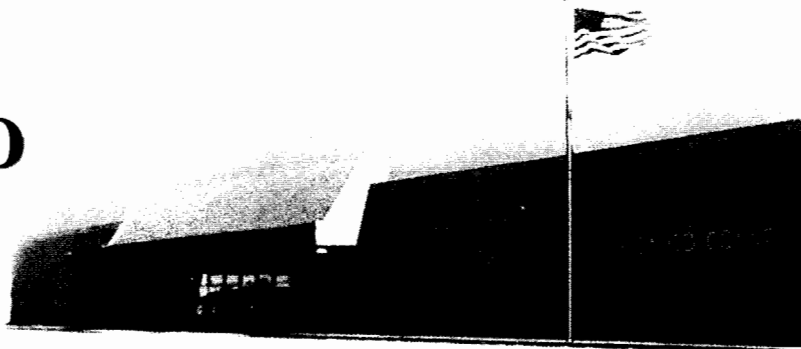


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



April 19, 2018

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

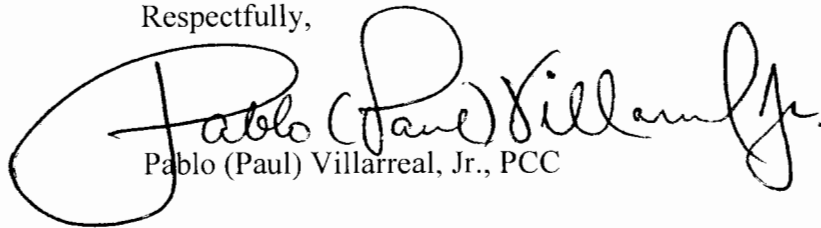
Re: See attached list

Gentlemen:

The Hidalgo County 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.

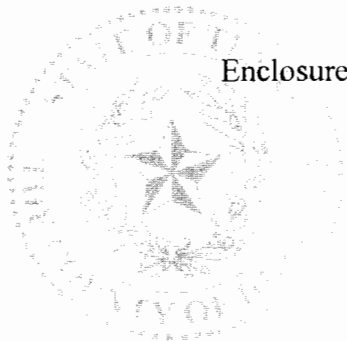
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,


Pablo (Paul) Villarreal, Jr., PCC

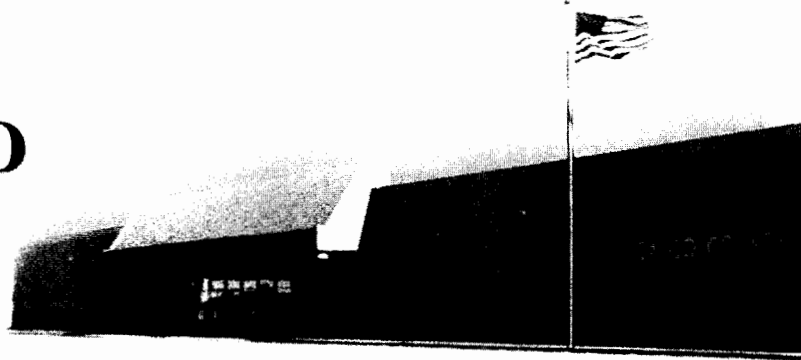
jcc

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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ACCOUNT NUMBER	PAYER	AMOUNT
M1570.00.000.0001.00	MG KAMEL PROPERTIES LTD	\$9,081.10
M1950.99.029.0015.06	MOHAN TEWANI	\$8,073.32
S2005.99.000.002A.03	RKL FAMILY LIMITED PARTNERSHIP	\$4,102.38
T6399.99.000.0001.02	RKL FAMILY LIMITED PARTNERSHIP	\$3,145.91
W6006.00.000.0001.00	LONE STAR NATIONAL BANK	\$11,934.03



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 MG KAMEL PROPERTIES LTD ✕
	Present mailing address (number and street) 5608 N 5TH ✕
	City, town or post office, state, ZIP code MCALLEN, TX 78504-2730

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MARVAL PLAZA (AMND) LOT 1**

Step 2: Describe the property	Address or location of property:
	1016211 ✕
	Account number of property: Tax receipt number:
	M1570.00.000.0001.00 ✕ OR 36414978

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	2017	12/20	/ 2017	\$ 52898.77
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 9081.10 ✕

Taxpayer's reason for refund (attach supporting documentation): **SUPP#6**

CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE.SEC 41.411

JC

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: 4/19/18 <i>MC 4-17-18</i>
	Authorized officer sign here ➡ <i>Maria A. Duran</i> JS	Date 4-18-18	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31111, tax code) sign here ➡ <i>Paul Villan</i> ✕	Date 3-22-18 <i>CMR</i>	

