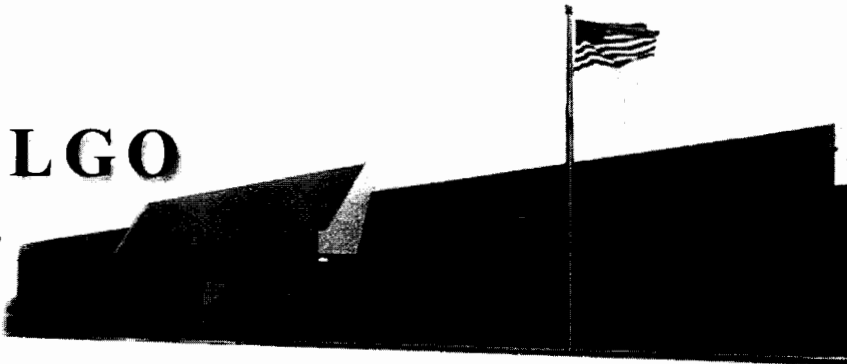


Office of Tax Assessor-Collector

# 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)

March 31, 2021

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

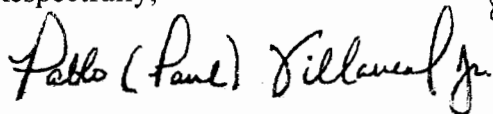
Re: See attached list

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

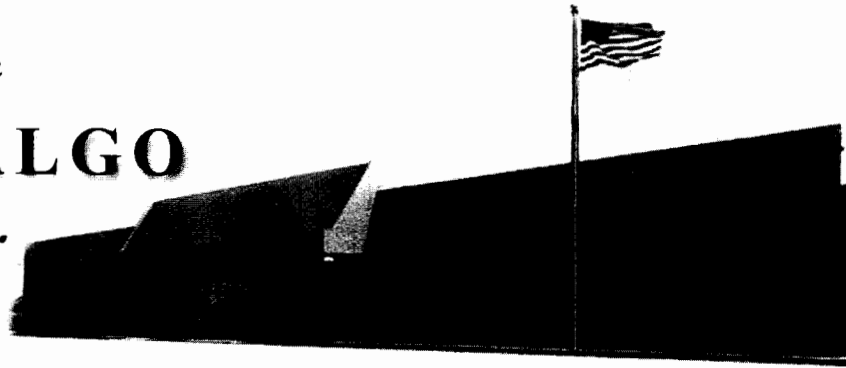
SP

Enclosure

*Office of Tax Assessor-Collector*

# COUNTY of HIDALGO

*Pablo "Paul" Villarreal, Jr. PCC.*



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| ACCOUNT NUMBER       | PAYER                              | AMOUNT     |
|----------------------|------------------------------------|------------|
| L0400.00.017.0004.05 | GRACE OF GOD INTERNATIONAL CHURCH  | \$3,066.43 |
| L1300.00.000.0057.04 | RIVERSIDE DEVELOPMENT SERVICES LLC | \$5,810.42 |
| L6446.05.000.0564.00 | GARCIA ROHEL A & SYLVIA            | \$4,234.80 |

# APPLICATION FOR TAX REFUND

|   |  |
|---|--|
| Collection office name<br><b>HIDALGO COUNTY TAX OFFICE</b>                  | Collecting tax for: (Tax Units)<br>GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-<br>CLV-CMS-CPN-CPO-CWL-SEB-SLV-<br>SML-SMS-SSL-SWL-JCC |
| Present mailing address (number and street)<br><b>P O BOX 178</b>           |  |
| City, town or post office, state, ZIP code<br><b>EDINBURG TX 78540-0178</b> | Phone (area code and number)<br><b>(956) 318-2157</b>  |

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

|  |  |
|--|--|
| <b>Step 1:</b><br>Owner's name and address | Owner's name<br><b>GRACE OF GOD INTERNATIONAL CHURCH</b> ✕               |
|  | Present mailing address (number and street)<br><b>4261 N VICTORIA RD</b> |
|  | City, town or post office, state, ZIP code<br><b>DONNA TX 78537</b>      |

