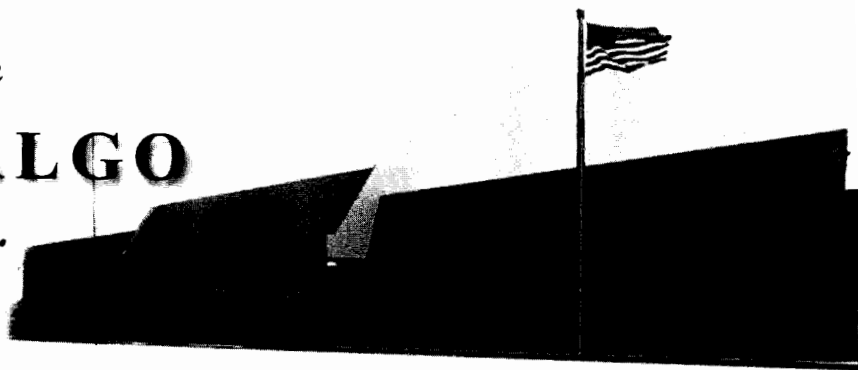


Office of Tax Assessor-Collector

# 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)

January 11, 2022

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

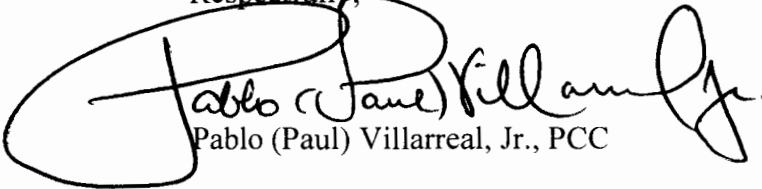
Re: See attached list

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

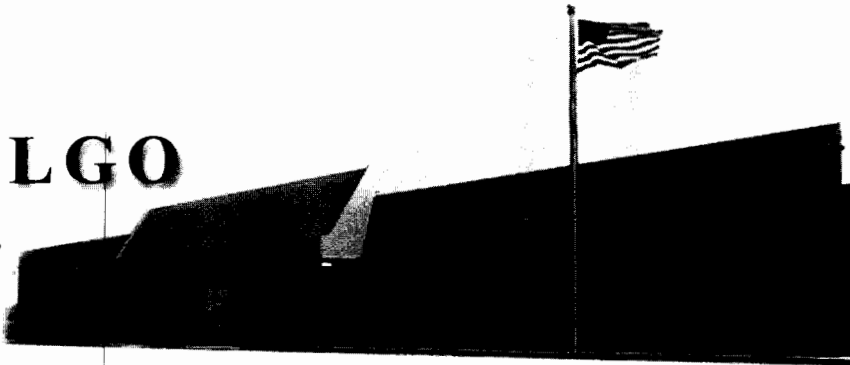
NR

Enclosure

Office of Tax Assessor-Collector

# COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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ACCOUNT NUMBER	PAYER	AMOUNT
L3100.02.000.0041.00	DE LA FUENTE ROEL & YADIRA D	\$4,008.57
M1950.99.000.0000.AV	WINTHROP RESOURCES CORP	\$5,452.79
M2240.99.000.0001.B8	SOUTH TEXAS BACK INSTITUTE / RAY R FULP III, D.O.	\$3,838.69
W0100.00.039.0010.03	QUIRICO LTD	\$6,616.47

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	<i>Reynaldo Cantu</i> 12/28/2021	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) <b>P O BOX 178</b>	12/29/2021	
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>DE LA FUENTE ROEL &amp; YADIRA D</b>
	Present mailing address (number and street) <b>1313 ALICIA LN</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78572-3017</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>LAS BRISAS 2 LOT 41</b>
	Address or location of property: <b>551835</b>
	Account number of property: <b>L3100.02.000.0041.00</b> OR Tax receipt number: <b>46278495</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	2020	01/25 / 2021	\$ 4,008.57	\$ 4,008.57
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4,008.57
Taxpayer's reason for refund (attach supporting documentation): <b>SUPPLEMENT 11</b>					
<b>GRANT FRSS FILED LATE Q/Y 2020</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 <i>[Signature]</i>	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 <i>[Signature]</i>	Date 12/30/2021
	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) <i>[Signature]</i>	Date 11/22/21

