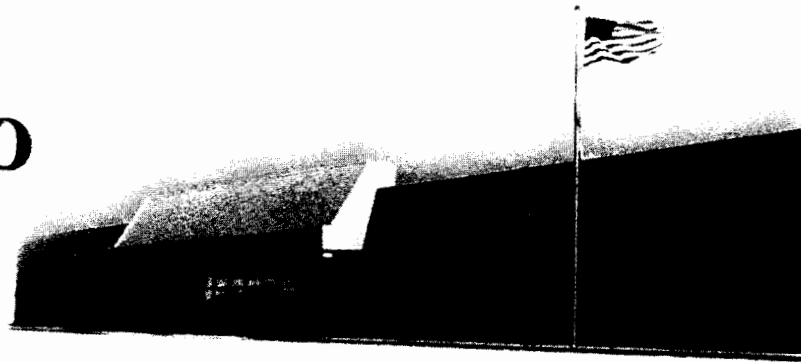


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



May 8, 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

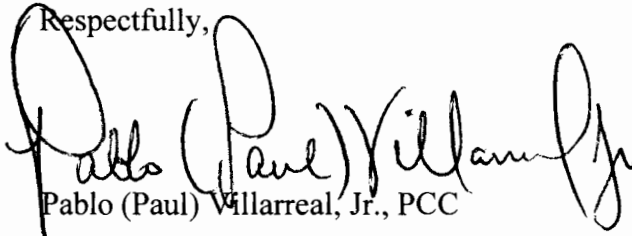
Re: See attached list

Gentlemen:

The Hidalgo County 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.

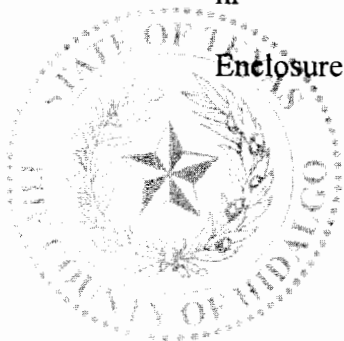
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

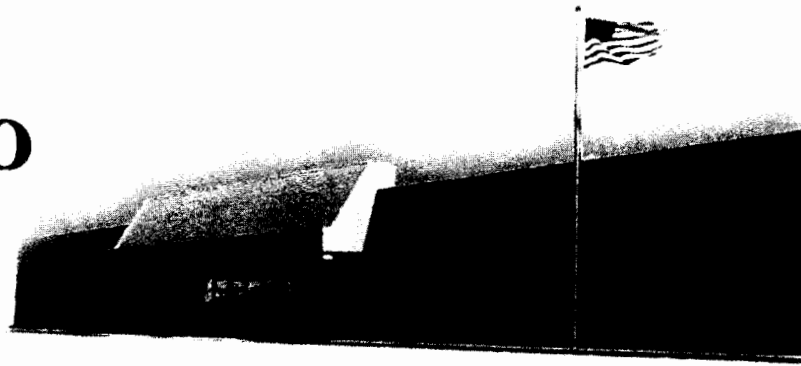

Pablo (Paul) Villarreal, Jr., PCC

nr

Enclosure



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



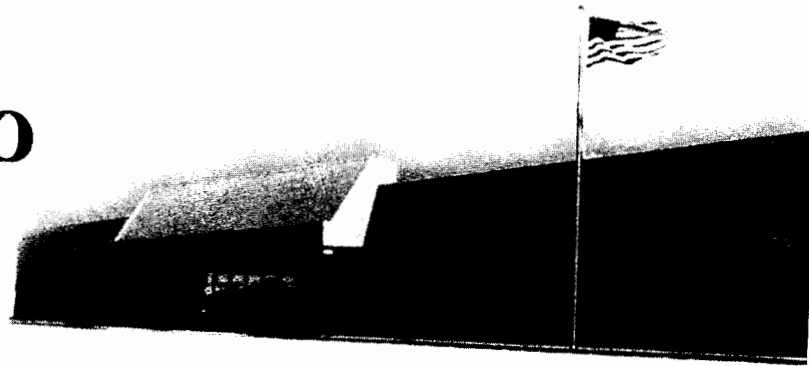
P.O. Box 178
 Edinburg, Texas 78540-0178
 Ph. (956) 318-2157
 Fax (956) 318-2733
www.hidalgocountytax.org