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA BLANCA A LOTS E&F R/S BLKS 17,20&21**


|   |   |
|---|---|
| <b>Step 2:</b><br>Describe the property | Address or location of property: <b>2909 MILE 9 1/2 N</b> |
|   | <b>206641</b> ✕   |
|   | Account number of property: <b>L0400.00.017.0004.05</b> ✕ |

Tax receipt number:

OR **46490680**

| <b>Step 3:</b><br>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                                    | 2020                               | 01/28 / 2021            | \$ 5,681.47          | \$ 3,066.43                    |
|  | 2.   |                                    | /                       | \$                   | \$                             |
|  | 3.   |                                    | /                       | \$                   | \$                             |
|  | 4.   |                                    | /                       | \$                   | \$                             |
|  | 5.   |                                    | /                       | \$                   | \$ 3,066.43 ✕                  |

Taxpayer's reason for refund (attach supporting documentation): **RF210224 EXEMPT 2020 Proration**  
SP

|                                 |  |
|---------------------------------|--|
| <b>Step 4:</b><br>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<br><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.

*Reynaldo Cantu* 3/30/2021

|  |  |   |
|--|--|---|
| <b>Step 5:</b><br>Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved   | AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE <i>JL</i> |
|  | Authorized officer<br><b>sign here</b> <i>Linda Fong</i>   | DATE: <u>03/26/2021</u> <i>g</i> 3/30/2021                |
|  | 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) ✕<br><b>sign here</b> <i>Jane Miller</i> | Date<br>3/8/2021 <i>3/5/21</i>                            |

# APPLICATION FOR TAX REFUND

|   |   |  |   |                         |  |   |               |
|---|---|--|---|-------------------------|--|---|---------------|
| Collection office name<br><b>HIDALGO COUNTY TAX OFFICE</b>  |   | Collecting tax for: (Tax Units)<br>GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-<br>CLV-CMS-CPN-CPO-CWL-SEB-SLV-<br>SML-SMS-SSL-SWL-JCC |   |                         |  |   |               |
| Present mailing address (number and street)<br><b>P O BOX 178</b>                                 |   | City, town or post office, state, ZIP code<br><b>EDINBURG TX 78540-0178</b>  |   |                         |  |   |               |
| City, town or post office, state, ZIP code<br><b>EDINBURG TX 78540-0178</b>                       |   | Phone (area code and number)<br><b>(956) 318-2157</b>  |   |                         |  |   |               |
| <b>To apply for a tax refund, the taxpayer must complete the following</b>                        |   |  |   |                         |  |   |               |
| <b>Step 1:</b><br>Owner's name and address  | Owner's name<br><b>RIVERSIDE DEVELOPMENT SERVICES LLC</b> ✕   |  |   |                         |  |   |               |
|   | Present mailing address (number and street)<br><b>2606 ZINNIA AVE</b>   |  |   |                         |  |   |               |
|   | City, town or post office, state, ZIP code<br><b>MCALLEN TX 78504</b>   |  | Phone (area code and number)              |                         |  |   |               |
| Legal description (or attach copy of the tax bill or tax receipt): <b>LA LOMITA (HOIT) LOT 57</b> |   |  |   |                         |  |   |               |
| <b>Step 2:</b><br>Describe the property   | Address or location of property: <b>N WARE RD</b>   |  |   |                         |  |   |               |
|   | <b>210581</b> ✕   |  |   |                         |  |   |               |
|   | Account number of property:<br><b>L1300.00.000.0057.04</b> ✕  |  | Tax receipt number:<br><b>OR 46905136</b> |                         |  |   |               |
|   |   |  |   |                         |  |   |               |
| <b>Step 3:</b><br>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   |  | 2020 ✕                                    | 01/29                   | / 2021                                 | \$ 14,526.07  | \$ 5,810.42   |
|   | 2.  |  |   |                         | /                                      | \$  | \$            |
|   | 3.  |  |   |                         | /                                      | \$  | \$            |
|   | 4.  |  |   |                         | /                                      | \$  | \$            |
|   | 5.  |  |   |                         | /                                      | \$  | \$ 5,810.42 ✕ |
|   | Taxpayer's reason for refund (attach supporting documentation): <b>RF210223 IA 2020 Proration</b>   |  |   |                         |  |   |               |
| <b>SP</b>   |   |  |   |                         |  |   |               |
| <b>Step 4:</b><br>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<br>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.<br><br><i>Reynaldo Cantu A/A</i> 3/30/2021 |  |   |                         |  |   |               |
| <b>Step 5:</b><br>Tax refund Determination  | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved  |  |   |                         |  | AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE 3/30/2021<br>DATE: 03/26/2021 ✕ <i>Je</i> |               |
|   | Authorized officer<br>sign here ➡ <i>Linda Jorg</i>   |  |   |                         | Date<br>03/30/2021                     |   |               |
|   | 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)<br>sign here ➡ <i>Paul Hill</i> ✕                     |  |   |                         | Date<br>3/8/2021 <i>CPD</i><br>3/15/21 |   |               |

