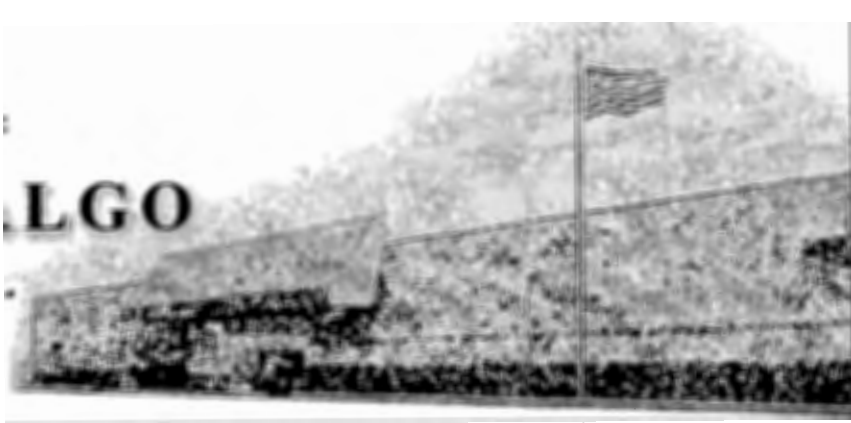


Office of Tax Assessor-Collector

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

FEBRUARY 13, 2024

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.

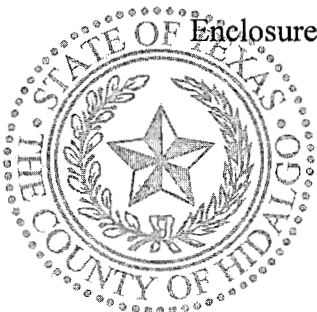
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,


Pablo (Paul) Villarreal, Jr., PCC

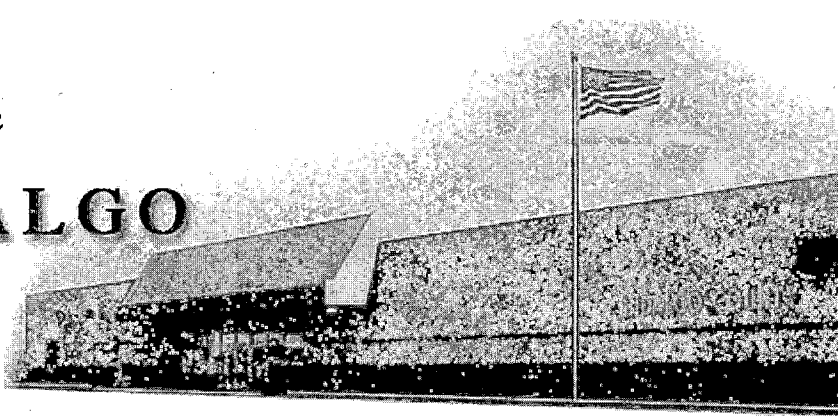
JV

Enclosure



Office of Tax Assessor-Collector

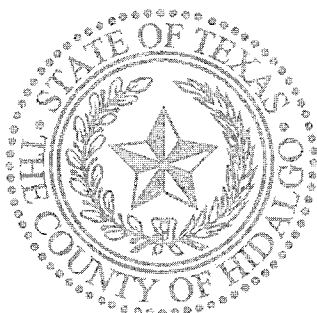
COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.
Hidalgo County Tax Assessor-Collector

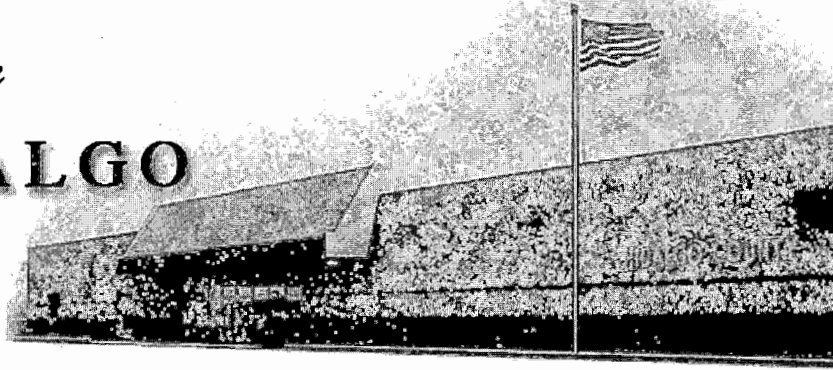
P.O. Box 178
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Fax (956) 318-2733
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ACCOUNT NUMBER	PAYER	AMOUNT
L6710.0A.000.0019.00	LEAL AURELIO & ESMERALDA	\$2,720.99
M1855.00.000.0007.00	MILLER JEFFERY D & MELISSA Y	\$2,723.79
L6225.03.000.0205.00	HALCOMB TIMOTHY H & DEBRA J	\$2,794.31
B3990.00.000.0002.00	DOMINGUEZ MARIELA DE JESUS & EDWARD	\$2,812.44
L6446.01.000.0134.00	ALMEDA JOSE LUIS & ANA MARCELA HERNANDEZ	\$2,842.16
L3388.00.000.0021.00	SINGLETON JOHN B	\$2,996.67
D2949.02.000.0179.00	GARCIA EDUARDO & JEANETTE	\$3,128.06
D2949.02.000.0179.00	GARCIA EDUARDO & JEANETTE	\$3,162.42
D2949.02.000.0179.00	GARCIA EDUARDO & JEANETTE	\$3,178.42
E3300.00.188.0005.00	MUSEUM OF SOUTH TEXAS HISTORY	\$3,456.80
C9538.02.000.0164.00	JAIME DANTE I	\$3,686.49
L1060.00.000.0051.00	2909 & 2913 NORTH 29TH LAND SERIES	\$4,146.26
L0920.02.000.0230.00	GUERRA EFRAIN SR	\$4,329.47



