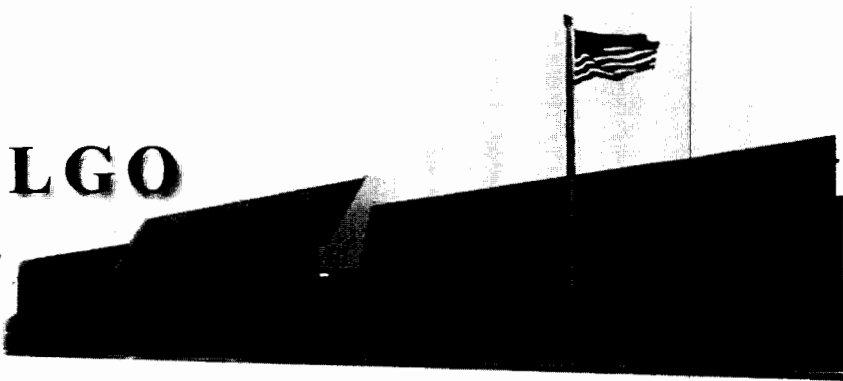


Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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

June 10, 2019

The Honorable Richard F. Cortez
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,

A handwritten signature in cursive script that reads "Pablo (Paul) Villarreal, Jr.".

Pablo (Paul) Villarreal, Jr., PCC

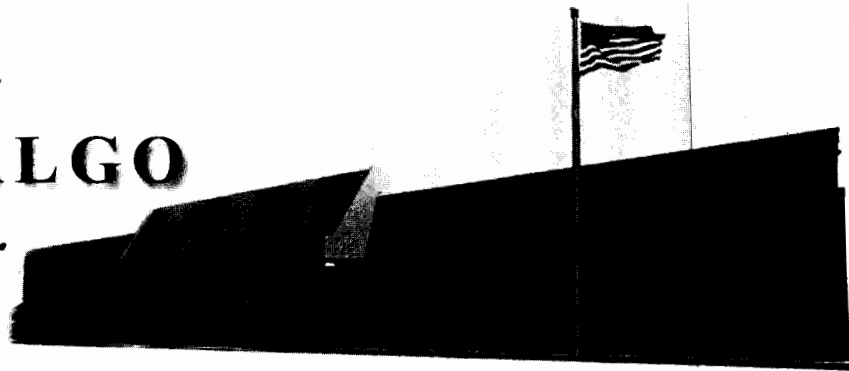
BG

Enclosure

Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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

| ACCOUNT NUMBER | PAYER | AMOUNT |
|----------------------|--------------------------|-------------|
| 10062.98.000.0000.80 | DUTY FREE AMERICAS, INC. | \$5,701.88 |
| E2300.00.002.0033.04 | FRED LOYA OR MARIA LOYA | \$6,394.45 |
| J1800.98.000.0044.05 | DUTY FREE AMERICAS, INC. | \$2,642.33 |
| M0150.00.058.0005.00 | PATRICIA HUGHES | \$3,135.67 |
| M1950.99.000.0011.20 | VW CREDIT, INC. | \$6,238.69 |
| S2982.99.000.0020.13 | PRATT INDUSTRIES | \$14,428.56 |
| S3000.99.000.0000.P6 | VW CREDIT, INC. | \$5,454.65 |
| W2300.99.000.0000.S8 | VW CREDIT, INC. | \$3,098.39 |

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 DUTY FREE AMERICA (PD BY: DUTY FREE AMERICAS, INC.) |
| | Present mailing address (number and street) 6100 HOLLYWOOD BLVD 7TH FLOOR |
| | City, town or post office, state, ZIP code HOLLYWOOD, FL 33024-7983 |

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PORCION 62-63,69.57AC AT S END OF POR 62-62 ADJ TO & AROUND EL RIO ST TR BEING TRAC #F, IMPROVEMENTS ONLY-NEW FOR 2003**

| | |
|--|----------------------------------|
| Step 2: Describe the property | Address or location of property: |
| | 658029 |
| | Account number of property: |
| | 10062.98.000.0000.80 |

Tax receipt number:

OR 40395788

| 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 | 2018 | 01/31 | / 2019 | \$ 22,752.24 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 5,701.88 |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9 THIS IS A NON-CLERICAL ERROR FOR 2018 YEAR. SECTION 25.25(D) LATE CORRECTION PENALTY. PAYOFF ACCT #658029 \$1,705.04 REFUND DIFF \$3,996.84 TO TP. 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: 6/6/19 |
| | 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 | |

