

Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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

January 02, 2025

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

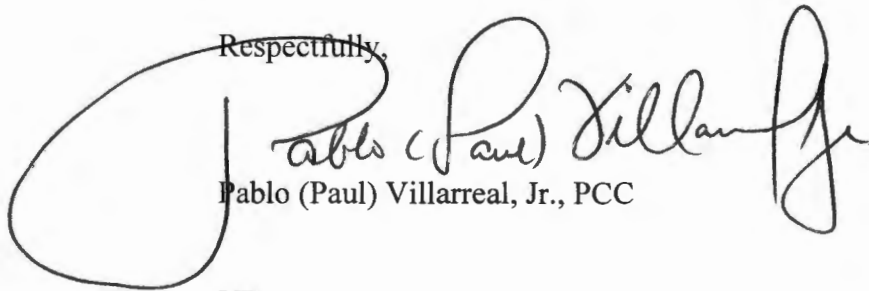
Re: See attached list

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,

A large, stylized handwritten signature in black ink, appearing to read "Pablo (Paul) Villarreal, Jr.".

Pablo (Paul) Villarreal, Jr., PCC

VR

Enclosure



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
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ACCOUNT NUMBER	PAYER	AMOUNT
E2060.00.000.002A.00	JESUS RAMIREZ	\$7,000.00
E2060.04.000.0002.00	JESUS RAMIREZ	\$11,700.00
E5560.00.000.0015.00	RAYMUNDO ROJAS	\$3,059.81
H0407.00.000.0003.00	ELIZABETH ALMANZA	\$8,826.57
L0450.00.056.0001.00	AWIN MANAGEMENT INC	\$4,681.13
M3920.00.014.0009.00	ELIZABETH ALMANZA	\$3,496.38



RECEIVED
11/05/2024

HIDALGO COUNTY AUDITOR'S OFFICE
APPROVED BY: Jake Solis
DATE: 12/05/2024 ka 2/11/24
12/22/24



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178

HIDALGO COUNTY AUDITOR'S OFFICE

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

Print Date: 09/26/2024

HCTO
JESUS RAMIREZ ✓
700 N. VETERAN'S BLVD., PO BOX ✓
SAN JUAN, TX 78589

Account Number E2060-00-000-002A-00 ✓ HCAD No. 679699 ✓
Legal Description of the Property EBONY ESTATES LOT 2A ✓ 700 N I RD STE I & H ✓
OWNER: XP PRECISION LLC ✓✓
-2023 OVERAGE AMOUNT \$7,000.00 ✓

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>Jesus Ramirez, Manager: Mirta Ramirez</u> ✓	Relationship to Property Owner <u>SELF</u>
	Mailing Address <u>PO BOX 181</u> ✓	Daytime Telephone Number <u>210-394-1254</u>
	City, State, Zip Code <u>San Juan, Texas, 78589</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>2024</u> and am the party entitled to the refund. <u>NO REFUND, PAY TAXES 2024</u> ✓	
Step 3: Mark the reason for the refund and provide a brief explanation	Overpaid the account <u>E2060-00-000-002A-00</u> ✓	
	Duplicate payment	
	Paid in error (explain) <u>N/A</u>	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer <u>2024</u>	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed <u>NO REFUND, PAY TAXES 2024</u> ✓	
Step 5: How should the refund be processed? <u>PAY TAXES 2024, NO REFUND</u> ✓	Mail to Property Owner <u>Jesus Ramirez, Manager: Mirta Ramirez</u> ✓	
	Mail to Payer at address in Step 1	
	Transfer this amount to account <u>E2060-00-000-002A-00</u> ✓ For tax year <u>2024</u>	
	Escrow for next year's taxes <u>\$7,000.00</u> ✓	
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>Jesus Ramirez</u> ✓	Date of application <u>Oct. 18, 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>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>4/5/29</u> ✓