*[Handwritten initials]*

**APPLICATION FOR TAX REFUND**

Collection office name: **HIDALGO COUNTY TAX OFFICE**  
 Present mailing address (number and street): **P O BOX 178**  
 City, town or post office, state, ZIP code: **EDINBURG TX 78540-0178**  
 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**  
 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: **WINTHROP RESOURCES CORP**  
 Present mailing address (number and street): **11100 WAYZATA BLVD STE 800**  
 City, town or post office, state, ZIP code: **MINNETONKA, MN 55305-5525**  
 Phone (area code and number):

**Step 2: Describe the property**  
 Legal description (or attach copy of the tax bill or tax receipt): **LEASED EQUIPMENT AT SML & CML / NEW**  
**ACCT 2016**  
 Address or location of property:  
**1036476**  
 Account number of property: **M1950.99.000.0000.AV** OR Tax receipt number: **46490284**

**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	01/28	\$ 54,527.66	\$ 5,452.79
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 5,452.79

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT 12**  
**SUBMITTED / ENTERED WRONG**  
**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: \_\_\_\_\_ 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  
 Authorized officer: **Linda Fong** Date: **12/30/2021**  
 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): **Jane Hill** Date: **11/22/21**

11/15/21

**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>	12/29/2021
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: **SOUTH TEXAS BACK INSTITUTE / RAY R FULP III, D.O.**

Present mailing address (number and street): **721 LINDBERG AVE**

City, town or post office, state, ZIP code: **MCALLEN, TX 78501**

Phone (area code and number):

**Step 2: Describe the property**

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2017/IMPS TRANS TO M2240-99-000-0001-B5**

**FURNITURE FIXTURES EQUIPMENT AT 1801 SOUTH 5<sup>TH</sup> ST STE 103 (AT DAYSTAR OPEN MRI)/NEW ACCT 2016**

Address or location of property:  
**1075500**

Account number of property: **M2240.99.000.0001.B8** OR Tax receipt number: **41399946**

**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	07/15	\$ 3,838.69	\$ 3,838.69
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 3,838.69

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT 32**

**SUBMITTED/ ENTERED WRONG**

**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: \_\_\_\_\_ 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

Authorized officer: **Linda Fong** Date: **12/30/2021**

Collector(s) of taxing unit(s) for refund application over (insert amount for which governing body approval is required under Section 31.11, tax code): **Jane Hill** Date: **11/22/21**

998 11/18/21

AUDITED BY THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 12/14/21 KORECTIP

**APPLICATION FOR TAX REFUND**

Collection office name  
**HIDALGO COUNTY TAX OFFICE**

Present mailing address (number and street)  
**P O BOX 178**

City, town or post office, state, ZIP code  
**EDINBURG TX 78540-0178**

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

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  
**QUIRICO LTD**

Present mailing address (number and street)  
**210 S BRYAN RD STE 5-A**

City, town or post office, state, ZIP code  
**MISSION, TX 78572-6204**

Phone (area code and number)

**Step 2:**  
 Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN. TO SHARYLAND S 9.6 LOT 39-10**

Address or location of property:  
**318148**

Account number of property: **W0100.00.039.0010.03** OR Tax receipt number: **47365566**

**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	05/04 / 2021	\$ 6,706.57	\$ 6,616.47 <
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 6,616.47 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPPLEMENT 11**

**CLEICAL ERROR: GRANT AG USE**

**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: **[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.

**Step 5:**  
 Tax refund Determination

This tax refund is  Approved  Disapproved

Authorized officer sign here: **[Signature: Linda Jorg]** Date: **12/30/2021**

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) sign here: **[Signature: Jane Silman]** Date: **11/22/21**

CNO  
 11/18/21