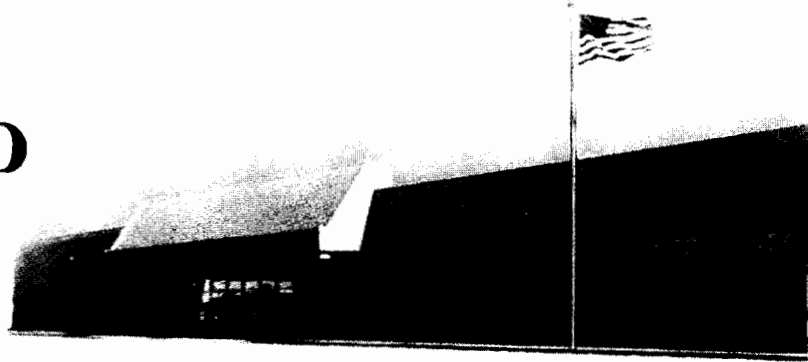


*Office of Tax Assessor - Collector*  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. R7A*



August 2, 2017

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

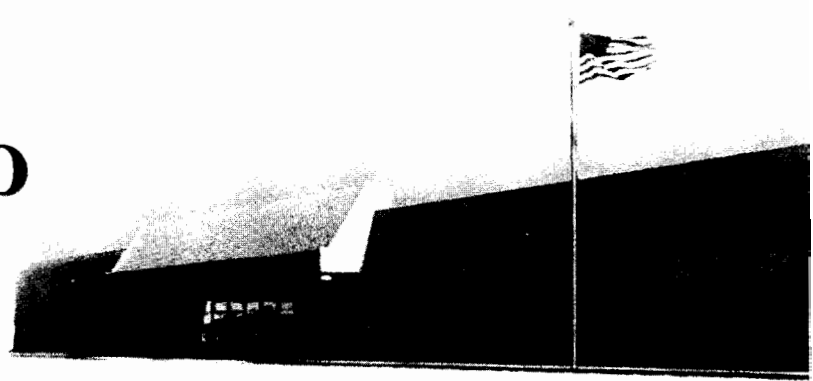
nr

Enclosure



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

*Pablo "Paul" Villarreal, Jr. RTA*



P.O. Box 178  
Edinburg, Texas 78540-0178  
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ACCOUNT NUMBER	PAYER	AMOUNT
A1800.99.033.0009.00	DolgenCorp,LLC.	\$2,970.79
A1800.99.052.0011.01	DolgenCorp,LLC.	\$4,389.80
A2667.99.000.0004.00	O'reilly Auto Parts	\$2,772.54
A4930.99.000.0014.00	DolgenCorp,LLC.	\$4,649.09
C2140.00.000.0000.00	Casa Del Sol Limited Partnership	\$18,184.57
C4600.99.014.0009.02	O'reilly Auto Parts	\$5,464.31
D6106.99.000.0001.00	DolgenCorp,LLC.	\$4,065.82
D6107.99.000.0001.00	DolgenCorp,LLC.	\$3,048.95
D6118.99.000.0001.00	DolgenCorp,LLC.	\$4,938.83
H1935.99.000.0004.00	DolgenCorp,LLC.	\$3,410.90
M0170.99.000.0008.00	DolgenCorp,LLC.	\$2,903.32
M0613.99.000.00C1.00	O'reilly Auto Parts	\$2,701.20
M3550.99.000.0000.L1	DolgenCorp,LLC.	\$4,404.99
M5233.99.000.001F.00	DolgenCorp,LLC.	\$3,807.64
P6322.99.000.0001.00	DolgenCorp,LLC.	\$4,566.29
W2236.99.001.0001.00	DolgenCorp,LLC.	\$5,305.94



# 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 <b>DOLLAR GENERAL #10115 (PD BY: DOLGENCORP, LLC.)</b>		
<b>Owner's name and address</b>	Present mailing address (number and street) <b>100 MISSION RDG</b>		
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>	Phone (area code and number)	

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2:</b>	Describe the property		
	Address or location of property: <b>807 E RIDGE</b>		
	<b>777617</b>		
	Account number of property: <b>A1800.99.033.0009.00</b>	OR	Tax receipt number: <b>33599722</b>

