

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)

August 4, 2020

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,

A handwritten signature in black ink that reads "Pablo (Paul) Villarreal, Jr." is written over the typed name.

Pablo (Paul) Villarreal, Jr., PCC

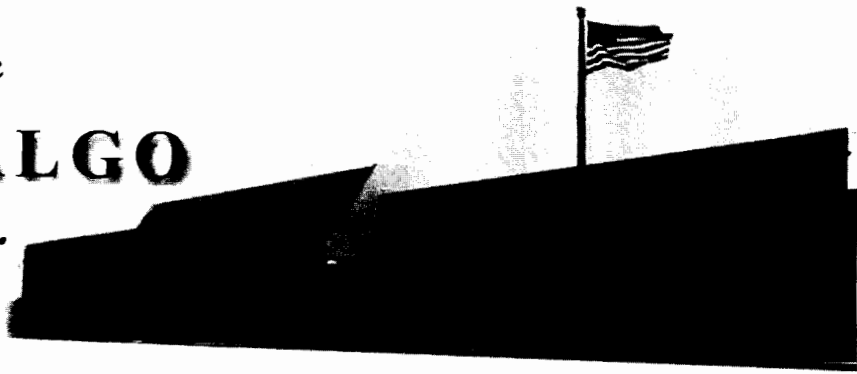
NR

Enclosure

Office of Tax Assessor-Collector

# COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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

ACCOUNT NUMBER	PAYER	AMOUNT
B2950.00.000.0002.05	WALGREEN CO	\$9,084.30
L6556.00.000.0001.00	LOWE'S HOME CENTERS INC	\$17,213.01
L6560.00.000.0004.00	LOWE'S HOME CENTERS INC	\$25,245.18
P6300.00.000.0016.10	LOWE'S HOME CENTERS INC	\$33,219.04
P7475.00.000.001B.00	LOWE'S HOME CENTERS INC	\$24,099.38
S2695.00.000.0001.00	WALGREEN CO	\$5,134.93
S5950.00.011.0002.05	BOX FAMILY LIMITED PARTNERSHIP LTD	\$2,880.22
S5950.00.011.0002.05	BOX FAMILY LIMITED PARTNERSHIP LTD	\$2,672.02



# 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>WALGREEN CO / REAL ESTATE PROPERTY TAX</b>
	Present mailing address (number and street) <b>P.O. BOX 1159</b>
	City, town or post office, state, ZIP code <b>DEERFIELD, IL 60015-5121</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **BIG ORANGE ALL LOTS 2 THRU 4 1.88AC**

<b>Step 2: Describe the property</b>	<b>R/S LOT 254 JHS 1.35 AC NET</b>
Address or location of property:	<b>675109</b>
Account number of property:	<b>B2950.00.000.0002.05</b>
Tax receipt number:	<b>OR 42848435</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	01/13 / 2020	\$ 52,644.30	\$ 9,084.30
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 9,084.30
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER #C-3875-19-A</b>					
<b>PER ORDER PAY BY: 08/13/2020</b>					
<b>NR</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
<p><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></p> <p style="text-align: right;"><b>AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE</b></p> <p style="text-align: right;"><b>DATE: 7/30/2020</b></p> <p style="text-align: right;"><i>[Signature]</i></p>		

<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>8-4-20</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>7/23/2020</b>

**7/23**

*[Handwritten signature]*

**7/22/2020**

# 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>LOWE'S HOME CENTERS INC</b> ✕
	Present mailing address (number and street) <b>1000 LOWE'S BOULEVARD</b>
	City, town or post office, state, ZIP code <b>MOORESVILLE, NC 28117-8520</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LOWE'S COMMERCIAL LOT 1 EXC E150-W227.78-**

<b>Step 2: Describe the property</b>	<b>N339.73 &amp; EXC E314.27-W542.03-N330</b>
	Address or location of property: <b>713443</b> ✕
	Account number of property: <b>L6556.00.000.0001.00</b> ✕
	Tax receipt number: <b>OR 42902099</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 ✕	01/14 / 2020	\$ 255,864.51	\$ 17,213.01
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 17,213.01

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3898-19-I** ✕

**PER ORDER PAY BY: 08/24/2020** ✕

**NR**

<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>
	DATE: <u>07/30/2020</u> ✕		<u>8/4/2020</u>
	Authorized officer sign here	<i>Maria A. Duran</i> ✕	Date <b>8-4-20</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 *Paul Vallin* ✕

Date **7/23/2020** ✕

7/23

7/22/2020

# 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>LOWE'S HOME CENTERS INC #</b>
	Present mailing address (number and street) <b>1000 LOWE'S BOULEVARD</b>
	City, town or post office, state, ZIP code <b>MOORESVILLE, NC 28117-8520</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LOWE'S OF WESLACO LOT 4**


<b>Step 2: Describe the property</b>	Address or location of property:
	<b>1180198 #</b>
	Account number of property: <b>L6560.00.000.0004.00 #</b>
	Tax receipt number: <b>OR 42902099</b>

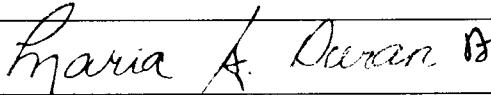
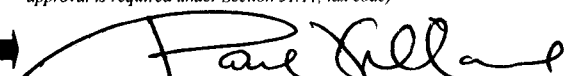
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2019	01/14	/ 2020	\$ 219,693.53
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 25,245.18 #

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3898-19-I**

**PER ORDER PAY BY: 08/24/2020**

**NR**

<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 <b>8-4-20</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>7/23/2020</b>

