

Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. R7A



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

October 27th 2025

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

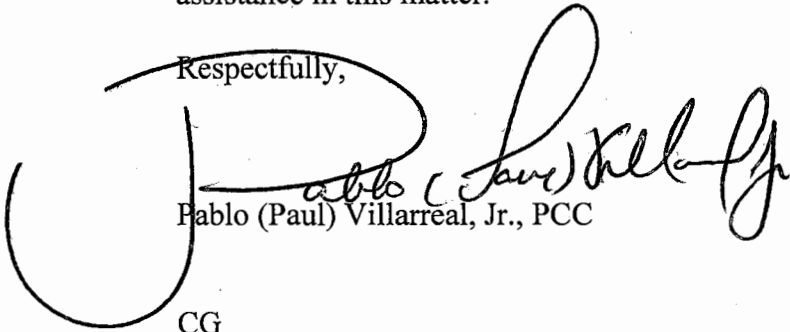
Re: See attached list

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,


Pablo (Paul) Villarreal, Jr., PCC

CG

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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

ACCOUNT NUMBER	PAYER	AMOUNT
A6857.99.000.0001.08	RYAN LLC PAYING FOR 7-11	\$3,700.64
C5357.01.000.0001.00	RYAN LLC PAYING FOR 7-11	\$14,855.22
C5357.99.000.0001.01	RYAN LLC PAYING FOR 7-11	\$5,237.22
C9478.99.000.0002.11	RYAN LLC PAYING FOR 7-11	\$2,637.30
E3300.99.099.0004.08	RYAN LLC PAYING FOR 7-11	\$4,201.70
F2240.99.000.0001.09	RYAN LLC PAYING FOR 7-11	\$4,972.18
G5900.99.003.0008.26	RYAN LLC PAYING FOR 7-11	\$6,232.15
H1334.01.001.0001.01	RYAN LLC PAYING FOR 7-11	\$14,749.98
H1334.99.001.0001.02	RYAN LLC PAYING FOR 7-11	\$7,377.71
H1351.99.000.0001.01	RYAN LLC PAYING FOR 7-11	\$5,893.67
J5700.00.015.0011.01	MCALLEN COLD STORAGE LTD	\$2,952.18
K5405.00.000.0030.00	NATIONSTAR MORTGAGE LLC DBA MR COOPER CORELOGIC INC	\$6,540.04
M5100.01.000.0038.01	PAULINO MUNOZ ALMA R MUNOZ	\$2,529.31
W0100.00.031.0002.16	PENNYMAC LOAN SERVICES LLC	\$3,191.65



THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *yn* 10/14/25

DATE: 10/06/25 *ke* 10/08/25



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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 02/09/2024

RECEIVED **SECOND NOTICE**

JUN 13 2025

Ryan LLC
 PTS-Scottsdale

JUN 05 2025

RYAN LLC PAYING FOR 7-11
ATTN: BILL PAY ♣
PO BOX 4900
SCOTTSDALE, AZ 85261

Account Number A6857-99-000-0001-08 ♣ HCAD No. 1217755 ♣ ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 1524 E.NOLANA LOOP / NEW ACCT 2019
1524 E.NOLANA LOOP 78577 OWNER: STRIPES STORB ♣ ✓

2023 OVERAGE AMOUNT \$3,700.64 ♣ ✓

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 <i>Ryan LLC Attn: Accounting</i>	Relationship to Property Owner <i>Tax Agent</i>
	Mailing Address <i>16220 N. Scottsdale Road, Suite 650</i>	Daytime Telephone Number <i>602 869 8590</i>
	City, State, Zip Code <i>Scottsdale, Arizona 85254</i>	Email Address: <i>REIT.Compliance@ryan.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 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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$3700.64
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> 25 ♣	Date of application <i>8/25/25</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> Date: <i>10/20/2025</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>9/29/25</i>

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis
DATE: 09/26/25 KE 10/08/25 11/02/2025

HIDALGO COUNTY AUDITOR'S OFFICE



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

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

Print Date: 02/13/2024

Resolved

JUN 23 2025

Ryan
PTS-Scottsdale

SECOND NOTICE

JUN 10 2025

RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

Account Number C5357-01-000-0001-00 ✓ HCAD No. 962699 ✓
Legal Description of the Property CITY CENTER PH 1 LOT 1 ✓ 3601 HWY 83 OWNER: MDC COAST 9 LLC ✓

2023 OVERAGE AMOUNT \$14,855.22 ✓

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>Ryan LLC Accounting</u> ✓	Relationship to Property Owner <u>Tax Agent</u> ✓
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>602 869 8590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address: <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$14,855.22</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 <u>[Signature]</u> ✓	Date of application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>Paul Hill</u> ✓ Date: <u>9/15/25</u> ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis 10/20/25

