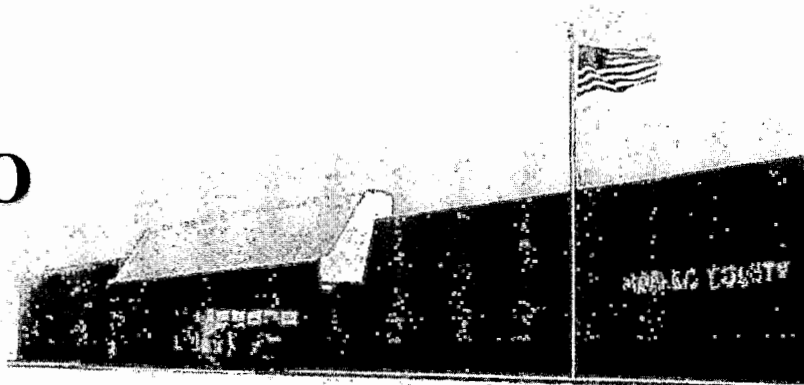


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



November 26, 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 Appraisal District has made a correction to the tax roll as allowed by Property Tax Code Section 26.15. 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

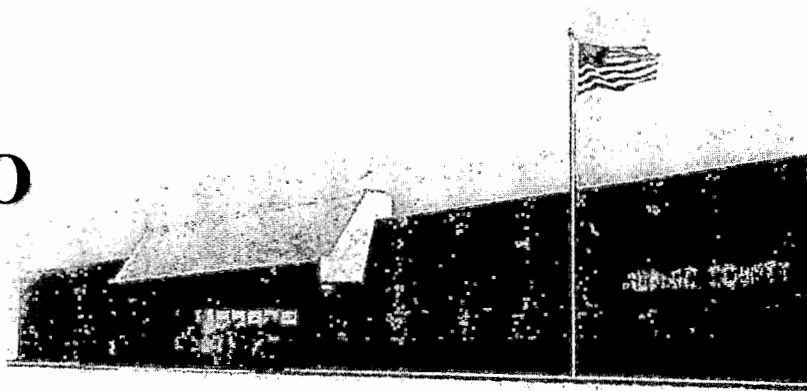
nlr

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
T4073.00.000.0007.00	DIMART HOSPITAL EQUIPMENT LLC	\$5,322.26
T4073.00.000.0007.00	DIMART INVESTMENTS L.P.	\$5,345.31



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 MARTINEZ JORGE & VELIA PAID BY: DIMART HOSPITAL EQUIPMENT LLC
	Present mailing address (number and street) 2211 LILLY COVE DR
	City, town or post office, state, ZIP code MISSION, TX 78572-3468

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **THE WOODS AT CIMARRON LOT 7**

Step 2: Describe the property	Address or location of property:
	517207 d
	Account number of property: T4073.00.000.0007.00 d
	Tax receipt number: OR 20249094

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	1/31 / 12	\$ 9,906.34	\$ 5,322.26
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$ TOTAL	\$ 5,322.26 d

Taxpayer's reason for refund (attach supporting documentation): **VALUE DECREASE. ENTERED INCORRECT SIZE OF 20,200 SQ FT INSTEAD OF 93,474 SQ FT. RF140913 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: 11-14-14 L.C. 11/13/14
	sign here Authorized officer 	Date 11/18/14
	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) Pablo (Paul) Hill	Date 10-22-14 d

10/21

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 MARTINEZ JORGE & VELIA (PAID BY: DIMART INVESTMENTS L.P.)
	Present mailing address (number and street) 1101 ASH AVE
	City, town or post office, state, ZIP code MCALLEN, TX 78501

Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **THE WOODS AT CIMARRON LOT 7**

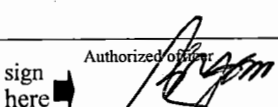
Step 2: Describe the property	Address or location of property:
	517207 *
	Account number of property: T4073.00.000.0007.00 *
	Tax receipt number: OR 25458534

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	01/30	/ 2014	\$ 9,949.24
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 5,345.31 *

Taxpayer's reason for refund (attach supporting documentation): **SUPP# 10**

ENTERED INCORRECT SIZE OF 20.200SQ FT INSTEAD OF THE CORRECT SIZE OF 93,474SQ FT / 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: 11-10-14 J.C. 11/13/14
	Authorized officer sign here 	Date 11/26/14
	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) Jablo (Paul) Villanueva *	Date 10-22-14