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**  
**DATE: 7-30-2020 JG**

**7/22/2020**

**7/23**

# 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>LOWE'S HOME CENTERS INC</b>	
	Present mailing address (number and street) <b>1000 LOWES BOULEVARD</b>	
	City, town or post office, state, ZIP code <b>MOORESVILLE, NC 28117-8520</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PHARR CITRUS ORCHARD CO. AN IRR TR W506.28LT**

**Step 2: Describe the property**

**15, LT 16 EXC S303.1-W343'&W506.28-LT 17 E386.15'LT 18 13.01 NET**

Address or location of property:  
**651308**

Account number of property: **P6300.00.000.0016.10** OR Tax receipt number: **42902099**

**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	01/14 / 2020	\$ 253,553.51	\$ 33,219.04
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 33,219.04

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3898-19-I**

**PER ORDER PAY BY: 08/24/2020**

**NR**

**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** [Signature]

Date of application for tax refund: \_\_\_\_\_

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**

DATE: **7/30/2020**  
**D. C. G. H. / 2020**

**Step 5: Tax refund Determination**

This tax refund is  Approved  Disapproved

Authorized officer: **sign here** [Signature: Maria A. Duran]

Date: **8-4-20**

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** [Signature: Fabrice and Willard]

Date: **7/23/2020**

**7/23**

**7/22/2020**

# 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>LOWE'S HOME CENTERS INC *</b>
	Present mailing address (number and street) <b>1000 LOWES BLVD</b>
	City, town or post office, state, ZIP code <b>MOORESVILLE, NC 28117-8520</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PLAZA LAS FUENTES LOT 1B**

<b>Step 2: Describe the property</b>	Address or location of property:
	<b>726296 *</b>
	Account number of property: <b>P7475.00.000.001B.00 *</b> OR <b>42902099</b>
	Tax receipt number:

<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	01/14	/ 2020	\$ 199,292.32
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 24,099.38 *

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3898-19-I**

PER ORDER PAY BY: **08/24/2020**

NR

<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	<b>Maria A. Duran</b>	Date <b>8-4-20</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>Jane [Signature]</b>	Date <b>7/23/2020</b>

7/23

7/22/2020

# 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>WALGREEN CO / C/O CHAD MIHEVE *</b>
	Present mailing address (number and street) <b>104 WILMOT RD</b>
	City, town or post office, state, ZIP code <b>DEERFIELD, IL 60015-5121</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **SHAMROCK ADVENTURE PALMHURST LOT 1**

**Step 2:  
Describe the property**

Address or location of property:  
**710775 \***

Account number of property: **S2695.00.000.0001.00 †** OR Tax receipt number: **43298221**

<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	01/29 / 2020	\$ 41,551.48	\$ 5,134.93
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 5,134.93 †

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-3875-19-A**

**PER ORDER PAY BY: 08/13/2020**

**NR**

**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** [Signature]

Date of application for tax refund: \_\_\_\_\_

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**

**DATE: 7/30/2020**  
**2-8/4/2020**

**Step 5:  
Tax refund Determination**

This tax refund is  Approved  Disapproved

Authorized officer: **sign here** [Signature: Maria A. Duranos] Date: **8-4-20**

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** [Signature: Jable (Jane) Pell †] Date: **7/23/2020**

**7/23 †**  
**7/23/2020**

# 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>BOX FAMILY LIMITED PARTNERSHIP LTD X</b>
	Present mailing address (number and street) <b>P.O. BOX 3376</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78502-3376</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **STEEL & PERSHING NE 2 AC OF E 5 AC OF W 10**

<b>Step 2: Describe the property</b>	<b>AC OF N 20AC OF LOT 2- LESS .35 AC FOR R/W-BLK 11</b>
	Address or location of property: <b>290136 X</b>
	Account number of property: <b>S5950.00.011.0002.05 X</b> OR <b>39102765</b>
	Tax receipt number:

<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	12/03	/ 2018	\$ 10,286.50
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2,880.22 X

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER #C-2876-18-D**

**PER ORDER PAY BY: 08/25/2020**

**NR**

<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>07/30/2020</b>
	Authorized officer <b>sign here</b>	Date <b>8-4-20</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>7/23/2020</b>

7/23

11/24/2020

# 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**

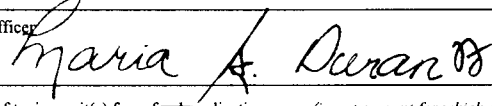
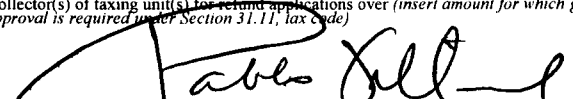
<b>Step 1:</b> Owner's name and address	Owner's name <b>BOX FAMILY LIMITED PARTNERSHIP LTD X</b>
	Present mailing address (number and street) <b>500 E PECAN BLVD</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501-9587</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **STEEL & PERSHING NE 2 AC OF E 5 AC OF W 10**

<b>Step 2:</b> Describe the property	AC OF N 20AC OF LOT 2- LESS .35 AC FOR R/W-BLK 11	
	Address or location of property: <b>290136 X</b>	
	Account number of property: <b>S5950.00.011.0002.05 X</b>	Tax receipt number: <b>OR 42091750</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 X	12/04 / 2019	\$ 10,277.00	\$ 2,672.02
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,672.02
Taxpayer's reason for refund (attach supporting documentation): <b>COURT ORDER #C-2876-18-D X</b>					
<b>PER ORDER PAY BY: 08/25/2020 X</b>					
<b>NR</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>07/30/2020</u> <i>ae</i> <u>8/4/2020</u>	
	Authorized officer sign here 	Date 8-4-20		
	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 7/23/2020 GAP		

7/23

7/22/2020