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

RECEIVED
11/25/2024

HIDALGO COUNTY AUDITOR'S OFFICE
APPROVED BY: Jake Solis
DATE: 12/09/2024 KR 12/11/24
12/22/24



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178

HIDALGO COUNTY AUDITOR'S OFFICE

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

Print Date: 10/08/2024

HCTO
JESUS RAMIREZ ✓
700 N. VETERAN'S BLVD., PO BOX
SAN JUAN, TX 78589

Account Number E2060-04-000-0002-00 ✓ HCAD No. 705072 ✓
Legal Description of the Property EBONY ESTATES 4 LOT 2 & 3 807 W HACKBERRY AVE ✓
OWNER: XP PRECISION LLC ✓
2023 OVERAGE AMOUNT \$11,700.00 ✓

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 Jesus/Mirta Ramirez ✓	Relationship to Property Owner Self
	Mailing Address PO BOX 181, San Juan, TX 78589	Daytime Telephone Number 210-394-1254
	City, State, Zip Code	Email Address: ebonyrentals@gmail.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>2024</u> and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	Overpaid the account PLEASE pay to this account 2024 Property Taxes, paying early ✓	
	Duplicate payment NA	
	Paid in error (explain) NA	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer \$11,700.00 ✓	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed Please pay to 2024 property taxes for this account ✓	
Step 5: How should the refund be processed?	Mail to Property Owner	
	Mail to Payer at address in Step 1 EE 4 Lots 2 & 3)	
	Transfer this amount to account E2060-04-000-0002-00 ✓ For tax year 2024	
	Escrow for next year's taxes 2024 ✓	
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 Jesus Ramirez ✓	Date of application 10-30-2024 ✓
	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	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: _____ Date: <u>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>Paul Villarreal</u> ✓ Date: <u>11/25/24</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

RECEIVED
 11/25/2024
 HIDALGO COUNTY AUDITORS OFFICE

HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: Jake Solis
 DATE: 12/09/2024 KR 12/11/24
 12/22/24
 Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 11/12/2024

HCTO
 RAYMUNDO ROJAS ✓
 3208 N CYNTHIA LN ✓
 MCALLEN, TX 78501

Account Number E5560-00-000-0015-00 ✓ HCAD No. 342923 ✓✓
Legal Description of the Property EMERALD POINT LOT 15 3208 N CYNTHIA LN ✓
OWNER: ROJAS RAYMUNDO & GRACIELA E ✓✓
2022 OVERAGE AMOUNT \$3,059.81 ✓✓

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>RAYMUNDO ROJAS</u> ✓	Relationship to Property Owner
	Mailing Address <u>3208 N Cynthia Ln</u>	Daytime Telephone Number <u>956 9943 978</u>
	City, State, Zip Code <u>MCALLEN TX 78501</u>	Email Address: <u>RAYMUNDO.ROJAS@GMAIL.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 _____ and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account	For tax year
	<input checked="" 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>Raymundo Rojas</u> ✓	Date of application <u>11/12/2024</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: _____ Date: <u>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓ <input type="checkbox"/> Denied	By: <u>Paul Villarreal</u> ✓ Date: <u>11/25/24</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: 10/15/2024

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: E.L. *12/22/24*

DATE: 12/6/2024 *KE* 12/10/24

✓ **HCTO**
ELIZABETH ALMANZA *¢*
 1770 S SEVILLA ST ✓
 PHARR, TX 78577

Account Number H0407-00-000-0003-00 <i>¢</i> HCAD No. 1012746 ✓✓
Legal Description of the Property HACIENDA LA ESPERANZA LOT 3 1770 S SEVILLA ST
OWNER: ALMANZA ELIZABETH & JONATHON <i>¢</i>

2023 OVERAGE AMOUNT \$8,826.57 *¢*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR, SAN JUAN, ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Elizabeth Almanza</u> <i>¢</i>	Relationship to Property Owner <u>Self</u>
	Mailing Address <u>1770 S Sevilla St</u>	Daytime Telephone Number <u>956-588-9139</u>
	City, State, Zip Code <u>Pharr TX 78577</u>	Email Address: <u>etdme6@aph00.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	Overpaid the account <u>\$8,826.57</u>	
	Duplicate payment	
	Paid in error (explain) <u>I wanted to pay for the 2020 taxes but the 2023 link was still open & it became an over payment</u>	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer <u>\$8,826.57</u>	
	Total tax, penalty, and interest amount owed for the year	<u>\$8,826.57</u>
	Amount of refund claimed	<u>\$8,826.57</u>
Step 5: How should the refund be processed?	Mail to Property Owner	
	Mail to Payer at address in Step 1 <u>Escrow to same account for 2024</u>	
	Transfer this amount to account <u>H 0407-00-000-0003-00</u> For tax year <u>2024</u>	
	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> <i>¢</i>	Date of application <u>11/21/24</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> <i>¢</i> Date: <u>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> <i>¢</i> Date: <u>12/2/24</u>