Office of Tax Assessor-Collector

COUNTY of HIDALGO



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Hidalgo County Tax Assessor-Collector

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Edinburg, Texas 78540-0178
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ACCOUNT NUMBER	PAYER	AMOUNT
L1956.01.000.0041.00	SALINAS ARON & DELIA	\$4,897.60
G4900.00.002.0001.00	GARZA-LEOPOLDO & ELIZABETH	\$5,222.36
N3010.99.000.00A1.95	EL CALLEJON DE LOS MILAGROS CALLEJON RESTAURAN	\$5,249.92
L0920.02.000.0174.00	MARISCAL EDUARDO & CLAUDIA R	\$5,331.25
L3074.03.000.0036.00	POOLE STEVEN ANDREW	\$7,289.12
A2360.00.000.0001.00	PRO HOME INVESTMENTS LLC	\$7,454.63
L1060.00.000.0028.00	SUMMER SQUARE APARTMENTS SERIES A SERIES	\$7,567.31
B4840.00.000.0004.00	MARTINEZ OTONIEL & KARINA	\$10,771.71
P7725.00.000.0002.00	FALL-PASO LP	\$16,605.57
J5700.99.000.0006.16	TOPS LSC	\$18,019.99
J5700.99.000.0006.16	TOPS LSC	\$18,196.25
K1800.99.005.0001.03	DFA DAIRY BRANDS LLC (PT)	\$46,203.32
K1800.99.005.0001.02	DFA DAIRY BRANDS LLC (PT)	\$58,035.89



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	
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 LEAL AURELIO & ESMERALDA ✓
	Present mailing address (number and street) 3206 LAGO SUPERIOR
	City, town or post office, state, ZIP code MCALLEN, TX 78504-5667
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): LUMEN PH A LOT 19
	Address or location of property: 3206 LAGO SUPERIOR
	1074982 ✓
	Account number of property: L6710.0A.000.0019.00 ✓ OR 51737915

THE HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: 2/5/24 LV
 DATE: CM 2/17/2024 [Signature] 2/18/2024

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 ✓	12/20 / 2023	\$ 9,178.19 ✓
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2,720.99 ✓

Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209 ✓
GRANT HS & DP Q/YR 2021 FILED LATE ✓
JT

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 →	Date 2/12/2024
	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) sign here →	Date 1/23/24

[Handwritten Signature]
[Handwritten Signature]
 Jablo (Paul) Villanueva ✓

JE
1-16-24

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	
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 MILLER JEFFERY D & MELISSA Y ✓
	Present mailing address (number and street) 614 RAMIREZ LANE
	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): **MAYBERRY GARDENS LOT 7**

Step 2: Describe the property	THE HIDALGO COUNTY AUDITOR'S OFFICE	
	APPROVED BY: <u>2/5/24 LV</u>	
	Address or location of property: 614 RAMIREZ LN	DATE: <u>CML 2/17/2024</u> <u>JT 2/18/2024</u>
	716985 ✓	
Account number of property:	Tax receipt number:	
M1855.00.000.0007.00 ✓	OR	51737915

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 ✓	12/2022	\$ 5,178.04 ✓	\$ 2,723.79 ✓
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,723.79 ✓
Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209 ✓					
GRANT DVHS AS OF PRORATED DATE 6/23/22 FILED LATE ✓					
JT					

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 →	Date 2/12/2024
	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 →	Date 1/23/24

JT
1-11-24

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	
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 HALCOMB TIMOTHY H & DEBRA J ✓
	Present mailing address (number and street) 3725 VIEW POINT DR
	City, town or post office, state, ZIP code EDINBURG, TX 78542-5691
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): LOS LAGOS PH 3 LOT 205
	THE HIDALGO COUNTY AUDITOR'S OFFICE
	Address or location of property: 3725 VIEW POINT DR DATE: <u>2/5/24 LV</u> <u>DATE: CM 2/7/2024</u> <u>2/8/2024</u>
	Account number of property: 673672 ✓ Tax receipt number: L6225.03.000.0205.00 ✓ OR 51737915

