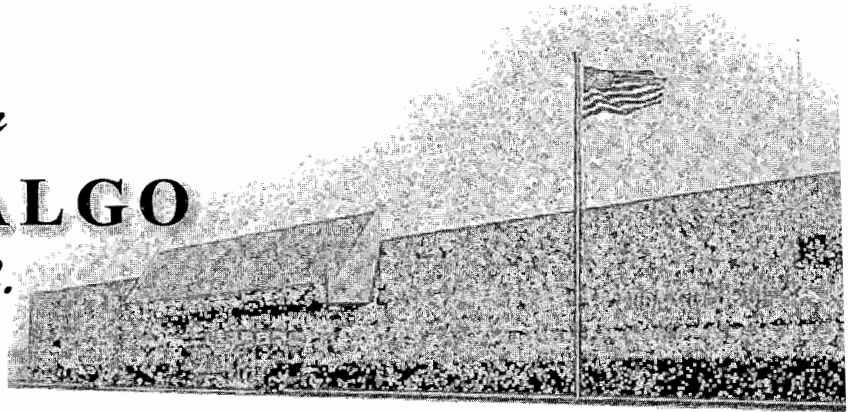


Office of Tax Assessor-Collector

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 21, 2023

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

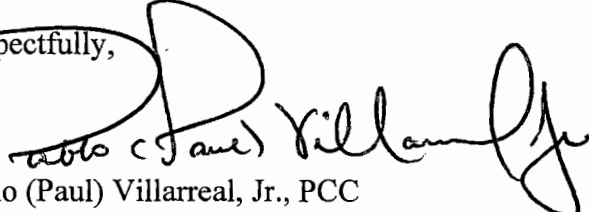
Re: See attached list

Commissioners Court:

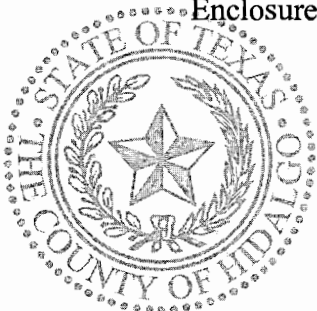
Our office has determined that the attached application(s) for a tax refund over \$2,500.00 dollars is (are) erroneous and/or excessive. The County Auditor has also agreed with our determination. As a result, I respectfully request that the Commissioner's Court approve the enclosed application(s) for 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,


Pablo (Paul) Villarreal, Jr., PCC

Enclosure

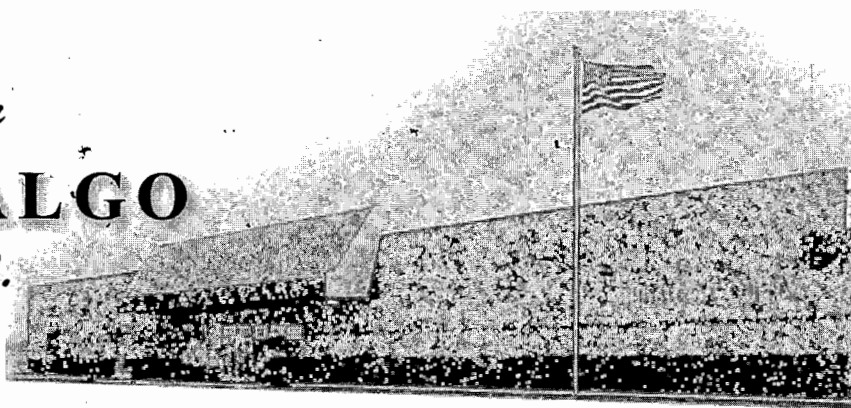


2804 S. Bus. Hwy 281 • Edinburg, TX 78539

Office of Tax Assessor-Collector

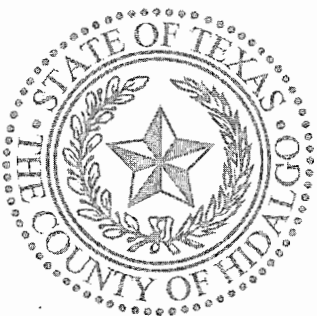
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. P.C.C.



