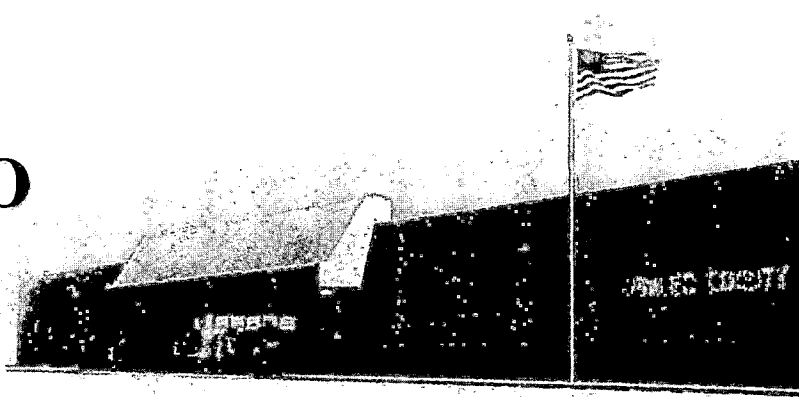


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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

October 21, 2014

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

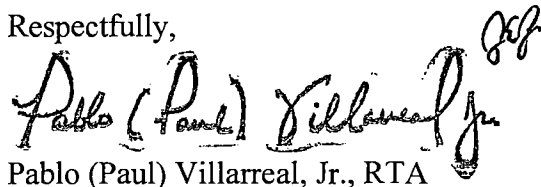
Re: See attached list

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.

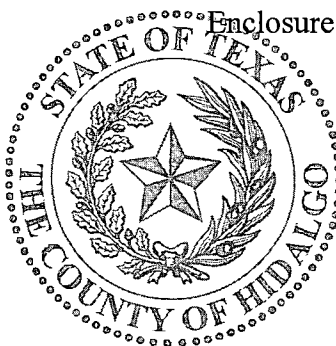
Respectfully,



Pablo (Paul) Villarreal, Jr., RTA

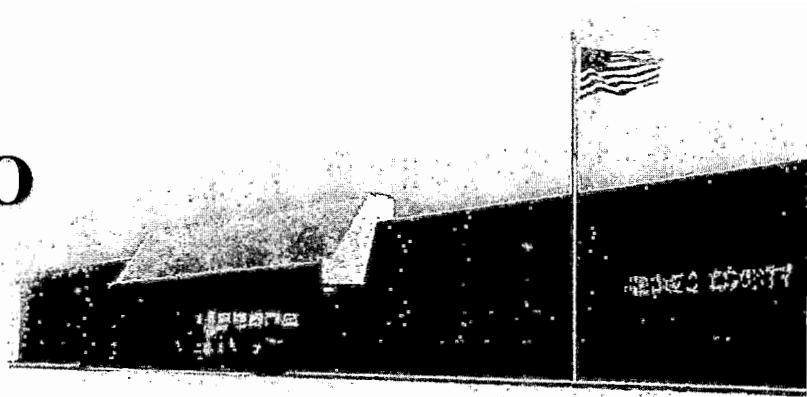
nlr

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RIA



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

| ACCOUNT NUMBER | PAYER | AMOUNT |
|----------------------|------------------------------|------------|
| R2950.99.000.0000.D6 | Ryan Tax Compliance Services | \$3,863.16 |
| S7355.00.000.0030.00 | Texas National Bank | \$5,175.58 |
| V0563.02.000.0051.00 | Rushmore Loan Management | \$2,645.80 |
| W3630.02.001.0057.00 | Corelogic | \$3,910.65 |



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



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: 01/28/2014

Change address

RYAN TAX COMPLIANCE SERVICES
 13155 NOEL ROAD SUITE 100
 DALLAS, TX 75240

SECOND NOTICE

JUL 17 2014

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: *6-10-14*

| |
|--|
| Account Number R2950-99-000-0000-D6 <i>d</i> HCAD No. 20826155 <i>d</i> |
| Legal Description of the Property LEASED EQUIPMENT AT SHD & CML / NEW ACCT 2010 VAR LOC @ SHD & CML OWNER: GENERAL MOTORS LLC |

2013 OVERAGE AMOUNT \$3,863.16 *d*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 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 <i>Ryan Tax Compliance Svcs</i> | Relationship to Property Owner <i>Agent.</i> |
| | Mailing Address <i>P.O. Box 460169</i> | Daytime Telephone Number <i>866-866-4186</i> |
| | City, State, Zip Code <i>Houston, Tx 77056</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 | Overpaid the account <input checked="" type="checkbox"/> | |
| | Duplicate payment <input checked="" 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>\$7,977.98</i> |
| | Total tax, penalty, and interest amount owed for the year | <i>\$7,977.78</i> |
| | Amount of refund claimed | <i>\$ 3,863.16.</i> |
| Step 5: How should the refund be processed? | Mail to Property Owner | |
| | Mail to Payer at address in Step 1 <input checked="" type="checkbox"/> | |
| | Transfer this amount to account | For tax year |
| | 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 <i>9/15/14</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>6/16/14</i> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>[Signature]</i> Date: <i>9/12/14</i> |

