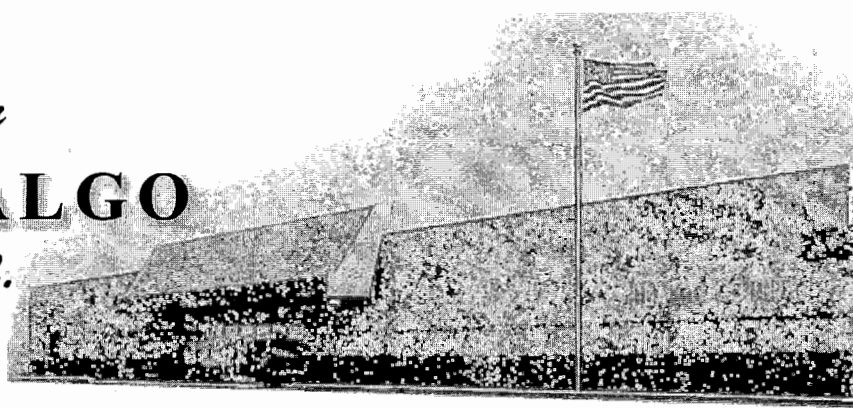


Office of Tax Assessor-Collector

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 23, 2023

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

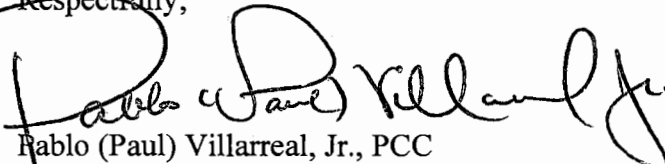
Re: See attached list

Commissioners Court:

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.

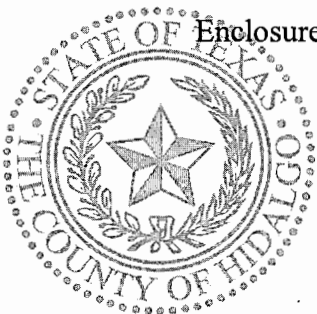
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,


Pablo (Paul) Villarreal, Jr., PCC

JT

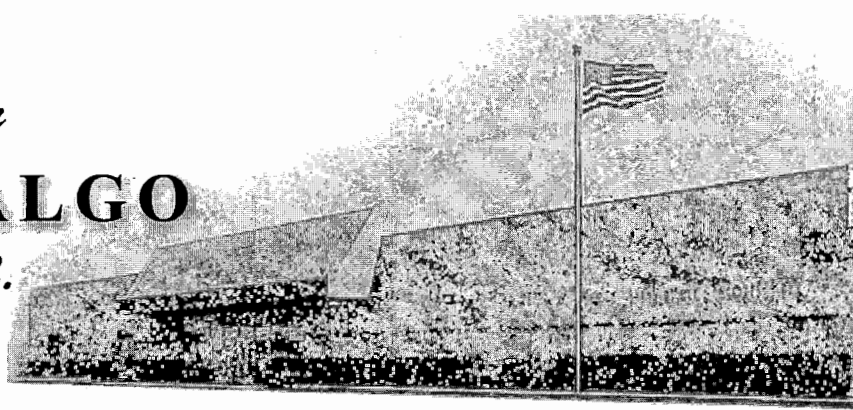
Enclosure



Office of Tax Assessor-Collector

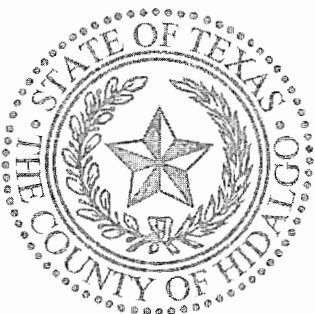
COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
L4737.99.00C.0001.13	DOCTORS HOSPITAL AT RENAISSANCE	\$61,864.49
M4932.00.000.0007.00	PAEZ PROPERTY HOLDING LLC	\$7,575.90
P6451.01.000.0004.00	FAAT INVESTMENT GROUP LLC	\$12,505.92
P6451.99.000.0004.00	MEDRANO PRODUCE LLC	\$35,444.78
P7545.01.000.0001.00	EL CAMPU LLC	\$22,796.43



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

APPLICATION FOR TAX REFUND

THE HIDALGO COUNTY AUDITOR'S OFFICE

Collection office name HIDALGO COUNTY TAX OFFICE	APPROVED BY: 05/26/23 LV	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	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<i>[Signature]</i> 6/7/2023	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 and address	Owner's name DOCTORS HOSPITAL AT RENAISSANCE ✓ WOMENS IMAGING CENTER/EMILY RIVERA A/P D
	Present mailing address (number and street) PO BOX 3293
	City, town or post office, state, ZIP code MCALLEN, TX 78502-3293
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT
	300 LINBERG AVE / NEW ACCT 2011
	Address or location of property: 300 LINDBERG AVE
	799858 ✓
Account number of property: L4737.99.00C.0001.13 ✓	Tax receipt number: OR 53325868

