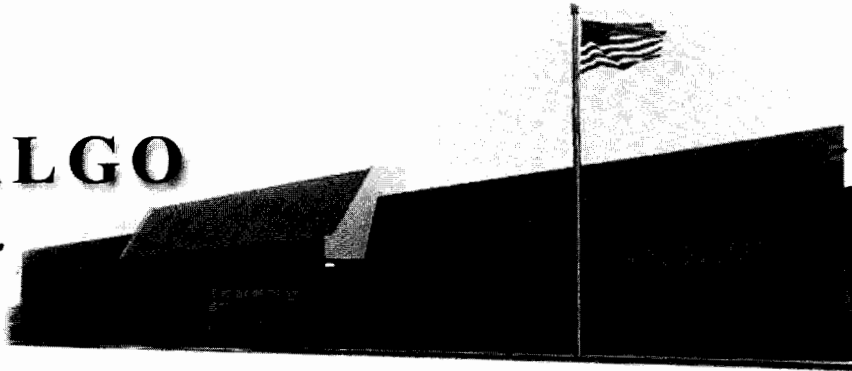


Office of Tax Assessor-Collector

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

JULY 14, 2021

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

Re: See attached list

Gentlemen:

Our office has determined that the attached application(s) for a tax refund over \$2,500.00 dollars is (are) erroneous and/or excessive. 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 required by Property Tax Code Section 31.11, Refunds of Overpayments or Erroneous Payments.

When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

Handwritten signature of Pablo (Paul) Villarreal, Jr. The signature is written in cursive and includes the initials "P.V." at the end.

Pablo (Paul) Villarreal, Jr., PCC

BR

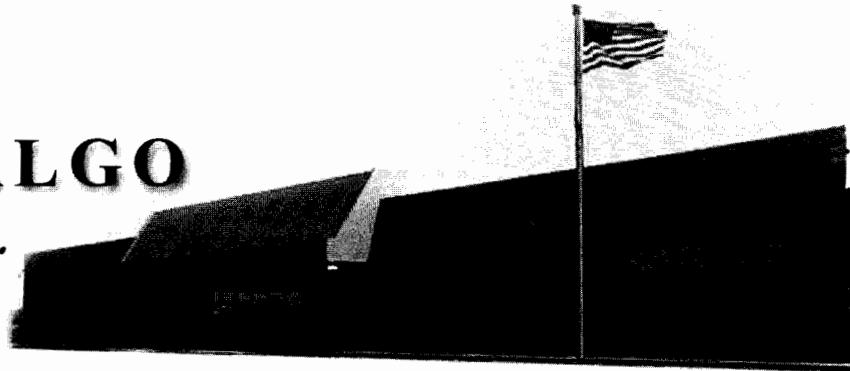
Enclosure



Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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| ACCOUNT NUMBER | PAYER | AMOUNT |
|----------------------|-------------------------------|-------------|
| C1400.00.035.0002.01 | NEUHAUS & SONS | \$10,744.91 |
| G8090.00.000.0061.00 | WELLS FARGO | \$4,517.15 |
| K2400.00.000.0093.07 | AEP TEXAS INC | \$18,129.76 |
| K2740.00.000.0001.00 | CORELOGIC CENTRALIZED REFUNDS | \$3,054.59 |
| L6307.05.000.0181.00 | LERETA LLC | \$3,000.00 |





PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733
 Print Date: 03/12/2021

AUDITED BY THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: *6/22/21 me*

Reynaldo Cantu A/A 6/26/2021
lc 7/13/2021

| |
|---|
| Account Number C1400-00-035-0002-01 * HCAD No. 131025 * |
| Legal Description of the Property CAPISALLO LOTS 2 3 4 5 BLK 35 82.929AC NET S MILE I B OWNER: NEUHAUS & SONS † |

