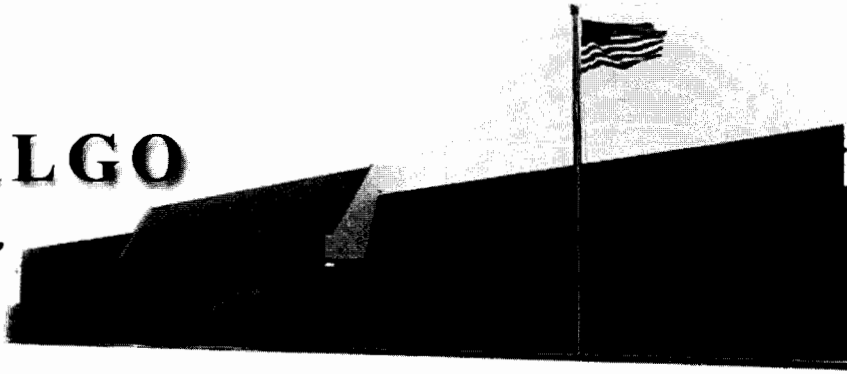


Office of Tax Assessor-Collector

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

November 7, 2019

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

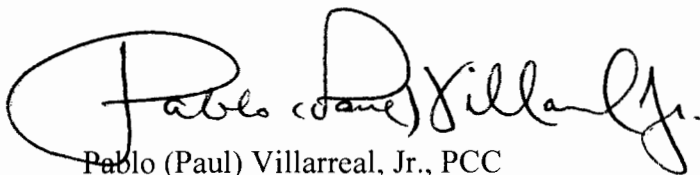
Re: See attached list

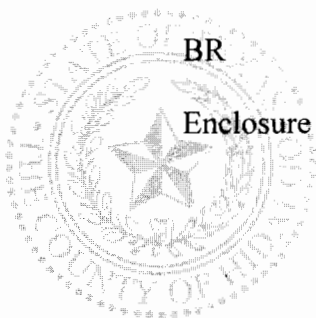
Gentlemen:

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,

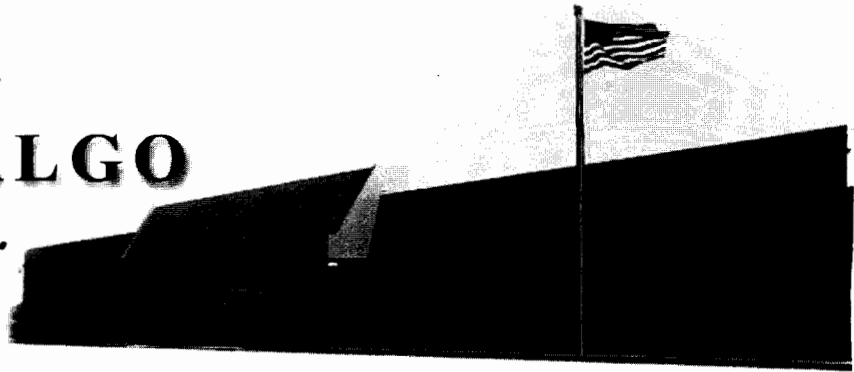

Pablo (Paul) Villarreal, Jr., PCC



Office of Tax Assessor-Collector

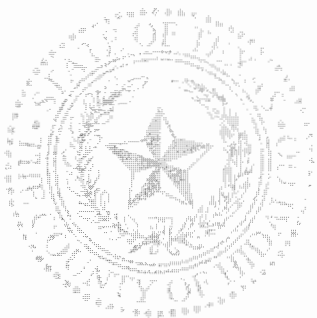
COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
C8230-04-014-0001-00	CPR 2800 TRENTON LTD	\$87,326.28
D7990-01-000-0001-00	DRURY SOUTHWEST INC	\$10,286.50
S3003-00-000-005A-00	WEINGARTEN SHARY SOUTH JV	\$69,037.85
S3003-00-000-005A-00	WEINGARTEN SHARY SOUTH JV	\$67,993.65
T0070-00-000-0002-00	DRURY SOUTHWEST INC	\$5,143.25
T6835-2C-000-0001-00	COLE KO MCALLEN TX LLC	\$45,793.68
T6835-2C-000-0001-00	COLE KO MCALLEN TX LLC	\$67,137.06



2804 S. Bus. Hwy 281 • Edinburg, TX 78539

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 CPR 2800 TRENTON LTD ^A (Paid by Corelogic)
	Present mailing address (number and street) 823 CONGRESS AVE STE 600
	City, town or post office, state, ZIP code AUSTIN, TX 78701-2647

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CORNERSTONE MEDICAL PARK PH 4 LOT 1 BLK 14**

Step 2: Describe the property	Address or location of property: 652755 ^A
	Account number of property: C8230.04.014.0001.00 ^A
	Tax receipt number: 40472698
	OR

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 ^A	01/31	/ 2019	\$ 253,952.28
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 87,326.28 ^A

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2966-18-C**

PER ORDER PAY BY: DECEMBER 3, 2019

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: 10/30/2019 ^{DC 11/5/19} ^{ll 11-4-19}
	Authorized officer sign here	Date 11/5/19
	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 9/24/19 9/26