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 ✓	12/20 / 2022	\$ 3,946.68	\$ 2,794.31 ✓
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2,794.31 ✓
Taxpayer's reason for refund (attach supporting documentation): SUPP 03 RF231209 ✓					
GRANT DV4 FOR 2022 ONLY/GRANT DVHS AS OF PRORATED DATE 4-19-2022 ✓ FILED LATE					
JT					

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	Date 2/12/2024
	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) sign here	Date 1/23/24

(Handwritten signatures and dates)

Signature: *[Signature]* Date: 2/12/2024

Signature: *[Signature]* Date: 1/23/24

JF 1-23-24

APPROVED BY: Alejandro Torres

2/8/2024 DATE: 2/5/2024 CM 2/8/2024

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	
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 DOMINGUEZ MARIELA DE JESUS & EDWARD ✓
	Present mailing address (number and street) 4018 W SPRAGUE ST
	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): **BRANDY ESTATES LOT 2**

Step 2: Describe the property	Address or location of property: 4018 W SPRAGUE ST
	507102 ✓
	Account number of property: B3990.00.000.0002.00 ✓ OR Tax receipt number: 51737915

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	12/20	/ 2022	\$ 10,930.40
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2,812.44 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209**

GRANT HS AS PRORATION DATE AS OF 10/14/2022 & DP QY 2022 FILED LATE APPLY REFUND \$2,812.44 TO HCTO TO ACCOUNT B3990.00.000.0003.00/507104

JT

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	Date 2/12/2024
	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	Date 1/23/24

JF
1-22-24

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	
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 ALMEDA JOSE LUIS & ANA MARCELA HERNANDEZ ✓	
	Present mailing address (number and street) 101 E DUKE AVE	
	City, town or post office, state, ZIP code MCALLEN, TX 78504-5667	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LOS VENADOS PH 1 'AMENDED' LOT 134 & 136**

Step 2: Describe the property	Address or location of property: 20907 LOS VENADOS DR	
	672162 ✓	
	Account number of property: L6446.01.000.0134.00 ✓	Tax receipt number: 54394750/54816851
	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	2023	11/06 / 2023	\$ 2,975.35 ✓	\$
	2. EDINBURG CISD	2023	12/11 / 2023	\$ 146.45 ✓	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ 3,121.80 ✓	\$ 2,842.16 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF 231209** ✓

GRANT AG USE THE HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: 2/5/24 LV
 JT DATE: CM 2/7/2024 2/8/2024

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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	sign here Authorized officer	Date 2/12/2024
	sign here Collector(s) of taxing unit(s) for which applications over (insert amount for which governing body approval is required under Section 3.11, tax code)	Date 1/23/24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	2/18/2024	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: 2/2/2024 CM 2/16/2024	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 SINGLETON JOHN B ✓
Owner's name and address	Present mailing address (number and street) 5608 PELICAN AVE
	City, town or post office, state, ZIP code MCALLEN, TX 78504
	Phone (area code and number)

Step 2:	Legal description (or attach copy of the tax bill or tax receipt): LAS VILLAS DEL RIO AT THE GROVES ON SHARY LOT 21
Describe the property	Address or location of property: 5608 PELICAN AVE
	1178668 ✓
	Account number of property: L3388.00.000.0021.00 ✓
	Tax receipt number: OR 54522343

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	2023 ✓	11/20 / 2023	\$ 8,355.13	\$ 2,996.67 ✓
		2.		/	\$	\$
		3.		/	\$	\$
		4.		/	\$	\$
		5. TOTAL		/	\$ ✓	\$ 2,996.67 ✓
	Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209					
	CORRECTING Q/YR; GRANT DVHS FILED LATE					
	JT					

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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved
	sign here → Authorized officer	Date 2/12/2024
	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 1/23/24

JT
 1-11-24

APPLICATION FOR TAX REFUND

RT 2/8/2024

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 GARCIA EDUARDO & JEANETTE ✓
	Present mailing address (number and street) 602 S MINA DE ORO ✓
	City, town or post office, state, ZIP code MISSION, TX 78572-9735
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DEL ORO UT NO. 2 LOT 179**

Step 2: Describe the property	Address or location of property: 602 S MINA DE ORO
	696985 ✓
	Account number of property: D2949.02.000.0179.00 OR Tax receipt number: 45335957

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	12/17	/ 2020	\$ 3,128.06
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3,128.06 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP # 3**

GRANT DVHS (PRORATED DATE: 05-28-2019) Q/YR 2019 FILED LATE

JT

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 →	Date 2/12/2024
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 39.11, tax code) sign here →	Date 1/23/24

Abdo e Paul Villanueva ✓
JE
1-11-24

APPROVED BY: Alejandro Torres

DATE: 2/5/2024 CM 2/8/2024

2/8/2024

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	
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 GARCIA EDUARDO & JEANETTE ✓
	Present mailing address (number and street) 602 S MINA DE ORO ✓
	City, town or post office, state, ZIP code MISSION, TX 78572-9735
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DEL ORO UT NO. 2 LOT 179**