<b>Step 3:</b>	<b>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	2016	12/29 / 2016	\$ 10,760.37	\$ 2,970.79
		2.		/	\$	\$
		3.		/	\$	\$
		4.		/	\$	\$
		5.		/	\$	\$ 2,970.79
	Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER# C-4175-16A</b>					
	<b>DUE DATE: SEPTEMBER 4, 2017</b>					
	<b>SP</b>					

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

<b>Step 5:</b>	<b>Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>8-1-17</b> <b>8-1-17</b>
	Authorized officer sign here	Date <b>8-1-17</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.1, tax code) sign here	Date <b>7/18/17</b>

7118

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DRI-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>DOLLAR GENERAL #11415 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSIO RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TX 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>5125 S. ALAMO RD</b>	
	<b>1020858</b>	
	Account number of property: <b>A1800.99.052.0011.01</b>	Tax receipt number: <b>33305840</b>
	<b>OR</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
	I. ALL ENTITIES	2016	12/13	/ 2016	\$ 9,840.91	\$ 4,389.80
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5.			/	\$	\$ 4,389.80

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>8-1-17</b> <i>[Signature]</i>
	Authorized officer sign here	Date <b>8-1-17</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) sign here	<i>[Signature]</i>	Date <b>7/18/17</b>

# 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>O'REILLY AUTO PARTS #1651 (PD BY: O'REILLY AUTO PARTS)</b>
	Present mailing address (number and street) <b>233 S PATTERSON AVE</b>
	City, town or post office, state, ZIP code <b>SPRINGFIELD, MO 65802-2210</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**


<b>Step 2: Describe the property</b>	Address or location of property: <b>707 W MILITARY HWY 281</b>	
	<b>771713</b>	
	Account number of property: <b>A2667.99.000.0004.00</b>	Tax receipt number: <b>OR 33329202</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	2016	12/14 / 2016	\$ 11,090.20	\$ 2,772.54
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 2,772.54 <b>X</b>


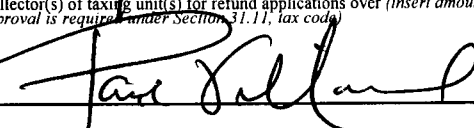
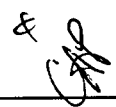
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-4280-16-A X**

**DUE DATE: SEPTEMBER 11, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>AG 011117</b> <b>DC 8-1-17</b>
	Authorized officer sign here 	Date <b>8-1-17</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) sign here 	Date <b>7/18/17</b> <b>X</b>	

# 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>DOLLAR GENERAL #10474 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>303 N TOM GILL</b>	
	<b>770140</b>	
	Account number of property: <b>A4930.99.000.0014.00</b>	Tax receipt number: <b>OR 33599722</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	2016	12/29 / 2016	\$ 9,924.38	\$4,649.09
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$4,649.09
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER# C-4175-16A</b>					
<b>DUE DATE: SEPTEMBER 4, 2017</b>					
<b>SP</b>					

<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 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.		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	
	Authorized officer sign here		DATE: <b>8-17-17</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) sign here		Date <b>7/18/17</b>	

# 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>CASA DEL SOL LIMITED PARTNERSHIP (PD BY: CASA DEL SOL LIMITED PARTNERSHIP)</b>
	Present mailing address (number and street) <b>9800 SHELARD PKWY STE 104 X</b>
	City, town or post office, state, ZIP code <b>MINNEAPOLIS, MN 55441-6451</b>

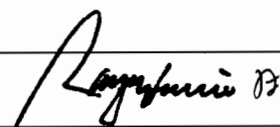
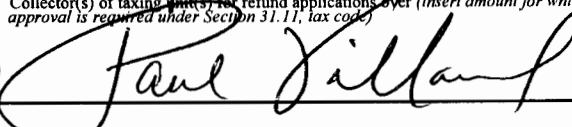
Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CASA DEL SOL PARK**

<b>Step 2:</b> Describe the property	Address or location of property: <b>400 N VALVERDE RD</b>	
	<b>133235 X</b>	
	Account number of property: <b>C2140.00.000.0000.00 X</b>	Tax receipt number: <b>OR 33975387</b>

<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	2016	01/12 / 2017	\$ 103,065.52	\$ 18,184.57
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 18,184.57 X
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER C-4271-16-H</b>					
<b>DUE DATE: August 29, 2017</b>					
<b>SP</b>					

<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.		