9/16/19

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 DRURY SOUTHWEST INC 4
	Present mailing address (number and street) 101 FARRAR DR
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DRURY INN & SUITES NO. 1 MCALLEN LOT 1**

Step 2: Describe the property	Address or location of property:
	1015918 4
	Account number of property: Tax receipt number:
	D7990.01.000.0001.00 4 OR 40607442

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	01/31	/ 2019	\$ 92,578.50
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 10,286.50 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3252-18-I 4**

PER ORDER PAY BY: NOVEMBER 27, 2019

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>		

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: 10/30/2019
	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	Maria A. Duran	11/5/19

CAF 9-16-19

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 WEINGARTEN SHARY SOUTH JV ATTN: KOHL'S DEPARTMENT STORES
	Present mailing address (number and street) PO BOX 2148
	City, town or post office, state, ZIP code MILWAUKEE, WI 53201-2148
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARYLAND PLACE LOT 5A**

Step 2: Describe the property	Address or location of property:
	722796
	Account number of property: S3003.00.000.005A.00
	Tax receipt number: OR 37173439

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	01/23 / 2018	\$ 251,492.28	\$ 69,037.85
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 69,037.85
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-4054-17-GA					
DUE BY DECEMBER 22, 2019					
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: 10/21/2019
	Authorized officer sign here	Maria A. Duran	Date 11/5/19
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.1, tax code) sign here	Jane Holland	Date 10/07/19

10/7/19 CAP 10-4-19

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 WEINGARTEN SHARY SOUTH JV 4 ATTN: KOHL'S DEPARTMENT STORES 4
	Present mailing address (number and street) PO BOX 2148
	City, town or post office, state, ZIP code MILWAUKEE, WI 53201-2148

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHARYLAND PLACE LOT 5A**

Step 2: Describe the property	Address or location of property: 722796 4
	Account number of property: S3003.00.000.005A.00 4
	Tax receipt number: OR 41099508

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	03/29 / 2019	\$ 250,856.97	\$ 67,993.65
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 67,993.65 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4054-17-G 4**

DUE BY DECEMBER 22, 2019

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: 10/21/19
	Authorized officer sign here	Date 11/5/19
	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 10/07/19

10/7/19

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 DRURY SOUTHWEST INC 4
	Present mailing address (number and street) 101 FARRAR DR
	City, town or post office, state, ZIP code CAPE GIRARDEAU, MO 63701-4905
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **T.M.J.C. LOT 2**


Step 2: Describe the property	Address or location of property:
	293624 4
	Account number of property: T0070.00.000.0002.00 4
	Tax receipt number: OR 40607324



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	01/31	/ 2019	\$ 39,088.70
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 5,143.25 4

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3251-18-E**

PER ORDER PAY BY: NOVEMBER 26, 2019

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>		

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: 10/30/2019 DC 11/5/19
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 311.11, tax code) sign here 		Date 11/5/19 9/29/19 9/26

CRP 9-16-19

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 COLE KO MCALLEN TX LLC ✗ C/O KOHL'S DEPT STORES ✗
	Present mailing address (number and street) PO BOX 2148
	City, town or post office, state, ZIP code MILWAUKEE, WI 53201-2148

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TRENTON CROSSING SHOPPING CENTER PH 2C LOT 1**

Step 2: Describe the property	Address or location of property:
	20406195 ✗
	Account number of property: Tax receipt number:
	T6835.2C.000.0001.00 ✗ OR 37173439

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	01/23 / 2018	\$ 179,420.51	\$ 45,793.68
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 45,793.68 ✗

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-4054-17-G ✗**

DUE BY DECEMBER 22, 2019

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: 10/21/19 <i>Ch</i> 11-4-19 <i>ll</i>
	Authorized officer sign here ➡ <i>Maria A. Duran</i>	Date 11/5/19
	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 ➡ <i>Jane Gilliland ✗</i>	Date 10/07/19

10/7/19 *ll* **10-4-19**

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 COLE KO MCALLEN TX LLC † C/O KOHL'S DEPT STORES †
	Present mailing address (number and street) PO BOX 2148
	City, town or post office, state, ZIP code MILWAUKEE, WI 53201-2148
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TRENTON CROSSING SHOPPING CENTER PH 2C LOT 1**

Step 2: Describe the property	Address or location of property: 20406195 †
	Account number of property: T6835.2C.000.0001.00 †
	Tax receipt number: OR 41265503

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	05/31 / 2019	\$ 200,946.89	\$ 67,137.06
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 67,137.06 †
Taxpayer's reason for refund (attach supporting documentation): COURT ORDER #C-4054-17-G †					
DUE BY DECEMBER 22, 2019					
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: 10/21/19 <i>OK</i> 11/5/19 <i>OK</i> 11-9-19 <i>OK</i>	
	Authorized officer sign here →	Maria A. Durango	Date	11/5/19
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 →	Paul Williams †	Date	10/07/19 <i>OK</i> 10/7/19 <i>OK</i>