ACCOUNT NUMBER	PAYER	AMOUNT
A6590.00.000.0001.00	Walgreens Family of Companies	\$6,306.47
B2950.00.000.0002.05	Walgreens Family of Companies	\$8,288.28
C2255.00.000.0001.00	Walgreens Family of Companies	\$12,517.62
F0300.00.002.0000.01	Walgreens Family of Companies	\$3,128.52
L6556.00.000.0001.00	Lowe's	\$9,034.10
P6300.00.000.0016.10	Lowe's	\$13,243.30
P7475.00.000.001B.00	Lowe's	\$10,600.27
R0180.00.000.0001.00	Capital One Hotel Group	\$61,488.90
R1334.00.000.0001.00	Walgreens Family of Companies	\$9,262.09
S1075.00.000.0001.00	Walgreens Family of Companies	\$9,806.16
S1184.00.000.0001.00	Walgreens Family of Companies	\$6,341.62
S2640.00.000.001A.00	Walgreens Family of Companies	\$3,200.47
S2695.00.000.0001.00	Walgreens Family of Companies	\$3,903.67
S2696.00.000.0001.00	Walgreens Family of Companies	\$8,275.52
T6836.00.000.0001.00	Commercial Builders Group LLC	\$28,620.55
W0280.00.000.0001.00	Walgreens Family of Companies	\$4,111.02
W0281.00.000.0001.00	Walgreens Family of Companies	\$4,441.40



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



ACCOUNT NUMBER	PAYER	AMOUNT
W3800.00.034.0000.00	Lowe's	\$19,582.14
W3800.00.034.0000.01	Lowe's	\$7,237.28
W3800.00.633.0000.00	Walgreens Family of Companies	\$6,196.51

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



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 SHAMROCK ADVENTURE V LTD #3623^a (PAID BY: WALGREENS FAMILY OF COMPANIES)^a
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): AVALON SQUARE LOT 1
	Address or location of property: 544176[*]
	Account number of property: A6590.00.000.0001.00^a
	OR 37494488


AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 5-4-18
J.C. 5/7/18

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	01/31 / 2018	\$ 39,335.27	\$ 6,306.47
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 6,306.47 [*]

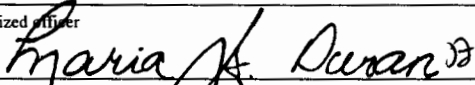
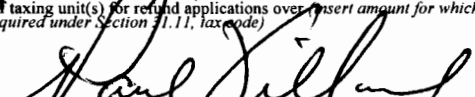
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A[†]**

PER ORDER PAY BY: MAY 28, 2018

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	
	Authorized officer sign here 	Date 5-7-18
	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 4/12/18 CAP 45.15

4/12

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 WALGREEN CO (PAID BY: WALGREENS FAMILY OF COMPANIES) a
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002

Legal description (or attach copy of the tax bill or tax receipt): **BIG ORANGE ALL LOTS 2 THRU 4 1.88 AC**

Step 2: Describe the property	R/S LOT 254 JHS 1.35 AC NET
	Address or location of property: 675109 a
	Account number of property: B2950.00.000.0002.05 a
	OR 37365730

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE

DATE: **5-4-18**
J.C. 5/7/18

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	2017	01/29	/ 2018	\$ 47,082.28
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 8,288.28 a

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A a**

PER ORDER PAY BY: MAY 28, 2018

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	
	Authorized officer sign here	Date 5-7-18
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 81.11, tax code) sign here	Date 4/12/18

4/12
4-6-18

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 SHAMROCK ADVENTURE LXXXIII LTD (PAID BY: WALGREENS FAMILY OF COMPANIES) d
	Present mailing address (number and street) P.O. BOX 901
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-0901

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **4-30-18**
J.C. Smith

Address or location of property: 816175 d	Tax receipt number:
Account number of property: C2255.00.000.0001.00 d	OR 37494442

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	01/31	/ 2018	\$ 60,482.42
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 12,517.62 A


Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A**

PER ORDER PAY BY: MAY 28, 2018

NR

**Step 4:
sign the form**

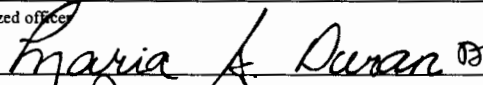
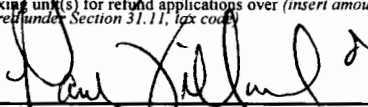
"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

