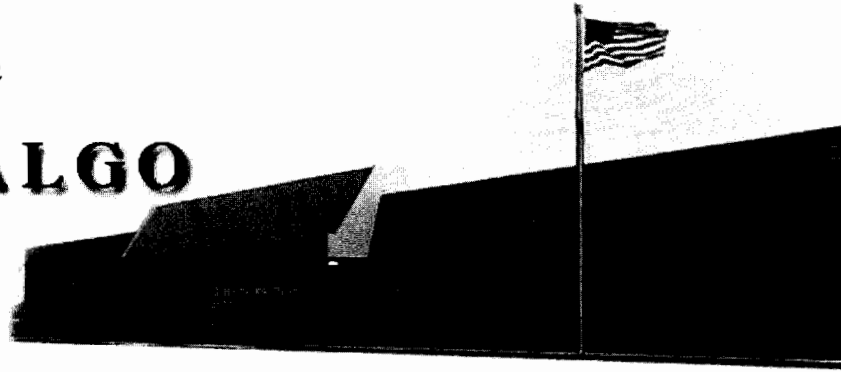


Office of Tax Assessor-Collector

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

October 19, 2018

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. ^{P&P}

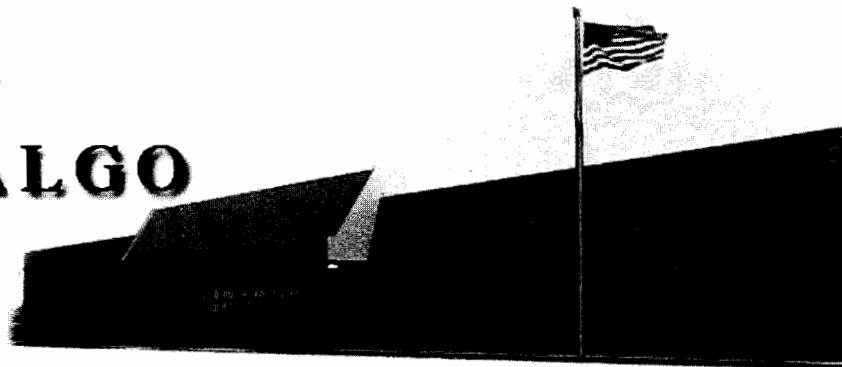
Pablo (Paul) Villarreal, Jr., PCC

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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
E0154.00.000.0126.00	1511 CENLAR	\$4,490.96
M1950.00.042.0004.00	AFFORDABLE HOMES OF SOUTH TEXAS INC	\$4,630.59
T2100.00.243.0003.05	JOSE PERALEZ OR GEENA MEDINA-PERALEZ (\$3,195.02) UNIVERSITY DENTAL CENTER (\$1,933.12)	\$5,128.14

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 RIVERA RUBEN J ALFARO & ADRIANA O GARCIA (PAD BY: 1511 CENLAR)
	Present mailing address (number and street) 623 SABAL AVE
	City, town or post office, state, ZIP code EDINBURG, TX 78539

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **EAGLE'S CROSSING LOT 126**

Step 2: Describe the property	Address or location of property: 718029
	Account number of property: E0154.00.000.0126.00
	Tax receipt number: OR 36884624

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	12/31	/ 2017	\$ 10,986.13
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4,490.96

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #10 THIS IS A CLERICAL ERROR FOR 2017 YEAR. SUBMITTED/ENTERED WRONG. HS GRANTED ON SUPPL #9 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: 10/3/18 10-12-18
	Authorized officer sign here <i>Maria A. Duran</i>	Date 10-15-18
	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 J. [Signature]</i>	Date 9/14/18 9/17

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 AFFORDABLE HOMES OF SOUTH TEXAS INC *
	Present mailing address (number and street) 1420 ERIE *
	City, town or post office, state, ZIP code MCALLEN, TX 78501-5220
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCALLEN ADDITION LOT 4 BLK 42**


Step 2: Describe the property	Address or location of property: 228929 *
	Account number of property: M1950.00.042.0004.00 *
	Tax receipt number: OR 38077095 / 38389181 / 38548402