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ACCOUNT NUMBER	PAYER	AMOUNT
K2400.00.000.0139.05	ROYAL FREIGHT L.P	\$3,978.32
O8050.99.000.0002.04	INTAX, INC	\$3,962.24
J8145.99.000.0001.11	ELSA STURZA	\$8,749.81
T0945.16.000.0003.00	HELENA H MAK MICHAEL L VOGEL	\$9,724.26
M5255.00.000.0016.00	LOPEZ PETERSON, PLLC	\$2,673.57
L1100.01.004.0052.02	CORELOGIC INC	\$3,548.75
A1800.00.040.0014.03	CARLOS R GARZA	\$2,872.61
W0100.00.053.0001.02	CAPITAL TITLE OF TEXAS LLC	\$4,104.08
H2050.02.000.0013.00	CORELOGIC TAX SERVICES LLC	\$8,556.42
J3325.00.000.0018.00	FREEDOM MORTGAGE	\$8,531.35
N3400.00.000.2042.19	ISIDRO RODRIGUEZ	\$1,070.94



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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: 02/22/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: E.L.

DATE: 5/22/2023 5/25/23 CM

[Signature] 6/15/2023

ROYAL FREIGHT, L.P. *
 P.O. BOX 4630
 MCALLEN, TEXAS 78502

Account Number K2400-00-000-0139-05 HCAD No. 343657	*
Legal Description of the Property KELLY PHARR TRACT E19.0AC LOT 139 EXC N521.60'-E529.40' LOT 139 12.66AC GR 12.54AC NET 407 W SIOUX RD OWNER: ACTIVE LAND INVESTMENTS LLC	*
2022 OVERAGE AMOUNT	\$3,978.32 *

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 31.11c 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	Royal Freight, LP *	Relationship to Property Owner	OWNER
	Mailing Address	P.O. BOX 4630	Daytime Telephone Number	956 283 2200
	City, State, Zip Code	McAllen, TX 78502	Email Address:	Sheri@royalfreight.net
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year _____ 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			
	<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		36,246.76	
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed		3,978.32	
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>Sheri Head</i> *	Date of application	4/12/23
	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>Donda Jorg</i>	Date: 06/16/2023
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>Paul Villarreal</i>	Date: 4/23/23

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

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 02/21/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Francisco Saenz*

DATE: 5/15/2023 5/30/23 *CM*

[Signature] 6/7/2023

INTAX, INC ϕ
 DEPT. ADTCOM
 PO BOX 54767
 LEXINGTON, KY 40555

Account Number O8050-99-000-0002-04 ϕ
HCAD No. 1315032 ϕ
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 507 OWASSA RD STE A/NEW ACCT 2021
507 OWASSA RD STE A 78539
OWNER: ADT COMMERCIAL LLC ϕ

2022 OVERAGE AMOUNT $\sqrt{\$3,962.24}$ ϕ

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 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: <u>859-269-1650</u>
	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 _____ 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	
	<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	<u>\$19,631.44</u>
	Total tax, penalty, and interest amount owed for the year	<u>\$15,669.20</u>
	Amount of refund claimed	<u>\$3,962.44</u>
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>Maria Allen</i> ϕ	Date of application <u>4/12/23</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>Dinda Jorg</i> Date: <u>06/07/2023</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> Date: <u>4/27/23</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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 03/24/2023

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: 05/19/23 LV

DATE: 06/08/23 CM

[Signature] 6/8/2023

ELSA STURZA ✓
 8350 E. OLD VAIL RD
 TUCSON, AZ 85747

Account Number J8145-99-000-0001-11 ✓ HCAD No. 1129644 ✓
Legal Description of the Property SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 1300 E MILITARY HIGHWAY / NEW ACCT 2018 1300 E MILITARY HWY 281 (S SIDE) 78577 OWNER: OFFSHORE GROUP THE

