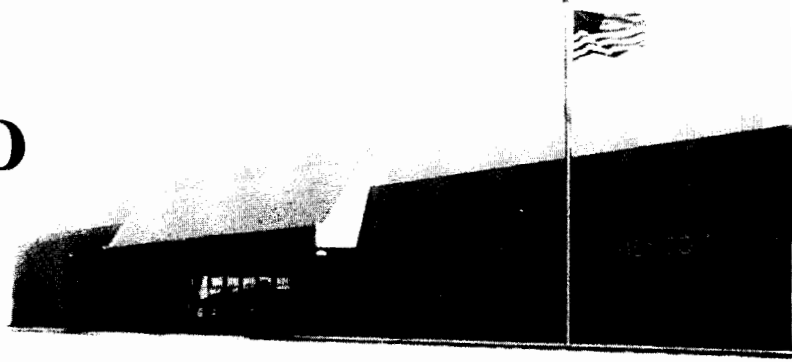


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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

August 15, 2019

The Honorable Richard F. Cortez
Hidalgo County Commissioners
Edinburg, Texas 78539

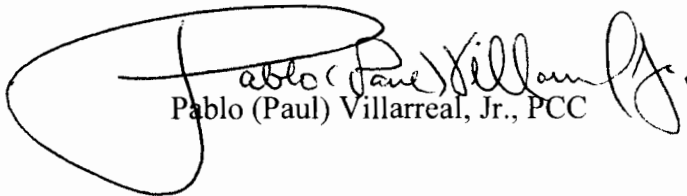
Re: See attached list

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,

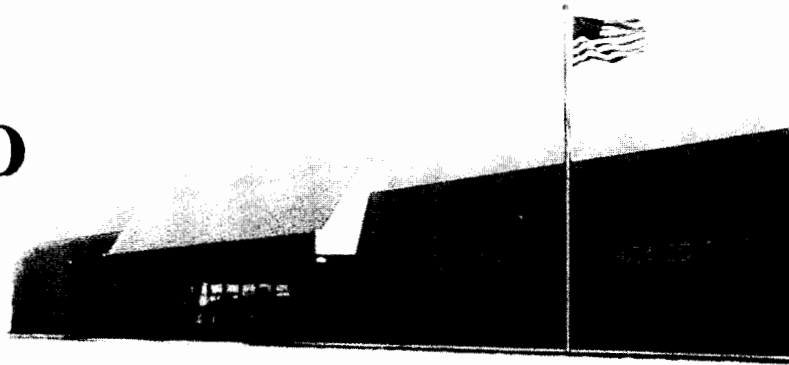

Pablo (Paul) Villarreal, Jr., PCC

BG

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
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ACCOUNT NUMBER	PAYER	AMOUNT
A6095.00.000.0017.00	LERETA FOR SELECT PORTFOLIO SERVICING	\$5,617.72
E5562.00.000.009A.00	AGUA SANTA LLC	\$4,483.54
H0423.00.000.0033.00	MR. COOPER C/O LERETA, LLC	\$3,500.00
H0423.00.000.0034.00	MR. COOPER C/O LERETA, LLC	\$3,500.00
S1810.01.000.0015.00	CORELOGIC	\$5,809.56
W0100.00.033.0008.14	MR.COOPER C/O LERETA, LLC	\$2,850.49





Hidalgo County Tax Assessor - Collector

Fax No.: 956-318-2733

PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

13368

SPS 51641039/0018025645

Print Date: 06/17/2019

LERETA LLC
1123 S PARKVIEW DR
COVINA, CA 91724

AUDITED BY: THE HIDALGO
COUNTY AUDITOR'S OFFICE
DATE: 08/12/2019

J.C. 8/19/19

Account Number A6095-00-000-0017-00 HCAD No. 695693
Legal Description of the Property ASHTON ESTATES LOT 17 3002 TULIP AVE OWNER: UNITED STATES OF AMERICA

2018 OVERAGE AMOUNT \$5,617.72

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 0018005645

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name Select Portfolio Servicing	Relationship to Property Owner
	Mailing Address 1123 Park View	Daytime Telephone Number 800-537-3821x1213
	City, State, Zip Code Covina CA 91723	Email Address:
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2018 and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	5617.72
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input checked="" type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account	For tax year
	<input type="checkbox"/> Escrow for next year's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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 <i>[Signature]</i>	Date of application 7/11/19
	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	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 8-13-19
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 7/17/19

This application must be completed, signed, and submitted with supporting documentation to be valid.