DATE: 10/03/25 KE 10/08/25



HIDALGO COUNTY AUDITOR'S OFFICE

PABLO (PAUL) VILLARREAL JR., PCC

Hidalgo County Tax Assessor - Collector

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

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/13/2024

Received
JUN 23 2025

SECOND NOTICE

Ryan
PTS-Scottsdale

RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

JUN 10 2025

Account Number C5357-99-000-0001-01 ✓ HCAD No. 1234674 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 3621 W BUS HWY 83 / NEW ACCT 2019 ✓ 3621 W BUS HWY 83 78501 OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$5,237.22 ✓

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>Ryan LLC Attn: Accounting</u> ✓	Relationship to Property Owner <u>Tax Agent</u>
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>602 869 8590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address: <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$5237.22
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 <u>[Signature]</u> ✓	Date of application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓ <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/9/25</u> ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Jake Solis* 10/20/25

DATE: 10/03/25 *KE* 10/08/25

HIDALGO COUNTY AUDITOR'S OFFICE



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/12/2024

Received

JUN 23 2025

Ryan
PTS-Scottsdale
RYAN LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

SECOND NOTICE

JUN 12 2025

Account Number C9478-99-000-0002-11 ✓ HCAD No. 1234678 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 123 E 3 MILE LINE RD / NEW ACCT 2019 ✓ 123 E 3 MILE RD 78573 OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$2,637.30 ✓

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

Loan #:

APPLICATION FOR PROPERTY TAX REFUND

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

Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Ryan LLC, Attn: Accounting</i> ✓	Relationship to Property Owner <i>Tax Payer</i>
	Mailing Address <i>16220 N. Scottsdale Road, Suite 650</i>	Daytime Telephone Number <i>602 869 8590</i>
	City, State, Zip Code <i>Scottsdale, Arizona 85254</i>	Email Address <i>REIT.Compliance@ryan.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 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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$2637.30
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 <i>8/25/25</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> Date: 10/20/2025
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 9/19/25 ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 10/01/25 KE 10/08/25 ^{10/20/25}



PABLO (PAUL) VILLARREAL JR., PCC

Hidalgo County Tax Assessor - Collector

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

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/14/2024

Received

JUN 23 2025

Ryan
PTS-Scottsdale

SECOND NOTICE

RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

JUN 13 2025

Account Number E3300-99-099-0004-08 ✓ HCAD No. 1217777 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 721 N CLOSNER / NEW ACCT 2019 ✓ 721 N CLOSNER 78539 OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$4,201.70 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

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

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Ryan LLC</u> <input checked="" type="checkbox"/> <u>Attn: Accounting</u>	Relationship to Property Owner <u>tax agent</u>
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>6028698590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$4201.70
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 <u>[Signature]</u> ✓	Date of application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/9/25</u> ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 10/03/25 / KR 10/08/25 10/20/25

HIDALGO COUNTY AUDITOR'S OFFICE



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/14/2024

Received

JUN 23 2025

SECOND NOTICE

Ryan
PTS-Scottsdale
RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

JUN 15 2025

Account Number F2240-99-000-0001-09 ✓ HCAD No. 1232722 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 102B E MONTE CRISTO / NEW ACCT 2019 ✓ 102 E MONTE CRISTO STE-B OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$4,972.18 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE
Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

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

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Ryan LLC</u> <u>Accounting</u> ✓	Relationship to Property Owner <u>Tax Agent</u>
	Mailing Address <u>18220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>602 809 8590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address: <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$4972.18</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 <u>[Signature]</u> ✓	Date of application <u>9/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/19/25</u> ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 10/01/25 KE 10/08/25 ^{10/20/25}

HIDALGO COUNTY AUDITOR'S OFFICE



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/13/2024

Received

JUN 25 2025

Ryan
PTS-Scottsdale

SECOND NOTICE

RYAN, LLC PAYING FOR 7-11 ✓ JUN 16 2025
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

Account Number G5900-99-003-0008-26 ✓ HCAD No. 1217787 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 2005 WEST PALMA VISTA DR / NEW ACCT 2019 ✓ 2005 W PALMA VISTA DR (S SIDE) OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$6,232.15 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 27: CITY OF PALMVIEW, 49: LA JOYA 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>Ryan LLC</u> ✓	Relationship to Property Owner <u>Attn: Accounting Tax Agent</u>
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>028698590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$6232.15
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 <u>[Signature]</u> ✓	Date of application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/9/25</u> ✓