**APPLICATION FOR TAX REFUND**

CA 03/16/21

**SUBMIT**

|   |   |
|---|---|
| Collection office name<br><b>HIDALGO COUNTY TAX OFFICE</b>                  | Collecting tax for: (Tax Units)<br>ST-DR1-FD1-FD2-FD3-FD4-CAN-<br>CMS-CPN-CPO-CWL-SEB-SLV-<br>SMS-SSL-SWL-JCC |
| Present mailing address (number and street)<br><b>P O BOX 178</b>           | Phone (area code and number)<br><b>(956) 318-2157</b>   |
| City, town or post office, state, ZIP code<br><b>EDINBURG TX 78540-0178</b> |   |

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

|                                     |  |
|-------------------------------------|--|
| Step 1:<br>Owner's name and address | Owner's name<br><b>GARCIA ROHEL A &amp; SYLVIA</b>                       |
|                                     | Present mailing address (number and street)<br><b>PO BOX 401</b>         |
|                                     | City, town or post office, state, ZIP code<br><b>LINN, TX 78563-0401</b> |

Legal description (or attach copy of the tax bill or tax receipt): **LOS VENADOS PH 5 LOT 564**

|                                  |  |
|----------------------------------|--|
| Step 2:<br>Describe the property | Address or location of property:<br><b>702215</b>          |
|                                  | Account number of property:<br><b>L6446-05-000-0564-00</b> |
|                                  | Tax receipt number:<br><b>OR 45149257</b>                  |

| Step 3:<br>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                                    | 2020                               | 11/30                   | \$ 6,794.78          | \$ 4,234.80                    |
|   | 2.   |                                    | /                       | \$                   | \$                             |
|   | 3.   |                                    | /                       | \$                   | \$                             |
|   | 4.   |                                    | /                       | \$                   | \$                             |
|   | 5. TOTAL   |                                    | /                       | \$                   | \$ 4,234.80                    |

Taxpayer's reason for refund (attach supporting documentation): **IN HOUSE SUPPLEMENT**

**2020 TAX CEILING**

**BR**

|                          |  |
|--------------------------|--|
| Step 4:<br>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<br><b>Reynaldo Cantu</b><br>Date of application for tax refund<br><b>3/30/2021</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.

|                                     |  |
|-------------------------------------|--|
| Step 5:<br>Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved |
|                                     | AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE<br>DATE: <b>03/26/2021</b>                           |

|  |                           |
|--|---------------------------|
| Authorized officer<br>sign here <b>Linda Fong</b>  | Date<br><b>03/30/2021</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)<br>sign here <b>Jablon Villanueva</b> | Date<br><b>3/15/2021</b>  |

CA 03/16/21