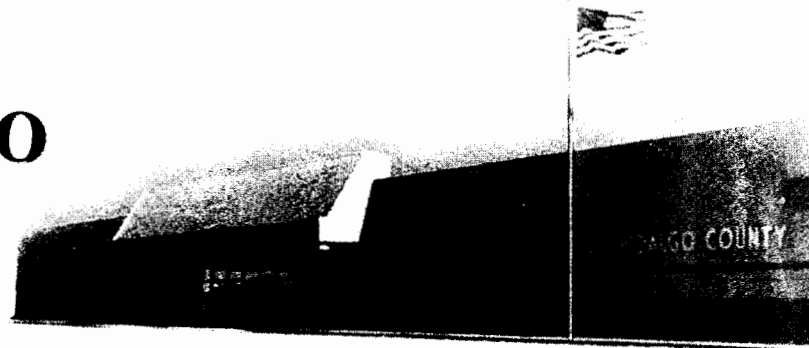


Office of Tax Assessor - Collector
COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. R7A
Assessor and Collector

P.O. Box 178
Edinburg, Texas 78540-0178
(956) 318-2157 • (956) 318-2733

May 11, 2016

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.

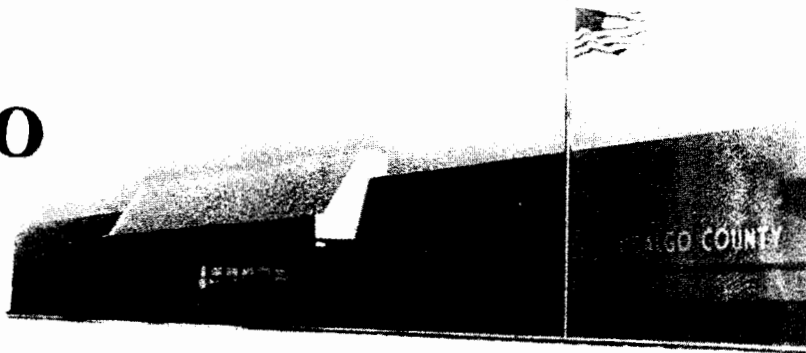
Respectfully,

Pablo (Paul) Villarreal, Jr. PCC
Pablo (Paul) Villarreal, Jr., PCC

nr

Enclosure

Office of Tax Assessor - Collector
COUNTY of HIDALGO

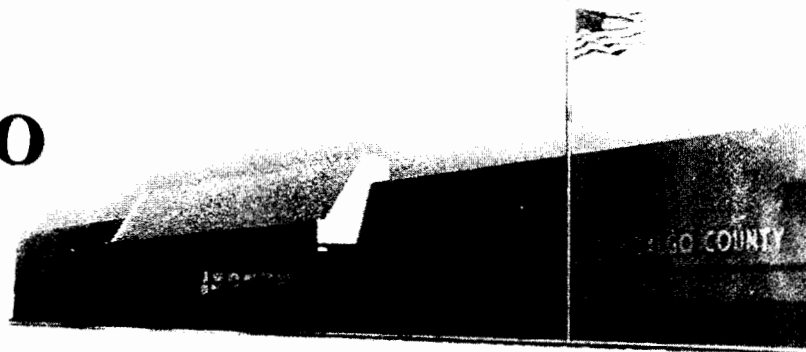


Pablo "Paul" Villarreal, Jr. R7A
Assessor and Collector

P.O. Box 178
Edinburg, Texas 78540-0178
(956) 318-2157 • (956) 318-2733

ACCOUNT NUMBER	PAYER	AMOUNT
A1800.00.040.0006.02	VIOLA G SUNDERLAND / SUE ELLEN SAUDER	\$4,385.47
C4921.1A.000.0009.00	REYMAC INVESTMENTS LLC	\$4,212.52
C4921.1A.000.0010.00	REYMAC INVESTMENTS LLC	\$3,252.56
C4921.1A.000.0011.00	REYMAC INVESTMENTS LLC	\$2,709.93
D7520.02.000.0118.00	CORELOGIC	\$3,058.01
D8510.02.000.0113.00	SIERRA TITLE OF HIDALGO COUNTY INC	\$35,760.75
E3300.99.000.0000.H3	PACIFIC RIM CAPITAL INC	\$6,948.28
K2400.00.000.0057.02	INTERNATIONAL BANK	\$7,020.51
M2248.99.000.0005.00	FRED LOYA INSURANCE AGENCY, INC	\$3,729.47
M2250.02.000.0004.00	AURIEL INVESTMENTS, LLC	\$9,235.55
M4935.00.000.0001.00	SPLISH SPLASH LAUNDRYMAT	\$4,209.49
M4935.00.000.0001.00	SPLISH SPLASH LAUNDRYMAT	\$5,853.18
M4935.00.000.0001.00	ARGENTO PROPERTIES LTD	\$5,971.81
M4935.00.000.0001.00	SPLISH SPLASH LAUNDRYMAT	\$6,007.61
P6190.99.000.001A.08	PTAX COE / GE CAPITAL	\$2,740.03
R1155.00.000.0038.00	LERETA LLC	\$2,707.96
S3095.00.000.000A.00	VSP INVESTMENTS LLC	\$4,802.05
T2100.99.241.0011.09	GATEWAY PRINTING & OFFICE SUPPLY INC	\$10,683.20
T2100.99.241.0011.09	GATEWAY PRINTING & OFFICE SUPPLY INC	\$10,818.69

Office of Tax Assessor - Collector
COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. RTA
Assessor and Collector

P.O. Box 178
Edinburg, Texas 78540-0178
(956) 318-2157 • (956) 318-2733

ACCOUNT NUMBER	PAYER	AMOUNT
W0100.00.010.0005.01	CJ-FALL LLC	\$3,224.33
W0100.00.048.0004.11	SOUTHWEST GRAIN COMPANY	\$3,533.22
W0100.00.048.0009.44	LUIS RIVERA	\$3,033.62
W2300.99.000.0000.S4	BANK OF AMERICA	\$13,566.76
W3800.00.726.0000.00	FA ZA FAMILY LP	\$10,011.86