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

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *J.O.* 10/14/25

DATE: 10/07/25 *KR* 10/08/25



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

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

Print Date: 02/12/2024

SECOND NOTICE

Received

JUN 25 2025

JUN 18 2025

Ryan
 PTS-Scottsdale
 RYAN LLC PAYING FOR 7-11
 ATTN: BILL PAY
 PO BOX 4900
 SCOTTSDALE, AZ 85261

Account Number H1334-01-001-0001-01 HCAD No. 958274
Legal Description of the Property HARRY'S FOLLY NO. 1 BLK 1 LOT 1 PARCEL 1 & 2 305 W EXPRESSWAY 83 OWNER: MDC COAST 10 LLC

2023 OVERAGE AMOUNT \$14,749.98

1: HIDALGO COUNTY, 35: CITY OF LA JOYA, 49: LA JOYA 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>Ryan LLC - Attn: Accounting</i>	Relationship to Property Owner <i>Tax Agent</i>
	Mailing Address <i>16220 N. Scottsdale Road, Suite 650</i>	Daytime Telephone Number <i>602 869 8590</i>
	City, State, Zip Code <i>Scottsdale, Arizona 85254</i>	Email Address: <i>REIT.Compliance@ryan.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 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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	\$14,749.98
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 <i>8/25/25</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> Date: <u>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>9/29/25</u>

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis 10/20/25

DATE: 10/03/25 KR 10/08/25



HIDALGO COUNTY AUDITOR'S OFFICE
PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

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

Print Date: 02/08/2024

Received

JUN 25 2025

Ryan
PTS-Scottsdale

SECOND NOTICE

RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

JUN 16 2025

Account Number
H1334-99-001-0001-02 ✓
HCAD No. 1234683 ✓
Legal Description of the Property
INVENTORY SUPPLIES FURNITURE FIXTURES &
EQUIPMENT AT 305 W EXPWY 83 / NEW ACCT
2019 ✓
305 W INTERSTATE HWY 2 (S SIDE) 78560
OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$7,377.71 ✓

1: HIDALGO COUNTY, 35: CITY OF LA JOYA, 49: LA JOYA 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>Ryan LLC Accounting</u>	Relationship to Property Owner <u>Tax Agent</u>
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>602 919 8590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address: <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$7377.71</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 <u>[Signature]</u>	Date of Application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓ <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/19/25</u> ✓

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

RECEIVED

09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 10/01/25 KE 10/08/25 ^{10/20/25}

HIDALGO COUNTY AUDITOR'S OFFICE



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector
PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 02/08/2024

Received

JUN 25 2025 SECOND NOTICE

Ryan
PTS-Scottsdale

RYAN, LLC PAYING FOR 7-11 ✓
ATTN: BILL PAY
PO BOX 4900
SCOTTSDALE, AZ 85261

JUN 16 2025

Account Number H1351-99-000-0001-01 ✓ HCAD No. 1217790 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 1901 DOVE AVE / NEW ACCT 2019 ✓ 1901 W DOVE AVE 78504 OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$5,893.67 ✓

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 31.11e 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>Ryan LLC Attn: Accounting</u>	Relationship to Property Owner <u>Tax Agent</u>
	Mailing Address <u>16220 N. Scottsdale Road, Suite 650</u>	Daytime Telephone Number <u>602 869 8590</u>
	City, State, Zip Code <u>Scottsdale, Arizona 85254</u>	Email Address: <u>REIT.Compliance@ryan.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	
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$5893.67</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 <u>[Signature]</u> ✓	Date of application <u>8/25/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/9/25</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
 09/11/2025

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 09/26/25 10/08/25

HIDALGO COUNTY AUDITOR'S OFFICE

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 03/11/2024

SECOND NOTICE

MCALLEN COLD STORAGE LTD
 8101 S 23RD ST
 MCALLEN, TX 78503

JUN 20 2025

Account Number J5700-00-015-0011-01 ✓ HCAD No. 200391 ✓
Legal Description of the Property JOHN CLOSNER E882.83'-W998.69' AN IRR TR LOT 11 BLOCK 15 10.28AC NET ✓ E OF IRD OWNER: GLG COLD STORAGE & WAREHOUSE LTD ✓

2023 OVERAGE AMOUNT \$2,952.18 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 6: EMS DIST #4, 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>Maria Rosalba Villagomez</u> ✓	Relationship to Property Owner <u>owner</u> ✓
	Mailing Address <u>8101 S. 23rd St</u>	Daytime Telephone Number <u>956 776 0053</u>
	City, State, Zip Code <u>McAllen TX 78503</u>	Email Address: <u>facturacion@mcallencoldstorage.net.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 checked="" 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>\$6,390.36</u>	
	Total tax, penalty, and interest amount owed for the year <u>\$3,438.18</u>	
	Amount of refund claimed <u>\$2,952.18</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 <u>[Signature]</u> ✓	Date of application <u>08/27/2025</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>10/20/2025</u>	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓ <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>9/9/25</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: 07/17/2025

