

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)

May 8, 2020

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

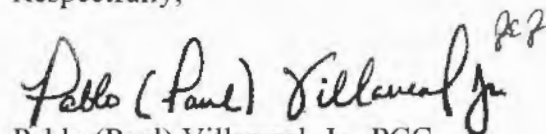
Re: See attached list

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

NR

Enclosure



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

Office of Tax Assessor-Collector

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ACCOUNT NUMBER	PAYER	AMOUNT
10049.00.003.0000.05	CIL FRESH PROPERTIES LLC	\$2,582.88
B4304.00.000.0106.00	TORRES CRISTELA N	\$3,237.88
K2400.00.000.0116.01	281 DISTRIBUTION CENTER LP	\$4,095.34
K3352.00.000.000A.00	HIC TEXAS I LLC	\$36,236.89
L0670.00.000.0054.00	WHEAT CHRISTOPHER S & ELVIA S	\$4,204.87
L1300.00.000.0056.02	RIVERSIDE DEVELOPMENT SERVICES LLC	\$10,225.83
N3400.00.000.2187.01	MOZINGO JOHN N & SHELLY B	\$2,763.44
N3400.00.000.2188.00	MOZINGO JOHN N & SHELLY B	\$3,356.87
N6600.02.006.0001.00	MCALLEN APARTMENTS LLC	\$4,224.32
R2255.02.000.0152.00	SIKORA TIMOTHY & ROSEANN M	\$4,783.72
S1000.99.000.0000.L6	VW CREDIT LEASING LTD	\$2,617.53
S5800.00.000.0021.00	MERCADO ANTONIO E ET AL	\$3,214.65
S5950.00.002.0002.01	DHR REAL ESTATE MANAGEMENT LLC	\$5,249.40



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ACCOUNT NUMBER	PAYER	AMOUNT
S5950.00.002.0002.01	DHR REAL ESTATE MANAGEMENT LLC	\$7,304.65
S5950.00.002.0002.01	DHR REAL ESTATE MANAGEMENT LLC	\$6,575.95
T2500.99.000.0005.02	GALVOTEC ALLOYS INC	\$3,631.98
T3075.02.000.008A.00	SOUTH MCALLEN APARTMENTS LP	\$14,603.89
T5520.02.000.000A.00	DHR REAL ESTATE PARTNERS LTD	\$4,083.46
T6820.00.000.0009.00	RODRIGUEZ ROEL & JESSICA	\$4,977.94
T6865.00.000.0002.00	EDINBURG MOB PROPERTIES	\$31,073.38
U2080.99.000.0001.B4	GATEHOUSE MEDIA TEXAS HOLDINGS II INC	\$3,129.87
V1200.00.000.0001.00	LOS FUENTES VILLAGE LLC	\$11,803.52
W3100.00.001.0007.00	REINITZ MARK D	\$2,517.62
W3800.00.002.0000.00	CIL PROPERTIES LLC	\$43,693.26
W3630.00.002.0076.00	MEZA CLAUDIA & JESSE	\$2,907.27



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

# 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

Step 1: Owner's name and address	Owner's name <b>CIL FRESH PROPERTIES LLC X</b>
	Present mailing address (number and street) <b>802 TRINITY ST</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78572</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PORCION 49 N 464'-S 2468.6'-W968.36-E1250'SH3 10.32 AC GR 9.19 AC NET**

Step 2: Describe the property	Address or location of property:
	<b>101436 X</b>
	Account number of property: <span style="float: right;">Tax receipt number:</span>
	<b>10049.00.003.0000.05 X</b> <span style="float: right;"><b>OR 43360939</b></span>

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	2019 X	01/29 / 2020	\$ 10,195.61	\$ 2,582.88
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,582.88 X

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE**

**SECTION 41.4111 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 <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>	