W6897.00.000.00A2.00	INTERNATIONAL BANK	\$7,584.55

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 SUNDERLAND HARRY P & VIOLA G PAID BY: VIOLA G SUNDERLAND/SUE ELLEN SAUDER
	Present mailing address (number and street) 2466 PONKAN SUMMIT DR
	City, town or post office, state, ZIP code APOPKA, FL 32712
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ALAMO LAND & SUGAR CO S5.0AC-E1/2 LT 6 BLK 40 5.0AC GR 4.40 AC NET**

Step 2: Describe the property	Address or location of property: 907 N ALAMO RD
	112365
	Account number of property: A1800.00.040.0006.02 OR 31158000
	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	2015	1-25	/ 2016	\$ 8537.39
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4385.47

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED/ AG EXCL INCREASE**

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."	
	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 official sign here	DATE: 5/15/16 Date 5/10/16
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 3.111, tax code) sign here	Date 4/27/16

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 REYMAC INVESTMENTS LLC ✕
	Present mailing address (number and street) 708 BRAZOS ST ✕
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CITRUS GROVE PLAZA PH 1A LOT 9**

Step 2: Describe the property	Address or location of property: 4123 EXPWY 83
	895216 ✕
	Account number of property: C4921.1A.000.0009.00 ✕
	Tax receipt number: OR 31391319

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	2015	1-29	/ 2016	\$ 17456.64
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4212.52 ✕

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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: 5/9/16 J.C. 5/10/16
	Authorized sign here ✕	Date 5/10/16
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.1 (a) tax code) sign here ✕	Date 9/27/16 ✕

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 REYMAC INVESTMENTS LLC ✕
	Present mailing address (number and street) 708 BRAZOS ST ✕
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CITRUS GROVE PLAZA PH 1A LOT 10**

Step 2: Describe the property	Address or location of property: 4129 EXPWY 83	
	895217 ✕	
	Account number of property: C4921.1A.000.0010.00 ✕	Tax receipt number: OR 31391401