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	
	Authorized officer <b>sign here</b> 		DATE: <b>8-1-17</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>7/12/17</b>	

# 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>O'REILLY AUTO PARTS #616 (PD BY: O'REILLY AUTO PARTS)</b>
	Present mailing address (number and street) <b>233 S PATTERSON AVE</b>
	City, town or post office, state, ZIP code <b>SPRINGFIELD, MO 65802-2210</b>

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**


<b>Step 2: Describe the property</b>	Address or location of property: <b>1405 E UNIVERSITY</b>
	Account number of property: <b>617452 X</b>
	Account number of property: <b>C4600.99.014.0009.02 d</b>
	Tax receipt number: <b>OR 33329202</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	2016	12/14	/ 2016	\$ 21,857.24	\$ 5,464.31
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5.			/	\$	\$ 5,464.31 d

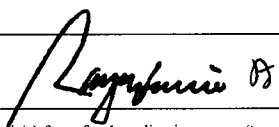
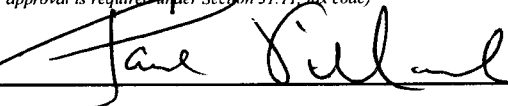

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-4280-16-A**

**DUE DATE: SEPTEMBER 11, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: JUN 8 11 17 d. C 8-1-17</b>
	Authorized officer sign here 	Date 8-1-17
	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 7/18/17 

# 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>DOLLAR GENERAL #12255 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>1801 E MONTE CRISTO RD</b>
	<b>792805</b>
	Account number of property: <b>D6106.99.000.0001.00</b> OR Tax receipt number: <b>33451639</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	2016	12/21 / 2016	\$ 11,327.85	\$ 4,065.82
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 4,065.82

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here	DATE: <b>8-1-17</b> <b>A.C. 8-1-17</b>
	Collector(s) or taxing unit(s) for refund application over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date <b>7/18/17</b>

7/18

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DRI-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>DOLLAR GENERAL #10604 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>7900 N FM 493</b>
	<b>775328</b>
	Account number of property: <b>D6107.99.000.0001.00</b>
	Tax receipt number: <b>33599722</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	2016	12/29	/ 2016	\$ 7,986.76
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$	\$ 3,048.95

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>8-1-17</b> <i>(Signature)</i>	
	Authorized officer sign here	Date <b>8-1-17</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)

sign here **Paul Villard** \* **7/18/17** \* *(Signature)*

7/18

# 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>DOLLAR GENERAL #8295 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>701 W MILITARY HWY 281</b>
	<b>795580</b>
	Account number of property: <b>D6118.99.000.0001.00</b> OR Tax receipt number: <b>33599722</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	2016	12/29 / 2016	\$ 12,904.35	\$ 4,938.83
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 4,938.83
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER# C-4175-16A</b>					
<b>DUE DATE: SEPTEMBER 4, 2017</b>					
<b>SP</b>					

<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 sign here	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>		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>8-1-17</b> <b>A. C. 8-1-17</b>
	Authorized officer sign here	Date <b>8-1-17</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) sign here	<b>Paul Zellman</b>	

# 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>DOLLAR GENERAL #10579 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>1018 N ALAMO RD</b>
	<b>770679</b>
	Account number of property: <b>H1935.99.000.0004.00</b>
	Tax receipt number: <b>33599722</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	2016	12/29	/ 2016	\$ 9038.14
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$	\$ 3,410.90

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here	DATE: <b>8-1-17</b> <b>J.C. 8-1-17</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) sign here	Date <b>7/18/17</b>