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: <b>04/28/2020</b> <i>RC</i> <b>5-5-20 RC</b>
	Authorized officer <b>sign here</b>	<b>Maria A. Duran</b>	Date <b>5-6-2020</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>	<b>Jane Gill</b> X	Date <b>4/7/2020</b>

4/7

JF 3-20-2020

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHID-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSI-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>TORRES CRISTELA N *</b>
	Present mailing address (number and street) <b>9211 N 26<sup>TH</sup> LN</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **BRISAS DEL NORTE LOT 106**


<b>Step 2:</b> Describe the property	Address or location of property: <b>692179 *</b>
	Account number of property: <b>B4304.00.000.0106.00 *</b>
	Tax receipt number: <b>OR 39234671</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 *	12/12	/ 2018	\$ 3,237.88
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3,237.88 *

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**GRANT FRSS FILE LATE Q/Y 2018**

**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
<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: <u>04/28/2020</u> <i>GL</i> <b>5-5-20</b> <i>RP</i>
	Authorized officer sign here 	Date <b>5-6-2020</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) sign here 	Date <b>4/7/2020 *</b>

4/7

SE 3-30-2020

# 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>281 DISTRIBUTION CENTER LP X</b>
	Present mailing address (number and street) <b>1120 E PRODUCE RD</b>
	City, town or post office, state, ZIP code <b>HIDALGO, TX 78557-4326</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **KELLY PHARR TRACT 9.39AC BEING W1246.4'-S354.24' EXC E135'-S245'-LOT 116 9.39 AC GR 8.49AC NET**


<b>Step 2: Describe the property</b>	Address or location of property:
	<b>202368 X</b>
	Account number of property: <b>K2400.00.000.0116.01 X</b>
	Tax receipt number: <b>40788377,40788389,40788492,43713987</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 X	02/20	/ 2019	\$ 1,435.05
2.	2018 X	02/20	/ 2019	\$ 742.42	\$
3.	2018 X	02/20	/ 2019	\$ 2,686.00	\$ 1,161.95
4.	2018 X	01/31	/ 2020	\$ 42,853.92	\$ 2,933.39
5. TOTAL			/	\$	\$ 4,095.34

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215**

**WRONG LAND RATE APPLIED**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>04/24/2020</b> <i>CSL</i> <b>5-5-20</b> <i>RLC</i>
	Authorized officer sign here 	Date <b>5-6-2020</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) sign here 	Date <b>4/7/2020</b>

417 JE  
4-1-2020

# 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>

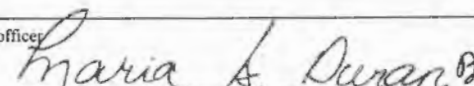
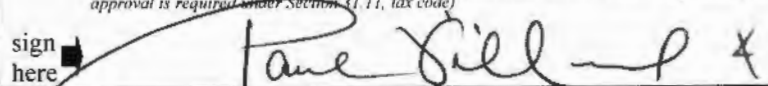
To apply for a tax refund, the taxpayer must complete the following

<b>Step 1: Owner's name and address</b>	Owner's name <b>HIC TEXAS I LLC X</b>
	Present mailing address (number and street) <b>900 E LAKEVIEW DR</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501-5723</b>
	Phone (area code and number)

<b>Step 2: Describe the property</b>	Legal description (or attach copy of the tax bill or tax receipt): <b>KEYSTONE APARTMENTS LOT A</b>
	Address or location of property: <b>577433 X</b>
	Account number of property: <b>K3352.00.000.000A.00 X</b>
	Tax receipt number: <b>OR 43115168</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	2019 X	01/23 / 2020	\$ 198,298.69	\$ 36,236.89
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 36,236.89 X
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT #6 / RF 200215</b>					
<b>THIS IS AN INCORRECT APPRAISAL ERROR FOR 2019 YEAR/SECTION 25.25(h)</b>					
<b>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>		