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	2015	1-29	/ 2016	\$ 16262.80
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3252.56 ✕

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	Signature sign here	Date of application for tax refund
<p>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.</p>		

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: 5/9/16 5/10/16
	Collector(s) of tax unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date	5/10/16 4/27/16 ✕

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 REYMAC INVESTMENTS LLC ✕
	Present mailing address (number and street) 708 BRAZOS ST ✕
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CITRUS GROVE PLAZA PH 1A LOT 11**

Step 2: Describe the property	Address or location of property: 4117 EXPWY 83
	895218 ✕
	Account number of property: C4921.1A.000.0011.00 ✕
	Tax receipt number: 31391199

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	2015	1-29	/ 2016	\$ 30475.17
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 2709.93 ✕

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**
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."	
	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 5/10/16
	Authorized sign here ✕	Date 5/10/16
	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 ✕ Paul Hillman ✕	Date 4/27/16 ✕ CAF

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 MANUEL PAID BY: CORELOGIC
	Present mailing address (number and street) 10305 N 25TH ST
	City, town or post office, state, ZIP code MCALLEN, TX 78504
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DOVE CROSSING PH 2 LOT I18**

Step 2: Describe the property	Address or location of property: 10305 N 25TH ST
	708664
	Account number of property: D7520.02.000.0118.00
	Tax receipt number: OR 30295552

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	2015	12-16	/ 2015	\$ 3532.20
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3058.01

Taxpayer's reason for refund (attach supporting documentation): **RF160312**

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."	
	Signature sign here	Date of application for tax refund
<p>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.</p>		

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 official sign here		DATE: 5/19/16 5/10/16
	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	Jane Dillan	Date 5/10/16 4/27/16

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 SM3 VENTURES LLC PAID BY: SIERRA TITLE OF HIDALGO COUNTY INC
	Present mailing address (number and street) PO BOX 1868
	City, town or post office, state, ZIP code MCALLEN, TX 78505
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DUNLYN ESTATES PH 2 LOT 113**

Step 2: Describe the property	Address or location of property: 1500 W HALL ACRES RD	
	161810	
	Account number of property: D8510.02.000.0113.00	Tax receipt number: OR 30215893

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	2015	12-10	/ 2015	\$ 55825.13
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 35760.75

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	Signature sign here	Date of application for tax refund
<p>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.</p>		

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 5/12/16	
	Collector(s) of taxing unit(s) for refund applications over which approval is required under section 31.11, tax code sign here	Paul J. [Signature]	Date 4/27/16	

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


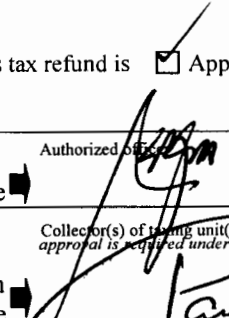

Step 1: Owner's name and address	Owner's name PACIFIC RIM CAPITAL INC *
	Present mailing address (number and street) 15231 LAGUNA CANYON ROAD SUITE 250 *
	City, town or post office, state, ZIP code IRVINE, CA 92618
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2015/DISPOSED 03-05-2014; LEASED EQUIPMENT AT SEB & CEB / NEW ACCT 2008**

Step 2: Describe the property	Address or location of property: 1010 E CHAPIN	
	774312 *	
	Account number of property: E3300.99.000.0000.H3 *	Tax receipt number: OR 31631993

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	2015	1-29 / 2016	\$ 6948.28	\$ 6948.28
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 6948.28 *
Taxpayer's reason for refund (attach supporting documentation): RF160312 VALUE DECREASED					
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."	
	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
	sign here 	Authorized officer 	DATE: 5/9/16 5/10/16
	sign here 	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 21.11, tax code)	Date

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 EL COFRE DEL TESORO LLC PAID BY: INTERNATIONAL BANK
	Present mailing address (number and street) 2414 SUNSET LN
	City, town or post office, state, ZIP code MISSION TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **KELLY PHARR TRACT W360'-E1245' & W304.20'-E885'-S450' LT 57 13.72 AC NET**