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 Approved Disapproved

Authorized officer sign here 	Date 5-7-18
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 4/12/18

4/12 **4-6-18**

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 JACKSON-HOUSTON EAST LTD (PAID BY: WALGREENS FAMILY OF COMPANIES)†
	Present mailing address (number and street) 900 E LAKEVIEW DR
	City, town or post office, state, ZIP code MCALLEN, TX 78501-5723
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): FAIRFIELD PLACE BLK 2 & 3 AN IRR TR
	N190.37-W217.19 A/K/A LOT A UNIT 2 0.91 AC NET
	Address or location of property: 729958
	Account number of property: F0300.00.002.0000.01
	OR 37494520

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: *4-18*
J.C. [Signature]

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	01/31 / 2018	\$ 33,060.87	\$ 3,128.52
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,128.52 <i>d</i>

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A^d**
PER ORDER PAY BY: MAY 28, 2018
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 <i>[Signature]</i>	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 <i>Maria A. Duran</i>	Date 5-7-18
	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 [Signature]</i>	Date 4/12/18

4/12

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 LOWE'S HOME CENTERS INC (PAID BY: LOWE'S)
	Present mailing address (number and street) 1000 LOWES BLVD
	City, town or post office, state, ZIP code MOORESVILLE, NC 28117

Phone (area code and number)
(956) 318-2157

Legal description (or attach copy of the tax bill or tax receipt): **LOWE'S COMMERCIAL LOT 1 EXC**

Step 2: Describe the property	E150-W227.78-N339.73 & EXC E314.27-W542.03-N330
	Address or location of property: 713443^d
	Account number of property: L6556.00.000.0001.00 a
	OR 37153601

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE


DATE: **4-25-18**
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	2017	01/23	/ 2018	\$ 209,489.30
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 9,034.10 ^d

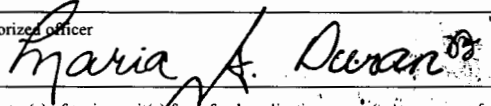
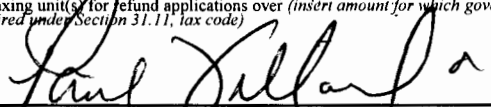
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3567-17-J ^d**

PER ORDER PAY BY: JUNE 14, 2018

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	
	Authorized officer sign here 	Date 5-7-18
	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 4/25/18

4-20-18
4-20

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 LOWE'S HOME CENTERS INC (PAID BY: LOWE'S)
	Present mailing address (number and street) 1000 LOWES BLVD
	City, town or post office, state, ZIP code MOORESVILLE, NC 28117

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PHARR CITRUS ORCHARD CO. AN IRR TR**

Step 2: Describe the property	W506.28LT 15 LT 16 EXC S303.1-W343 & W506.28-LT 17 E386.15 LT 18 13.01 NET	
	Address or location of property:	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	651308	DATE: 5-9-18
	Account number of property: P6300.00.000.0016.10	Tax receipt number: 37153601

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	01/23 / 2018	\$ 219,568.30	\$ 13,243.30
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 13,243.30

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3567-17-J**

PER ORDER PAY BY: JUNE 14, 2018

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	
	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

Maria A. Duran

Paul J. [Signature]

5-7-18

4/25/18

4/20 4:00-18

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

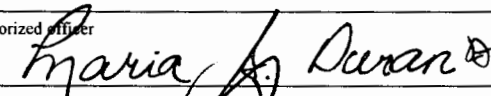
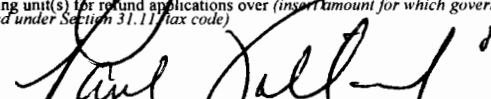
Step 1: Owner's name and address	Owner's name LOWE'S HOME CENTERS INC (PAID BY: LOWE'S)	
	Present mailing address (number and street) 1000 LOWES BLVD	
	City, town or post office, state, ZIP code MOORESVILLE, NC 28117	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PLAZA LAS FUENTES LOT 1B**

Step 2: Describe the property	Address or location of property:		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	726296		
	Account number of property:		Tax receipt number:
	P7475.00.000.001B.00	OR	37153601