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>05/05/2020</b> <i>JL 5/7/2020</i> <b>5-6-20 ll</b>
	Authorized officer <b>sign here</b> 	Date <b>5-7-2020</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>4/7/2020</b> <b>4/7</b>

*JE 3.30.2020*

# 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-CW1-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>WHEAT CHRISTOPHER S &amp; ELVIA S X</b>
	Present mailing address (number and street) <b>4116 VIOLET AVE</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-5474</b>
	Phone (area code and number)


<b>Step 2:</b> Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>LA CANTERA ESTATES LOT 54</b>
	Address or location of property: <b>698194 X</b>
	Account number of property: <b>L0670.00.000.0054.00 X</b> OR <b>42324798</b>
	Tax receipt number:

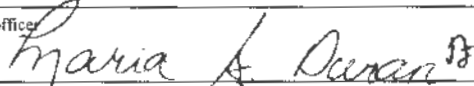

<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2019 X	12/18	/ 2019	\$ 4,664.98
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4,204.87 X

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**GRANT DVHS FILED LATE Q/Y 2019 PRORATE BEGIN DATE 2/6/19**

**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
	<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	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>05/06/2020</b> <i>PL 5/1/2020</i>
	Authorized officer sign here 	Date <b>5-7-2020</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) sign here 	Date <b>4/7/2020</b> <b>4/7</b>

JFE  
3-30-2020

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SS1-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SMI-SMS-SS1-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>RIVERSIDE DEVELOPMENT SERVICES LLC X</b>
	Present mailing address (number and street) <b>604 WISTERIA AVE</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-2898</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA LOMITA (HOIT) AN IRR TR E135.10'-S660.19'-LOT 55 & S660.19'-LOT56 EXC E675'-N270.14'-SD515' & EXC E1096.69'-S244.86' 11.39AC GR 11.27 AC**

<b>Step 2:</b> Describe the property	Address or location of property:
	<b>210574 X</b>
	Account number of property:
	<b>L1300.00.000.0056.02 X</b> OR <b>41620311</b>
	Tax receipt number:

<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	2019 X	10/17 / 2019	\$ 19,477.76	\$ 10,225.83
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 10,225.83 X
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT #6 / RF 200215</b>					
<b>WRONG LAND RATE APPLIED</b>					
<b>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		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>05/06/2020</u> <i>GA</i>	
	Authorized officer sign here	<i>Maria A Duran</i>	Date	<i>5-7-2020</i>
	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>Jane Hill</i> X	Date	<i>4/7/2020</i> <i>4/7</i>

*JE 3/30/2020*



# 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>MOZINGO JOHN N &amp; SHELLY B</b>
	Present mailing address (number and street) <b>PO BOX 36</b>
	City, town or post office, state, ZIP code <b>LA VILLA, TX 78562-0036</b>
	Phone (area code and number)
Legal description (or attach copy of the tax bill or tax receipt): <b>NORTH CAPISALLO BK 2187 AN IRR TR-2608.76'-N545'-BLK 2187 6.42AC NET</b>	

<b>Step 2: Describe the property</b>	Address or location of property:	
	<b>246178</b>	
	Account number of property:	Tax receipt number:
	<b>N3400.00.000.2187.01</b>	<b>OR 43591589</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	2019	01/31 / 2020	\$ 6,611.71	\$ 2,763.44
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,763.44
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT #6 / RF 200215</b>					
<b>CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SEC 41.411</b>					
<b>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
	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		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>05/05/2020 gcl</u> <b>5-6-20 ll</b>	
	Authorized officer <b>sign here</b>	<b>Maria A Duran</b>	Date	<b>5-7-2020</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>	<b>Paul Gallman</b>	Date

JE  
3/31-2020

# 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>MOZINGO JOHN N &amp; SHELLY B</b>
	Present mailing address (number and street) <b>PO BOX 36</b>
	City, town or post office, state, ZIP code <b>LA VILLA, TX 78562-0036</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **NORTH CAPISALLO AN IRR E406.88'-S725.44'-BLK 2188 3.35 AC NET**

