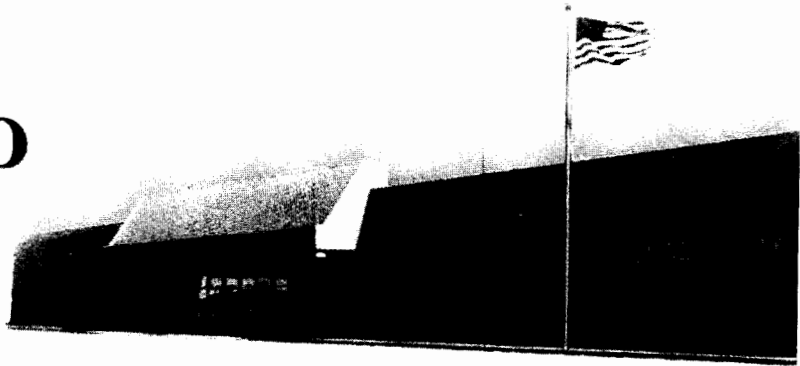


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



JULY 6, 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:

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., PCC

sp

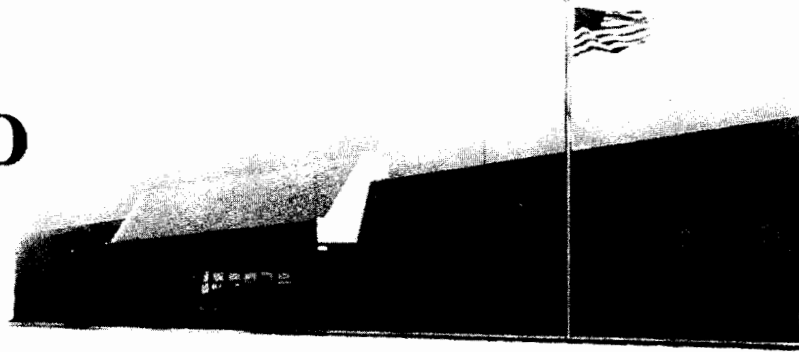
Enclosure



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
E5400.00.030.0000.02	LINEBARGER GOGGAN BLAIR & SAMPSON LLP	\$28,107.00
E5400.00.045.0020.00	LINEBARGER GOGGAN BLAIR & SAMPSON LLP	\$7,945.00
O2005.00.000.0006.00	WELLS FARGO HOME MORTGAGE	\$3,463.50



2804 S. Bus. Hwy 281 • Edinburg, Texas 78539

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 CITY OF ELSA TRST PAID BY: LINEBARGER GOGGAN BLAIR & SAMPSON LLP
	Present mailing address (number and street) P.O. BOX 178
	City, town or post office, state, ZIP code EDINBURG, TX 78540
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ELSA ORIGINAL TOWNSITE BNG AN IRR TR**

Step 2:
Describe the property

W199-E249-N136.97-S380 BLK 30 .81AC NET

Address or location of property:
169434

Account number of property: **E5400.00.030.0000.02** Tax receipt number:
OR 35465421/35465423/35465428/35465418 35465432/3546541735465436

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	1997	02/07 ✓	/ 2017 ✓	\$ 27,188.83
2.	1998		/	\$ 918.17	\$ 918.17
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 28,107.00

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#169434**

REFUND BACK TO TAX PAYER

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: *Cristina Villacresna* Date of application for tax refund: **4/25/18**

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6/28/18**

Authorized officer: *Maria A. Duran* Date: **7-3-18**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.11, tax code): *Gene Dill* Date: **5/9/18**

5/15 CAP 5-13-18

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 CITY OF ELSA TRST (PAID BY: LINEBARGER GOGGAN BLAIR & SAMPSON LLP)
	Present mailing address (number and street) P.O. BOX 178
	City, town or post office, state, ZIP code EDINBURG, TX 78540
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ELSA ORIGINAL TOWNSITE BLK 45 LTS 20 & 21**

Step 2: Describe the property	Address or location of property: 169537
	Account number of property: E5400.00.045.0020.00
	Tax receipt number: 35465451/35465460/35465465/35465469/35465448/35465445/35465455
	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	1997	02/07	/ 2017	\$ 814.03
2.	1998		/	\$ 790.16	\$ 790.16
3.	1999		/	\$ 745.16	\$ 745.16
4.	2000		/	\$ 749.93	\$ 749.93
5. TOTAL			/	\$ ↓	\$ ↓

See grand total p. 4 → \$ 7,945.00 **3099.28**

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#169537**

REFUND BACK TO TAX PAYER

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 Christina Villaseca	Date of application for tax refund 4/25/18

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: 6/28/18	
Authorized officer sign here	Maria A. Duran	Date 7-3-18
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)	Jablon (Jablon) Hall	Date 5/7/18

5/8

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 CITY OF ELSA TRST (PAID BY: LINEBARGER GOGGAN BLAIR & SAMPSON LLP)
Owner's name and address	Present mailing address (number and street) P.O. BOX 178
	City, town or post office, state, ZIP code EDINBURG, TX 78540
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ELSA ORIGINAL TOWNSITE BLK 45 LTS 20 & 21**