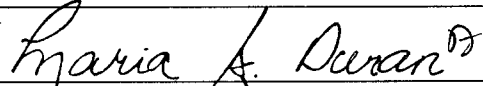
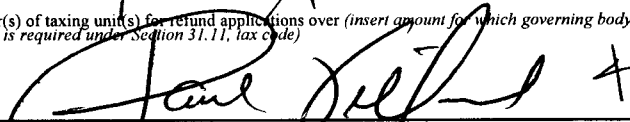
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2017	3/29	/ 2018	\$ 4220.86
2.		06/20	/ 2018	\$ 353.82	\$
3.		8/10	/ 2018	\$ 55.91	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 4,630.59 *

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT 10**

GRANT FULL EXEMPT AS PF 01/01/2017 APL ON FILE. PAYOFF ACCT #228945

(\$2.98) REFUND DIFF TO TP (\$4,627.61) ♂ 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: 10/15/18 10-12-18 10/12/18
	Authorized officer sign here 	Date 10-15-18	
	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 9/19/18 9/17 9/15/18	

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 PERALEZ JOSE III & GEORGINA M (PD BY: JOSE PERALEZ OR GEENA MEDINA-PERALEZ)
	Present mailing address (number and street) 1420 E MONTE CRISTO RD
	City, town or post office, state, ZIP code EDINBURG, TX 78542-7495
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TEX-MEX SURVEY E287.2'-W790'-N692'BNG AN IRR TR LOT 3 SEC 243 4.46 AC GR 4.16 AC NET**

Step 2: Describe the property	Address or location of property:
	295703
	Account number of property:
	T2100.00.243.0003.05
	Tax receipt number:
	OR 37975259 / 38125857 / 38291976 / 38393179 / 38365787 / 38226573

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	03/09	/ 2018	\$ 3,500.00
2.			04/06	\$ 1,500.00	\$
3.			05/04	\$ 1000.00	\$
4.			05/25	\$ 1,442.78	\$
5. TOTAL			/	\$ TOTAL	\$

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #10**

CLERICAL ERROR - GRANT AG USE

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: 10/11/18	
			10-12-18	
sign here	Authorized officer Maria A. Duran	Date 10-15-18		
sign here	Collector(s) of taxing unit(s) for refund applications over (insert amount) which governing body approval is required under Section 37.11, tax code Paul [Signature]	Date 9/19/18	9117	

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 PERALEZ JOSE III & GEORGINA M (PD BY: JOSE PERALEZ OR GEENA MEDINA-PERALEZ)
	Present mailing address (number and street) 1420 E MONTE CRISTO RD
	City, town or post office, state, ZIP code EDINBURG, TX 78542-7495
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TEX-MEX SURVEY E287.2'-W790'-N692'BNG AN IRR TR LOT 3 SEC 243 4.46 AC GR 4.16 AC NET**

Step 2: Describe the property	Address or location of property:
	295703
	Account number of property:
	T2100.00.243.0003.05
	Tax receipt number:
	OR 37975259 / 38125857 / 38291976 / 38393179 / 38365787 / 38226573

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	06/11	/	2018	\$ 1000.00
2.				06/22	\$ 752.24	\$
3.				/	\$	\$
4.				/	\$	\$
5. TOTAL				/	\$ TOTAL	\$ 3195.02

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #10**

CLERICAL ERROR - GRANT AG USE

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 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 9/14/18

CA# 9/15/18

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 PERALEZ JOSE III & GEORGINA M (PD BY: UNIVERSITY DENTAL CENTER)
	Present mailing address (number and street) 1420 E MONTE CRISTO RD
	City, town or post office, state, ZIP code EDINBURG, TX 78542-7495

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TEX-MEX SURVEY E287.2'-W790'-N692'BNG AN IRR TR LOT 3 SEC 243 4.46 AC GR 4.16 AC NET**

Step 2: Describe the property	Address or location of property: 295703
	Account number of property: T2100.00.243.0003.05
	Tax receipt number: OR 38125865 / 38291959 / 38393171

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	04/06	/ 2018	\$ 1,200.00
2.		05/25	/	\$ 2,000.00	\$
3.		06/22	/	\$ 900.00	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 1,933.12

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #10**

CLERICAL ERROR - GRANT AG USE

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **10/11/18**

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 10-12-18

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	
	Authorized officer sign here	Date 10-15-18
	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 9/14/18

9/15/18