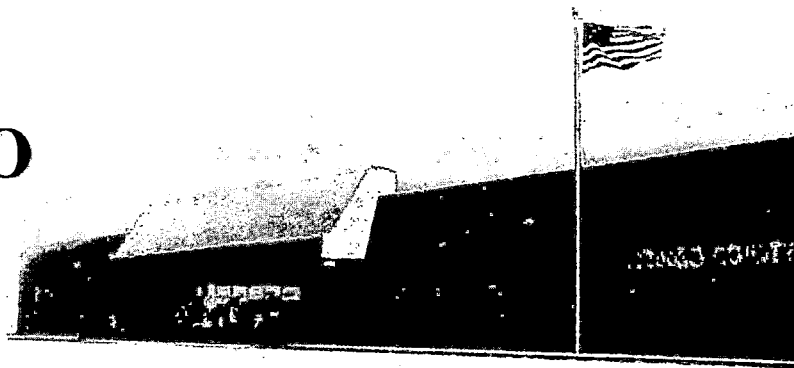


Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. R7A*



May 26, 2015

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

The Honorable Ramon Garcia  
Hidalgo County Commissioners  
Edinburg, Texas 78539

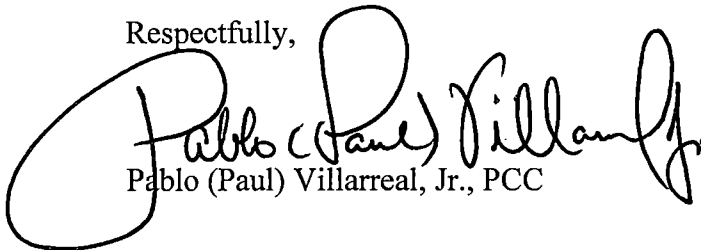
Re: See attached list

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., PCC

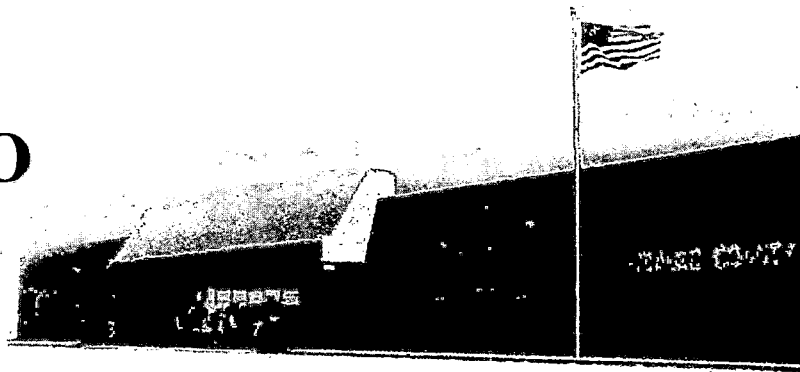
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Enclosure



Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. R7A*



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ACCOUNT NUMBER	PAYER	AMOUNT
C7883.01.000.0002.00	TARGET CORPORATION	\$24,966.08
M2350.01.000.0004.00	RYAN TAX COMPLIANCES SERVICES LLC	\$9,135.61
M2360.00.000.0001.00	TARGET CORPORATION	\$4,437.83
N5410.00.000.0001.00	TARGET CORPORATION	\$12,869.56
S2979.00.00A.0003.00	TARGET CORPORATION	\$11,471.42



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1:</b> Owner's name and address	Owner's name <b>DAYTON HUDSON CORP PD BY: TARGET CORPORATION</b>
	Present mailing address (number and street) <b>1000 NICOLLET MALL</b>
	City, town or post office, state, ZIP code <b>MINNEAPOLIS, MN 55403-2542</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CONCORD PROPERTY CORP #1 LOT 2 AMENDED**

<b>Step 2:</b> Describe the property	Address or location of property:
	<b>508864</b>
	Account number of property:
	<b>C7883.01.000.0002.00</b>

Tax receipt number:

OR **28541987**

<b>Step 3:</b> 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	2014	1/30	/ 15	\$ 224,387.33	\$ 24,966.08
2.			/	\$	\$	
3.			/	\$	\$	
4.			/	\$	\$	
5.			/	\$ TOTAL	\$ 24,966.08	

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-7058-14-A**

MM

<b>Step 4:</b> 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 <b>sign here</b>	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.