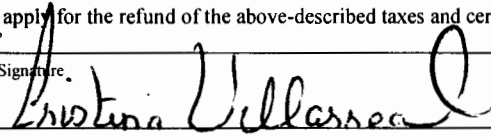
Step 2:	Describe the property
	Address or location of property: 169537
	Account number of property: E5400.00.045.0020.00
	Tax receipt number: 35465451/35465460/35465465/35465469/35465448/35465445/35465455

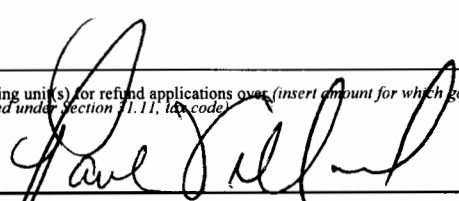
Step 3:	Give the tax payment information			
Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2001	02/07 / 2017	\$ 726.64	\$ 726.64
2.	2002	/	\$ 726.70	\$ 726.70
3.	2003	/	\$ 699.68	\$ 699.68
4.	2004	/	\$ 891.40	\$ 891.40
5. TOTAL		/	\$ ↓	\$ ↓

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#169537**

REFUND BACK TO TAX PAYER

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."
sign here	Signature:  Date of application for tax refund: 4/25/18
	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 type="checkbox"/> Approved <input type="checkbox"/> Disapproved
sign here	Authorized officer:  Date: 5/7/18
sign here	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): Paul Villaseca Date: 5/7/18

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 CITY OF ELSA TRST (PAID BY: LINEBARGER GOGGAN BLAIR & SAMPSON LLP)
	Present mailing address (number and street) P.O. BOX 178
	City, town or post office, state, ZIP code EDINBURG, TX 78540
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ELSA ORIGINAL TOWNSITE BLK 45 LTS 20 & 21**

Step 2: Describe the property	Address or location of property: 169537
	Account number of property: E5400.00.045.0020.00
	Tax receipt number: 35465451/35465460/35465465/35465469/35465448/35465445/35465455
	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	2005	02/07 ✓	/ 2017 ✓	\$ 880.50 ✓
2.	2006		/	\$ 544.09 ✓	\$ 544.09 ✗
3.	2007		/	\$ 321.17 ✓	\$ 321.17 ✗
4.	2008		/	\$ 49.50 ✓	\$ 49.50 ✗
5. TOTAL			/	\$ ↓	\$ ↓

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#169537**

REFUND BACK TO TAX PAYER

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 <i>Kristina Villarreal</i>	Date of application for tax refund 4/25/18

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 type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here <i>[Signature]</i>	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 <i>[Signature]</i>	Date 5/7/18

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 CITY OF ELSA TRST (PAID BY: LINEBARGER GOGGAN BLAIR & SAMPSON LLP)
	Present mailing address (number and street) P.O. BOX 178
	City, town or post office, state, ZIP code EDINBURG, TX 78540
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ELSA ORIGINAL TOWNSITE BLK 45 LTS 20 & 21**

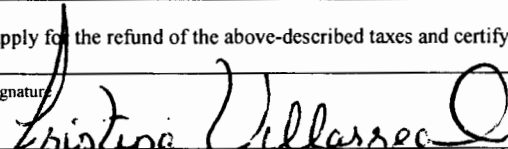
Step 2: Describe the property	Address or location of property: 169537
	Account number of property: E5400.00.045.0020.00
	Tax receipt number: 35465451/35465460/35465465/35465469/35465448/35465445/35465455
	OR

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	2009	02/07	/ 2017	\$ 6.04
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$	\$ 7,945.00

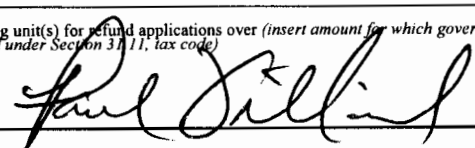
Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#169537**

REFUND BACK TO TAX PAYER

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 4/25/18

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 type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here 	Date 5/4/18
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code)	Date

9/0544860224

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 BALTAZA SANDRA (PAID BY: WELLS FARGO) Home Mortgage
	Present mailing address (number and street) 907 S ABRAM RD
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number) 515-348-6202

Legal description (or attach copy of the tax bill or tax receipt): **OJO DE AGUA LOT 6**

Step 2: Describe the property	Address or location of property: 907 S Abram RD Mission, TX 78572
	Account number of property: 636696
	Tax receipt number: 02005.00.000.0006.00
	OR 36485983

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	12/27 ✓	\$ 3,463.50	\$ 3,463.50
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,463.50

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ACCT#636696**

TAX PAYER IS RESPONSIBLE FOR TAXES REFUND BACK TO WELLS FARGO

Apply refund to acct E4675-01-000-0003-00 in the NR Amount of (\$2,073.77) Refund Diff (\$1,389.73) to Wells Fargo

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	sign here Signature Kyle Morris & Kyle Morris	Date of application for tax refund 4/11/18
	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: 6/28/18 ll 7-2-18
	sign here Authorized officer Maria A. Duran	Date 7-3-18
	sign here 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) Paul Dillard	Date 4/17/18

4/19 6/19

Claim Form 113