2022 OVERAGE AMOUNT \$8,749.81 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 57: HIDALGO ISD

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: <u>Offshore International LLC</u> Relationship to Property Owner	
	Mailing Address: <u>8350 E Old Vail Rd</u>	Daytime Telephone Number: <u>(520) 889-0022</u>
	City, State, Zip Code: <u>Tucson, AZ 85747</u>	Email Address: <u>elsa.sturza@telcel.com</u>
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2022</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	<u>7,597.88</u>
	Total tax, penalty, and interest amount owed for the year	<u>7,597.88</u>
	Amount of refund claimed	<u>8,749.81</u>
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	For tax year <u>2023</u> ✓
	<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>[Signature]</u>	Date of application: <u>4-21-2023</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: _____ Date: _____
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>5/2/23</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: 02/02/2023

THE HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: 05/19/23 LV
 DATE: 6/08/23 CM

[Signature] 6/8/2023

HELENA H MAK MICHAEL L VOGEL ✓
 11605 NEW AVE
 GILROY, CA 95020

Account Number T0945-16-000-0003-00 ✓
HICAD No. 710270 ✓
Legal Description of the Property CAURUS ESTATES NO. 16 LOT 3 W HARRISON AVE
OWNER: VOGEL MICHAEL & HELENA M ✓
2022 OVERAGE AMOUNT ✓ \$9,724.26 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 21: CITY OF ALTON, 48: MISSION CISD, 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: <u>Helene Mak</u>	Relationship to Property Owner: <u>Property Owner</u>
	Mailing Address: <u>P.O. BOX 1234</u>	Daytime Telephone Number: <u>(408) 425-5995</u>
	City, State, Zip Code: <u>GILROY, CA 95021</u>	Email Address: <u>MBENLOGROWERS10@AOL.COM</u>
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2022</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 <u>You applied to the wrong account!</u> <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	<u>9,724.26</u>
	Total tax, penalty, and interest amount owed for the year	<u>1,069.66</u>
	Amount of refund claimed	<u>PAID on a/c # T0323-00-000-0003 10,793.92</u>
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 Helene Mak ✓ Date of application 4/2/2023

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: Approved Denied By: _____ Date: _____

TAX OFFICE USE ONLY: Approved Denied By: Paul Villarreal Date: 4/27/23

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

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	HIDALGO COUNTY AUDITOR'S OFFICE	Collecting tax for (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SFH-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	APPROVED BY: E.L.	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 5/18/2023 5/30/23 CM	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 TRUSS DEVELOPMENT GROUP LLC (PAID BY LOPEZ PETERSON PLLC) *
	Present mailing address (number and street) 101 W HILLSIDE RD
	City, town or post office, state, ZIP code LAREDO TX 78501
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MISSION VALLEY LOT 16**

Step 2: Describe the property	Address or location of property: 3409 GABRIELS CT
	1068088 *
	Account number of property: _____ Tax receipt number: _____
	M525.00.000.0016.00 OR 53003198

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	2022	01/31 / 2023	\$ 1,378.86	\$ 1,378.86
	2. ALL ENTITIES	2021	01/31 / 2023	\$ 1,294.71	\$ 1,294.71
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,673.57 *

Taxpayer's reason for refund (attach supporting documentation): **PAYER CLAIMS THEY PAID THE ACCOUNT BY MISTAKE.**

JV

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 4-6-23

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 [Signature] *	Date 06/08/2023
	Collector(s) of taxing unit(s) for refund applications over dollar amount for which governing body approval is required under Section 111, tax code sign here [Signature] *	Date 4/21/23

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Francisco Saenz

DATE: 5/18/2023 5/30/23 *CM*

APPLICATION FOR TAX REFUND

6/7/2023

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
Present mailing address (number and street) P O BOX 178	
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 VALDEZ MARISELA A & JUAN G & MARICELA D (PD BY: CORELOGIC)
	Present mailing address (number and street) 2006 N NICHOLSON
	City, town or post office, state, ZIP code MISSION, TX 78572-2741

Legal description (or attach copy of the tax bill or tax receipt) **LA HOMA RANCH CITRUS GROVES UT NO. 1 W192.39' LOT 52 BLK 4 2.92 AC**

