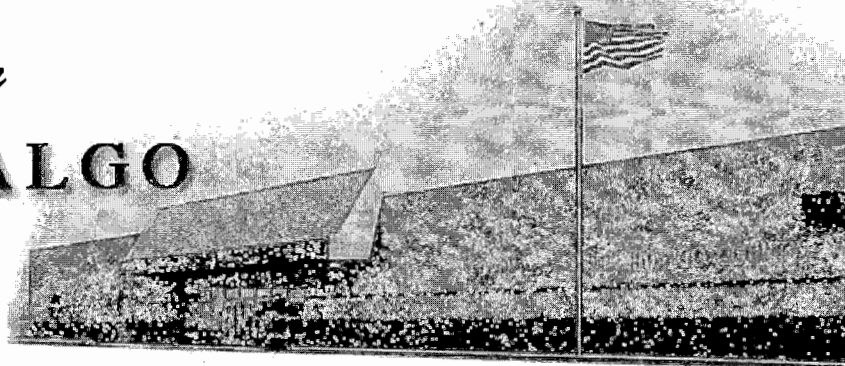


Office of Tax Assessor-Collector
COUNTY of HIDALGO



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

P.O. Box 178
Edinburg, Texas 78540-0178
Ph. (956) 318-2157
Fax (956) 318-2733
www.hidalgocountytax.org

June 18, 2024

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

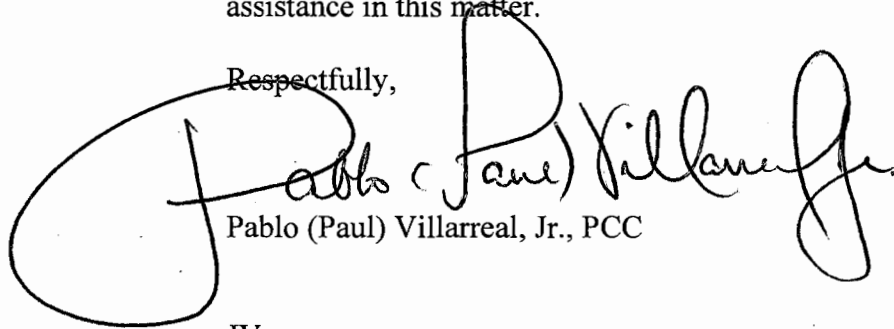
Re: See attached list

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.

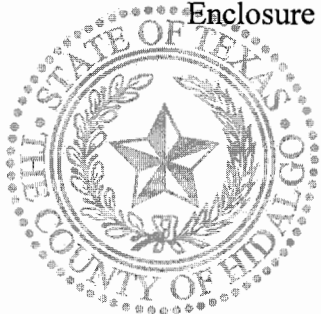
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,


Pablo (Paul) Villarreal, Jr., PCC

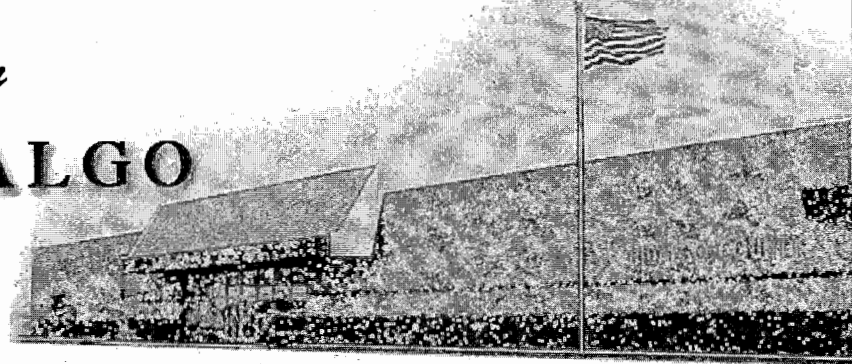
JV

Enclosure



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

Hidalgo County Tax Assessor-Collector

P.O. Box 178
Edinburg, Texas 78540-0178
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ACCOUNT NUMBER	PAYER	AMOUNT
A1800.00.054.0009.12	CORELOGIC CENTRALIZED REFUNDS	\$2,615.69
B3990.00.000.0002.00	CORELOGIC CENTRALIZED REFUNDS	\$3,178.89
B4840.00.000.0004.00	CORELOGIC CENTRALIZED REFUNDS	\$5,027.96
C1924.00.000.0095.00	RONNIE CANTU CONSTRUCTION LLC	\$3,544.39
N3000.00.000.0013.00	COBRA 21 LLC	\$7,453.79
S6857.00.000.0004.00	CORELOGIC	\$2,531.18