Step 2: Describe the property	Address or location of property: W ALBERTA RD
	201981
	Account number of property: K2400.00.000.0057.02 OR 30414432
	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	2015	12-22 / 2015	\$ 17551.28	\$ 7020.51
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 7020.51

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED**

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."	
	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: 5/19/16 5/10/16
	Authorized official sign here	Date 5/10/16	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.11, tax code) sign here	Paul Hillen	

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 FRED LOYA CLAIMS & LEGAL PAID BY: FRED LOYA INSURANCE AGENCY, INC
	Present mailing address (number and street) 1800 N LEE TREVINO DR STE 201
	City, town or post office, state, ZIP code EL PASO, TX 79936
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SUPPLIES FURNITURE FIXTURES EQUIPMENT & VEHICLES AT 11900 N 26TH ST STE 100 & 200/ NEW ACCT 2010**

Step 2: Describe the property	Address or location of property: 11900 N 26TH ST STE 100 & 200
	20407101 ✗
	Account number of property: M2248.99.000.0005.00 ✗ OR 31248779
	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	2015	1-26 / 2016	\$ 13728.59	\$ 3729.47
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 3729.47 ✗

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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: 5/19/16 5/10/16
	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 5/10/16 4/27/16 ✗

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 MCALLEN TEXAS PLAZA II LLC PAID BY: AURIEL INVESTMENTS, LLC
	Present mailing address (number and street) 100 E NOLANA AVE STE 130
	City, town or post office, state, ZIP code MCALLEN, TX 78504

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCALLEN NORTHWEST INDUSTRIAL #2 LOT 4 & 5**

Step 2: Describe the property	Address or location of property: 5000 N 23RD ST
	594925
	Account number of property: M2250.02.000.0004.00
	Tax receipt number: 31487793, 31487792

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	2015	1-29	/ 2016	\$ 68366.91
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 9235.55

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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 signature sign here	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5/19/16 A.C. S/10/16
	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 5/10/16 4/27/16

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 ARGENTO PROPERTIES LTD PAID BY: SPLISH SPLASH LAUNDRYMAT
	Present mailing address (number and street) 2507 NICOLE DR
	City, town or post office, state, ZIP code MISSION, TX 78574

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MISSION CENTER (R/S LOT 1) - AMENDED**

Step 2: Describe the property	Address or location of property: 1929 N CONWAY AVE
	458636
	Account number of property: M4935.00.000.0001.00
	Tax receipt number: 23546951,23546968,25469911

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	6-10	/ 2013	\$ 4461.96
2. ALL ENTITIES	2012	6-10	/ 2013	\$ 1978.26	\$ 992.44
3. CMS	2013	1-29	/ 2014	\$ 1950.64	\$ 978.58
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4209.49

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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 signature sign here	Date 5/10/16	DATE: 5/19/16 A. C. 5/10/16
	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 4/27/16	

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 ARGENTO PROPERTIES LTD PAID BY: SPLISH SPLASH LAUNDRYMAT
	Present mailing address (number and street) 2507 NICOLE DR
	City, town or post office, state, ZIP code MISSION, TX 78574

Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **MISSION CENTER (R/S LOT 1) - AMENDED**

Step 2: Describe the property	Address or location of property: 1929 N CONWAY AVE
	458636
	Account number of property: M4935.00.000.0001.00
	Tax receipt number: 25469911


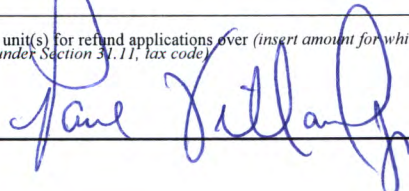
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2013	1-29	/ 2014	\$ 10741.18
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 5853.18

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED**

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."	
	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 5/10/16
	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 4/27/16

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 5/19/16

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

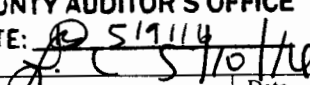
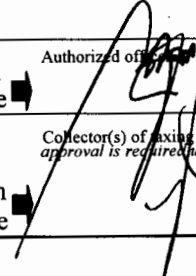
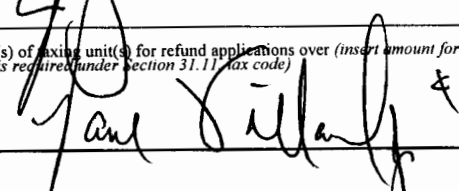

