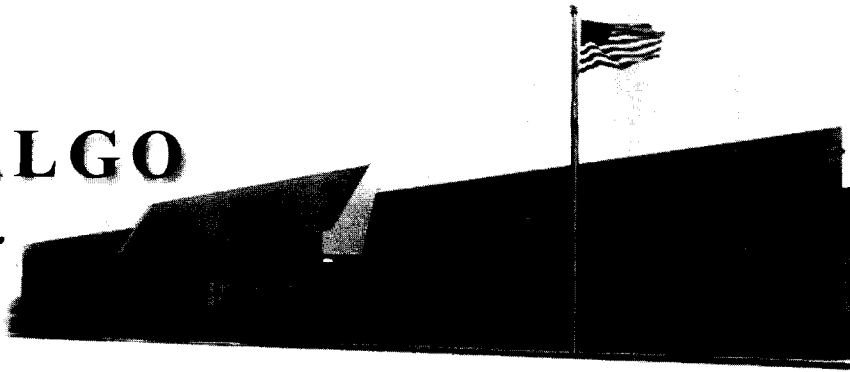


Office of Tax Assessor-Collector

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

JUNE 7, 2021

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 cursive script that reads "Pablo (Paul) Villarreal, Jr." The signature is written in dark ink and is positioned above the typed name.

Pablo (Paul) Villarreal, Jr., PCC

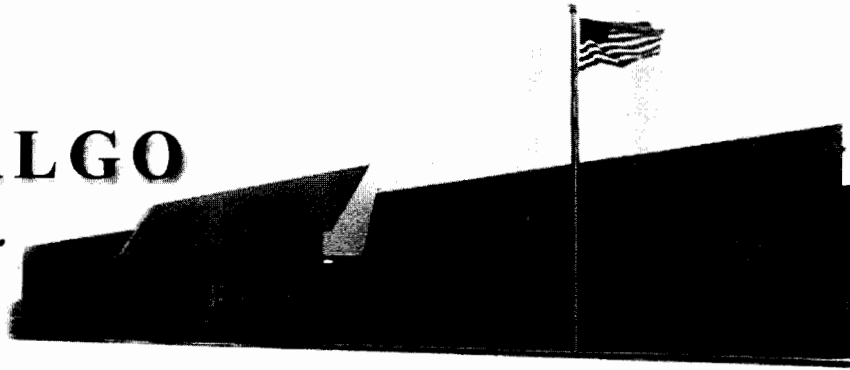
SP

Enclosure

Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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ACCOUNT NUMBER	PAYER	AMOUNT
P7055.00.000.0001.00	MISSION SPORTS CENTER L P	\$5,445.00

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	DATE: 6/3/21 E.L.	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<i>Raynaldo Cantu AdAd</i> 6/4/21	Phone (area code and number) (956) 318-2157


To apply for a tax refund, the taxpayer must complete the following *6/4/2021*

Step 1: Owner's name and address	Owner's name MISSION SPORTS CENTER L P ✕
	Present mailing address (number and street) 1900 N AKARD ST
	City, town or post office, state, ZIP code DALLAS TX 75201-2300

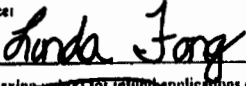

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): PLANTATION GROVE SPORTS COMPLEX ;PT 1
	Address or location of property: PLANTATION GROVE BLVD
	631934 ✕
	Account number of property: P7055.00.000.0001.00 ✕ OR 42191793 Tax receipt number:

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 ✕	12/11	/	2019	\$ 62,617.50 ✕
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5.			/		\$	\$ 5,445.00

Taxpayer's reason for refund (attach supporting documentation): **COURT ORDER C-3987-19-B**
SP Due Date JUNE 23, 2021

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."	Date of application for tax refund
	Signature sign here 	

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	
	Authorized officer sign here 	Date 06/07/2021
	Collector(s) of taxing units for refund applications over (insert amount for which governing body approval is required under Section 31.17) tax code sign here 	Date 5/27/2021