Step 2: Describe the property	Address or location of property 536516
	Account number of property: L1100.01.004.0052.02
	Tax receipt number: OR 51737915

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	2022	12/20	\$3,548.75	\$3,548.75
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$3,548.75

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR CORELOGIC IS NOT RESPONSIBLE TO PAY ON THIS ACCT. CORRECT ACCT IS #L1100.01.004.0052.01 WHICH IS ALREADY PD. CORELOGIC IS REQUESTING REFUND BR**

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>Randy</i>	Date of application for tax refund 2-23-2023

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 06/07/2023
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31a.1 tax code) sign here <i>Jane Williams</i>	Date 4/27/23

APPLICATION FOR TAX REFUND

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
Present mailing address (number and street) P O BOX 178	HIDALGO COUNTY AUDITOR'S OFFICE APPROVED BY: E.L.
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 5/17/2023 5/30/23 CM <i>[Signature]</i> 6/8/2023
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 CANO FERNANDO & ELVA EDITH (PAID BY CARLOS R GARZA) *
Owner's name and address	Present mailing address (number and street) 1100 W NEBRASKA RD
	City, town or post office, state, ZIP code ALAMO, TX 78516-6813
	Phone (area code and number)

Step 2:	Legal description (or attach copy of the tax bill or tax receipt): ALAMO LAND & SUGAR CO
Describe the property	W150'-E190'-N115'-S135' LOT 14 BLK 40
	Address or location of property: 1102 NEBRASKA RD ALAMO, TX 78516
	112405 *
	Account number of property: A1800.00.040.0014.03 OR 52210728
	Tax receipt number:

Step 3:	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
Give the tax payment information	1. ALL ENTITIES	2022	01/09 / 2023	\$ 2872.61	\$ 2872.61
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2872.61 *

Taxpayer's reason for refund (attach supporting documentation): **PAYER PAID ON INCORRECT PARCEL AND IS REQUESTING PAYMENT BE APPLIED TO CORRECT ACCOUNT. \$1000.00.064.0008.00- REFUND ANY OVERAGE. HCTO - \$2,362.36 REFUND TO T/P - \$510.25**

JT

Step 4:	"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 the form	Signature sign here Carlos R Garza *	Date of application for tax refund 4-13-23
	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	
sign here	Authorized officer Linda Jorg	Date 06/08/2023
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.14 tax code) Jane Hillman *	Date 4/21/23

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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	APPROVED BY: E.L.	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 5/18/2023 05/30/23 <i>CM</i>	Phone (area code and number) (956) 318-2157

[Signature] **6/8/2023**

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

Step 1: Owner's name and address	Owner's name PENA JOSE LUIS (PD BY: CAPITAL TITLE OF TEXAS) *
	Present mailing address (number and street) 6928 W 7 MILE RD
	City, town or post office, state, ZIP code MISSION, TX 78573
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN TO SHARYLAND-E220.1'-W661.6'-S989.5' LOT 53-1 5.0AC GR 4.90AC NET**

Step 2: Describe the property	Address or location of property: 319159 *	Tax receipt number:
	Account number of property: W0100.00.053.0001.02 *	OR 51054768

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	2022	10/25 / 2022	\$ 4,104.08	\$ 4,104.08
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4,104.08 *

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR TAXPAYER IS NOT RESPONSIBLE TO PAY FOR 2022 TAX YEAR BR**

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 <i>[Signature]</i> *	Date of application for tax refund 3/9/2023
	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>[Signature]</i>	Date 06/08/2023
	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 <i>[Signature]</i> *	Date 4/21/23

APPLICATION FOR TAX REFUND

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
Present mailing address (number and street) P O BOX 178	HIDALGO COUNTY AUDITOR'S OFFICE APPROVED BY: E.L.
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 5/22/2023 5/30/23 <i>CM</i> <i>6/8/2023</i>
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 MORALES ERNESTO RUBEN D (PD BY: CORELOGIC TAX SERVICES, LLC)
Owner's name and address	Present mailing address (number and street) 500 SUNFLOWER AVE
	City, town or post office, state, ZIP code MCALLEN, TX 78504-2920
	Phone (area code and number)