<b>Step 2:</b> Describe the property	Address or location of property: <b>246181</b>
	Account number of property: <b>N3400.00.000.2188-00</b>
	Tax receipt number: <b>OR 43591589</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	2019	01/31	/ 2020	\$ 7,957.25
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3,356.87

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**  
**CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SEC 41.411**  
**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 <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:</b> 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: <b>05/05/2020</b>
	Authorized officer <b>sign here</b> <i>Maria A Duran</i>	Date <b>5-7-2020</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 41.41 tax code) <b>sign here</b> <i>Paul Williams</i>	Date <b>4/7/2020</b>

**4/7**  
**JE 5/7/2020**

# 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>MCALLEN APARTMENTS LLC</b>
	Present mailing address (number and street) <b>5301 N 17<sup>TH</sup> ST</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-4446</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **NORTH PARK ESTATES #2 LOTS 1-4 BLK 6**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>248719</b>
	Account number of property: <b>N6600.02.006.0001.00</b>
	Tax receipt number: <b>OR 42924581</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	2019	01/16	/ 2020	\$ 61,775.52
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4,224.32

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS AN INCORRECT APPRAISAL ERROR FOR 2019 YEAR. SECTION 25.25(H)**

**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	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>05/06/2020</b>
	Authorized officer <b>sign here</b> <i>Maria A. Duran</i>	Date <b>5-7-2020</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> <i>Paul Saldaña</i>	Date <b>4/7/2020</b>

4/7

JFE 3/31/2020

# 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>SIKORA TIMOTHY &amp; ROSEANN M #</b>
	Present mailing address (number and street) <b>3916 N POTSDAM AVE NO 927</b>
	City, town or post office, state, ZIP code <b>SIOUX FALLS, SD 57104-7048</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RETAMA VILLAGE PH 2 LOT 152**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>727948 #</b>
	Account number of property: <b>R2255.02.000.0152.00 #</b>
	Tax receipt number: <b>OR 42224943</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		2019	12/12	/ 2019	\$ 5,774.66
2.				/	\$	\$
3.				/	\$	\$
4.				/	\$	\$
5. TOTAL				/	\$	\$ 4,783.72 #

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #26 / RF 200215**

**GRANT DVHS FILED LATE Q/Y 2019**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer:		DATE: <b>4-30-2020 JG</b> <b>5/5/2020</b>
	sign here	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)	Date

sign here

Date **4/7/2020**

**4/7**

**JE 3/31/2020**

# 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-SJ.V-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>VW CREDIT LEASING LTD #</b> <b>ATTN: TAX DEPT</b>
	Present mailing address (number and street) <b>1401 FRANKLIN BLVD</b>
	City, town or post office, state, ZIP code <b>LIBETVILLE, IL 60048-4460</b>

Phone (area code and number)

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

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>1019021 #</b>
	Account number of property: <b>S1000.99.000.0000.L6 #</b>
	Tax receipt number: <b>OR 40037176</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	01/22	/	2019	\$ 29,941.21
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5. TOTAL			/		\$	\$ 2,617.53 #

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215**

**PERSONAL PROPERTY IN GASTON COUNTY VIN #3VW2K7AJ2FM423992**

**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		<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer <b>sign here</b> <i>Maria A. Duran</i>		Date <b>5-6-2020</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> <i>Paul Hillant</i>		Date <b>4/7/2020</b>

**4/7**

*JE 3/7/2020*

# 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>MERCADO ANTONIO E ET AL #</b>
	Present mailing address (number and street) <b>PO BOX 3154</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78573-0054</b>
	Phone (area code and number)