Step 2:
Describe the property

Address or location of property: **602 S MINA DE ORO**

696985 ✓

Account number of property: **D2949.02.000.0179.00** ✓

Tax receipt number: **OR 48918755**

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	\$ 3,162.42
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3,162.42 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP # 3**

GRANT DVHS (PRORATED DATE: 05-28-2019) Q/YR 2019 FILED LATE

JT

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

Date **2/12/2024**

sign here → 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)

Jillancy ✓

Date **1/23/24**

JE
1-11-24

APPROVED BY: Alejandro Torres

DATE: 2/15/2024 *CM* 2/18/2024

APPLICATION FOR TAX REFUND

[Signature] 2/18/2024

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-SMI-SMS-SSI-SWI-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 GARCIA EDUARDO & JEANETTE ✓
	Present mailing address (number and street) 602 S MINA DE ORO ✓
	City, town or post office, state, ZIP code MISSION, TX 78572-9735

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DEL ORO UT NO. 2 LOT 179**

Step 2: Describe the property	Address or location of property: 602 S MINA DE ORO ✓
	696985 ✓
	Account number of property: D2949.02.000.0179.00 OR Tax receipt number: 48918755

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 ✓	12/20	/ 2022	\$ 3,178.42
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 3,178.42 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP # 3**

GRANT DVHS (PRORATED DATE: 05-28-2019) Q/YR 2019 FILED LATE

JT

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 →	Date 2/12/2024
	Collector(s) of taxing unit(s) for refund applications cover (insert amount for which governing body approval is required under Section 31.11, tax code) sign here →	Date 1/23/24

JE
1-11-24

APPROVED BY: Alejandro Torres

2/8/2024

DATE: 2/2/2024 CM 2/8/2024

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-SWI-ICC					
Present mailing address (number and street) P O BOX 178		City, town or post office, state, ZIP code EDINBURG TX 78540-0178					
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 MUSEUM OF SOUTH TEXAS HISTORY ✓						
	Present mailing address (number and street) 200 N CLOSNER BLVD ✓						
	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): EDINBURG TOWNSITE LOT 5-6-7 BLK 188							
Step 2: Describe the property	Address or location of property: 120 E LOEB ST Parcel Address ✓						
	164660 ✓						
	Account number of property: E3300.00.188.0005.00 ✓		Tax receipt number:				
			OR 51790337				
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 ✓	12/21	/ 2022	\$ 4,205.76	\$ 3,456.80
	2.				/	\$	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5. TOTAL				/	\$	✓ \$ 3,456.80 ✓
	Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209						
GRANT FULL EXEMPT AS OF 3-7-2022 ✓							
JT							
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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved						
	sign here	Authorized officer				Date	
	sign here	Collector(s) of taxing unit(s) the refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)				Date	

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[Handwritten signature]
[Handwritten signature]

2/12/2024

1/23/24

JF
1-23-24

APPLICATION FOR TAX REFUND

2/8/2024

DATE: 2/5/2024 CM 2/8/2024

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 <input checked="" type="checkbox"/> JAIME DANTE I
	Present mailing address (number and street) 812 CHICKADEE <input checked="" type="checkbox"/>
	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): **CRYSTAL ESTATES PH 2 LOT 164**

Step 2: Describe the property	Address or location of property: 812 CHICKADEE AVE <input checked="" type="checkbox"/>
	648333 <input checked="" type="checkbox"/>
	Account number of property: C9538.02.000.0164.00 <input checked="" type="checkbox"/> OR 51737915
	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	2022	12/20 / 2022	\$ 4,281.10	\$ 3,686.49 <input checked="" type="checkbox"/>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 3,686.49 <input checked="" type="checkbox"/>
Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209					
GRANT HS QY 2021/GRANT DVHS AS OF PRORATED DATE 2/27/2022 FILED LATE					
JT					

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	Date 2/12/2024
	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	Date 2/23/24

JE 1-11-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE <i>[Signature]</i> 2/8/2024	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	Phone (area code and number) (956) 318-2157
DATE: 2/2/2024 <i>CM 2/6/2024</i>	

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

Step 1:	Owner's name 2909 & 2913 NORTH 29TH LANE SERIES A SERIES OF SUNSET SUNRISE LLC ✓
Owner's name and address	Present mailing address (number and street) 9 POND VIEW AVE
	City, town or post office, state, ZIP code MEDFEILD, MA 02052-2830
	Phone (area code and number)

Step 2:	Legal description (or attach copy of the tax bill or tax receipt): LA HACIENDA ESTATES LOT 51 & 52
Describe the property	Address or location of property: 2909 N 29TH LN
	209451 ✓
	Account number of property: L1060.00.000.0051.00 ✓
	Tax receipt number: OR 5333535