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	01/23 / 2018	\$ 172,647.82	\$ 10,600.27
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 10,600.27 <i>d</i>
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3567-17-J					
PER ORDER PAY BY: JUNE 14, 2018					
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	
	Authorized officer sign here 	Date 5-7-18
	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 4/25/18

4/26 CAP 4.20.18

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

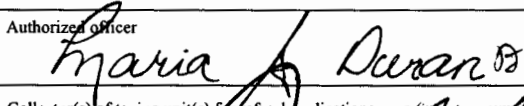
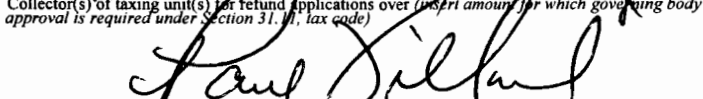
To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name CEDARS HOSPITALITY LLC (PAID BY: CAPITAL ONE HOTEL GROUP)^d
	Present mailing address (number and street) 421 S INTERNATIONAL BLVD
	City, town or post office, state, ZIP code WESLACO, T X 78596
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): R.G.V. EXPRESS LOT 1
	Address or location of property: 654088
	Account number of property: R0180.00.000.0001.00^d OR 37313340
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>5-9-18</u> <i>d.c. 5/7/18</i> 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	2017	01/26 / 2018	\$ 143,559.90	\$ 61,488.90
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 61,488.90 ^d
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER # C-2792-17-G ^d					
PER ORDER PAY BY : JUNE 6, 2018					
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	
	Authorized officer sign here 	Date 5-7-18
	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 4/12/18 ^d

4/12

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 WALTEX LLC (PAID BY: WALGREENS FAMILY OF COMPANIES)
	Present mailing address (number and street) 2327 W ISLAND RD
	City, town or post office, state, ZIP code WILLIAMSBURG, VA 23185-7682

Phone (area code and number)
(956) 318-2157

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): RDEJ WALGREENS EDINBURG LOT 1
	Address or location of property: 792546
	Account number of property: R1334.00.000.0001.00
	OR 37494530

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5/2/18**
Tax receipt number: **517118**

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	01/31 / 2018	\$ 69,120.24	\$ 9,262.09
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 9,262.09

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A**

PER ORDER PAY BY: MAY 28, 2018

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	
	Authorized officer sign here	Date
	Collector(s) of taxing unit(s) for refund applications over \$5000 (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date

Maria A. Duran
Paul Hill

5-7-18
4/12/18
4/12
4-6-18

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 WALTRUST PROPERTIES INC (PAID BY: WALGREENS FAMILY OF COMPANIES) ↑
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SAN JUAN WALGREEN'S LOT 1**

Step 2: Describe the property	Address or location of property: 714347 d	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5-4-18 <i>DeSAIN</i>
	Account number of property: S1075.00.000.0001.00 d	

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	01/31 / 2018	\$ 59,269.86	\$ 9,806.16
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 9,806.16 d
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A d					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here	Date 5-7-18
	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 4/12/18 <i>4-6-18</i>

4/12

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

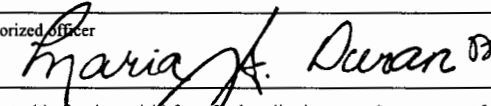
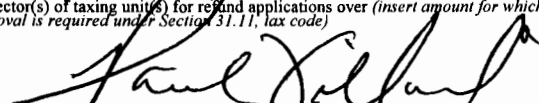
Step 1: Owner's name and address	Owner's name SHAMROCK ADVENTURE LXIV LTD (PAID BY: WALGREENS FAMILY OF COMPANIES) d
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002
	Phone (area code and number)

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

Step 2: Describe the property	Address or location of property: 686001 A	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5-4-18 <i>J.C. Smith</i>
	Account number of property: S1184.00.000.0001.00 A	
	OR	
	37495621	

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	01/31 / 2018	\$ 55,184.75	\$ 6,341.62
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 6,341.62 d
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A d					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here 	Date 5-7-18
	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 4/12/18 <i>C. H. D. 4-10-15</i>