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

FEB 08 2024 267



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: 12/19/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Francisco Saenz *[Signature]*
 DATE: 5/15/2024 KR 05/15/24 *[Signature]* 5/17/24
6/1/2024 *[Signature]*

CORELOGIC CENTRALIZED REFUNDS ϕ
 PO BOX 9202
 COPPELL, TX 75019-9760 W 45

Account Number A1800-00-054-0009-12 ϕ HCAD No. 1070547 ϕ \checkmark
Legal Description of the Property ALAMO LAND & SUGAR CO W191.10'-E1128.94'-N1156.72 LOT 9 BLK 54 5.066AC GR 4.934 AC NET 7716 E ALBERTA RD OWNER: BARRERA JOSE DAVID ϕ \checkmark \checkmark

2023 OVERAGE AMOUNT \$2,615.69 ϕ \checkmark

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 5: EMS DIST #3, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 56: DONNA ISD

Loan #: 2014797894

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 CORELOGIC TAX SERVICES LLC	Relationship to Property Owner
	Mailing Address PO BOX 9202	Daytime Telephone Number 817-699-2106
	City, State, Zip Code COPPELL TEXAS 75019	Email Address: shanshwethe@corelogic.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2023</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>99751024.50</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>2615.69</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 <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> Corelogic	Date of application <u>4-2-24</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: <u>[Signature]</u> ϕ Date: <u>6/3/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/15/24</u>

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

FEB 06 2024 270



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: 12/19/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Francisco Saenz*

DATE: 5/14/2024 *KR* 05/15/24 5/17/24

[Signature] 6/1/2024

CORELOGIC CENTRALIZED REFUNDS ϕ
 PO BOX 9202
 COPPELL, TX 75019-9760

W 4-5

Account Number B3990-00-000-0002-00 ϕ HCAD No. 507102 ϕ \checkmark
Legal Description of the Property BRANDY ESTATES LOT 2 4018 W SPRAGUE ST 78539
OWNER: DOMINGUEZ MARIELA DE JESUS & EDWARD \checkmark

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE
 2023 OVERAGE AMOUNT \$3,178.89 ϕ \checkmark
 Loan #: 0686884776

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 CORELOGIC TAX SERVICES LLC	Relationship to Property Owner
	Mailing Address PO BOX 9202	Daytime Telephone Number 817-699-2108
	City, State, Zip Code COPPELL TEXAS 75019	Email Address: shenshwatha@corelogic.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2023 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	99751024.50
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	3178.89 \checkmark
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 2023
	<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>[Signature]</i> Corelogic	Date of application 4-2-24
	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>[Signature]</i> Date: 6/3/2024
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 4/15/24

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

122 08 2024 280



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: 12/18/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Francisco Saenz*
 DATE: 5/15/2024 *KR* 05/15/24 5/17/24
R 6/1/2024

CORELOGIC CENTRALIZED REFUNDS
 PO BOX 9202
 COPPELL, TX 75019-9760

Account Number B4840-00-000-0004-00 HCAD No. 1238556
Legal Description of the Property BRYAN OAKS LOT 4 EXC W 6.58' N BRYAN RD
OWNER: MARTINEZ OTONIEL & KARINA

2023 OVERAGE AMOUNT \$5,027.96

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 48: MISSION CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 6050013575812