Step 1: Owner's name and address	Owner's name ARGENTO PROPERTIES LTD ✕
	Present mailing address (number and street) 2507 NICOLE DR
	City, town or post office, state, ZIP code MISSION, TX 78574
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MISSION CENTER (R/S LOT 1) - AMENDED**

Step 2: Describe the property	Address or location of property: 1929 N CONWAY AVE	
	458636 ✕	
	Account number of property: M4935.00.000.0001.00 ✕	Tax receipt number: OR 27624222

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	2014	12-30 / 2014	\$ 10915.49	\$ 5971.81
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 5971.81 ✕
Taxpayer's reason for refund (attach supporting documentation): RF160221 VALUE DECREASED					
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."	
	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: 5/19/16 
	Authorized official sign here 	Date 5/10/16	
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 4/27/16 ✕		

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 ARGENTO PROPERTIES LTD PAID BY: SPLISH SPLASH LAUNDRYMAT
	Present mailing address (number and street) 2507 NICOLE DR
	City, town or post office, state, ZIP code MISSION, TX 78574

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MISSION CENTER (R/S LOT 1) - AMENDED**

Step 2: Describe the property	Address or location of property: 1929 N CONWAY AVE	
	458636	
	Account number of property: M4935.00.000.0001.00	Tax receipt number: OR 31514390

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	2015	1-29	/ 2016	\$ 10937.23
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 6007.61

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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: 5/10/16
	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	5/27/16

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 GE EQUIP SMALL TICKET PAID BY: PTAX COE/GE CAPITAL
	Present mailing address (number and street) PO BOX 5043
	City, town or post office, state, ZIP code CHICAGO, IL 60680
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LEASED EQUIPMENT AT 201 W ANAYA RD/NEW ACCT 2014**

Step 2: Describe the property	Address or location of property: 201 W ANAYA RD
	930002
	Account number of property: P6190.99.000.001A.08 OR 26990480
	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	2014	11-19 / 2014	\$ 2740.03	\$ 2740.03
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 2740.03
Taxpayer's reason for refund (attach supporting documentation): RF160312 VALUE DECREASED					
APPLY TO ACCOUNTS. 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."	
	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: 9/27/16
	Authorized officer sign here	Date 9/10/16	
	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	Paul Villafra	

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 SOTO RUBEN & CONSUELO A PAID BY: LERETA LLC
	Present mailing address (number and street) PO BOX 1644
	City, town or post office, state, ZIP code WESLACO, TX 78599
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RANCHO VICTORIA LOT 38**

Step 2: Describe the property	Address or location of property: 2703 CYPRESS DR
	575997
	Account number of property: R1155.00.000.0038.00 OR Tax receipt number: 30439027

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	2015	12-28 / 2015	\$ 2707.96	\$ 2707.96
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 2707.96
Taxpayer's reason for refund (attach supporting documentation): RF160221					
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."	
	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 sign here	Date	DATE: 5/10/16	
	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	4/27/16	

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 VSP INVESTMENTS LLC *
	Present mailing address (number and street) P O BOX 5848 *
	City, town or post office, state, ZIP code MCALLEN, TX 78502
	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **SHELDON AN IRR TR N469.86' LOT A 4AC GR 3.51AC NET**

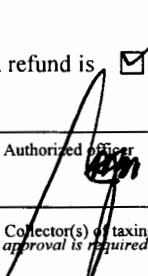
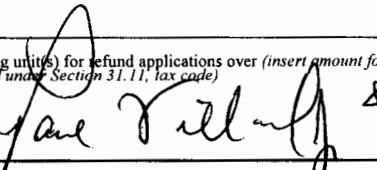
Step 2: Describe the property	Address or location of property: 100 EHACKBERRY AVE
	283712 *
	Account number of property: S3095.00.000.000A.00 * OR 27283119
	Tax receipt number:

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	2014	12-15	/ 2014	\$ 16403.11
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4802.05 *

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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: 5/19/16 J.C. 5/16/16
	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 5/10/16 5/27/16 *

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 GATEWAY PRINTING & OFFICE SUPPLY INC ✕
	Present mailing address (number and street) 315 S CLOSNER BLVD
	City, town or post office, state, ZIP code EDINBURG TX 78541

Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES EQUIPMENT AT 300 W CHAPIN / NEW ACCT 2012**

Step 2: Describe the property	Address or location of property: 300 W CHAPIN
	820672 ✕
	Account number of property: T2100.99.241.0011.09 ✕
	Tax receipt number: OR 25312800

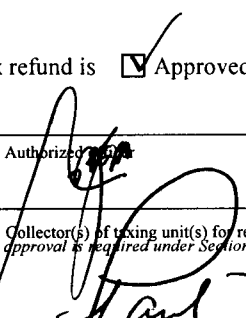
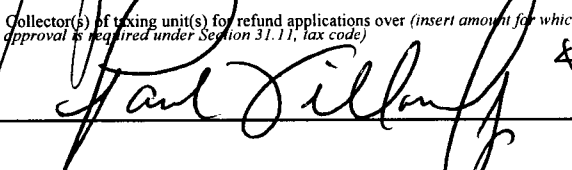

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES		2013	1-27 / 2014	\$ 12319.30
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 10683.20 ✕

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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 sign here 	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5/19/16 5/10/16
	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 5/10/16 4/27/16 ✕ 

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 GATEWAY PRINTING & OFFICE SUPPLY INC *
	Present mailing address (number and street) 315 S CLOSNER BLVD
	City, town or post office, state, ZIP code EDINBURG TX 78541
	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES EQUIPMENT AT 300 W CHAPIN / NEW ACCT 2012**

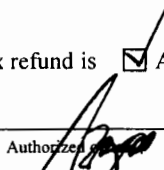

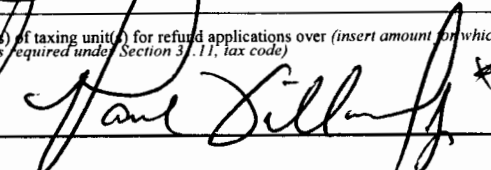
Step 2: Describe the property	Address or location of property: 300 W CHAPIN	
	820672 *	
	Account number of property: T2100.99.241.0011.09 *	Tax receipt number: OR 28083311

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	2014	1-21	/ 2015	\$ 12475.54
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 10818.69 *

Taxpayer's reason for refund (attach supporting documentation): **RF160221 VALUE DECREASED**

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."	
	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  sign here 	DATE: 5/19/16 J.C. 5/10/16
	Collector(s) of taxing unit(s) for refund applications over (insert amount on which governing body approval is required under Section 31.11, tax code) sign here 	Date 5/16/16 9/27/16 * CAP

4-27-16

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 CJ-FALL LLC	
	Present mailing address (number and street) 2501 W MILITARY HIGHWAY SUITE C45	
	City, town or post office, state, ZIP code MCALLEN TX 78503	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN. TO SHARYLAND E28.80 AC EXC 1.10 AC**

Step 2: Describe the property	BNG AN IRR TR E1042.48'-S92.15 LOT 10-5; AN IRR TR W865.61' LOT 10-6; AN IRR TR S232.03'-W1006.86' LOT 11-5; AN IRR TR S48.83-W863.02' LOT 11-6 54.2	
	Address or location of property: N OF MILITARY PRKWY	
	316430	
	Account number of property: W0100.00.010.0005.01	Tax receipt number: OR 31485997

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	2015	1-29 / 2016	\$ 23376.54	\$ 3224.33
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 3224.33
Taxpayer's reason for refund (attach supporting documentation): RF160312 VALUE DECREASED					
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."	
	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: 5/16/16		DATE: 5/10/16
	Authorized signature sign here	Date 5/10/16	Date 4/27/16
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	Jane Hillman		4/27/16