7118

CAO 7/15/19

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

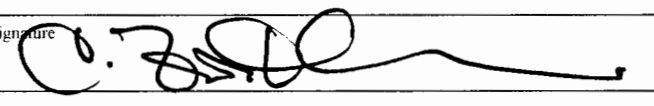
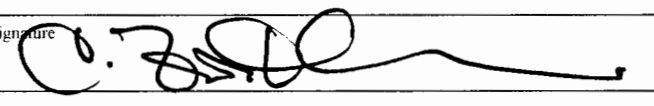
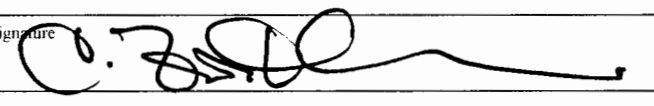
Step 1: Owner's name and address	Owner's name HERMI L.L.C. (PAID BY: AGUA SANTA LLC)
	Present mailing address (number and street) 2101 N 50TH ST
	City, town or post office, state, ZIP code MCALLEN, TX 78501-5441
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **EMERALD VALLEY AT PEREZ POINT LOT 9A**

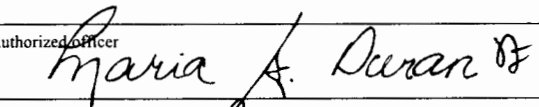
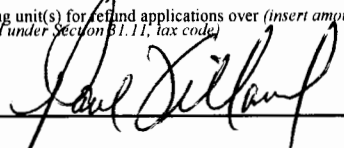
Step 2: Describe the property	Address or location of property: 2101 N 50TH ST.
	700641 4
	Account number of property: E5562.00.000.009A.00 4
	Tax receipt number: OR 38891160

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 4	11/13	/ 2018	\$ 4,483.54
2. ALL ENTITIES			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.			/	\$	\$ 4,483.54 4

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR REFUND BACK TO AGUA SANTA LLC SP**

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."	
	<table border="1"> <tr> <td>sign here </td> <td>Date of application for tax refund 7-10-19</td> </tr> </table>	sign here 
sign here 	Date of application for tax refund 7-10-19	

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
	sign here 	Date 8-13-19
	sign here 	Date 7/17/19 7/18

AG 8/13/19
7/15/19

13521

Mr Cooper 0646024031



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157
Fax No.: 956-318-2733

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

AUDITED BY: THE HIDALGO
COUNTY AUDITOR'S OFFICE

Print Date: 01/02/2019

DATE: 8/12/19 MR
L. C. 8/13/19

Account Number
H0423-00-000-0033-00
HCAD No. 845860

Legal Description of the Property
HACIENDA SANTA LUCIA LOT 33
4709 N EBONY ST

Mr Cooper
LERETA LLC
1123 S PARKVIEW DR
COVINA, CA 91724

OWNER: MAR DESIGN & CONSTRUCTION INC

2018 OVERAGE AMOUNT \$3,500.00

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR, SAN JUAN, ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE
Loan #: 0646024031

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above

Name: Mr Cooper c/o Lereta LLC Relationship to Property Owner
Mailing Address: 1123 Park View Daytime Telephone Number
City, State, Zip Code: Covina, CA 91724 Email Address:

Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.

I paid the taxes for year 2018 and am the party entitled to the refund.

Step 3: Mark the reason for the refund and provide a brief explanation

- Overpaid the account
- Duplicate payment
- Paid in error (explain)

Step 4: Provide payment information

Total amount paid by this taxpayer
Total tax, penalty, and interest amount owed for the year
Amount of refund claimed: 3500.00

Step 5: How should the refund be processed?

- Mail to Property Owner
- Mail to Payer at address in Step 1
- Transfer this amount to account For tax year
- Escrow for next year's taxes

Step 6: Sign the application form. Unsigned applications will not be processed.

By completing and signing this 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

Please allow 60 days from the time this application is returned to the tax office for the refund to be processed

SIGN HERE: [Signature] Date of application: 7/11/19

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

AUDITORS USE ONLY:

Approved Denied By: [Signature] Date: 8-13-19

TAX OFFICE USE ONLY:

Approved Denied By: [Signature] Date: 7/17/19

This application must be completed, signed, and submitted with supporting documentation to be valid.

7/18

7/13/19

134114

Mr Cooper 0646624130



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157
Fax No.: 956-318-2733

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 01/02/2019

AUDITED BY: THE HIDALGO
COUNTY AUDITOR'S OFFICE
DATE: 08/12/2019

J. 8/13/19

Account Number
H0423-00-000-0034-00A
HCAD No. 845861A

Legal Description of the Property
HACIENDA SANTA LUCIA LOT 34
4715 NEBONY ST

LERETA LLC
1123 S PARKVIEW DR
COVINA, CA 91724

OWNER: MAR DESIGNS & CONSTRUCTION INC

2018 OVERAGE AMOUNT \$3,500.00

Loan #: 0646624130

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR, SAN JUAN, ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above

Name Mr Cooper c/o Lereta
Mailing Address LERETA, LLC
City, State, Zip Code 1123 Park View Drive
Covina, CA 91724

Relationship to Property Owner
Daytime Telephone Number
Email Address:

Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.