Step 2:	Legal description (or attach copy of the tax bill or tax receipt): HERITAGE MANOR #2 LOTS 13 & 14 UNIT 2
Describe the property	Address or location of property: 500 SUNFLOWER AVE
	188327 *
	Account number of property: H2050.02.000.0013.00 * OR 52426677
	Tax receipt number:

Step 3:	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
Give the tax payment information	1. ALL ENTITIES	2022 *	12/29 / 2022	\$ 8,556.42	\$ 8,556.42 *
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 8,556.42 *

R	Taxpayer's reason for refund (attach supporting documentation): TAXPAYER PAID ON INCORRECT PARCEL IS REQUESTING FOR FUNDS TO BE APPLIED TO CORRECT ACCT #1372920 \$7708.50 - applied to acct#1372920 and \$847.92 refund to taxpayer.
	JVR

Step 4:	"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 the form	Signature <i>Lorenna K... *</i>	Date of application for tax refund 04/21/2023
	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 <i>Linda Fong</i>	Date 06/08/2023
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approved is required under Section 31.11, tax code) <i>Paul Hill</i> *	Date 4/28/23

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPLICATION FOR TAX REFUND APPROVED BY: 05/30/23 LV

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
Present mailing address (number and street) P O BOX 178	DATE: 5/30/23 CM 6/8/2023
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 ✓ LOPEZ MARIA ALVINA (PD BY: FREEDOM MORTGAGE)(CoreLogic)	
Owner's name and address	Present mailing address (number and street) 2408 THAMES DR	
	City, town or post office, state, ZIP code EDINBURG, TX 78539	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **JAMES COURT LOT 18**

Step 2:	Describe the property	
	Address or location of property: 2412 THAMES DRIVE	
	1306314	
	Account number of property: 13325.00.000.0018.00	Tax receipt number: OR 50816580

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	\$ 8,531.35	\$ 8,531.35
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 8,531.35 ✓

Taxpayer's reason for refund (attach supporting documentation): **CERTIFIED OWNER CAME FORWARD AND INFORMED US THAT FREEDOM MORTGAGE IS NOT HER MORTGAGE COMPANY**

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 [Signature]	Date of application for tax refund 8/5/22
	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 [Signature]	Date 06/08/2023
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 34.11, tax code) sign here [Signature]	Date 8/16/22

APPROVED BY: *Francisco Saenz*

DATE: 5/18/2023 5/30/23 *CM*

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	<i>[Signature]</i> 6/7/2023	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		
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 GALLARDO SAMUEL M & PALOMA F (PD BY: ISIDRO RODRIGUEZ) <i>φ</i>
	Present mailing address (number and street) 14123 CAVAZOS LN
	City, town or post office, state, ZIP code MERCEDES, TX 78570-4488
	Phone (area code and number)
Legal description (or attach copy of the tax bill or tax receipt): NORTH CAPISALLO W330'-N132'-S924' FT 2042 1.0AC GR0.94AC NET A/K/A S 1/S LT 4	

Step 2: Describe the property	Address or location of property:
	245883 <i>φ</i>
	Account number of property:
	N3400.00.000.2042.19 <i>φ</i> OR 47423919
	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	2020 <i>φ</i>	05/21 / 2021	\$ 1,070.94 <i>φ</i>	\$ 1,070.94 <i>φ</i>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 1,070.94 <i>φ</i>
Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR TAXPAYER IS NOT RESPONSIBLE TO PAY ON THIS ACCT WANTS PAYMENT TO BE APPLIED TO ACCT. 245872 BR					

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 <i>Signature</i> <i>Isidro Rodriguez <i>φ</i></i>	Date of application for tax refund 4-25-23
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	
	sign here <i>Authorized officer</i> <i>Linda Jorg</i>	Date 06/07/2023
	sign here <i>Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 317.1, tax code)</i> <i>Paul Tillman <i>φ</i></i>	Date 4/27/23