4/12

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


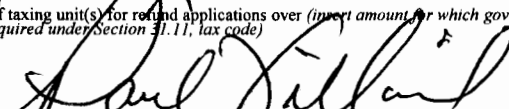
Step 1: Owner's name and address	Owner's name AJS PROPERTIES LLC (PAID BY: WALGREENS FAMILY OF COMPANIES)
	Present mailing address (number and street) 110 E 40TH ST STE 802
	City, town or post office, state, ZIP code NEW YORK, NY 10016-1810
	Phone (area code and number)

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

Step 2: Describe the property	Address or location of property: AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	
	519824 a	DATE: 5-9-18
	Account number of property: S2640.00.000.001A.00 a	Tax receipt number: OR 37494510

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	01/31 / 2018	\$ 31,068.52	\$ 3,200.47
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,200.47 a
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here 	Date 5-7-18
	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 4/12/18

4/12

4/15/18

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 WALGREEN CO (PAID BY: WALGREENS FAMILY OF COMPANIES)
	Present mailing address (number and street) 104 WILMOT RD
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-5121

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHAMROCK ADVENTURE PALMHURST LOT 1**

Step 2: Describe the property	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	
	Address or location of property: 710775	DATE: 5-4-18
	Account number of property: S2695.00.000.0001.00	Tax receipt number: 37365728
	OR	

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	01/29 / 2018	\$ 40,055.67	\$ 3,903.67
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,903.67
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here	Date
	Collector(s) of taxing unit(s) for refund applications over \$100,000 (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date

Maria A. Duran
Jane J. [Signature]

5-7-18
4/12/18
4/12
CIBX
4-16-18

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 WALTRUST PROPERTIES INC (PAID BY: WALGREENS FAMILY OF COMPANIES) d
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002

Legal description (or attach copy of the tax bill or tax receipt): **SHAMROCK-WALGREENS EDINBURG LOT 1**


Step 2: Describe the property	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	
	Address or location of property:	
	718495 d	DATE: 5-4-18 P.C 5/7/18
	Account number of property: S2696.00.000.0001.00 d	OR 37494403

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	01/31	/	2018	\$ 58,389.32
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5. TOTAL			/		\$	\$ 8,275.52 d

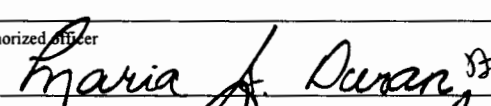
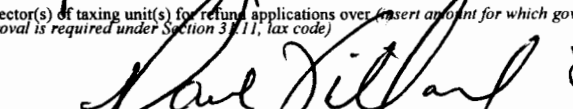
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A d**

PER ORDER PAY BY: MAY 28, 2018

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	
	Authorized officer sign here 	Date 5-7-18
	Collector(s) of taxing unit(s) for refund applications over <i>insert amount for which governing body approval is required under Section 37.11, tax code</i> sign here 	Date 4/12/18

4/12
4-12-18

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 RBY TRENTON LLC (PAID BY: COMMERCIAL BUILDERS GROUP LLC) ^d
	Present mailing address (number and street) 4629 MACRO
	City, town or post office, state, ZIP code SAN ANTONIO, TX 78218-5420
	Phone (area code and number)

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5-4-18**
P.C. 5/7/18

Address or location of property:
696929 ¹

Account number of property:
T6836.00.000.0001.00 ^d OR **36778245**

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	2017	12/28	/ 2017	\$ 231,859.85
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 28,620.55 ¹


Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER # C-4066-17-J ¹**

PER ORDER PAY BY : JUNE 7, 2018

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."

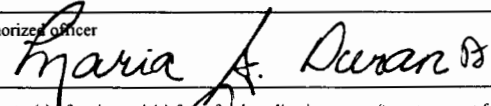
Signature: **sign here** 

Date of application for tax refund

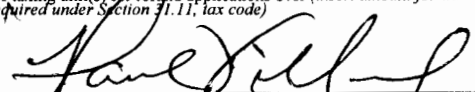
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

Authorized officer: **sign here** 

Date: **5-7-18**

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: **4/12/18**

4/12 *4-5-18*

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 CS POOL II LLC (PAID BY: WALGREENS FAMILY OF COMPANIES) ^d
	Present mailing address (number and street) 1030 W HIGGINS RD STE 360
	City, town or post office, state, ZIP code PARK RIDGEW, IL 60068
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): WALGREENS - BENCOR PLACE LOT 1
	Address or location of property: 618482 ^a
	Account number of property: W0280.00.000.0001.00 ^a
	Tax receipt number: OR 37494496
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 5-4-18 <i>J.C. 5/7/18</i>