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	CORELOGIC TAX SERVICES LLC	Relationship to Property Owner
	Mailing Address	PO BOX 9202	Daytime Telephone Number 817-699-2106
	City, State, Zip Code	COPPELL TEXAS 75019	Email Address: shenshwatha@corelogic.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2023 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	901151024.50	
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed	5027.96	
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 2023
	<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>Stanley Corelogic</i>	Date of application 4-2-24
	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>[Signature]</i>	Date: 6/3/2024
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 4/15/24

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: 01/27/2024

RECEIVED MAR 27 2024

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Francisco Saenz *FS*
 DATE: 5/14/2024 KR 05/15/24 5/17/24

FS 6/1/2024

RONNIE CANTU CONSTRUCTION LLC ✓
 2912 S. JACKSON RD
 MCALLEN, TX 78503 ✓

Account Number C1924-00-000-0095-00 ✓ HCAD No. 1313597 ✓ ✓
Legal Description of the Property CARROLL ESTATES LOT 95 1108 COOPER LN
OWNER: RONNIE CANTU CONSTRUCTION LLC ✓ ✓

2023 OVERAGE AMOUNT \$3,544.39 ✓ ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 37: CITY OF SAN JUAN, 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 <u>Ronnie Cantu Const LLC</u>	Relationship to Property Owner <u>Owner</u>
	Mailing Address <u>2912 S. Jackson</u>	Daytime Telephone Number <u>(956) 655-4424</u>
	City, State, Zip Code <u>McAllen, TX 78503</u>	Email Address: <u>ronniecantu@bizrgo.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>2023</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>23,635.30</u>
	Total tax, penalty, and interest amount owed for the year	<u>20,090.91</u>
	Amount of refund claimed	
Step 5: How should the refund be processed?	<input checked="" 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 <u>M w</u>	Date of application <u>3/28/2024</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: <u>[Signature]</u> Date: <u>6/3/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/15/24</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: 01/04/2024

THE HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: 4/15/24 LV
 DATE: KR 05/06/24 5/20/24
6/1/2024

COBRA 21 LLC
 3601 N 10TH ST
 MCALLEN, TX 78501

Account Number N3000-00-000-0013-00 ✓ HCAD No. 245553 ✓
Legal Description of the Property NOLANA TERRACE LOT 13 & 14 2117 NOLANA AVE
OWNER: BARRERA J OSCAR SR & THE COBRA TRUST ✓

2023 OVERAGE AMOUNT \$7,453.79 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN 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 <u>Jose Oscar Barrera Sr.</u> ✓	Relationship to Property Owner <u>Owner</u>
	Mailing Address <u>3601-A N 10th ST</u>	Daytime Telephone Number
	City, State, Zip Code <u>McAllen, TX 78501</u>	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 <u>2023</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>\$7453.79</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>21,566.17</u> ✓
	Total tax, penalty, and interest amount owed for the year	<u>0</u>
	Amount of refund claimed	<u>7,453.79</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	
	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 <u>[Signature]</u>	Date of application <u>2/23/24</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: <u>[Signature]</u> Date: <u>6/5/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>3/1/24</u>

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

FEB 08 2024 218



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: 01/24/2024

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Alejandro Torres*

DATE: 4/26/2024 *KE* 05/16/24 5/24/24

[Signature] 6/1/2024

CORELOGIC ✓
3001 HACKBERRY RD
WESTERN REGION SERVICE CENTER - DFW 4-5
IRVING, TX 75063-015

Account Number ✓ S6857-00-000-0004-00 HCAD No. 682812 ✓ ✓
Legal Description of the Property SUMMER BREEZE LOT 4 305 N 46TH ST ✓
OWNER: LOPEZ ENRIQUE ✓ & MARCELA CAMPA ✓ 2023 OVERAGE AMOUNT \$2,531.18 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 51: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 1394316566

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 CORELOGIC TAX SERVICES LLC ✓	Relationship to Property Owner
	Mailing Address PO BOX 9202	Daytime Telephone Number 817-699-2106
	City, State, Zip Code COPPELL TEXAS 75019	Email Address: shenshwetha@corelogic.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2023</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>99751024.50</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>2531.18</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>[Signature]</i>	Date of application <u>3-29-24</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>[Signature]</i> Date: <u>6/30/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>4/8/24</u>

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