NEUHAUS & SONS
 11240 N MILE W
 MERCEDES, TX 78570

2020 OVERAGE AMOUNT \$10,744.91

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 4: EMS DIST #2, 46: MERCEDES ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

| | | |
|---|---|--|
| Step 1: Identify the Payer requesting the refund if different than shown above | Name | Relationship to Property Owner |
| | Mailing Address | Daytime Telephone Number |
| | City, State, Zip Code | Email Address: |
| Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer. | I paid the taxes for year <u>2020</u> and am the party entitled to the refund. | |
| Step 3: Mark the reason for the refund and provide a brief explanation | <input checked="" type="checkbox"/> Overpaid the account | |
| | <input type="checkbox"/> Duplicate payment | |
| | <input type="checkbox"/> Paid in error (explain) | |
| Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00... | Total amount paid by this taxpayer | |
| | Total tax, penalty, and interest amount owed for the year | |
| | Amount of refund claimed | |
| Step 5: How should the refund be processed? | <input checked="" type="checkbox"/> Mail to Property Owner | |
| | <input type="checkbox"/> Mail to Payer at address in Step 1 | |
| | <input type="checkbox"/> Transfer this amount to account | For tax year |
| | <input type="checkbox"/> Escrow for next year's taxes | |
| Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed | By completing and signing this 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 | |
| | SIGN HERE <i>[Signature]</i> | Date of application <u>5-10-21</u> |
| | 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 | |
| AUDITORS USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>[Signature]</i> Date: <u>07/13/2021</u> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>[Signature]</i> Date: <u>5/20/21</u> |

This application must be completed, signed, and submitted with supporting documentation to be valid.

CPD
5/20/21

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 06/17/21 K. ORENK.

936-0563907336

APPLICATION FOR TAX REFUND

| | | |
|---|-------------------------------------|--|
| Collection office name HIDALGO COUNTY TAX OFFICE | <i>Reynaldo Cantu JTA</i> 6/25/2021 | 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 | <i>lc</i> 7/13/2021 | |
| City, town or post office, state, ZIP code EDINBURG TX 78540-0178 | | Phone (area code and number) (956) 318-2157 |

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

| | |
|---|--|
| Step 1: Owner's name and address | Owner's name CABALLEO MIGUEL ANGEL PENA & ZEIDY ENEDY (PD BY: WELLS FARGO) |
| | Present mailing address (number and street) 1916 SANDIA LN |
| | City, town or post office, state, ZIP code EDINBURG, TX 78541 |
| | Phone (area code and number) |
| Legal description (or attach copy of the tax bill or tax receipt): GREENLEAF ESTATAES LOT 61 | |

| | | |
|----------------------------------|--|--|
| Step 2: Describe the property | Address or location of property: 1916 SANDIA LN | |
| | 691478 | |
| | Account number of property: G8090-00-000-0061-00 | Tax receipt number: 45293578 |
| | OR | |

| Step 3: Give the tax payment information | Name Of Taxing Unit from Which Refund is Requested | Year for Which Refund is Requested | Date of the Tax Payment | Amount of Taxes Paid | Amount of Tax Refund Requested |
|---|--|------------------------------------|-------------------------|----------------------|--------------------------------|
| | 1. ALL ENTITIES | 2020 | 12/16 | 2020 | \$ 4,517.15 |
| 2. | | | | \$ | \$ |
| 3. | | | | \$ | \$ |
| 4. | | | | \$ | \$ |
| 5. TOTAL | | | | \$ | \$ 4,517.15 |

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR**

~~AMOUNT SHOULD BE APPLIED TO ACCOUNT G8090 00 000 0066 00~~

NO refunded back to Wells Fargo as no levy is due. RC **691472**

| | | |
|--|--|--|
| 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: <i>Barbara Kincaid, on behalf of Wells Fargo Home Mortgage</i> sign here <i>Barbara Kincaid</i> | Date of application for tax refund 5-20-2021 |
| 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 <i>Linda Fong</i> | Date 07/13/2021 |
| | Collector(s) of taxing unit(s) for this application over (insert amount for which governing body approval is required under Section 37.11, Tax Code) sign here <i>Jane Villalpando</i> | Date 5/25/2021 |