I paid the taxes for year 2018 and am the party entitled to the refund.

Step 3: Mark the reason for the refund and provide a brief explanation

X Overpaid the account
Duplicate payment
Paid in error (explain)

Step 4: Provide payment information
Attach copies of cancelled checks only if refund is over \$500.00

Total amount paid by this taxpayer
Total tax, penalty, and interest amount owed for the year
Amount of refund claimed 3500.00

Step 5: How should the refund be processed?

Mail to Property Owner
X Mail to Payer at address in Step 1
Transfer this amount to account
Escrow for next year's taxes

For tax year

Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed

By completing and signing this 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 7/11/19

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

AUDITORS USE ONLY:

Approved

Denied

By Maria A. Duran Date: 8-13-19

TAX OFFICE USE ONLY:

Approved

Denied

By

By Paul Villarreal Date: 7/17/19

This application must be completed, signed, and submitted with supporting documentation to be valid.

7/18

7/18/19

JUN 05 2019 038



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
Fax No.: 956-318-2733

Print Date: 12/04/2018

SECOND NOTICE

MAY 20 2019

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 8/12/19 *OK*

8/13/19

CORELOGIC ~~4~~
3001 HACKBERRY RD
WESTERN REGION SERVICE CENTER - DFW 4-5
IRVING, TX 75063--015

Account Number S1810-01-000-0015-00 4 HCAD No. 593318 4
Legal Description of the Property SANTA FE ESTATES PH 1 LOT 15 1918 VILLA LINDA
OWNER: GONZALEZ JOSE LUIS & EVA M 4 2018 OVERAGE AMOUNT \$5,809.56

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 070240078

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Corelogic Tax Service</u>	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number
	City, State, Zip Code	Email Address:
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2018</u> and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer	\$5970.77
	Total tax, penalty, and interest amount owed for the year	\$ 161.21
	Amount of refund claimed	\$ 5809.56
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input checked="" type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account	For tax year
	<input type="checkbox"/> Escrow for next year's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this 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 <u><i>Chantel Hair</i></u>	Date of application <u>06/20/19</u>
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		
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u><i>Maria A. Duran</i></u> Date: <u>8-13-19</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u><i>Paul</i></u> Date: <u>7/3/19</u>

This application must be completed, signed, and submitted with supporting documentation to be valid.

718

JE 7-3-19

13524

Mr. Cooper 1822997290



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector

PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 01/02/2019

LERETA LLC
1123 S PARKVIEW DR
COVINA, CA 91724

AUDITED BY: THE HIDALGO
COUNTY AUDITOR'S OFFICE
DATE: 08/12/2019

8/13/19

Account Number
W0100-00-033-0008-14
HCAD No. 3471884

Legal Description of the Property
WEST ADDN. TO SHARYLAND
E425'-S153.74'-N512.84'-LOT 33-8 1.50AC
GR 1.43AC NET

4421 MAYBERRY RD
OWNER: RIOS REYES & NAOMI O

2018 OVERAGE AMOUNT \$2,850.49

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 48: MISSION CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 1822997290

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above

Name: Mr. Cooper c/o LERETA, LLC
Relationship to Property Owner
Mailing Address: 1123 Park View Drive
Daytime Telephone Number
City, State, Zip Code: Covina, CA 91724
Email Address:

Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.

I paid the taxes for year 2018 and am the party entitled to the refund.

Step 3: Mark the reason for the refund and provide a brief explanation

Overpaid the account
 Duplicate payment
 Paid in error (explain)

Step 4: Provide payment information

Total amount paid by this taxpayer
Total tax, penalty, and interest amount owed for the year
Amount of refund claimed

2850.49

Attach copies of cancelled checks only if refund is over \$500.00

Step 5: How should the refund be processed?

Mail to Property Owner
 Mail to Payer at address in Step 1
 Transfer this amount to account
 Escrow for next year's taxes

For tax year

Step 6: Sign the application form. Unsigned applications will not be processed.

By completing and signing this 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

7/11/19

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

AUDITORS USE ONLY:

Approved

Denied

By:

[Signature]

Date: 8/13/19

TAX OFFICE USE ONLY:

Approved

Denied

By:

[Signature]

Date: 7/17/19

This application must be completed, signed, and submitted with supporting documentation to be valid.

7/18

7/18/19