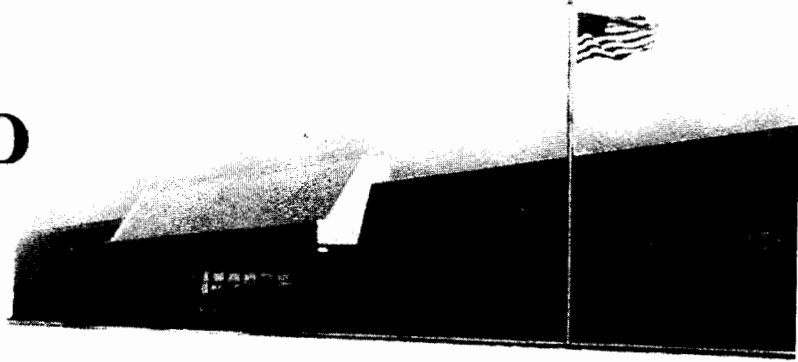


Office of Tax Assessor - Collector
COUNTY of HIDALGO
Pablo "Paul" Villarreal, Jr. R7A



Aug 17, 2016

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

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

The Hidalgo County District Court has ordered a correction to the tax roll as allowed by Property Tax Code Section 42.43. This correction decreased the tax liability of the property owner(s). Since taxes had been previously paid, our office determined that the tax roll correction resulted in a tax refund over \$2,500.00 dollars due to the taxpayer(s). The County Auditor has also agreed with our determination. As a result, I respectfully request that the Commissioner's Court approve the enclosed application(s) for a tax refund as recommended by the County Auditor.

When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

Pablo (Paul) Villarreal, Jr., PCC

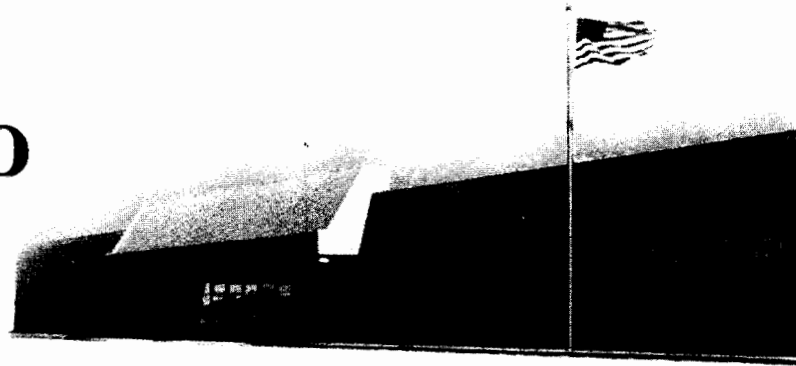
sp

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



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Edinburg, Texas 78540-0178
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ACCOUNT NUMBER	PAYER	AMOUNT
C7883.01.000.0001.00	CIELO PASO LAS TIENDAS LP	\$22,796.76
C7883.01.000.0002.00	TARGET CORPORATION	\$24,711.34
M2650.00.006.0007.00	SPECS LIQUOR STORES	\$6,875.33
M2650.00.006.0007.00	SPECS LIQUOR STORES	\$6,844.34
P7413.01.000.0002.00	PUENTE PARTNERS LP	\$41,921.08
P7413.01.000.0003.00	PUENTE PARTNERS LP	\$29,040.99
S2979.00.00A.0003.00	TARGET CORPORATION	\$98,274.71



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

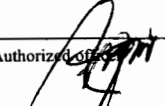
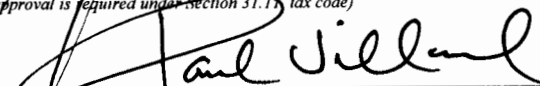
Step 1: Owner's name and address	Owner's name CIELO PASO LAS TIENDAS LP *
	Present mailing address (number and street) 823 CONGRESS AVE STE 600 *
	City, town or post office, state, ZIP code AUSTIN, TX 78501
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt):

Step 2: Describe the property	CONCORD PROPERTY CORP #1 LOT 1	
	Address or location of property: 700 E EXPWY 83	
	508863 *	
	Account number of property: C7883.01.000.0001.00 *	Tax receipt number: OR 30239752

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	12/11 / 2015	\$ 160,747.51	\$ 22,796.76
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 22,796.76
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER C-4276-15-D					
Per Order Pay by September 26, 2014					
SP					

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: 8/15/14 <i>J.C. 8/15/14</i>
	Authorized sign here 	Date 8/15/14	
	Collector(s) sign here 	Date 8/11/14 *	<i>AK</i>

8-1-14

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 DAYTON HUDSON CORP PAID BY: TARGET CORPORATION
	Present mailing address (number and street) 1000 NICOLLET MALL
	City, town or post office, state, ZIP code MINNEAPOLIS, MN 55403-2542

Phone (area code and number)