<b>Step 2:</b> Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>ST LOUIS GROVES LT 21 &amp; 22 20.20 AC</b>
	Address or location of property:
	<b>289747 #</b>
	Account number of property: <b>S5800.00.000.0021.00 #</b> OR Tax receipt number: <b>43361596</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	2019	01/29 / 2020	\$ 35,385.29	\$ 3,214.65
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL.		/	\$	\$ 3,214.65 ✓
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT #26 / RF 200215</b>					
<b>CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE.SEC 41.411</b>					
<b>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 <b>sign here</b> [Signature]	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>5-1-2020 JG</b> <b>5-5-20</b> [Signature]
	Authorized officer <b>sign here</b> [Signature: Maria A Duran #]	Date <b>5-6-2020</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> [Signature: Paul Tillman]	Date <b>4/7/2020</b>

4/7  
JE  
3-31-2020

# 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>DHR REAL ESTATE MANAGEMENT LLC # ATTN: EMILY RIVERA ACCTS PAYABLE</b>
	Present mailing address (number and street) <b>PO BOX 3293</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-3293</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **STEELE & PERSHING E360'-S535'-EXC N97'-E65'- LOT 2 BLK 2 J.28AC GR 3.88AC NET**

<b>Step 2: Describe the property</b>	Address or location of property: <b>289948 #</b>
	Account number of property: <b>S5950.00.002.0002.01 #</b>
	Tax receipt number: <b>OR 37484164</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	2017	01/31 / 2018	\$ 9,289.98	\$ 5,249.40
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 5,249.40

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #26 / RF 200215**

**WRONG LAND RATE APPLIED PER APPRAISER REVIEW**

**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>5-5-20</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>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer <b>sign here</b>	Date <b>5-6-2020</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>4/7/2020</b>

417

JF  
5/31/2020

# 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-SFB-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>DHR REAL ESTATE MANAGEMENT LLC #</b> <b>ATTN: EMILY RIVERA ACCTS PAYABLE</b>	
	Present mailing address (number and street) <b>PO BOX 3293</b>	
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-3293</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **STEELE & PERSHING E360'-S535'-EXC N97'-E65'- LOT 2 BLK 2 J.28AC GR 3.88AC NET**


<b>Step 2:</b> Describe the property	Address or location of property:	
	<b>289948 #</b>	
	Account number of property:	Tax receipt number:
	<b>S5950.00.002.0002.01 #</b>	<b>OR 40419759</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	2018	01/31	/ 2019	\$ 11,852.67
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 7,304.65


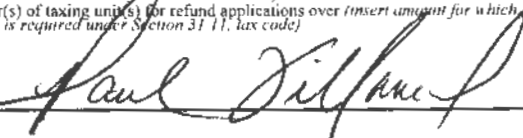
Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215**

**WRONG LAND RATE APPLIED PER APPRAISER REVIEW**

**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		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>5-1-2020 JG</b> <b>5-5-20 KP</b>	
	Authorized officer sign here 	Date <b>5-6-2020</b>	<b>4/7/2020</b> <b>417</b>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code) sign here 	Date		

**JE**  
**3-31-2020**

# 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

Step 1: Owner's name and address	Owner's name <b>DHR REAL ESTATE MANAGEMENT LLC ✗</b> <b>ATTN: EMILY RIVERA ACCTS PAYABLE</b>	
	Present mailing address (number and street) <b>PO BOX 3293</b>	
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504-3293</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **STEELE & PERSHING E360'-S535'-EXC N97'-E65'- LOT 2 BLK 2 J.28AC GR 3.88AC NET**

Step 2: Describe the property	Address or location of property:	
	<b>289948 ✗</b>	
	Account number of property:	Tax receipt number:
	<b>S5950.00.002.0002.01 ✗</b>	<b>OR 43470563</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	2019	01/31	/ 2020	\$ 11,031.77
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 6,575.95

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**  
**WRONG LAND RATE APPLIED PER APPRAISER REVIEW**  
**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 <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.**

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: <b>5-1-2020 - JG</b> <b>5-6-20 ll</b>
	Authorized office <b>sign here</b>	Date <b>5-7-2020</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>4/7/2020</b>	