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	01/31 / 2018	\$ 42,392.40	\$ 4,111.02
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4,111.02 ^d
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A ^d					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here <i>Maria J Duran ^{AS}</i>	Date 5-7-18
	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 Jallant</i>	Date 4/12/18 <i>CHP 45/18</i> 4/12

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 WALTRUST PROPERTIES INC (PAID BY: WALGREENS FAMILY OF COMPANIES)
	Present mailing address (number and street) P.O. BOX 1159
	City, town or post office, state, ZIP code DEERFIELD, IL 60015-6002
	Phone (area code and number)

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5-3-18**
J.C. 5/7/18

Address or location of property:
732333

Account number of property:
W0281.00.000.0001.00 OR **37494480** 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		2017	01/31 / 2018	\$ 41,556.40
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4,441.40 <i>d</i>

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3447-17-A**

PER ORDER PAY BY: MAY 28, 2018

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** [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 Approved Disapproved

Authorized officer: **sign here** [Signature: Maria A. Duran]

Date: **5-7-18**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31711, tax code): **sign here** [Signature: Paul Hill]

Date: **4/12/18**

4/12

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 LOWE'S HOME CENTERS INC (PAID BY: LOWE'S)
	Present mailing address (number and street) 1000 LOWES BLVD
	City, town or post office, state, ZIP code MOORESVILLE, NC 28117

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT N791-'W629' OF FT 34 11.42AC**

Step 2: Describe the property	GR 10.88AC NET
	Address or location of property: 324155 d
	Account number of property: W3800.00.034.0000.00 d
	OR 37153601

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE


DATE: 5-4-18
2. C 57718
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	2017	01/23 / 2018	\$ 56,514.09	\$ 19,582.14
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 19,582.14 d

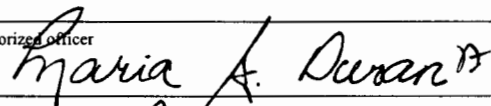
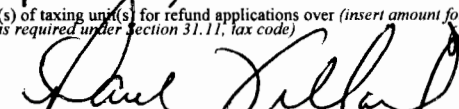
Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3567-17-J d**

PER ORDER PAY BY: JUNE 14, 2018

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	
	Authorized officer sign here 	Date 5-7-18
	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 4/25/18

4-26-18
4-26-18

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 LOWE'S HOME CENTERS INC^d (PAID BY: LOWE'S)^d
	Present mailing address (number and street) 1000 LOWES BLVD
	City, town or post office, state, ZIP code MOORESVILLE, NC 28117

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT -S481-N1272-W629 FT 34**

Step 2: Describe the property	6.94AC GR 6.61AC NET
	Address or location of property: 324156^d
	Account number of property: W3800.00.034.0000.01^d OR 37153601
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>5-4-18</u> <u>PLS/TA</u> 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	2017	01/23 / 2018	\$ 174,798.92	\$ 7,237.28
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 7,237.28 ^d

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3567-17-J^d**

PER ORDER PAY BY: JUNE 14, 2018

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	
	Authorized officer sign here Maria A. Duran^{da}	Date 5-7-18
	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 Jull^a	Date 4/25/18

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CAP 4-20-18

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 H T GONG REAL ESTATE INVESTMENTS LA (PAID BY: WALGREENS FAMILY OF COMPANIES) ↑
	Present mailing address (number and street) 848 BAUER CT
	City, town or post office, state, ZIP code SAN CARLOS, CA 94070-3612
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT BNG AN IRR TR**

Step 2: Describe the property	E247.88-N277.40 FT 633 1.41 AC	
	Address or location of property:	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	326400 a	DATE: 5-4-18
	Account number of property: W3800.00.633.0000.00 a	Tax receipt number: OR 37495947

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	01/31 / 2018	\$ 47,915.95	\$ 6,196.51
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 6,196.51 a
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-3447-17-A a					
PER ORDER PAY BY: MAY 28, 2018					
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	
	Authorized officer sign here → <i>Maria A Duran</i>	Date 5-7-18
	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 Tillman</i>	Date 4/2/18 CAP 4/5/18

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