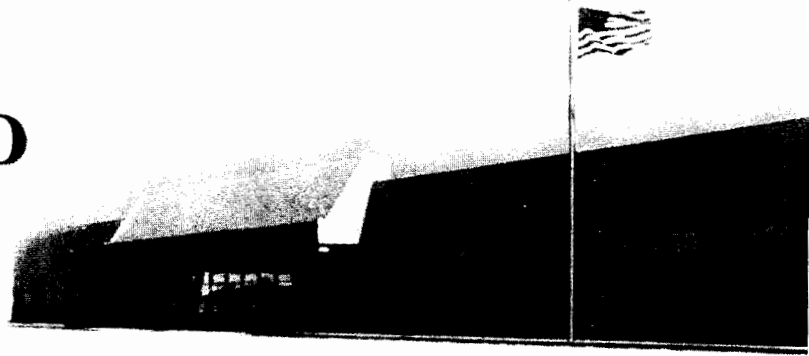


Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. RTA*



January 22, 2018

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:

Our office has determined that the attached application(s) for a tax refund over \$2,500.00 dollars is(are) erroneous and/or excessive. 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 required by Property Tax Code Section 31.11, Refunds of Overpayments or Erroneous Payments.

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

Respectfully,

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

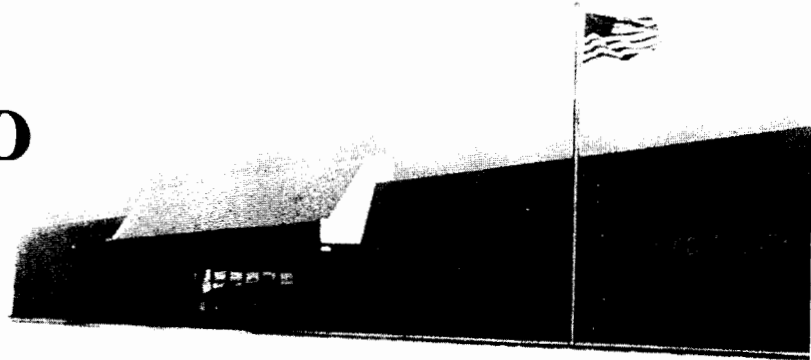
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Enclosure



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

*Pablo "Paul" Villarreal, Jr. RTA*



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ACCOUNT NUMBER	PAYER	AMOUNT
M1120.99.001.004C.05	BIOMET	\$3,213.69





**PABLO (PAUL) VILLARREAL JR., PCC**  
**Hidalgo County Tax Assessor - Collector**  
 PO BOX 178 EDINBURG, TX 78540-0178

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

DATE: 01/12/18  
 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

1-16-18 *[Handwritten initials]*

Print Date: 11/30/2017

**BIOMET** ✕  
**PO BOX 587** *M/S 5163*  
**WARSAW, IN 46581-058**

<b>Account Number</b> M1120-99-001-004C-05 ✕ HCAD No. 1075546 ✕
<b>Legal Description of the Property</b> INVENTORY & EQUIPMENT AT 1401 E HACKBERRY AVE STE D / NEW ACCT 2017  1401 E HACKBERRY AVE STE-D 78501  OWNER: BIOMET ORTHOPEDICS LLC ✕
✕ <b>2017 OVERAGE AMOUNT</b> \$3,213.69 ✕

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 43: PHARR,SAN JUAN,ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: \_\_\_\_\_

**APPLICATION FOR PROPERTY TAX REFUND**

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

<b>Step 1: Identify the Payer requesting the refund if different than shown above</b>	Name		Relationship to Property Owner	
	Mailing Address		Daytime Telephone Number	
	City, State, Zip Code		Email Address:	
<b>Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.</b>	I paid the taxes for year <u>2017</u> and am the party entitled to the refund.			
<b>Step 3: Mark the reason for the refund and provide a brief explanation</b>	<input checked="" type="checkbox"/>	Overpaid the account	<u>Paid Mar 2018 Amount due</u>	
	<input type="checkbox"/>	Duplicate payment		
	<input type="checkbox"/>	Paid in error (explain)		
<b>Step 4: Provide payment information</b> Attach copies of cancelled checks only if refund is over \$500.00 <u>Got</u>	Total amount paid by this taxpayer		\$38,921.33	
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed		\$3,213.69	
<b>Step 5: How should the refund be processed?</b>	<input checked="" type="checkbox"/>	Mail to Property Owner		
	<input type="checkbox"/>	Mail to Payer at address in Step 1		
	<input type="checkbox"/>	Transfer this amount to account	For tax year	
	<input type="checkbox"/>	Escrow for next year's taxes		
<b>Step 6: Sign the application form. Unsigned applications will not be processed.</b> Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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 ✕ <u>Debra Law</u> 574-372-4304		Date of application <u>12/13/17</u>	
	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			
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	<u>Maria A. Duran</u> 1-17-18	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u>	Date: <u>12/21/17</u> <i>CRB</i>

This application must be completed, signed, and submitted with supporting documentation to be valid.