3/22

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 <input checked="" type="checkbox"/> GOLD PALACE (PAID BY: MOHAN TEWANI)
	Present mailing address (number and street) 317 S MAIN ST <input checked="" type="checkbox"/>
	City, town or post office, state, ZIP code MCALLEN, TX 78501
	Phone (area code and number)

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

Step 2: Describe the property	& VEHICLES AT 317 SOUTH MAIN ST / NEW ACCT 2003	
	Address or location of property:	
	646537 <input checked="" type="checkbox"/>	
	Account number of property: M1950.99.029.0015.06 <input checked="" type="checkbox"/>	Tax receipt number: OR 36338692 / 37433865

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	2017	12/16 / 2017	\$ 7,571.79	\$ 8,073.32
	2.		01/30 / 2018	\$ 8,107.11	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 8,073.32
Taxpayer's reason for refund (attach supporting documentation): SUPP#6					
CORRECTION OF NON-CLERICAL ERROR[SEC 25.25(D)] 10% LATE CORRECTION					
PENALTY (APPLY \$760.56 TO ACCT AND REFUND DIFF \$7,312.76)					

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 <input checked="" type="checkbox"/>	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: RE 4/11/18 RE 4-17-18
	Authorized officer sign here <input checked="" type="checkbox"/>	Maria A. Duran	Date 4-18-18
	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 <input checked="" type="checkbox"/>	Paul Hill

3/22

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 PONCHO'S RESTAURANT INC (PAID BY: RKL FAMILY LIMITED PARTNERSHIP)
	Present mailing address (number and street) P.O. BOX 764
	City, town or post office, state, ZIP code PHARR, TX 78577
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): INVENTORY SUPPLIES FURNITURE FIXTURES &
	EQUIPMENT AT 601 W EXPWY 83 / NEW ACCT 2010
	Address or location of property: 20407132
	Account number of property: S2005.99.000.002A.03 OR Tax receipt number: 37433705

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	2017	01/30 / 2018	\$ 6,874.91	\$ 4,102.38
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5.	TOTAL			/	\$
Taxpayer's reason for refund (attach supporting documentation): SUPP#6						
SUBMITTED/ENTERED WRONG 10%RENDITION PENALTY WAIVED FOR						
2017 TAX YEAR 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: 4/12/18 DC 4-16-18
	Authorized officer sign here	Maria A. Duran	Date 4-18-18
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 Hill	Date 3-22-18 CAP	

3/22

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 ✗ PONCHOS RESTAURANT #3 (PAID BY: RKL FAMILY LIMITED PARTNERSHIP)
	Present mailing address (number and street) 601 W EXPRESSWAY 83 ✗
	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): **INVENTORY SUPPLIES FURNITURE FIXTURES &**

Step 2: Describe the property	EQUIPMENT AT 4300 N 2ND / NEW ACCT 2013	
	Address or location of property:	
	37433671 844689 ✗	Tax receipt number:
	T6399.99.000.0001.02 ✗	OR 37433671

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	2017	01/30 / 2018	\$ 8,886.56	\$ 3,145.91
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,145.91 ✗

Taxpayer's reason for refund (attach supporting documentation): **SUPP#6**

SUBMITTED/ENTERED WRONG 10%RENDITION PENALTY WAIVED FOR 2017 TAX YEAR 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: 20 4/11/18 <i>Re 4-17-18 dit/18</i>
	Authorized officer sign here	<i>Maria A. Duran</i>	Date 4-18-18
	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 Jullent ✗</i>	Date 3-22-18

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

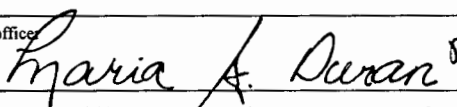
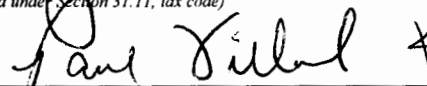
Step 1: Owner's name and address	Owner's name LOPEZ JOSE L & MARIA T (PAID BY: LONE STAR NATIONAL BANK)
	Present mailing address (number and street) 4107 SAN EFRAIN
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WILLOW GROVE LOT 1**

Step 2: Describe the property	Address or location of property:
	842010
	Account number of property: Tax receipt number:
	W6006.00.000.0001.00 OR 36139570

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	2017	12/01 / 2017	\$ 79,728.44	\$ 11,934.03
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 11,934.03
Taxpayer's reason for refund (attach supporting documentation): SUPP#6					
CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE.SEC 41.411					
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: <u>PO 4/5/18</u> <u>RL 4-17-18</u> <u>4/18/18</u>
	Authorized office sign here 	Date 4-18-18	
	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 3-22-18 CRP	

3/22