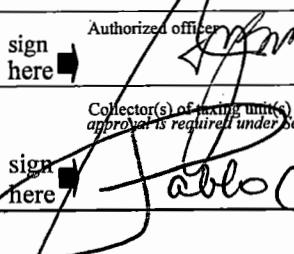
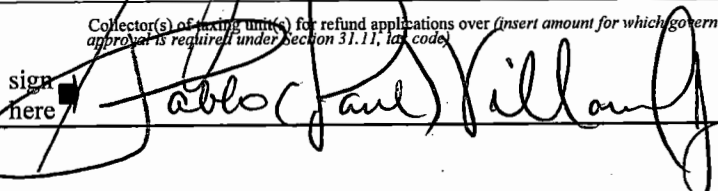
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2013 A	12/30	/ 13	\$ 108,284.27 A
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 17,348.43 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5421-13-E**

Per Order Pay by: 10-08-2014

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	
	sign here  Authorized officer	Date 9/26/14
	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 9/23/14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **9/25/14**
J.C. 9.25.14

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 WEINGARTEN SHARY NORTH JV &
	Present mailing address (number and street) PO BOX 924133 &
	City, town or post office, state, ZIP code HOUSTON, TX 77292-4133 &
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **JOHN H SHARY N7.9AC AN IRR TR LOT 175 7.90AC**


Step 2: Describe the property	Address or location of property:
	280909 &
	Account number of property: Tax receipt number:
	S2950.00.000.0175.10 & OR 25201052

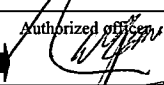
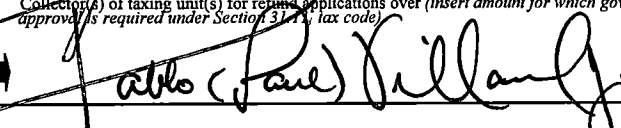
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2013 &	1/23	/ 14	\$ 37,154.39 &
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 6,042.76 Λ

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5669-13 E**

Per Order Pay by: 10-08-2014

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: 9/25/14
	sign here  Authorized officer		Date
sign here  Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approves required under Section 31.14, tax code)		Date	9-23-14

9/24

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 WEINGARTEN SHARY NORTH JV 4
	Present mailing address (number and street) PO BOX 924133 4
	City, town or post office, state, ZIP code HOUSTON, TX 77292-4133 4
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **JOHN H SHARY 23.15AC AC23.30 N OF CRW LOT 185**

Step 2: Describe the property	23.11AC NET
	Address or location of property: 280975 4
	Account number of property: S2950.00.000.0185.10 4
	Tax receipt number: 25201052

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	1/23	/ 14	\$ 28,114.05 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,373.99 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5669-13E**

Per Order Pay by: 10-08-2014

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: 9/25/14 J.C. 25.4
	sign here Authorized officer	Date 9/26/14
	sign here Collector(s) of taxing unit(s) for refund applications over \$1000 (insert amount for which governing body approval is required under Section 31.11, tax code)	Date 9-23-14

9/24

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-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 SHARY RETAIL LTD PAID BY: HEB 4
	Present mailing address (number and street) BILLBOX #01-3704-556, PO BOX 839999 4
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78283-3999 4

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARY TAYLOR EXPRESSWAY COMMERCIAL LOT 1**

Step 2: Describe the property	BLK A
	Address or location of property: 707591 4
	Account number of property: S2979.00.00A.0001.00 4
	Tax receipt number: OR 23005708

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 4	1/31	/ 13	\$ 308,199.37 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 22,919.55 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2331-12-I**

Per Order Pay by: 10-08-2014

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	
	sign here Authorized officer	Date
	sign here Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 3.11, tax code)	Date

AUDITED BY: THE HIDALGO COUNTY AUDITORS OFFICE
DATE: (PN) 9/25/14
9.25.14

9/26/14

9/23/14

9/24

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-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 SHARY RETAIL LTD &
	Present mailing address (number and street) BILLBOX #01-3704-556, PO BOX 839999 &
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78283-3999 &

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARY TAYLOR EXPRESSWAY COMMERCIAL LOT 2**

Step 2: Describe the property	BLK A
	Address or location of property: 707592 &
	Account number of property: S2979.00.00A.0002.00 &
	Tax receipt number: OR 22477873

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 &	1/22	/ 13	\$ 167,188.85 &
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 11,325.93 &

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2331-12-I**

Per Order Pay by: 10-08-2014

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
	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 AUDITOR'S OFFICE DATE: 9/25/14
	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 9/24/14