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**  
DATE: **5-20-15**  
**D.C.S. - 2-15**

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b>	Date <b>5/22/15</b>
	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) <b>sign here</b>	Date <b>5-11-15 SE</b>

5/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>MCALLEN COMPONENTS LP PD BY: RYAN TAX COMPLIANCES SERVICES LLC</b>
	Present mailing address (number and street) <b>6200 S 42<sup>ND</sup> ST</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78503-8856</b>

**Phone (area code and number)**

Legal description (or attach copy of the tax bill or tax receipt): **MCALLEN SW IND DIST#1 UNIT 1 LOTS 4 THRU 8**



<b>Step 2: Describe the property</b>	Address or location of property:
	<b>230532</b>
	Account number of property: <b>M2350.01.000.0004.00</b>
	Tax receipt number: <b>OR 28517090</b>


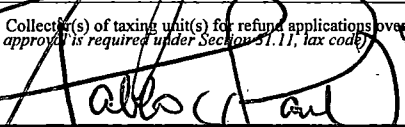
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2014	1/30	/ 15	\$ 71,682.61
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 9,135.61

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-6814-14-B**

**RF150411**

**MM**

<b>Step 4: sign the form</b>	"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."	
	<b>sign here</b>  <b>Signature</b>	<b>Date of application for tax refund</b> 
	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.	

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>5-22-15</b>
	<b>sign here</b>  <b>Authorized officer</b>	Date <b>5/22/15</b>
	<b>sign here</b>  <b>Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 51.11, tax code)</b>	Date <b>4/23/15</b> <b>JE</b>

5/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>TARGET CORPORATION PD BY: TARGET CORPORATION</b>
	Present mailing address (number and street) <b>PO BOX 9456</b>
	City, town or post office, state, ZIP code <b>MINNEAPOLIS, MN 55440-9456</b>

**Phone (area code and number)**

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

<b>Step 2: Describe the property</b>	Address or location of property: <b>704082</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>5-20-15</b> <i>JCS-20-15</i>
	Account number of property: <b>M2360.00.000.0001.00</b>	Tax receipt number: <b>OR 28541987</b>

<b>Step 3: Give the tax payment information</b>	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	2014	1/30	/ 15	\$ 126,925.71
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 4,437.83

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-7058-14-A**

MM

<b>Step 4: sign the form</b>	"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 <b>sign here</b>	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.

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b>	Date <b>5/20/15</b>
	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) <b>sign here</b>	Date <b>5-11-15 JFC</b>

5/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>TARGET CORP PD BY: TARGET CORPORATION d</b>
	Present mailing address (number and street) <b>1000 NICOLLET MALL</b>
	City, town or post office, state, ZIP code <b>MINNEAPOLIS, MN 55403-2542</b>

**Phone (area code and number)**

Legal description (or attach copy of the tax bill or tax receipt): **NORTH MCALLEN SHOPPING CENTER LOT 1**

<b>Step 2: Describe the property</b>	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <i>PC 5-20-15</i>	
	Address or location of property: <b>647662 d</b>	
	Account number of property: <b>N5410.00.000.0001.00 d</b>	Tax receipt number: <b>OR 28541987</b>

<b>Step 3: Give the tax payment information</b>	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	2014	1/30	/ 15	\$ 162,982.36
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 12,869.56 d

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-7058-14-A**

**MM**

<b>Step 4: sign the form</b>	"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."	
	<b>sign here</b> Signature	<b>Date of application for tax refund</b>
	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.	

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b>	Date <b>5/20/15</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approvals required under Section 61.11, tax code) <b>sign here</b>	Date <b>5-11-15 d JE</b>

5/11

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1: Owner's name and address</b>	Owner's name <b>TARGET CORPORATION PD BY: TARGET CORPORATION</b>
	Present mailing address (number and street) <b>1000 NICOLLET MALL</b>
	City, town or post office, state, ZIP code <b>MINNEAPOLIS, MN 55403-2542</b>

**Phone (area code and number)**

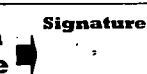

Legal description (or attach copy of the tax bill or tax receipt): **SHARY-TAYLOR EXPRESSWAY COMMERCIAL LOT 3**

<b>Step 2: Describe the property</b>	BLK A
	Address or location of property:  <b>707590</b>
	Account number of property: <b>S2979.00.00A.0003.00</b>
	Tax receipt number: <b>OR 28541987</b>

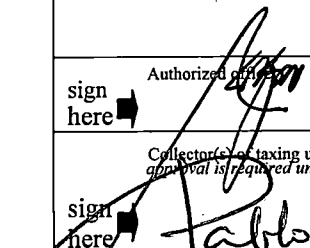
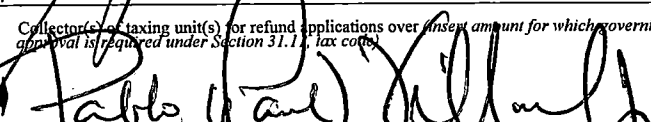

<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2014	1/30	/ 15	\$ 222,310.62
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 11,471.42

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-7058-14-A**

MM

<b>Step 4: sign the form</b>	"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."	
	<b>sign here</b>  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.

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	<b>sign here</b>  Authorized signatory	Date <b>5/22/15</b>
	<b>sign here</b>  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 <b>5-11-15</b> 

**AUDITED BY: THE HIDALGO  
COUNTY AUDITOR'S OFFICE  
DATE: 5-20-15  
JCS-LLS**

5/11