4/7  
JE  
3-31-2020

# 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-SSI-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>GALVOTEC ALLOYS INC #</b>
	Present mailing address (number and street) <b>6712 S 36<sup>TH</sup> ST</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78503-8817</b>

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY SUPPLIES MACHINERY FURNITURE FIXTURES & EQUIPMENT AT 2901B HW 83 (REAR) / NEW ACCT 2018**


<b>Step 2: Describe the property</b>	Address or location of property:
	<b>1129884 #</b>
	Account number of property: <b>T2500.99.000.0005.02 #</b>
	Tax receipt number: <b>OR 42757631</b>


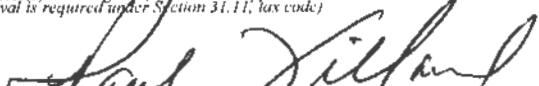
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2018	01/08 / 2020	\$ 3,631.98	\$ 3,631.98
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,631.98 #

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**PERSONAL PROPERTY DAW R2950.99.005.0009.01**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	<b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Authorized officer sign here 	Date <b>5-6-2020</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) sign here 	Date <b>4/7/2020</b>

**DATE: 5-1-2020 JG**

**5-5-20 ll 5/5/2020**

**4/7**

**JE 3-31-2020**

# 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>SOUTH MCALLEN APARTMENTS LP #</b>
	Present mailing address (number and street) <b>4900 W EXPRESSWAY 83 SUITE 227</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501-3053</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **THE DISTRICT AT MCALLEN PPH 2 LOT 8A**


<b>Step 2:</b> Describe the property	Address or location of property: <b>701847 #</b>
	Account number of property: <b>T3075.02.000.008A.00 #</b>
	Tax receipt number: <b>OR 43284641</b>

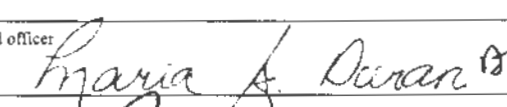
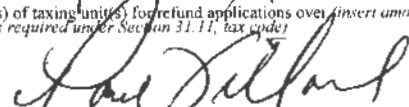
<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2019	01/29	/ 2020	\$ 175,942.03
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 14,603.89 #

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS A CLERICAL ERROR FOR 2019 YEAR. SUBMITTED/ENTERED WRONG.**

**FAILURE TO GIVE DUE PROCESS IN A TIMELY MANNER. 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 <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:</b> 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: <b>5-1-2020 JG</b>
	Authorized officer <b>sign here</b> 	Date <b>5-6-2020</b>
	Collector(s) of taxing unit(s) for refund applications over approval is required under Section 31.11, tax code <b>sign here</b> 	Date <b>4/7/2020</b>

4/7

JF  
3/2/2020

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHID-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>DHR REAL ESTATE PARTNERS LTD #</b> <b>ATTN: EMILY RIVERA ACCTS PAYABLE</b>	
	Present mailing address (number and street) <b>PO BOX 3293</b>	
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78502-3293</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TIMBERWALK #2 LOT A**

<b>Step 2:</b> Describe the property	Address or location of property:	
	<b>609067 #</b>	
	Account number of property:	Tax receipt number:
	<b>T5520.02.000.000A.00 #</b>	<b>OR 43470563</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	2019	01/31	/ 2020	\$ 16,333.80
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4,083.46 #

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS AN INCORRECT APPRAISAL ERROR FOR 2019 YEAR, SECTION 25.25(h)**

**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		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	sign here		DATE: <b>5-1-2020 JG</b> <b>5-5-20 RL</b>
	Authorized officer	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)	Date
sign here		<b>5-6-2020</b>	<b>4/7/2020</b>

**4/7**

**2020**  
**JE**  
**3/31/2020**

# 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>RODRIGUEZ ROEL &amp; JESSICA</b> ✕
	Present mailing address (number and street) <b>3304 CRYSTAL FALLS AVE</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539-1828</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **TRENTON ACRES LOT 9**