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 ✓	1/31 / 2023	\$ 10,146.26	\$ 4,146.26
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ ✓	\$ 4,146.26 ✓
	Taxpayer's reason for refund (attach supporting documentation): SUPP 4 RF.231210				
	ARBITRATION DETERMINATION AND AWARD; ARB ID# 10822000039 SECT 41 A.09 PTC DETERMINATION DATE: 9/20/23.				
	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 <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	Authorized officer <i>[Signature]</i>	Date 2/12/2024
sign here	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.01, tax code) <i>Fabio (Paul) Villanueva</i> ✓	Date 1/24/24

JE 1-22-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	<i>[Signature]</i> 2/8/2024	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: 2/2/2024 <i>CM 2/7/2024</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 GUERRA EFRAIN SR ✓
	Present mailing address (number and street) 1916 OZARK AVE
	City, town or post office, state, ZIP code MCALLEN, TX 78504-0587

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA FLORESTA PH 2 LOT 230**

Step 2: Describe the property	Address or location of property: 1916 OZARK AVE
	1073062 ✓
	Account number of property: L0920.02.000.0230.00 ✓
	Tax receipt number: OR 51737915

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 ✓	12/20	/ 2022	\$ 5,847.04
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4,329.47 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF 231209**

**GRANT HS (PRORATED DATE: 04-11-22) & DVHS (PRORATED DATE: 04-11-22)
Q/YR 2022 FILED LATE**

JT

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]</i>	Date 2/12/2024
	sign here <i>[Signature]</i>	Date 1/23/24

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.17, tax code)

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Date 2/8/2024	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	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	APPROVED BY: E.L.	Phone (area code and number) (956) 318-2157
	DATE: 2/2/2024 <i>CM 2/7/2024</i>	

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

Step 1:	Owner's name SALINAS ARON & DELIA
Owner's name and address	Present mailing address (number and street) 4305 STILLWATER CV
	City, town or post office, state, ZIP code EDINBURG, TX 78542-1448
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA SIENNA DEVELOPMENT THE COVES PH 1**

Step 2:	Describe the property
	SEC 1 LOT 41 - AMENDED
	Address or location of property: 4305 STILLWATER COVE
	20407355 ✓
	Account number of property: L1956.01.000.0041.00 ✓
	Tax receipt number: OR 51737915

Step 3:	Give the tax payment information																														
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">Name Of Taxing Unit from Which Refund is Requested</th> <th style="width:15%;">Year for Which Refund is Requested</th> <th style="width:15%;">Date of the Tax Payment</th> <th style="width:15%;">Amount of Taxes Paid</th> <th style="width:20%;">Amount of Tax Refund Requested</th> </tr> </thead> <tbody> <tr> <td>1. ALL ENTITIES</td> <td>2022 ✓</td> <td>12/20 / 2022</td> <td>\$ 8,402.84</td> <td>\$ 4,897.60</td> </tr> <tr> <td>2.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>3.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>4.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>5. TOTAL</td> <td></td> <td>/</td> <td>\$</td> <td>✓ \$ 4,897.60 ✓</td> </tr> </tbody> </table>	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 / 2022	\$ 8,402.84	\$ 4,897.60	2.		/	\$	\$	3.		/	\$	\$	4.		/	\$	\$	5. TOTAL		/	\$	✓ \$ 4,897.60 ✓
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 / 2022	\$ 8,402.84	\$ 4,897.60																											
2.		/	\$	\$																											
3.		/	\$	\$																											
4.		/	\$	\$																											
5. TOTAL		/	\$	✓ \$ 4,897.60 ✓																											

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209**

GRANT HS QY 2021/ GRANT DVHS AS OF PRORATED DATE 6/11/2022 FILED LATE

JT

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."		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Signature sign here</td> <td>Date of application for tax refund</td> </tr> </table>	Signature sign here	Date of application for tax refund
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				
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Authorized officer sign here</td> <td>Date 2/12/2024</td> </tr> <tr> <td>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</td> <td>Date 2/23/24</td> </tr> </table>	Authorized officer sign here	Date 2/12/2024	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	Date 2/23/24
Authorized officer sign here	Date 2/12/2024				
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	Date 2/23/24				

JE 1-11-24

APPROVED BY: Alejandro Torres

2/8/2024

DATE: 2/7/2024 CM 2/8/2024

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	
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 GARZA LEOPOLDO & ELIZABETH ✓
	Present mailing address (number and street) 1600 HERITAGE LN ✓
	City, town or post office, state, ZIP code MISSION, TX 78572-4528
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **GOLDEN CREST MANOR PH 2 LOT 1 BLK 2**

Step 2: Describe the property	Address or location of property: 1600 HERITAGE LN
	180248 ✓
	Account number of property: G4900.00.002.0001.00 ✓
	Tax receipt number: OR 51869480

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	12/28 / 2022	\$ 6,314.19	\$ 5,222.36 ✓
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5.		/	\$	\$ 5,222.36 ✓
Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209					
GRANT DVHS AS OF PRORATED DATE 3/1/2022 FILED LATE					
JT					