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: 01/07/2014

SECOND NOTICE
 SEP 0 12 2014
 Hidalgo County Tax Office
 Received

Payer
 TEXAS NATIONAL BANK
 P.O. BOX 777
 MERCEDES, TX 78570

| |
|---|
| Account Number S7355-00-000-0030-00 4 HCAD No. 684251 2 |
| Legal Description of the Property SUNRISE MEADOWS LOT 30 2022 E 21ST ST 4 |
| OWNER: GARZA ROBERTO B & NORMA E BECERRA 4 |

2013 OVERAGE AMOUNT \$5,175.58 4

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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 TEXAS NATIONAL BANK | Relationship to Property Owner LENDER |
| | Mailing Address P.O. Box 4650 | Daytime Telephone Number 956-217-7100 |
| | City, State, Zip Code EDINBURG, TX 78539 | |
| 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 | \$6,589.18 |
| | Total tax, penalty, and interest amount owed for the year | 1,413.60 |
| | Amount of refund claimed | \$5,175.58 |
| 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 Connie Gonzalez HERE <i>Connie Gonzalez</i> | Date of application 8/17/2014 |
| | 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 37.107 | |
| AUDITORS USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>[Signature]</i> | Date: <u>10/16/14</u> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>Paul Villarreal</i> | Date: <u>9/8/14</u> |

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

AUDITED BY THE HIDALGO COUNTY OFFICE
 DATE: *PN* 9/18/14
JC 10.13.14

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 |

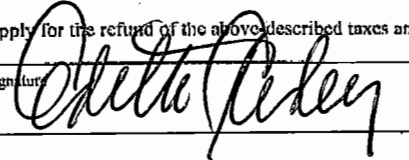
To apply for a tax refund, the taxpayer must complete the following

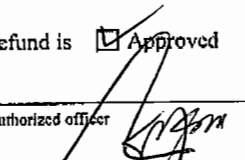
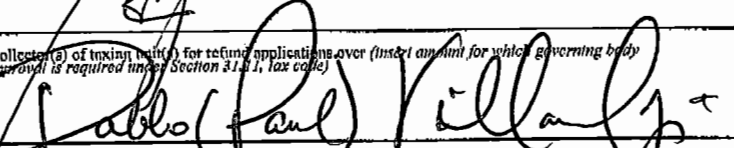
| | | |
|--|--|---|
| Step 1: Owner's name and address | Owner's name PENA EDUARDO & MARY E PAID BY: RUSHMORE LOAN MANAGEMENT * | |
| | Present mailing address (number and street) PO BOX 1345 | |
| | City, town or post office, state, ZIP code HIDALGO, TX 78557 | Phone (area code and number) 800-537-3821 xt 1239 |
| | | |

| | | |
|---|--|---|
| Step 2: Describe the property | Legal description (or attach copy of the tax bill or tax receipt): VALLE ALTO NORTH UT 2 LOT 51 | |
| | Address or location of property: 2806 E GRANJENO AVE | |
| | 549650 | |
| | Account number of property: V0563.02.000.0051.00 | Tax receipt number: OR 24419296 |

| 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 | 12/17 | / 2013 | \$ 2645.80 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ | \$ 2645.80 * |

| | |
|---|--|
| Taxpayer's reason for refund (attach supporting documentation): PD IN ERROR . TAXPAYER RESPONSIBLE and PAID FOR TAXES. REFUND TO: RUSHMORE | |
| Rushmore Loan Management PO Box 1499 Covina, CA 91724 | |
| 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  * | Date of application for tax refund 9/14/14 |
| 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 |
| | sign here  | Date 10/16/14 | DATE: 9-10-14 |
| | sign here  | Date 9-19-14 | |

9/19

080414 001



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: 01/03/2014

SECOND NOTICE

Change address

Payer: CORELOGIC &
1 CORELOGIC DR
MAIL CODE: 4-5
WESTLAKE, TX 76262

JUL 21 2013

| |
|--|
| Account Number W3630-02-001-0057-00 HCAD No. 696864 |
| Legal Description of the Property WEST MEADOWS UT 2 LOT 57 BLK 1 3108 PAGE AVE OWNER: VALDEZ JOSE A & MELISSA |
| 2013 OVERAGE AMOUNT \$3,910.65 |

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.

| | | |
|--|---|---|
| Step 1: Identify the Payer requesting the refund if different than shown above | Name <i>Corelogic Tax Service</i> | Relationship to Property Owner <i>Tax Services</i> |
| | Mailing Address <i>P.O. Box 961250</i> | Daytime Telephone Number <i>817 699 4292</i> |
| | City, State, Zip Code <i>Irving, TX 76061</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 | |
| | 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>David Crosby</i> | Date of application <i>8/13/2014</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>10/16/14</i> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>[Signature]</i> Date: <i>9/21/14</i> |

DATE: 9/18/14
2010-13-14

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

9/12