**Step 2:  
Describe the property**

Address or location of property:  
**346964** ✕

Account number of property: **T6820.00.000.0009.00** ✕      OR      Tax receipt number: **42489135**

**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	2019 ✕	12/30 / 2019	\$ 12,939.68	\$ 4,977.94
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 4,977.94 ✕

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215 THIS IS A NON-CLERICAL ERROR FOR 2019 YEAR. SECTION 25.25(d).LATE CORRECTION PENALTY/APPLY \$796.19 TO ACCT #346964/REFUND DIFF \$4,181.75 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  Approved     Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: **04/29/2020** ✕      **5-5-20** *ll*

Authorized officer: **sign here** *Maria A Duran*      Date: **5-6-2020**

Collector(s) of taxing units for refund applications over (insert amount for which governing body approval is required under Section 31.11 tax code): **sign here** *Paul Hilland ✕*      Date: **4/7/2020**

**417**  
*JE 3-31-2020*

# 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>EDINBURG MOB PROPERTIES X</b> <b>ATTN: UNIVERSAL HEALTH SERVICES</b>
	Present mailing address (number and street) <b>367 S GULPH PH</b>
	City, town or post office, state, ZIP code <b>KING OF PRUSSIA, PA 19406-3121</b>
	Phone (area code and number) <b>(956) 318-2157</b>


<b>Step 2: Describe the property</b>	Legal description (or attach copy of the tax bill or tax receipt): <b>TRENTON STREET LOT 2</b>
	Address or location of property: <b>570309 X</b>
	Account number of property: <b>T6865.00.000.0002.00 X</b>
	Tax receipt number: <b>OR 43357536</b>


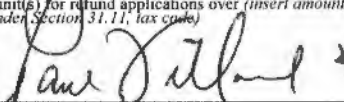
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2019 X	01/30	/ 2020	\$ 112,697.38
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 31,073.38 X

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS AN INCORRECT APPRAISAL ERROR FOR 2019 YEAR. SECTION 25.25 (H)**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>04/28/2020</b> <i>DC 5/5/2020</i>
	Authorized officer sign here 	Date <b>5-6-2020</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) sign here 	Date <b>4/7/2020</b>

417  
JE  
3/2/2020

# 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>GATEHOUSE MEDIA TEXAS HOLDINGS II INC X</b>
	Present mailing address (number and street) <b>175 SULLY'S TRAIL</b>
	City, town or post office, state, ZIP code <b>PITTSFORD, NY 14534-4560</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 4500 N 10<sup>TH</sup> STE 155/NEW ACCT 2019**


<b>Step 2: Describe the property</b>	Address or location of property:
	<b>1181748 X</b>
	Account number of property:
	<b>U2080.99.000.0001.B4 X</b>
	Tax receipt number:
	<b>OR 42377121</b>


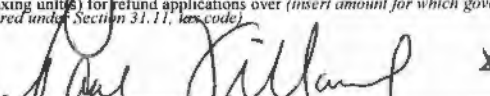
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES X	2019	12/30 / 2019	\$ 3,285.20	\$ 3,129.87
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,129.87 X

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**Correction of Non-clerical error [Sec 25.25(D)] 10% Late Correction Penalty. / Apply \$15.53**

**to acct. #1181748 & \$29.15 to acct. #963795 / refund \$3,085.19 to TP. 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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here 	Date 5-6-2020
	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 4/7/2020 X

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE *5/5/2020*  
DATE: *04/28/2020* *5-5-20 RL*

*JE 3-31-2020*

*417*

# 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>LOS FUENTES VILLAGE LLC</b> ✕
	Present mailing address (number and street) <b>1470 APACHE CT</b>
	City, town or post office, state, ZIP code <b>CAMARILLO, CA 93010-3662</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **VALLEY GARDENS LOT 1**