9/24

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 SHARY RETAIL LTD &
	Present mailing address (number and street) BILLBOX #01-3704-556, PO BOX 839999 &
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78283-3999 &
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARY TAYLOR EXPRESSWAY COMMERCIAL LOT 4**


Step 2: Describe the property	BLK A
	Address or location of property: 707593 &
	Account number of property: S2979.00.00A.0004.00 &
	Tax receipt number: OR 22477873

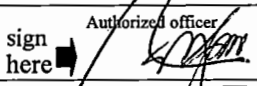
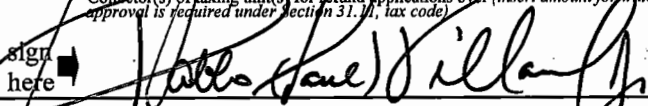
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2012 &	1/22	/ 13	\$ 181,438.51 &
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 13,856.88 &

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2331-12-I**

Per Order Pay by: 10-08-2014

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: 9/25/14 J.C. 9.25.14
	Authorized officer sign here 	Date 9/26/14
	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 9/23/14

9/24

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 SHARY RETAIL LTD &	Phone (area code and number)
	Present mailing address (number and street) BILLBOX #01-3704-556, PO BOX 839999 &	
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78283-3999 &	



Legal description (or attach copy of the tax bill or tax receipt): **SHARY TAYLOR EXPRESSWAY COMMERCIAL LOT 6**



Step 2: Describe the property	BLK A	
	Address or location of property:	
	707595	
	Account number of property: S2979.00.00A.0006.00 &	Tax receipt number: OR 22477873

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 &	1/22	/ 13	\$ 51,813.21 &
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 3,494.27 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2331-12-I**

Per Order Pay by: 10-08-2014
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 CLERK'S OFFICE DATE: 9/25/14
	sign here  Authorized officer	Date 9/26/14	
	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 9/23/14	

9/24

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 SHARY RETAIL LTD ✕
	Present mailing address (number and street) BILLBOX #01-3704-556, PO BOX 839999 ✕
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78283-3999 ✕

Phone (area code and number)
#

Legal description (or attach copy of the tax bill or tax receipt): **SHARY TAYLOR EXPRESSWAY COMMERCIAL LOT 11**

Step 2: Describe the property	BLK A
	Address or location of property: 707600 ✕
	Account number of property: S2979.00.00A.0011.00 ✕
	Tax receipt number: OR 22477873

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	4	1/22	/ 13	\$ 46,202.21
2.				/	\$	\$
3.				/	\$	\$
4.				/	\$	\$
5.				/	\$ TOTAL	\$ 2,555.27

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2331-12-I**

Per Order Pay by: 10-08-2014

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	
	Authorized officer sign here [Signature]	AUDITED BY: THE HIDALGO COUNTY CLERK'S OFFICE DATE: 9/25/14
	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) sign here [Signature]	Date 9/26/14

Date: **9/23/14**

9/24

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) 4
	Present mailing address (number and street) P.O. BOX 1214
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63702-1214
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **T M J C LOT 2**

Step 2: Describe the property	Address or location of property:
	293624 4
	Account number of property: Tax receipt number:
	T0070.00.000.0002.00 4 OR 20488931

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	2011 4	01/31 / 2012	\$ 46,542.71 4	\$ 7,330.71 4
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 7,330.71 1

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-2697-11-C**

PER ORDER PAY BY 11-09-2014

NR

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 AUDITOR'S OFFICE DATE 9/23/14
	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 9-26-14 Date 9-19-14

9/19

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 DRURY SOUTHWEST INC <i>a</i>
	Present mailing address (number and street) 101 S FARRAR DR <i>a</i>
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905 <i>a</i>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **T M J C LOT 2**

Step 2: Describe the property	Address or location of property:
	293624
	Account number of property: Tax receipt number:
	T0070.00.000.0002.00 OR 22969493

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 <i>a</i>	01/31 / 2013	\$ 60,897.00 <i>a</i>	\$ 18,849.93 <i>a</i>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 18,849.93 <i>a</i>
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-2454-12-I					
PER ORDER PAY BY 11-06-2014					
NR					

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 <i>a</i>	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>(PA) 9/23/14</i> <i>J. C. 9.25.14</i>
	Authorized officer sign here <i>(Signature)</i>	Date 9/26/14	
	Collector(s) of taxing unit(s) for refund applications over <i>insert amount for which governing body approval is required under Section 31.11, tax code</i> sign here <i>(Signature)</i>	Date 9-19-14	

9/19

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 DRURY SOUTHWEST INC (PAID BY: DRURY HOTELS) *
	Present mailing address (number and street) 101 FARRAR DR *
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905 A
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **T M J C LOT 2**