5/13

5-8-19

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 LOYA FRED JR & YVONNE GONZALEZ (PD BY: FRED LOYA OR MARIA LOYA) |
| | Present mailing address (number and street) 412UMAR AVE |
| | City, town or post office, state, ZIP code MCALLEN, TX 78501 |
| | Phone (area code and number) |

Legal description (or attach copy of the tax bill or tax receipt): **EBONY HEIGHTS CITRUS GROVES UT NO. 2 W354'-S723.70' LOT 32 5.88AC GR 5.60AC NET**

| | |
|--|--|
| Step 2: Describe the property | Address or location of property: |
| | 584815 |
| | Account number of property: |
| | E2300.00.002.0033.04 OR 40297154 |
| | 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 | 2018 | 01/29 | / 2019 | \$ 20,093.22 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 6,394.45 |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9 THIS IS A NON-CLERICAL ERROR FOR 2018 YEAR. SUBMITTED/ENTERED WRONG 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. | | |

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6/5/19**

| | | |
|---|--|------|
| 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

6-10-19

Jane Smith

5/10/19

5/13

5/2/19

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 UETA OF TEXAS INC (PD BY: DUTY FREE AMERICAS, INC.) |
| | Present mailing address (number and street) 6100 HOLLYWOOD BLVD 7TH FLOOR |
| | City, town or post office, state, ZIP code HOLLYWOOD, FL 33024-7983 |

Legal description (or attach copy of the tax bill or tax receipt): **JJY DE BALLI 5.60AC BNG AN IRR TR S OF IB & WC LEVEE & FM 1015 LOT 44A:IMPROVEMENTS ONLY-NEW FOR 2006**

| | |
|--|--|
| Step 2: Describe the property | Address or location of property: 696021 |
| | Account number of property: J1800.98.000.0044.05 |
| | Tax receipt number: OR 40395421 |

| 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 | 2018 | 01/31 | / 2019 | \$ 4,613.71 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 2,642.33 |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9 THIS IS A NON-CLERICAL ERROR FOR 2018 YEAR. SECTION 25.25 (D) LATE CORRECTION PENALTY. PAYOFF ACCT #696021 \$197.14 REFUND DIFF \$2,445.19 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 |
| | Authorized officer sign here | DATE: 6/15/19 | 6/15/19 |
| | 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 | 5/13 | 5/10/19 |

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 SHULL PATRICIA L HUGHES (PD BY: PATRICIA HUGHES) |
| | Present mailing address (number and street) 25730 MILE 5 W |
| | City, town or post office, state, ZIP code MONTE ALTO, TX 78538-2600 |

Legal description (or attach copy of the tax bill or tax receipt): **M T L & I NW 3.52 AC LOT 5 BLK 58 3.52 AC NET**

| | | |
|---|--|--|
| Step 2: Describe the property | AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE | |
| | Address or location of property: 225302 | DATE: 6-6-19 |
| | Account number of property: M0150.00.058.0005.00 | Tax receipt number: 40589135 |
| | <i>J. C. [unclear]</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 | 2018 | 01/30 | / 2019 | \$ 4,752.50 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 3,135.67 |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #7**
SUBMITTED / ENTERED WRONG
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 | |
| | Authorized officer sign here | Date 6-10-17 |
| | 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 4/24/19 |

6/3 **4/25** **4-23-19**

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 VW CREDIT LEASING LTD (PD BY: VW CREDIT, INC.) |
| | Present mailing address (number and street) 1401 FRANKLIN BLVD |
| | City, town or post office, state, ZIP code LIBERTYVILLE, IL 60048-4460 |
| | Phone (area code and number) |

Legal description (or attach copy of the tax bill or tax receipt): **LEASED VEHICLES AT SML & CML / NEW ACCT 2004**

| | |
|--|---|
| Step 2: Describe the property | Address or location of property: 678087 + |
| | Account number of property: M1950.99.000.0011.20 + |
| | Tax receipt number: OR 40037176 |
| | |

| 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 | 2018 | 01/22 | / 2019 | \$ 8,148.82 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 6,238.69 + |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9**
SUBMITTED/ENTERED WRONG
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. | |