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 →	Date 2/12/2024
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 51.11, tax code) sign here →	Date 1/24/24

(Handwritten signatures and initials)

JF
1-11-24

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	
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 EL CALLEJON DE LOS MILAGROS CALLEJON RESTAURANTS LLC ✓
	Present mailing address (number and street) 400 W NOLANA AVE STE U
	City, town or post office, state, ZIP code MCALLEN, TX 78504-3037

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 400 W NOLANA STE U / NEW ACCT 2018	THE HIDALGO COUNTY AUDITOR'S OFFICE
	Address or location of property: 400W NOLANA AVE STE-U	APPROVED BY: <u>2/5/24 LV</u>
	1128910 ✓	DATE: <u>2/17/2024</u> <i>[Signature]</i> 2/18/2024
	Account number of property: N3010.99.000.00A1.95 ✓	Tax receipt number: OR 54170193

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 ✓	09/07/	/ 2023	\$ 8,259.99 ✓
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ ✓	\$ 5,249.92 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209 ✓**

SUBMITTED/ENTERED WRONG 10% RENDITION PENALTY WAIVED ✓

JT

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 <i>[Signature]</i>	Date of application for tax refund 2/12/2024

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 2/12/2024
	Collector(s) of taxing unit(s) to refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here <i>[Signature]</i>	Date 1/23/24

56
1/11/24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	<i>[Signature]</i> 2/8/2024 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: 2/2/2024 <i>CM</i> 2/16/2024	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 MARISCAL EDUARDO & CLAUDIA R. ✓
	Present mailing address (number and street) 1912 PROVIDENCE AVE
	City, town or post office, state, ZIP code MCALLEN, TX 78504-5658
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): LA FLORESTA PH 2 LOT 174
	Address or location of property: 1912 PROVIDENCE AVE
	1073006 ✓
	Account number of property: L0920.02.000.0174.00 ✓ OR Tax receipt number: 51737915

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 ✓	12/20	1 2022	\$ 5,331.25	\$ 5,331.25 ✓
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 5,331.25 ✓
Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209						
GRANT DVHS FILED LATE						
JT						

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]</i>	Date 2/12/2024
	sign here <i>[Signature]</i>	Date 2/23/24

JF
1-11-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	<i>[Signature]</i> 2/8/2024 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: 2/2/2024 <i>CM</i> 2/7/2024	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 POOLE STEVEN ANDREW ✓
	Present mailing address (number and street) 2306 N 26TH ST
	City, town or post office, state, ZIP code HIDALGO, TX 78557

Legal description (or attach copy of the tax bill or tax receipt): **LAS ARBOLEDAS DE HIDALGO PH 3 LOT 36**

Step 2: Describe the property	Address or location of property: 2306 N 26TH ST
	1307631 ✓
	Account number of property: L3074.03.000.0036.00 ✓
	Tax receipt number: OR 51737915

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	12/20	/ 2022	\$ 7,289.12
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 7,289.12 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209**
GRANT HS/DVHS Q/YR 2022 FILED LATE
JT

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 → <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	
	Authorized officer sign here → <i>[Signature]</i>	Date 2/12/2024
	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 1/23/24

JFE
1-11-24

APPROVED BY: Alejandro Torres

2/8/2024

DATE: 2/5/2024 CM 2/8/2024

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						
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 PRO HOME INVESTMENTS LLC ✓					
	Present mailing address (number and street) 200 S 10TH ST STE 1601-A ✓					
	City, town or post office, state, ZIP code MCALLEN, TX 78501-4859		Phone (area code and number)			
Legal description (or attach copy of the tax bill or tax receipt): ALBA PLAZA N223.32' LOT 1						
Step 2: Describe the property	Address or location of property: 608 N SHARY RD					
	1238655 ✓					
	Account number of property: A2360.00.000.0001.00		Tax receipt number: 54459782			
	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	2023	11/13 / 2023	\$ 39,588.50	\$ 7,454.63	
	2.		/	\$	\$	
	3.		/	\$	\$	
	4.		/	\$	\$	
	5.		/	\$	\$ 7,454.63 ✓	
Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209						
THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SECTION 41.411						
JT						
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: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved					
	sign here	Authorized officer			Date	
	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	

(Signature) **2/12/2024**

(Signature) **1/23/24**

SE 1-11-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE <i>[Signature]</i> 2/8/2024 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
HIDALGO COUNTY AUDITOR'S OFFICE APPROVED BY: E.L.	DATE: 2/2/2024 <i>CM</i> 2/6/2024

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

Step 1:	Owner's name SUMMER SQUARE APARTMENTS SERIES A SERIES ✓ Present mailing address (number and street) 9 POND VIEW AVE City, town or post office, state, ZIP code MEDFIELD, MA 02052-2830	Phone (area code and number)
----------------	--	------------------------------

