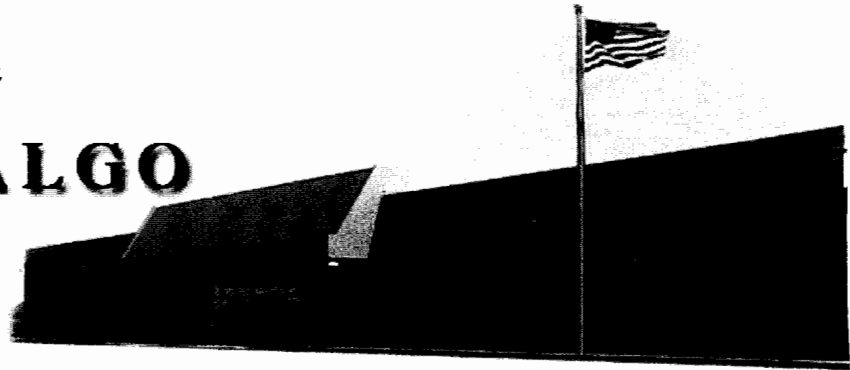


Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

Hidalgo County Tax Assessor-Collector

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

AUGUST 23, 2018

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,

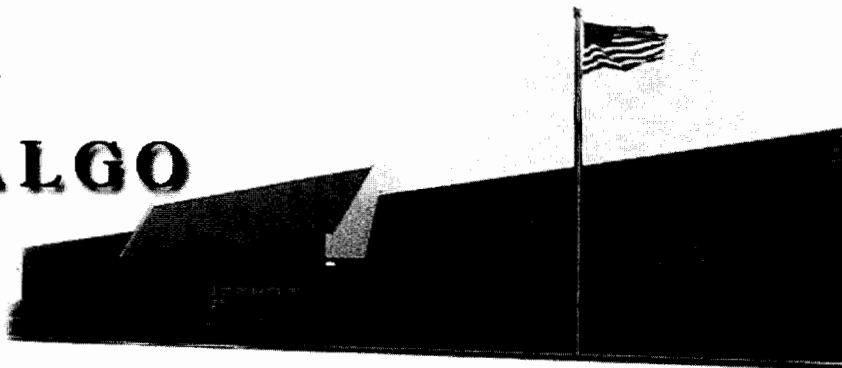
Pablo (Paul) Villarreal, Jr., PCC

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Enclosure

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

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ACCOUNT NUMBER	PAYER	AMOUNT
E8465.04.000.0004.00	J M A ENTERPRISES INC	\$3,080.05
H2550.01.002.0003.08	KCMP LTD	\$5,767.28
S3012.06.000.0002.00	M & T REALTY CAPITAL CORP	\$48,485.20

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 J M A ENTERPRISES INC ✕
	Present mailing address (number and street) 1309 BUSINESS PARK DR
	City, town or post office, state, ZIP code MISSION, TX 78572-6057
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **EXPRESSWAY BUSINESS PARK PH 4 LOT 4**

Step 2: Describe the property	Address or location of property:
	560046 ✕
	Account number of property: E8465.04.000.0004.00 ✕
	Tax receipt number: OR 37483929

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 ✓	\$ 29,358.10 ✕
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3080.05 ✕

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3147-17-J** ✕

PER ORDER PAY BY: OCTOBER 10, 2018

BR

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: 8/15/18 ✕		DATE: 8/16-18	
	Authorized officer sign here	Marina A. Duran ✕	Date	8-20-18
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)	Fabio Villan ✕	Date	8/11/18	

8/2
7/25/18

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 KCMP LTD
	Present mailing address (number and street) 6420 S 23RD ST
	City, town or post office, state, ZIP code MCALLEN, TX 78503-8915

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **HIDALGO CANAL CO-VV W 199.81-N436'-S445' LOT 3 BLK 2 2.0 AC**

Step 2: Describe the property	Address or location of property:
	724179
	Account number of property:
	H2550.01.002.0003.08

Tax receipt number:

OR 38079923

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 ✓	03/29 ✓	/ 2018 ✓	\$ 43,707.87 ✓
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 5,767.28 ✓

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4311-17-I**

PER ORDER PAY BY: OCTOBER 9, 2018

BR

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: 8/15/18 <i>OK</i> 8-16-18	
	Authorized officer sign here	<i>Marina A. Duran</i>	Date	8-20-18
	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)	<i>Paul Duffin</i>	Date	8/11/18 8/12

CAP 8/15/18

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 JUNIPER SHARYLAND LTD (PD BY: M & T REALTY CAPITAL CORP) <i>✗</i>
	Present mailing address (number and street) 520 POST PAK BLVD STE 575
	City, town or post office, state, ZIP code HOUSTON, TX 77027-9414
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARYLAND PLANTATION GROVE #6 LOT 2**

Step 2: Describe the property	Address or location of property:
	701404 <i>✗</i>
	Account number of property: S3012.06.000.0002.00 <i>✗</i>
	Tax receipt number: OR 37726119

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 <i>✓</i>	01/31 <i>✓</i> / 2018 <i>✓</i>	\$ 519,555.20 <i>✗</i>	\$ 48,485.20 <i>✗</i>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 48,485.20 <i>✓</i>
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-4002-17-H <i>✗</i>					
PER ORDER PAY BY: OCTOBER 14, 2018					
BR					

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>✗</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		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	
	Authorized officer sign here <i>✗</i> <i>Maria A. Duran</i>	Date 8-10-18	DATE: 8/15/18 <i>J. C. Smith</i> 8-10-18	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.17, tax code) sign here <i>✗</i> <i>Paul Silfman</i>	Date 8/11/18	8/2 <i>7/25/18</i>	