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 03/10/2020

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 7/9/2021 *CMF*

Raynaldo Cantu Sr 7/12/2021
lc 7/13/2021

SECOND NOTICE

APR 30 2021

AEP TEXAS INC
~~PO BOX 24408~~
~~CANTON, OH 44701~~
 PO Box 16428
 Columbus, OH 43216-6428

| |
|---|
| Account Number K2400-00-000-0093-07 HCAD No. 202220 |
| Legal Description of the Property KELLY PIARR TRACT W660'-S246.95'-N660' & W650'-S130'-N790' LOT 93 5.68AC GR 5.25AC NET |
| 5050 N CAGE BLVD |
| OWNER: AEP TEXAS INC |

2019 OVERAGE AMOUNT \$18,129.76

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR, SAN JUAN, ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11e of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

| | | |
|--|---|--|
| Step 1: Identify the Payer requesting the refund if different than shown above | Name | Relationship to Property Owner |
| | Mailing Address <u>PO Box 16428</u> | Daytime Telephone Number <u>614-716-3209</u> |
| Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer. | City, State, Zip Code <u>Columbus OH 43216-6428</u> Email Address: <u>hnhinton@aep.com</u> | |
| | I paid the taxes for year <u>2019</u> and am the party entitled to the refund. | |
| Step 3: Mark the reason for the refund and provide a brief explanation | <input type="checkbox"/> Overpaid the account | <u>Payment (\$50.37) not applied to correct account.</u> |
| | <input checked="" type="checkbox"/> Paid in error (explain) | <u>Sold in 2017 to A: N Iglesias (\$18,079.39)</u> |
| Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00 | Total amount paid by this taxpayer | <u>Check 3000000537 \$11,340,923.64</u> |
| | Total tax, penalty, and interest amount owed for the year | |
| | Amount of refund claimed | |
| Step 5: How should the refund be processed? | <input type="checkbox"/> Mail to Property Owner | |
| | <input type="checkbox"/> Mail to Payer at address in Step 1 | |
| | <input checked="" type="checkbox"/> Transfer this amount to account | <u>1031249 \$50.37 For tax year 2019</u> |
| | <input checked="" type="checkbox"/> Escrow for next year's taxes | <u>Refund back \$18,079.39 for 202220</u> |
| Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed | By completing and signing this 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 | |
| | SIGN HERE <u>Heidi M Hinton</u> | Date of application <u>5/24/2021</u> |
| 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 | | |
| AUDITORS USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <u>[Signature]</u> Date: <u>07/13/2021</u> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <u>[Signature]</u> Date: <u>6/10/2021</u> |

This application must be completed, signed, and submitted with supporting documentation to be valid.



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 12/17/2020

Corelogic Centralized Refunds
 PO Box 9202
 Coppel, TX 75019-9760

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 07/13/2021

lc
 7/13/2021

Reynaldo Cantu Acted 6/26/2021

| |
|--|
| Account Number K2740-00-000-0001-00 HCAD No. 638286 |
| Legal Description of the Property KENT ESTATE LOT 1 11224 BRYAN RD |
| OWNER: CLEM RICHARD S & PATRICIA A |
| 2020 OVERAGE AMOUNT \$3,054.59 |

1: HIDALGO COUNTY, 2: DRAINAGE DIST.#1, 4: MISSION CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 6070117731117