Legal description (or attach copy of the tax bill or tax receipt): LA HACIENDA ESTATES LOT 28 & 29

Step 2:	Describe the property Address or location of property: 2701 N 30 TH ST 209428 ✓ Account number of property: L1060.00.000.0028.00 ✓ Tax receipt number: OR 5333535
----------------	--

Step 3:	Give the tax payment information																														
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">Name Of Taxing Unit from Which Refund is Requested</th> <th style="width:15%;">Year for Which Refund is Requested</th> <th style="width:15%;">Date of the Tax Payment</th> <th style="width:15%;">Amount of Taxes Paid</th> <th style="width:15%;">Amount of Tax Refund Requested</th> </tr> </thead> <tbody> <tr> <td>1. ALL ENTITIES</td> <td>2022 ✓</td> <td>1/31 / 2023</td> <td>\$ 18,567.31</td> <td>\$ 7,567.31</td> </tr> <tr> <td>2.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>3.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>4.</td> <td></td> <td>/</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>5. TOTAL</td> <td></td> <td>/</td> <td>\$</td> <td>✓ \$ 7,567.31 ✓</td> </tr> </tbody> </table>	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 ✓	1/31 / 2023	\$ 18,567.31	\$ 7,567.31	2.		/	\$	\$	3.		/	\$	\$	4.		/	\$	\$	5. TOTAL		/	\$	✓ \$ 7,567.31 ✓
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 ✓	1/31 / 2023	\$ 18,567.31	\$ 7,567.31																											
2.		/	\$	\$																											
3.		/	\$	\$																											
4.		/	\$	\$																											
5. TOTAL		/	\$	✓ \$ 7,567.31 ✓																											

Taxpayer's reason for refund (attach supporting documentation): SUPP 4 RF231210

ARBITRATION DETERMINATION AND AWARD; ARB ID# 10822000038 SECT 41A.09 PTC DETERMINATION DATE:9/29/23

JT

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]</i>	Authorized officer	Date 2/12/2024
sign here <i>[Signature]</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 1/29/24

JF
1-22-24

APPROVED BY: *Alejandro Torres*

RT 2/8/2024

DATE: 2/5/2024 *CM* 2/8/2024

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							
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 MARTINEZ OTONIEL & KARINA ✓ (PAID BY: GATEWAY FIRST BANK)						
	Present mailing address (number and street) 2008 E 25 1/2 ✓						
	City, town or post office, state, ZIP code MISSION, TX 78574		Phone (area code and number)				
Legal description (or attach copy of the tax bill or tax receipt): BRYAN OAKS LOT 4 EXC W 6.58'							
Step 2: Describe the property	Address or location of property: N BRYAN RD						
	1238556 ✓						
	Account number of property: B4840.00.000.0004.00 ✓		Tax receipt number: OR 53709541				
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	3/31/	/ 2023	\$ 17,603.27	\$ 10,771.71
	2.				/	\$	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5.				/	\$	\$ 10,771.71 ✓
	Taxpayer's reason for refund (attach supporting documentation): SUPP 3 RF231209						
ENTERED INCORRECT OWNERSHIP. CORRECT BACK TO PREV OWNER ✓ MARTINEZ, OTONIEL & KARINA; THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SECTION 41.411							
JT							
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. <input checked="" type="checkbox"/> Approved. <input type="checkbox"/> Disapproved.						
	sign here Authorized officer				Date		
	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		

[Handwritten signature] 2/12/2024

[Handwritten signature] 1/23/24

JF
1-11-24

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	
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 FALL-PASO LP ✓
	Present mailing address (number and street) 6500 MONTANA AVE
	City, town or post office, state, ZIP code EL PASO, TX 79925-2129
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **PLEASANTON LOT 2**

Step 2: Describe the property	THE HIDALGO COUNTY AUDITOR'S OFFICE
	Address or location of property: 1701 S CAGE BLVD APPROVED BY: 2/5/24 LV
	709713 ✓ DATE: CM 2/7/2024 <i>[Signature]</i> 2/8/2024
	Account number of property: P7725.00.000.0002.00 ✓ Tax receipt number: OR 52623257

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	\$ 107,764.82
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 16,605.57 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF 231209** ✓

ARBITRATION DETERMINATION AND AWARD; ARB ID#10822000019 SECT 41A.09 PTC. DETERMINATION DATE:6/29/23

JT

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]</i>	Date 2/12/2024
	sign here <i>[Signature]</i>	Date 1/23/24

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)

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	2/8/2024	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: 2/2/2024 <i>CM 2/6/2024</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 TOPS LSC
	Present mailing address (number and street) ATTN: PROPERTY TAX DEPT ✓ 1648 MCGRATHIANA PKWY STE 130
	City, town or post office, state, ZIP code LEXINGTON, KY 40511-1339
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): DELETE 2020/GONE 9/30/19; INVENTORY SUPPLIES
	FURNITURE FIXTURES & EQUIPMENT AT 1100 E MILITARY HWY STE D/ NEW ACCT 2019
	Address or location of property: 1100 E MILITARY HWY 281 (S SIDE) S
	1185456 ✓
	Account number of property: J5700.99.000.0006.16 ✓ OR Tax receipt number: 46834017