7118

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DRI-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>DOLLAR GENERAL #06531 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSIO RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>201 E. FERGUSON (495)</b>
	<b>1020861</b>
	Account number of property: <b>M0170.99.000.0008.00</b>
	Tax receipt number: <b>OR 33305840</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	2016	12/13	/ 2016	\$ 10,102.18	\$ 2,903.32
2.			/	\$	\$	
3.			/	\$	\$	
4.			/	\$	\$	
5.			/	\$	\$ 2,903.32	

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here	Date <b>8-1-17</b>
	Collector(s) of taxing unit(s) for refund application over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date <b>7/18/17</b>

7/18

# 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>O'REILLY AUTO PARTS #2497 (PD BY: O'REILLY AUTO PARTS)</b>
	Present mailing address (number and street) <b>233 S PATTERSON AVE</b>
	City, town or post office, state, ZIP code <b>SPRINGFIELD, MO 65802-2210</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>8915 E HWY 107</b>	
	<b>818306</b>	
	Account number of property: <b>M0613.99.000.00C1.00</b>	Tax receipt number: <b>OR 33329202</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	2016	12/14 / 2016	\$ 10,804.79	\$ 2,701.20
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 2,701.20

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-4280-16-A**

**DUE DATE: SEPTEMBER 11, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here	Date	<b>DATE: AUG 7/13/17</b> <b>A.C. 8-1-17</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.14, tax code) sign here	Date	<b>7/18/17</b>

7118

# 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>DOLLAR GENERAL #3736 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSIO RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>100 N. OHIO AVE</b>
	<b>1020862</b>
	Account number of property: <b>M3550.99.000.0000.L1</b> OR <b>33305840</b>
	Tax receipt number:

<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	2016	12/13	/ 2016	\$ 10,380.34	\$ 4,404.99
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5.			/	\$	\$ 4,404.99
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER# C-4175-16A</b>						
<b>DUE DATE: SEPTEMBER 4, 2017</b>						
<b>SP</b>						

<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 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.		

<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>8/11/17 VG.</b> <b>2. C 8-1-17</b>	
	Authorized officer sign here	Date		
	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		

# 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>DOLLAR GENERAL #12194 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>



Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>307 W GRIFFIN PKWY</b>	
	<b>792730 *</b>	
	Account number of property: <b>M5233.99.000.001F.00 *</b>	Tax receipt number: <b>OR 33451639</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	2016	12/21 / 2016	\$ 10,727.78	\$ 3,807.64
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 3,807.64 *
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER# C-4175-16A *</b>					
<b>DUE DATE: SEPTEMBER 4, 2017</b>					
<b>SP</b>					

<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 sign here 	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>	

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <u>8-1-17</u> <i>D.C. 8-1-17</i>
	Authorized officer sign here 	Date <u>8-1-17</u>	
	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 	<i>Paul Villard *</i>	

7/18

# 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>DOLLAR GENERAL #10627 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TX 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2: Describe the property</b>	Address or location of property: <b>2615 S CAGE BLVD</b>
	<b>775073</b>
	Account number of property: <b>P6322.99.000.0001.00</b> OR Tax receipt number: <b>33599722</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	2016	12/29 / 2016	\$ 10,587.92	\$ 4,566.29
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 4,566.29

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 8-1-17 8-1-17</b>
	Authorized officer sign here	Date 8-1-17
	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 7/18/17

7/18

# 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>DOLLAR GENERAL #10611 (PD BY: DOLGENCORP, LLC.)</b>
	Present mailing address (number and street) <b>100 MISSION RDG</b>
	City, town or post office, state, ZIP code <b>GOODLETTSVILLE, TN 37072-2171</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

<b>Step 2:</b> Describe the property	Address or location of property: <b>518 S BRIDGE</b>
	<b>773210</b>
	Account number of property: <b>W2236.99.001.0001.00</b> OR <b>33599722</b>
	Tax receipt number:

<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	2016	12/29 / 2016	\$ 11,693.63	\$ 5,305.94
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 5,305.94

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER# C-4175-16A**

**DUE DATE: SEPTEMBER 4, 2017**

**SP**

<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 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.**

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here	DATE: <b>8-1-17</b> <b>8-1-17</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) sign here	Date <b>7/18/17</b>

7/18