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	\$ 70,183.25 ✓
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 61,864.49 ✓

Taxpayer's reason for refund (attach supporting documentation): SUPP 6 SUBMITTED/ENTERED
WRONG.
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 <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.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	sign here <i>[Signature: Lunda Jorg]</i>	Date 06/08/2023
	sign here <i>[Signature: and Jillean]</i>	Date 5/18/23

[Handwritten initials]
5/17/23

APPLICATION FOR TAX REFUND THE HIDALGO COUNTY AUDITOR'S OFFICE

Collection office name HIDALGO COUNTY TAX OFFICE	APPROVED BY: <u>05/26/23 LV</u>	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: <u>5/30/23 CM</u>	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<u>6/7/2023</u>	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 PAEZ PROPERTY HOLDING, LLC ✓
	Present mailing address (number and street) 2220 S 48TH ST
	City, town or post office, state, ZIP code MCALLEN, TX 78503-7322

Phone (area code and number)
(956) 318-2157

Legal description (or attach copy of the tax bill or tax receipt): **MISSION BUSINESS PARK LOT 7**

Step 2: Describe the property	Address or location of property: 106 INTERNATIONAL BLVD	
	516551 ✓	
	Account number of property: M4932.00.000.0007.00 ✓	Tax receipt number: OR 51872715

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	✓	12/29 / 2022	\$ 41,002.27
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 7,575.90

Taxpayer's reason for refund (attach supporting documentation): **SUPP 6 THIS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE 41.411**

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 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 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: 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 31.11, tax code) sign here [Signature: ...]	Date 5/18/23

CMR
5/17/23

APPLICATION FOR TAX REFUND

THE HIDALGO COUNTY AUDITOR'S OFFICE

Collection office name HIDALGO COUNTY TAX OFFICE	APPROVED BY: <u>05/26/23 LV</u>	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: <u>5/30/23 CM</u>	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<u>6/7/2023</u>	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: **FAAT INVESTMENT GROUP LLC** ✓
 Present mailing address (number and street): **1200 S DANNER RD**
 City, town or post office, state, ZIP code: **PHARR, TX 78577-6014** Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **PHARR PRODUCE DISTRICT PH 1 LOT 4 & 5**

Step 2: Describe the property

Address or location of property: **10900 S PALM DR**
846168 ✓
 Account number of property: **P6451.01.000.0004.00** ✓ Tax receipt number: **OR 51411490**

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 ✓	11/28 / 2022	\$ 84,625.82 ✓	\$ 12,505.92
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 12,505.92 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 6 THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SECTION 41.411**
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 jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

sign here: Authorized officer: Linda Fong Date: 06/08/2023

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): [Signature] Date: 5/18/23

OMP
5/18/23

APPLICATION FOR TAX REFUND THE HIDALGO COUNTY AUDITOR'S OFFICE

Collection office name HIDALGO COUNTY TAX OFFICE	APPROVED BY: <u>05/26/23 LV</u>	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: <u>5/30/23 CM</u>	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<u>6/7/2023</u>	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 MEDRANO PRODUCE LLC ✓
	Present mailing address (number and street) 10900 S PALM DR
	City, town or post office, state, ZIP code PHARR, TX 78577
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY SUPPLIES FURNITURE FIXTURES &**

Step 2: Describe the property	EQUIPMENT AT 10900 S PALM DR / NEW ACCT 2022	
	Address or location of property: 10900 S PALM DR	
	1378529 ✓	
	Account number of property: P6451.99.000.0004.00 ✓	Tax receipt number: OR 51844396

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 ✓	12/27 / 2022	\$ 72,579.63 ✓	\$ 35,444.78
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 35,444.78 ✓
Taxpayer's reason for refund (attach supporting documentation): SUPP 6 SUBMITTED/ENTERED					
WRONG					
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 sign here →	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	
	Authorized officer sign here → <u>Linda Fong</u>	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 → <u>Paul Gilliam</u> ✓	Date 5/18/23

5/17/23

APPLICATION FOR TAX REFUND THE HIDALGO COUNTY AUDITOR'S OFFICE

Collection office name HIDALGO COUNTY TAX OFFICE	APPROVED BY: 05/26/23 LV	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 <i>CM</i>	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	<i>6/7/2023</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 and address	Owner's name EL CAMPU LLC ✓
	Present mailing address (number and street) 2408 EL ENCINO DR
	City, town or post office, state, ZIP code MISSION, TX 78573-8446
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): PLAZA SPORT CENTER PHASE I LOT 1 EXC AN
	IRR 3.27AC TR
	Address or location of property: 1101 E NOLANA LOOP
	845939 ✓
Account number of property: P7545.01.000.0001.00 ✓	Tax receipt number: OR 52462887

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 ✓	01/17 / 2023	\$ 58,652.20 ✓	\$ 22,796.43
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 22,796.43 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 6 THIS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SECTION 41.411**

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>Linda Fong</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	
	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 approval is required under Section 31.11, tax code) <i>Jane Hillman</i>	Date 5/18/23

5/17/23