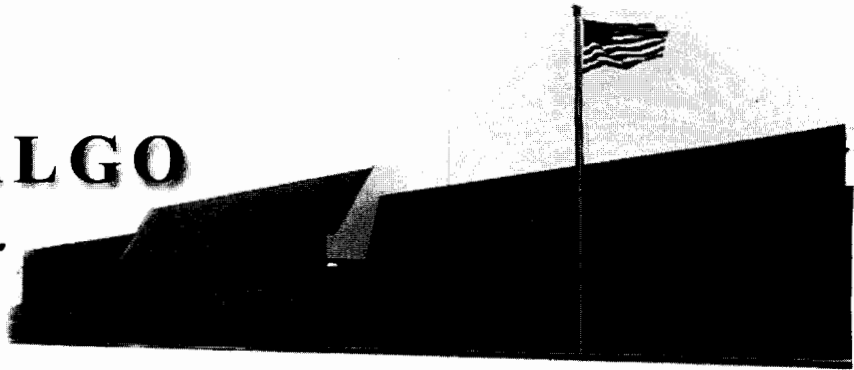


Office of Tax Assessor-Collector

# 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](http://www.hidalgocountytax.org)

November 7, 2019

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

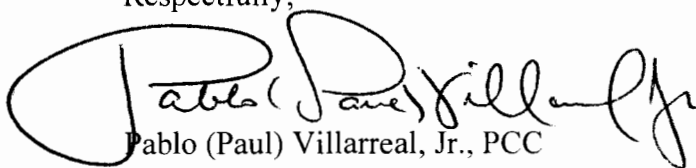
Re: See attached list

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.

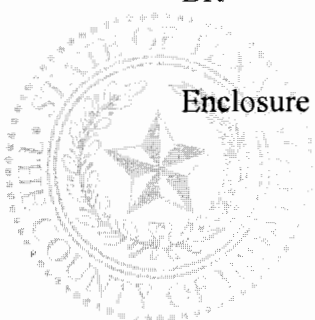
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

  
Pablo (Paul) Villarreal, Jr., PCC

BR

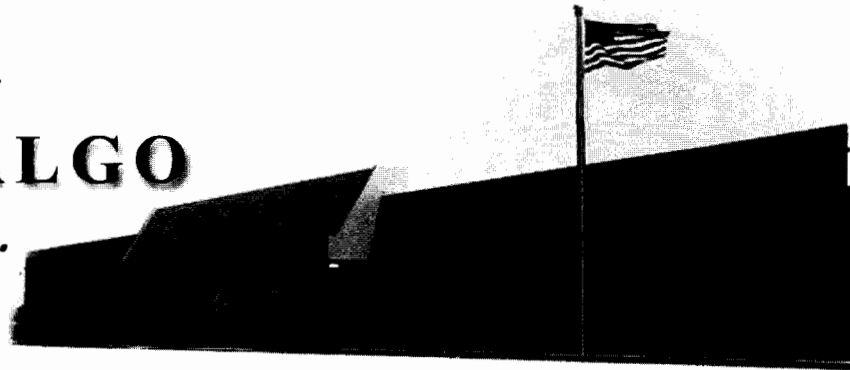
Enclosure



Office of Tax Assessor-Collector

# COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. P.C.C.



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ACCOUNT NUMBER	PAYER	AMOUNT
E5977-00-000-0011-00	IGLESIA VINO NUEVO SAN CARLOS INC	\$2,809.17
L0250-00-126-0000-00	EARLING ESTATES LLC	\$5,309.84
M1950-99-000-0010-59	LEASING ASSOC OF BARRINGTON INC	\$2,796.19
P2750-01-000-0065-00	VILLARREAL REYNALDO	\$3,101.98
W3800-00-324-0000-00	CADENA CELIA M	\$3,052.79



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>IGLESIA VINO NUEVO SAN CARLOS INC †</b>
	Present mailing address (number and street) <b>8305 CURRY RD</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78542-5865</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ENCORE RANCHES LOT 11**

<b>Step 2:</b> Describe the property	Address or location of property:	
	<b>20407267 †</b>	
	Account number of property:	Tax receipt number:
	<b>E5977.00.000.0011.00 †</b>	<b>OR 35683204, 35809563, 36118901, 36648599, 38689088</b>

<b>Step 3:</b> 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	2016	09/28 / 2017	\$ 301.76	\$ 301.76
	2.	2016	10/30 / 2017	\$ 324.46	\$ 324.46
	3.	2016	11/30 / 2017	\$ 324.46	\$ 324.46
	4.	2016	12/28 / 2017	\$ 324.46	\$ 324.46
	5.	2016	10/18 / 2018	\$ 1,534.03	\$ 1,534.03
	Taxpayer's reason for refund (attach supporting documentation):				<b>TOTAL \$2,809.17 †</b>
<b>SUPPLEMENT #32 GRANTED FULL EXEMPTION APL FILE LATE EX AS OF 1/1/2016 &amp; FORWARD BR</b>					

<b>Step 4:</b> 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
	<b>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.</b>	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b> DATE: <b>10/23/19</b> <i>RC 11-1-19 &amp; 11/5/19</i>	
	Authorized officer sign here	<i>Maria A. Durango</i>	Date	<b>11/5/19</b>
	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 Tillman †</i>	Date	<b>9/24/19</b> <i>9/26</i>