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6/5/19**

| | | |
|---|---|--------------------------|
| Step 5: Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved | |
| | Authorized officer sign here | Date 6-10-19 |
| | 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 5/10/19 + |

5/13

5/19/19

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 PRATT LLC (PD BY: PRATT INDUSTRIES)† |
| | Present mailing address (number and street) 1800-C SARASOTA PKWY |
| | City, town or post office, state, ZIP code CONYERS, GA 30013 |
| | Phone (area code and number) |

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2018/DAW E8465-99-000-0001-47; INVENTORY AT 5801 GEORGE MCVAY DRIVE/ NEW ACCT 2017**


| | |
|---|---|
| Step 2: Describe the property | Address or location of property: |
| | 1123108 † |
| | Account number of property: S2982.99.000.0020.13 † |
| | Tax receipt number: OR 40588945 |

| 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 | 2018 | 01/30 | / 2019 | \$ 14,428.56 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 14,428.56 † |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9**

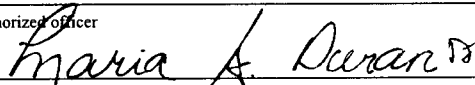
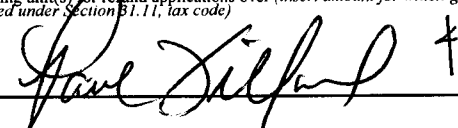
PERSONAL PROPERTY DAW E8465-99-000-0001-47

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.

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **RS 6/5/19**

| | | |
|--|--|--------------------------|
| Step 5: Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved | |
| | Authorized officer sign here  | Date 6-10-19 |
| | 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 5/10/19 † |

6-6-19
6-6-19
5/10/19 †
5/13
5/9/19

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 VW CREDIT LEASING LTD (PD BY: VW CREDIT, INC.) |
| | Present mailing address (number and street) 1401 FRANKLIN BLVD |
| | City, town or post office, state, ZIP code LIBERTYVILLE, IL 60048-4460 |
| | Phone (area code and number) |

Legal description (or attach copy of the tax bill or tax receipt): **LEASED VEHICLES AT SSL & SMS / NEW ACCT 2015**

| | |
|--|----------------------------------|
| Step 2: Describe the property | Address or location of property: |
| | 1019011 |
| | Account number of property: |
| | S3000.99.000.0000.P6 |
| | Tax receipt number: |
| | OR 40037176 |

| 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 | | 2018 | 01/22 / 2019 | \$ 23,570.71 |
| 2. | | | / | \$ | \$ |
| 3. | | | / | \$ | \$ |
| 4. | | | / | \$ | \$ |
| 5. TOTAL | | | / | \$ TOTAL | \$ 5,454.65 |

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #9**

SUBMITTED/ENTERED WRONG

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 |
| <p>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.</p> <p style="text-align: right;">AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: 6/15/19 <i>ll 6-6-19</i> <i>dc 6/1/19</i></p> | | |

| | | |
|---|---|------------------------|
| Step 5: Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved | |
| | Authorized officer sign here | Date 6-10-19 |
| | Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 51.11, tax code) sign here | Date 5/10/19 |

5/13

5/9/19

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 VW CREDIT LEASING LTD (PD BY: VW CREDIT, INC.) |
| | Present mailing address (number and street) 1401 FRANKLIN BLVD |
| | City, town or post office, state, ZIP code LIBERTYVILLE, IL 60048-4460 |
| | Phone (area code and number) |

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2018/ASSETS DISPOSED; LEASED VEHICLES AT SWL & CWL / NEW ACCT 2015**

| | |
|--|--|
| Step 2: Describe the property | Address or location of property: |
| | 1019031 |
| | Account number of property: W2300.99.000.0000.S8 OR 40037176 |
| | 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 | 2018 | 01/22 / 2019 | \$ 3,098.39 | \$ 3,098.39 |
| | 2. | | / | \$ | \$ |
| | 3. | | / | \$ | \$ |
| | 4. | | / | \$ | \$ |
| | 5. TOTAL | | / | \$ TOTAL | \$ 3,098.39 |
| | Taxpayer's reason for refund (attach supporting documentation): SUPPLEMENT #9 | | | | |
| SUBMITTED/ENTERED WRONG | | | | | |
| 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. | |

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6/5/19**

| | | |
|---|--|------------------------|
| Step 5: Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved | |
| | Authorized officer sign here | Date 6-10-19 |
| | 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 5/10/19 |

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5/9/19