72

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *uf* 10/14/25

DATE: 10/07/25 *KE* 10/08/25

NATIONSTAR MORTGAGE LLC DBA MR COOPER
CORELOGIC INC *φ*
 3001 HACKBERRY DRIVE
 IRVING, TX 75063-0115

Account Number K5405-00-000-0030-00 <i>φ</i> HCAD No. 1180391 <i>φ</i> ✓
Legal Description of the Property KING ESTATES LOT 30 KING DR
OWNER: GONZALES RICARDO JR & APRIL LUDIN GARZA ✓ <i>φ</i>

2024 OVERAGE AMOUNT \$6,540.04 *φ*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 40: CITY OF WESLACO, 53: WESLACO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 0734547375

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	Cotality	Relationship to Property Owner
	Mailing Address	PO BOX 9202	Daytime Telephone Number 817-699-2106
	City, State, Zip Code	COPPELL Texas 75019	Email Address: abhshetty@cotality.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	<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		
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		<u>6540.04</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		Date of application
	SIGN HERE	<i>Staley</i> <i>φ</i>	<u>8/22/25</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: <u>9/29/25</u>

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



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733
 Print Date: 02/08/2024

RECEIVED
 09/29/2025

SECOND NOTICE

JUN 24 2025

HIDALGO COUNTY AUDITOR'S OFFICE

PAULINO MUÑOZ ALMA R MUÑOZ ✓
 1555 S GASTEL CIR
 MISSION, TX 78572

Account Number M5100-01-000-0038-01 ✓ HCAD No. 238454 ✓
Legal Description of the Property MISSION MANOR PH 1 S40'-E70' LOT 38A ✓ 1609 IOWA ST
OWNER: MUNOZ PAULINO & ALMA ✓

2023 OVERAGE AMOUNT \$2,529.31 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 48: MISSION CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

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

Step 1: Identify the Payer requesting the refund if different than shown above	Name <u>Alma Munoz ✓</u>	Relationship to Property Owner <u>Self</u>
	Mailing Address <u>1555 S. Gastel Cir</u>	Daytime Telephone Number <u>956-212-5710</u>
	City, State, Zip Code <u>Mission, TX</u>	Email Address: <u>ALMMNZ@Outlook.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 type="checkbox"/> Overpaid the account	
	<input checked="" 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 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>Alma Munoz ✓</u>	Date of application <u>Sept. 21, 2025 ✓</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>10/21/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/29/25 ✓</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 78009
 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733
 Print Date: 07/07/2023

MAIL RECEIVED

SECOND NOTICE

JUL 10 2025

THE HIDALGO COUNTY AUDITOR'S OFFICE

JUN 30 2025

APPROVED BY: J.O. *[Signature]* 10/10/25

DATE: 10/06/25 *[Signature]* 10/08/25

PENNYMAC LOAN SERVICES LLC
 P.O. BOX 514387
 LOS ANGELES, CA 90051

Account Number: W0100-00-031-0002-16 HCAD No. 1315009
Legal Description of the Property WEST ADDN. TO SHARYLAND N495'-S660' EXC E330'-N205'-S370' EXC N155'-S575'-E330' EXC N85'-S660'-E1024.94'-LOT 31-2 10.27AC GR. 10.23AC NET 3416 N LOS EBANOS OWNER: MARES JESUS A & JOHANNA SANTOY

2022 OVERAGE AMOUNT \$3,191.65

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 48: MISSION CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 8195912599

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 31.11e 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>PennyMac Loan Services</u> Relationship to Property Owner <u>Mortgage Co.</u>
	Mailing Address <u>6610 Condor Dr Ste 208 Moorpark, CA 93021</u> Daytime Telephone Number <u>817-292-2317</u>
	City, State, Zip Code <u>Moorpark, CA 93021</u> Email Address: <u>Nicole.White@pennymac.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>2021 & 2022</u> and am the party entitled to the refund.
Step 3: Mark the reason for the refund and provide a brief explanation.	<input checked="" type="checkbox"/> Overpaid the account
	<input type="checkbox"/> Duplicate payment
	<input type="checkbox"/> Paid in error (explain)
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer <u>28,874.14</u>
	Total tax, penalty, and interest amount owed for the year
	Amount of refund claimed <u>3,191.65</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 <u>Nicole White</u> Date of application <u>9/2/2025</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>10/20/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>9/15/25</u>

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