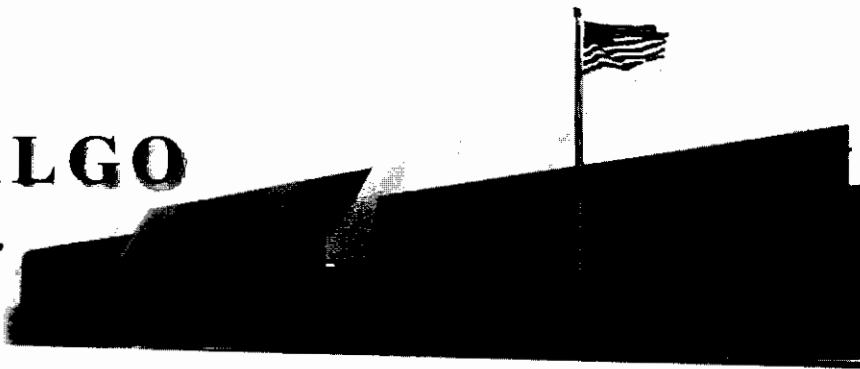


Office of Tax Assessor-Collector

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

January 11, 2023

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

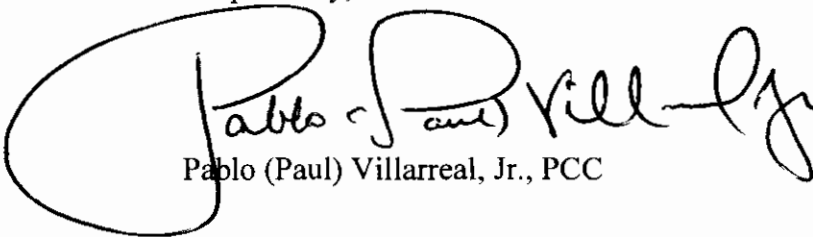
Re: See attached list

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,



Pablo (Paul) Villarreal, Jr., PCC

JVR


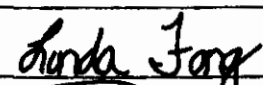
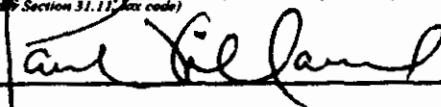
Enclosure

APPROVED BY: *Karen Ramirez*

DATE: 01/04/2023 01/05/23 *CMO*

APPLICATION FOR TAX REFUND

RCIII 1/10/2023

| | | | | | | | | |
|---|---|--|------------------------------------|-------------------------|----------------------|--------------------------------|--------------|---------------|
| Collection office name HIDALGO COUNTY TAX 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 MS-CPN-CPO-CWL-SEB-SL MS-SSL-SWL-JCC (956) <i>area code and number</i> 318-2157 | | | | | | |
| Present mailing address (number and street) P O BOX 178 | | | | | | | | |
| City, town or post office, state, ZIP code EDINBURG TX 78540-0178 | | | | | | | | |
| To apply for a tax refund, the taxpayer must complete the following | | | | | | | | |
| Step 1: Owner's name and address | Owner's name MCALLEN HOSPITALITY GROUP LLC ✓ | | | | | | | |
| | Present mailing address (number and street) 617 W EXORESSWAY 83 | | | | | | | |
| | City, town or post office, state, ZIP code MCALLEN, TX 78503-2931 | Phone (c <i>area code and number</i> | | | | | | |
| Step 2: Describe the property | Legal description (or attach copy of the tax bill or tax receipt): SAVANNAH PARK LOT 1 | | A | | | | | |
| | Address or location of property: 617 EXPWY 83 | | | | | | | |
| | 596931 ✓ | | | | | | | |
| | Account number of property: S2005.00.000.001A.00 ✓ | | OR 48767429 | 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 | | 2021 ✓ | 12/29 | / | 2021 | \$ 95,421.72 | \$ 6,880.42 |
| | 2. | | | | / | | \$ | \$ |
| | 3. | | | | / | | \$ | \$ |
| | 4. | | | | / | | \$ | \$ |
| | 5. TOTAL | | | | / | | \$ | \$ 6,880.42 ✓ |
| Taxpayer's reason for refund (attach supporting documentation): CO#C-4150-21-1 ✓ | | | | | | | | |
| DUE BY 02.01.2023 ✓ | | | | | | | | |
| JVR | | | | | | | | |
| 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>sign here</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. | | | | | | | |
| Step 5: Tax refund Determination | This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved | | | | | | | |
| | <i>sign here</i>  | Authorized officer | Date | | | | | |
| | <i>sign here</i>  | 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) | Date | | | | | |

01/10/2023

12/12/22

Handwritten initials and date

APPLICATION FOR TAX REFUND

RCIII 1/10/2023

| | | | | | | | |
|---|--|---|------------------------------------|-------------------------|----------------------|--------------------------------|-------------|
| Collection office name HIDALGO COUNTY TAX OFFICE | | Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMC-SSL-SWT-IJC AS-CPN-CPO-CWL-SEB-SLV | | | | | |
| Present mailing address (number and street) P O BOX 178 | | Phone (area code and number) 318-2157 | | | | | |
| City, town or post office, state, ZIP code EDINBURG TX 78540-0178 | | | | | | | |
| To apply for a tax refund, the taxpayer must complete the following | | | | | | | |
| Step 1: Owner's name and address | Owner's name WESLACO LODGING LLC ✓ | | | | | | |
| | Present mailing address (number and street) 709 E BUSINESS HWY 83 | | | | | | |
| | City, town or post office, state, ZIP code WESLACO, TX 78596 | Phone (area code and number) | | | | | |
| Step 2: Describe the property | Legal description (or attach copy of the tax bill or tax receipt): WEST TRACK BLK FT 640 | | LOT 5 & 6 FLORA | | | | |
| | MOBILE PARK | | | | | | |
| | Address or location of property: 709 E BUS 83 | | | | | | |
| | 326438 | | | | | | |
| Account number of property: W3800.00.640.0000.07 | | OR | 49479942 | | | | |
| | | 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 | | 2021 ✓ | 01/24 | 2022 | \$ 20,950.30 | \$ 7,012.51 |
| | 2. | | | | / | \$ | \$ |
| | 3. | | | | / | \$ | \$ |
| | 4. | | | | / | \$ | \$ |
| | 5. TOTAL | | | | / | \$ | \$ 7,012.51 |
| | | Taxpayer's reason for refund (attach supporting documentation): CO#C-4161-21-B ✓ | | | | | |
| | | DUE BY 01.30.2023 ✓ | | | | | |
| | | JVR | | | | | |
| 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." | | | | | | |
| | 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 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 | | | | | | |
| | sign here | Authorized officer | Date | | | | |
| | sign here | <i>Linda Jorg</i> | 01/10/2023 | | | | |
| | sign here | 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) | Date | | | | |
| | | <i>Jane Villanueva</i> ✓ | 12/12/22 | | <i>12/18/22</i> | | |