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

Step 2: Describe the property	Address or location of property: 508864
	Account number of property: C7883.01.000.0002.00
	Tax receipt number: OR 31284363

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	1/27	/ 16	\$ 227,580.09
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 24,711.34

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4323-15-A**

Per order Pay by October 5, 2016

MM

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 8/15/16 <i>J.C. 8/15/16</i>
	Authorized sign here	Date 8/15/16
	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 Villan	Date 8/11/16 CAP

8/11/16

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 STORE MASTER FUNDING LLC (PAID BY: SPECS LIQUOR STORES)
	Present mailing address (number and street) 11550 I STREET NO 200
	City, town or post office, state, ZIP code OMAHA, NE 68137
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT SOUTH 220-NORTH**


Step 2: Describe the property	817.37-W440 LOT 7 BLK 6 2.07ACS NET
	Address or location of property: 231124
	Account number of property: M2650.00.006.0007.00 OR Tax receipt number: 30605235

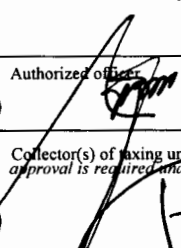
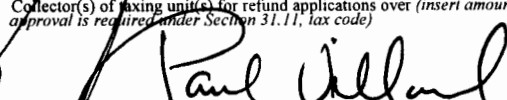
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2015	12/30	/ 2015	\$ 29,169.08
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 6,875.33

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-7068-14-B**

PER ORDER PAY BY SEPTEMBER 22, 2016

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: 8/15/16 <i>D.C. 8/15/16</i>
	Authorized officer sign here 	Date	8/15/16
	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	8/01/16 <i>CR</i>

8/1/16

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 STORE MASTER FUNDING LLC (PAID BY: SPECS LIQUOR STORES)
	Present mailing address (number and street) 11550 I STREET NO 200
	City, town or post office, state, ZIP code OMAHA, NE 68137
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT SOUTH 220-NORTH**


Step 2: Describe the property	817.37-W440 LOT 7 BLK 6 2.07ACS NET	
	Address or location of property:	
	231124	
	Account number of property: M2650.00.006.0007.00	Tax receipt number: OR 27177423

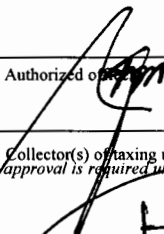
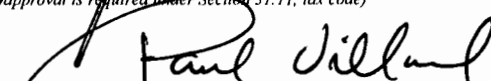
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2014	12/09	/ 2014	\$ 29,037.59
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 6,844.34

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-7068-14-B**

PER ORDER PAY BY SEPTEMBER 22, 2016

NR

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	Authorized officer sign here 	Date 8/15/16
	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 8/10/16

8/11/16

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 PUENTE PARTNERS LP
	Present mailing address (number and street) 6500 MONTANA AVE
	City, town or post office, state, ZIP code EL PASO, TX 79925

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt):

Step 2: Describe the property	PLAZA DEL PUENTE PH 1 LOT 2
	Address or location of property: 702 INTERNATIONAL BLVD
	733045
	Account number of property: P7413.01.000.0002.00 OR Tax receipt number: 30292730

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	12/15	\$ 145,822.36	\$ 41,921.08
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 41,921.08

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-4276-15-D**

Per Order Pay by September 26, 2016

SP

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: 8/16/16
	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	8/16/16

8/1/16

Paul Villan

8/1/16

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 PUENTE PARTNERS LP *
	Present mailing address (number and street) 6500 MONTANA AVE
	City, town or post office, state, ZIP code EL PASO, TX 79925

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): PLAZA DEL PUENTE PH 1 LOT 3
	Address or location of property: 701 INTERNATIONAL BLVD
	733046 *
	Account number of property: P7413.01.000.0003.00 * Tax receipt number: 30292730 *

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	12/15 / 2015	\$ 100,183.46 *	\$ 29,040.99
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$ <u>9</u>
	5.		/	\$	\$ 29,040.99
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER C-4276-15-D *					
Per Order Pay by September 26, 2016					
SP					

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 <u>8/15/2016</u> <i>A.C. 8/16/16</i>
	Authorized officer sign here	Date <u>8/16/16</u>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code) sign here	Date <u>8/1/16</u>

8-1-16

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 TARGET CORPORATION
	Present mailing address (number and street) 1000 NICOLLET MALL
	City, town or post office, state, ZIP code MINNEAPOLIS, MN 55403-2542
	Phone (area code and number)

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

Step 2: Describe the property	BLK A
	Address or location of property: 707590 A
	Account number of property: 52979.00.00A.0003.00
	Tax receipt number: OR 31224070

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	/ 16	\$ 328,888.72
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$ TOTAL	\$ 98,274.71

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4323-15-A**
Per Order Pay by October 5, 2016
 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: 8/16/16
	Authorized officer sign here	Date 8/16/16
	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 8/11/16

8/11/16