*9-28-19*

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>


**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1: Owner's name and address</b>	Owner's name <b>EARLING ESTATES LLC *</b>
	Present mailing address (number and street) <b>PO BOX 720806</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-0806</b>
	Phone (area code and number)

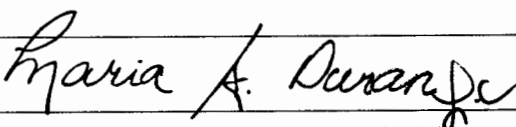
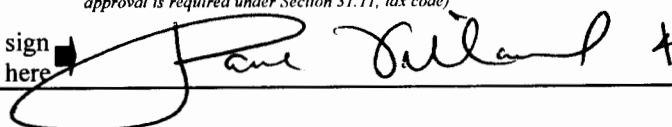
Legal description (or attach copy of the tax bill or tax receipt): **LOTT, TOWN&IMPROVEMENTS 11.93 ACS-2 IRRG TRS-W498341' EXC E57' & W223.64'-S1045.30' BLK 126: & BLK 127 S1045.3'**

<b>Step 2: Describe the property</b>	Address or location of property:	
	<b>206360 *</b>	
	Account number of property:	Tax receipt number:
	<b>L0250.00.126.0000.00 *</b>	<b>OR 40661120</b>

<b>Step 3: Give the tax payment information</b>	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	\$ 6,743.98	\$ 5,309.84
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 5,309.84 *
Taxpayer's reason for refund (attach supporting documentation): <b>Supplement #11 Clerical error property split to L0250-00-126-0000-19 due to failure to retrieve a copy of annexation ordinance payoff acct. #1232850 (\$4,527.33) refund diff to TP (\$782.51) BR</b>					

<b>Step 4: sign the form</b>	"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 <b>sign here</b> 	Date of application for tax refund
	<b>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.</b>	

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**  
DATE: **10/22/19**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b> 	Date <b>11/5/19</b>
	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) <b>sign here</b> 	Date <b>9/24/19</b> <b>9/26</b>

**67-87-19**

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>LEASING ASSOC OF BARRINGTON INC</b>
	Present mailing address (number and street) <b>220 N RIVER ST</b>
	City, town or post office, state, ZIP code <b>EAST DUNDEE, IL 60118-1332</b>

Phone (area code and number)

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

<b>Step 2:</b> Describe the property	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	
	Address or location of property: <b>676088</b>	
	Account number of property: <b>M1950.99.000.0010.59</b>	Tax receipt number: <b>40661361</b>
	<b>OR</b>	

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	\$ 7,227.50
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 2,796.19

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #11**

**SUBMITTED/ENTERED WRONG PAYOFF ACCT. #1036610 (\$20.87) REFUND**

**FULL AMT DIFF TO TP (\$2,775.32) (2,796.19) BR**

<b>Step 4:</b> 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.**

<b>Step 5:</b> 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*  
*Paul J. [Signature]*

11/5/19  
9/24/19  
9/26/19  
9-18-19

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1: Owner's name and address</b>	Owner's name <b>VILLARREAL REYNALDO †</b>
	Present mailing address (number and street) <b>707 N KIKA DE LA GARZA BLVD</b>
	City, town or post office, state, ZIP code <b>LA JOYA, TX 78560-4087</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PALMSHORES #1 LOT 65**

<b>Step 2: Describe the property</b>	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	
	Address or location of property: <b>255230 †</b>	DATE: <b>10/23/19 MR</b> <b>11-4-19 RL</b>
	Account number of property: <b>P2750.01.000.0065.00 †</b>	Tax receipt number: <b>OR 39110638</b>

<b>Step 3: Give the tax payment information</b>	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	12/03	/ 2018	\$ 4,943.94 †
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3,101.98 †

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #1**

**INCLUSION OF PROPERTY NON-EXISTENT. SOME IMPROVEMENTS**

**TRANSFERRED TO P2750-01-000-0066-00**

**BR**

<b>Step 4: sign the form</b>	"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 <b>sign here</b>	Date of application for tax refund
	<b>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.</b>	

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b>	Date <b>11/5/19</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.14, tax code) <b>sign here</b>	Date <b>9/24/19</b> <b>9/26 †</b>

*Maria A. Duran*  
*Paul Villarreal †*

**67-979**

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1: Owner's name and address</b>	Owner's name <b>CADENA CELIA M</b>
	Present mailing address (number and street) <b>2354 EL PINTO RD</b>
	City, town or post office, state, ZIP code <b>SULLIVAN CITY, TX 78595-2064</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT BEING AN IRR TRACT-S11.9AC FT 324 11.90AC GR 11.81AC NET**

<b>Step 2: Describe the property</b>	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>	
	DATE: <b>10/23/19</b>	
	Address or location of property: <b>325312</b>	<b>11-4-19</b>
	Account number of property: <b>W3800.00.324.0000.00</b>	Tax receipt number: <b>OR 40674634</b>

<b>Step 3: Give the tax payment information</b>	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	\$ 4,822.67
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 3,052.79

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #1**  
**ALL IMPROVEMENTS DOUBLE ASSESSED WITH T3400-00-000-0003-04**  
**BR**

<b>Step 4: sign the form</b>	"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 <b>sign here</b>	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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <b>sign here</b>	Date <b>11/5/19</b>
	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) <b>sign here</b>	Date <b>9/24/19</b>

**9/26**

**CAO 9/18/19**