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 ✓	1/31	/ 2021	\$ 18,019.99
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 18,019.99 ✓

Taxpayer's reason for refund (attach supporting documentation): SUPP 4 RE231210
SUBMITTED/ENTERED WRONG
JT

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	Date 2/12/2024
	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	Date 1/24/24

JTE
1-22-24

APPLICATION FOR TAX REFUND

[Signature] 2/8/2024

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 <input checked="" type="checkbox"/> TOPS LSC
	ATTN: PROPERTY TAX DEPT
	Present mailing address (number and street) 1648 MCGRATHIANA PKWY STE 130
	City, town or post office, state, ZIP code LEXINGTON, KY 40511-1339
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2020/GONE 9/30/19; INVENTORY SUPPLIES**

Step 2: Describe the property	FURNITURE FIXTURES & EQUIPMENT AT 1100 E MILITARY HWY STE D/ NEW ACCT 2019	
	Address or location of property: 1100 E MILITARY HWY 281 (S SIDE) S	
	1185456 <input checked="" type="checkbox"/>	
	Account number of property: J5700.99.000.0006.16 <input checked="" type="checkbox"/>	Tax receipt number: OR 50149268

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 <input checked="" type="checkbox"/>	1/31	/ / 2022	\$ 18,196.25
2.			/ /	\$	\$
3.			/ /	\$	\$
4.			/ /	\$	\$
5. TOTAL			/ /	\$	\$ 18,196.25 <input checked="" type="checkbox"/>

Taxpayer's reason for refund (attach supporting documentation): **SUPP 4 RF 231210**

SUBMITTED/ENTERED WRONG

JT

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 <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	
	Authorized officer sign here <i>[Signature]</i>	Date 2/12/2024
	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) <input checked="" type="checkbox"/> sign here <i>[Signature]</i>	Date 1/29/24

JFE
1-22-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	2/8/2024	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: 2/2/2024 <i>CM 2/7/2024</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: **DEAN TRANSPORTATION (PAID BY: DFA DAIRY BRANDS LLC (PT))** ✓
 Present mailing address (number and street): **8401 N CENTRAL EXPY STE 400**
 City, town or post office, state, ZIP code: **DALLAS, TX 75225-4046** Phone (area code and number):

Step 2:
Describe the property
 Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2022/DAW K1800-99-005-0001-04;**
LEASED EQUIPMENT AT 601 BEAUMONT AVE/NEW ACCT 2019
 Address or location of property: **601 BEAUMONT AVE**
1187206 ✓
 Account number of property: **K1800.99.005.0001.03** ✓ Tax receipt number: **OR 54837540**

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 ✓	11/07 / 2023	\$ 46,203.32	\$ 46,203.32
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$ ✓	\$ 46,203.32 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209**
PERSONAL PROPERTY DAW K1800-99-005-0001-04
DELETED REFUND PAYER JT

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 *JL* Date: **2/12/2024**
 sign here: _____ Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.17, tax code) *able of (and) Jellam JL ✓* Date: **1/23/24**

JE 1-19-24

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	<i>2/18/2024</i> 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.	Phone (area code and number) (956) 318-2157
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 2/2/2024 <i>CM 2/7/2024</i>	

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

Step 1: Owner's name and address

Owner's name
DEAN TRANSPORTATION (PAID BY: DFA DAIRY BRANDS LLC (PT)) ✓

Present mailing address (number and street)
8401 N CENTRAL EXPY STE 400

City, town or post office, state, ZIP code
DALLAS, TX 75225-4046

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **DELETE 2022/OWNERSHIP CHNG TO K1800-99-005-0001-04 ; FURNITURE FIXTURES EQUIPMENT & VEHICLES AT 601 W BEAUMONT / NEW ACT 2006**

Step 2: Describe the property

Address or location of property: **601 W BEAUMONT AVE**

766513 ✓

Account number of property: **K1800.99.005.0001.02 ✓** Tax receipt number: **53395369/54387420**

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 ✓	2/17 / 2023	\$ 53,193.53 ✓	\$ 53,193.53 ✓
2. ALL ENTITIES	2022 ✓	10/31 / 2023	\$ 4,842.36 ✓	\$ 4,842.36 ✓
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$ ✓	\$ 58,035.89 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF231209 ✓**

DELETE 2022 DUE TO OWNERSHIP CHANGE TO: K1800-99-005-0001-04

~~PAY OFF NEW ACCT K1800-99-005-0001-04 \$53,193.53~~ REFUND PAYER **\$58,035.89**
JT see email from HCTO

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 *[Signature]* Date **2/12/2024**

sign here 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) *ables (Paul) McLaughlin* Date **1/23/24**

JF 1-19-24