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

RECEIVED
11/25/2024

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 12/09/2024 KR 12/11/24

HIDALGO COUNTY AUDITOR'S OFFICE

12/22/24

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 01/29/2024



FABLO (PAUL) VILLARREAL JR., PCC

Hidalgo County Tax Assessor - Collector

PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

* Republic services is parent co. of Browning Ferris & AWIN management.

AWIN MANAGEMENT, INC
18500 N ALLIED WAY
PHOENIX, AZ 85054

Account Number
L0450-00-056-0001-00 ✓
HCAD No. 206962 ✓ ✓

Legal Description of the Property
LA BLANCA 'B' N 14.51 AC BLK 56;
36.02AC-BLK 27; 76.32AC BLK 68 & 69
127.0AC NET

2200 MILE 12 N

OWNER: BROWNING-FERRIS INC ✓

2023 OVERAGE AMOUNT \$4,681.13 ✓ ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 6: EMS DIST #4, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 56: DONNA ISD

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>BROWNING FERRIS</u> ✓	Relationship to Property Owner <u>owner</u>
	Mailing Address <u>PO BOX 29240</u>	Daytime Telephone Number <u>(480) 718-6077</u>
	City, State, Zip Code <u>PHX, AZ 85038</u>	Email Address: <u>propertytax@republicservices.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>\$25,551.98</u> ✓
	Total tax, penalty, and interest amount owed for the year	<u>\$20,870.85</u> ✓
	Amount of refund claimed	<u>\$4,681.13</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	
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	Date of application <u>11/12/24</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: Date: <u>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓ <input type="checkbox"/> Denied	By: Date: <u>11/25/24</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: 10/15/2024

HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: E.L. *up* 12/22/24
 DATE: 12/9/2024 *KE* 12/10/24

HCTO
 ELIZABETH ALMANZA *φ*
 1770 S SEVILLA ST
 PHARR, TX 78577

Account Number M3920-00-014-0009-00 <i>φ</i> HCAD No. 615524 <i>✓✓</i>
Legal Description of the Property MID POINT MANOR ESTATES LOT 9 BLK 14 1903 BALD CYPRESS DR <i>✓</i>
OWNER: TORRES ELIZABETH <i>✓φ</i>

2023 OVERAGE AMOUNT \$3,496.38 *✓φ*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 40: CITY OF WESLACO, 53: WESLACO 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 <i>Elizabeth Almanza</i>	Relationship to Property Owner <i>Self</i>
	Mailing Address <i>1770 S. Sevilla St</i>	Daytime Telephone Number <i>956 588 9139</i>
	City, State, Zip, Code <i>Pharr TX 78577</i>	Email Address: <i>etorres6@yahoo.com</i>
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 type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input checked="" type="checkbox"/> Paid in error (explain) <i>I meant to pay the 24 taxes online but the 23 link was still open which caused an overpayment</i>	
Step 4: Provide payment information. Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer	<i>\$3,496.38</i>
	Total tax, penalty, and interest amount owed for the year	<i>\$3,496.38</i>
	Amount of refund claimed	<i>\$3,496.38</i>
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	
	<input type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account <i>M3920-00-014-0009-00</i> For tax year <i>2024</i>	
	<input checked="" type="checkbox"/> Escrow for next year's taxes <u>Escrow to same account for 2024</u> <i>✓</i>	
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> <i>φ✓</i>	Date of application <i>11/21/24</i>
	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> <i>φ</i> Date: <u>12/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> <i>φ</i> Date: <u>11/2/24</u>

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