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

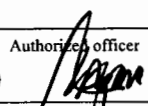
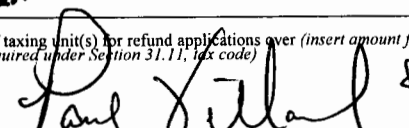
Step 1: Owner's name and address	Owner's name SOUTHWEST GRAIN COMPANY &
	Present mailing address (number and street) 28473 FM 2058 &
	City, town or post office, state, ZIP code EDINBURG TX 78541
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN.TO SHARYLAND S 8.83-19.31 S & E-CANAL LOT 48-4**

Step 2: Describe the property	Address or location of property: N TROSPER RD
	318806 &
	Account number of property: W0100.00.048.0004.11 &
	Tax receipt number: OR 31602167

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	2015	1-29 / 2016	\$ 5451.25	\$ 3533.22
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 3533.22 &
Taxpayer's reason for refund (attach supporting documentation): RF160312 VALUE DECREASED					
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."	
	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: 5/5/16 J.C. STOUT
	Authorized officer sign here 	Date 5/10/16	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 

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 DARVASA TRADING LLC PAID BY: LUIS RIVERA
	Present mailing address (number and street) P O BOX 3188
	City, town or post office, state, ZIP code MCALLEN, TX 78502
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN TO SHARYLAND E330' LOT 48-9 10.0AC GR 8.96AC NET**

Step 2: Describe the property	Address or location of property: W HWY 107	
	539917	
	Account number of property: W0100.00.048.0009.44	Tax receipt number: OR 30016817

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	2015	11-25	/ 2015	\$ 5961.98
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3033.62

Taxpayer's reason for refund (attach supporting documentation): **RF160221 AG EXCL INCREASE**

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."	
	Signature sign here	Date of application for tax refund
<p>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.</p>		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here	DATE: 5/19/16 5/16/16
	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 4/27/16

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5/19/16**

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 BANC OF AMERICA LEASING & CAPITAL LLC PAID BY: BANK OF AMERICA
	Present mailing address (number and street) P O BOX 105578
	City, town or post office, state, ZIP code ATLANTA, GA 30348
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2015; CREATED IN ERROR; LEASED VEHICLES AT SWL & CWL / NEW ACCT 2015**

Step 2: Describe the property	Address or location of property: VAR LOC @ SWL & CWL
	1013757
	Account number of property: W2300.99.000.0000.S4 OR 30810531
	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	2015	12-30	/ 2015	\$ 13566.76
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 13566.76

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED**

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."	
	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 5/10/16
	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 4/27/16

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 AVILA FELIPE M PAID BY: FA ZA FAMILY LP
	Present mailing address (number and street) 2803 S WESTGATE DR
	City, town or post office, state, ZIP code WESLACO, TX 78596
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT FT 726 27.48AC GR 24.08AC NET**

Step 2: Describe the property	Address or location of property: 2803 S WESTGATE DR
	326845
	Account number of property: W3800.00.726.0000.00 OR 31013584
	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	2015	1-18	/ 2016	\$ 17363.99
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 10011.86

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED**

AG EXCL INCREASE 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."	
	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: 5/15/16
	Authorized signature sign here		Date 5/10/16
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	Jane Gilliland		Date 4/27/16

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 EL COFRE DEL TESORO LLC PAID BY: INTERNATIONAL BNAK
	Present mailing address (number and street) 2414 SUNSET LN
	City, town or post office, state, ZIP code MISSION TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WISTERIA EXECUTIVE SUITES LOT A2**

Step 2: Describe the property	Address or location of property: 4900 N 10TH ST
	726311
	Account number of property: W6897.00.000.00A2.00
	Tax receipt number: OR 30412393

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	2015	12-22-	/ 2015	\$ 42574.27
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 7584.55

Taxpayer's reason for refund (attach supporting documentation): **RF160312 VALUE DECREASED**

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."	
	Signature sign here	Date of application for tax refund
<p>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.</p>		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized Officer sign here	<p>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5/15/16 <i>(Signature)</i></p> <p>Date 5/10/16</p>
	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	<p>Date 4/27/16</p>