<b>Step 2:</b> Describe the property	Address or location of property:
	<b>312889</b> ✕
	Account number of property: <b>V1200.00.000.0001.00</b> ✕
	Tax receipt number: <b>OR 42461850</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	2019 ✕	12/27	/ 2019	\$ 50,995.95
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 11,803.52 ✕

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #6 / RF 200215**

**THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE.**

**SECTION 41.411**

**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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: **04/28/2020** *cy* **5-5-20** *AE*

*Acst/10/2020*

*Maria A. Duran*  
*Raul Villalobos* ✕

**5-4-2020**  
**4/7/2020**

**417**  
*JE*  
*3-31-2020*

# 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>REINITZ MARK D X</b>
	Present mailing address (number and street) <b>2001 DAFFODIL AVE</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501-6157</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST HARVEY ADDN UT NO. 1 & NO. 2 E47' LOT 7 & W40' LOT 8 BLK 1**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>323669 X</b>
	Account number of property: <span style="float: right;">Tax receipt number:</span>
	<b>W3100.00.001.0007.00 X</b> <span style="float: right;"><b>OR 39117750</b></span>

<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 X	12/04	/ 2018	\$ 2,517.62
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2,517.62 X

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215**

**GRANT DVHS FILED LATE Q/Y 2017 PRORATE BEGIN DATE 4/26/2017**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>04/28/2020</u> <i>AK/ST/2020</i> 5-5-20 <i>AK</i>
	Authorized officer sign here	Date <b>5-6-2020</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) sign here	Date <b>4/7/2020 X</b>

*JK*  
*3-31-2020*

# 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>CIL PROPERTIES LLC *</b>
	Present mailing address (number and street) <b>802 TRINITY ST</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78572-1612</b>
	Phone (area code and number)



Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT W20.0AC EXC A 0.06AC TRACT BEING 50'X50' FT 2 19.94 AC**

<b>Step 2: Describe the property</b>	Address or location of property: <b>324070 *</b>
	Account number of property: <b>W3800.00.002.0000.00 *</b> OR <b>42285268</b>
	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	2019 *	12/17 / 2019	\$ 141,419.05	\$ 43,693.26
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 43,693.26 *

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215 THIS IS A NON-CLERICAL ERROR FOR 2019 YEAR. SECTION 25.25(d) LATE PENALTY CORRECTION / APPLY \$9,772.58 TO ACCT. #324070 REFUND \$33,920.68 TO TP. 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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>04/29/2020</u> <i>P.C. 5/15/2020</i> <i>5-5-20 ll</i>
	Authorized officer sign here  <i>Maria A. Duran</i>	Date <b>5-6-2020</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) sign here  <i>Paul Sillman</i> *	Date <b>4/7/2020</b>

*JE 2-31-2020*

# 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>MEZA CLAUDIA &amp; JESSE</b> (Copy Acct ACT = Unknown)
	Present mailing address (number and street) <b>3003 GINGER AVE</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539-3449</b>

Legal description (or attach copy of the tax bill or tax receipt): **WEST MEADOW LOT 76 BLK 2**

<b>Step 2: Describe the property</b>	Address or location of property: <b>668507</b> X
	Account number of property: <b>W3630.00.002.0076.00</b> X
	Tax receipt number: <b>42324808</b>
	OR

<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	2019	12/18	/ 2019	\$ 6,354.20
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2,907.27

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT #16 / RF 200215**

**GRANT DVHS FILED LATE Q/Y 2019 PRORATE BEGIN DATE 7/18/19**

**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 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: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>04/29/2020</b> <i>5-5-20</i>
	Authorized officer sign here <i>Maria A Duran</i>	Date <b>5-6-2020</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) sign here <i>Paul Tillman</i> X	Date <b>4/7/2020</b>

*4/15/2020*

*4/7*

*JE 3-31-2020*