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

| | | | |
|--|---|------------------------------------|--|
| Step 1: Identify the Payer requesting the refund if different than shown above | Name | RICHARD S CLEM | Relationship to Property Owner |
| | Mailing Address | 11224 N BRYAN RD | Daytime Telephone Number |
| | City, State, Zip Code | MISSION, TX 78573 | Email Address: rajesaravanan@corelogic.com |
| Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer. | I paid the taxes for year <u>2020</u> and am the party entitled to the refund. | | |
| Step 3: Mark the reason for the refund and provide a brief explanation | <input checked="" type="checkbox"/> | Overpaid the account | |
| | <input type="checkbox"/> | Duplicate payment | |
| | <input type="checkbox"/> | Paid in error (explain) | |
| Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00 | Total amount paid by this taxpayer | | \$8,872.38 |
| | Total tax, penalty, and interest amount owed for the year | | 0 |
| | Amount of refund claimed | | \$3,054.59 |
| Step 5: How should the refund be processed? | <input checked="" type="checkbox"/> | Mail to Property Owner | |
| | <input type="checkbox"/> | Mail to Payer at address in Step 1 | |
| | <input type="checkbox"/> | Transfer this amount to account | For tax year |
| | <input type="checkbox"/> | Escrow for next year's taxes | |
| Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed | By completing and signing this 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 | | |
| | SIGN HERE | <u>Marcia Reagan</u> | Date of application 05/12/21 |
| | 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 | | |
| AUDITORS USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <u>Linda Jagg</u> | Date: <u>07/13/2021</u> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <u>Paul Villarreal</u> | Date: <u>5/26/2021</u> |

This application must be completed, signed, and submitted with supporting documentation to be valid.



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 12/17/2019

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 7/8/21 E.L.

Raymundo Cantu A.A. 7/19/2021
 LERETA LLC lc 7/13/2021
 ATTN: REFUND DEPARTMENT
 PO BOX 35605
 DALLAS TX 75235-9788

SECOND NOTICE

APR 30 2021

| |
|---|
| Account Number 1307-05-000-0181-00 X HCAD No. 673774 X |
| Legal Description of the Property LOS NOGALES PH 5, SHARYLAND PLANTATION VILLAGE LOT 181 3504 SANTA OLIVIA |
| OWNER: ORTEGA RAUL HOMERO X |

2019 OVERAGE AMOUNT \$3,000.00 X

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 1118388

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

| | | |
|--|---|---|
| Step 1: Identify the Payer requesting the refund if different than shown above | Name <i>Reverse Mtg Servicing Co/Lereta</i> | Relationship to Property Owner |
| | Mailing Address <i>PO Box 35605</i> | Daytime Telephone Number <i>972-971-0391</i> |
| | City, State, Zip Code <i>Dallas, TX 75235</i> | Email Address <i>dstephens@lereta.com</i> |
| Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer. | I paid the taxes for year <u>2019</u> and am the party entitled to the refund. | |
| Step 3: Mark the reason for the refund and provide a brief explanation | <input checked="" type="checkbox"/> Overpaid the account | |
| | <input type="checkbox"/> Duplicate payment | |
| | <input type="checkbox"/> Paid in error (explain) | |
| Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00 | Total amount paid by this taxpayer | <i>\$30,616.71</i> |
| | Total tax, penalty, and interest amount owed for the year | |
| | Amount of refund claimed | <i>\$3,000.00 X</i> |
| Step 5: How should the refund be processed? | <input type="checkbox"/> Mail to Property Owner | |
| | <input checked="" type="checkbox"/> Mail to Payer at address in Step 1 | |
| | <input type="checkbox"/> Transfer this amount to account | For tax year |
| | <input type="checkbox"/> Escrow for next year's taxes | |
| Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed | By completing and signing this 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 | |
| | SIGN HERE <i>Diana Stephen/Lereta LLC</i> | Date of application <i>5-28-2021</i> |
| | 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 | |
| AUDITORS USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>Jonda Fong</i> Date: <i>07/13/2021</i> |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied | By: <i>Paul Hill</i> Date: <i>6/16/2021</i> |

This application must be completed, signed, and submitted with supporting documentation to be valid.