Step 2: Describe the property	Address or location of property: 293624 *
	Account number of property: T0070.00.000.0002.00 * OR Tax receipt number: 25529200

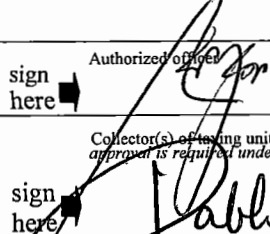
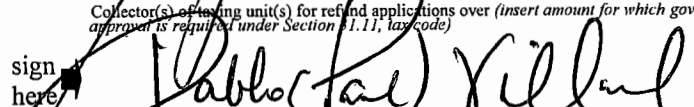
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2013 A	01/31	/ 2014	\$ 65,407.60 A
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 11,709.70 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-5424-13-H**

PER ORDER PAY BY 11-05-2014

NR

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 	Date 9/23/14
	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 9/23/14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **9/25/14**
Y.C. 9.15.14

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 AUBURN INVESTMENTS INC (PAID BY: DRURY HOTELS) A
	Present mailing address (number and street) 101 S FARRAR DR A
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701 A
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **T M J C #2 LOT 1**

Step 2: Describe the property	Address or location of property:	
	346513 A	
	Account number of property:	Tax receipt number:
	T0070.02.000.0001.00 A	OR 25529184

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	01/31 / 2014	\$ 49,471.46 A	\$ 5,101.74 A
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 5,101.74 A
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-5423-13-J					
PER ORDER PAY BY 11-24-2014					
NR					

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 AUDITOR'S OFFICE DATE: 9/23/14
	Authorized officer sign here 	Date	9/26/14
	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) Paul Villalobos (Paul) Villalobos	Date	9-19-14

9/19

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 UPTOWN PARTNERS LTD 4
	Present mailing address (number and street) 720 BRAZOS ST STE 520 4
	City, town or post office, state, ZIP code AUSTIN, TX 78701-2506 4

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **VALENCIA MARKETPLACE LOT 2 BLK 1**

Step 2: Describe the property	Address or location of property: 819139 4
	Account number of property: V0535.00.001.0002.00 4
	Tax receipt number: OR 24799082

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	1/7	/ 14	\$ 23,322.09 4
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 4,894.68 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5669-13H**

Per Order Pay by 10-08-2014

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 []
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	Date 9/26/14
	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 9-23-14

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **9/25/14**

J.C. 9.25.14

9/23

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-SĒB-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 UPTOWN PARTNERS LTD <i>A</i>
	Present mailing address (number and street) 720 BRAZOS ST STE 520 <i>A</i>
	City, town or post office, state, ZIP code AUSTIN, TX 78701-2506 <i>A</i>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **VALENCIA MARKETPLACE LOT 4 BLK 1**

Step 2: Describe the property	Address or location of property:
	819141 <i>A</i>
	Account number of property: V0535.00.001.0004.00 <i>A</i>
	Tax receipt number: 24799082

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 <i>A</i>	1/7	/ 14	\$ 57,746.44 <i>A</i>
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 8,199.60 <i>A</i>

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5669-13H**

Per Order Pay by: 10-08-2014

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 <i>[Signature]</i>	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: <i>9/25/14</i> <i>J.C. 9.25.14</i>
	Authorized officer sign here <i>[Signature]</i>	Date 9/26/14	
	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 <i>[Signature]</i>	Date 9/23/14	

9/23

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 UPTOWN PARTNERS LTD A
	Present mailing address (number and street) 720 BRAZOS ST STE 520 A
	City, town or post office, state, ZIP code AUSTIN, TX 78701-2506 A
	Phone (area code and number)



Legal description (or attach copy of the tax bill or tax receipt): **VALENCIA MARKETPLACE LOT 6 BLK 1**

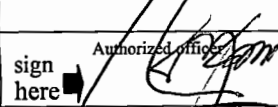
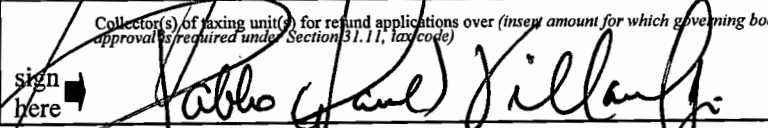
Step 2: Describe the property	Address or location of property: 819143 A
	Account number of property: V0535.00.001.0006.00 A
	Tax receipt number: OR 24799082

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	1/7	/ 14	\$ 63,791.42 A
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 8,199.60 A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-5669-13H**

Per Order Pay by: 10-08-2014
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
	sign here  Authorized officer		DATE: <i>J.C. 9.25.14</i>
	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 <i>9/26/14</i>
			Date <i>9/23/14</i>

9/24