

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](http://www.hidalgocountytax.org)

December 8<sup>th</sup> 2025

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

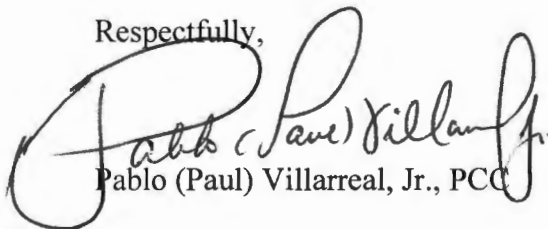
Re: See attached list

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. PCC.



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

ACCOUNT NUMBER	PAYER	AMOUNT
W3800.00.423.0000.07	MUNOZ SANDRA ET AL (PAID BY:CAPITAL TITLE OF TEXAS LLC)	\$3,379.03
P4355.00.000.0011.00	JOSEPHIN ASSAD	\$9,034.00
N3000.99.000.0001.06	RYAN LLC PAYING FOR 7-11	\$3,180.18
N2970.99.000.001B.06	RYAN LLC PAYING FOR 7-11	\$4,113.16
N2970.00.000.001B.00	RYAN LLC PAYING FOR 7-11	\$17,444.34
N2060.99.000.0002.05	RYAN LLC PAYING FOR 7-11	\$7,470.08



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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


<b>Step 1: Owner's name and address</b>	Owner's name <b>MUNOZ SANDRA ET AL (PAID BY: CAPITAL TITLE OF TEXAS LLC) ✓ ♣</b>
	Present mailing address (number and street) <b>1016 W DURHAM AVE</b>
	City, town or post office, state, ZIP code <b>RAYMONDVILLE, TX 78580</b>
	Phone (area code and number)

<b>Step 2: Describe the property</b>	Legal description (or attach copy of the tax bill or tax receipt): <b>WEST TRACT 3.10AC- FT 423</b>
	<b>THE HIDALGO COUNTY AUDITOR'S OFFICE</b>
	Address or location of property: <b>1043 E MILE 14 1/2 N</b>
	<b>325676 ♣ ✓</b>
Account number of property:	Tax receipt number:
<b>W3800.00.423.0000.07 ♣</b>	<b>OR 60588633, 60588669, 60585206 ♣</b>


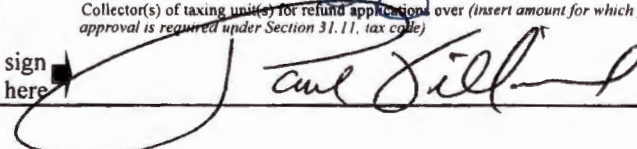
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. 8001 OVERPAYMENT	2024	09/30	/ 2025	\$ 3,154.00 ♣
2. 8001 OVERPAYMENT	2024	09/30	/ 2025	\$ 225.00 ♣	\$ 225.00 ♣ ✓
3. 8001 OVERPAYMENT	2024	09/26	/ 2025	\$ 0.03 ♣	\$ 0.03 ♣ ✓
4.			/	\$	\$
5. TOTAL			/	\$ 3,379.03 ♣	\$ 3,379.03 ♣ ✓

Taxpayer's reason for refund (attach supporting documentation): **PAYER, CAPITAL TITLE OF TEXAS LLC, PAID YRS 2009-2024, WITH CHECK NO. 26892 (\$20,742.28). PAYER**

**REQUESTED TO PAY \$13,583.44 TOWARDS ACCT #325676, HOWEVER TOTAL AMOUNT DUE WAS \$10,204.41. TOTAL AMOUNT TO REFUND IS \$3,379.03. KGR ✓ ♣**

<b>Step 4: sign the form</b>	"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 for tax refund <b>10/16/2025 ♣</b>

**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.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	sign here 	Date <b>12/3/2025</b>
	sign here  ♣	Date <b>12/24/25</b>



**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: 05/29/2025

**THE HIDALGO COUNTY AUDITOR'S OFFICE**

APPROVED BY: J.O. *YJ* 12/1/25

DATE: 10/21/25 *KE* 10/27/25

**HCTO**  
**JOSEPHIN ASSAD** ♣  
 5617 S 23RD STREET  
 MCALLEN, TX 78503

<b>Account Number</b> P4355-00-000-0011-00 ♣ HCAD No. 790090 ♣ ✓
<b>Legal Description of the Property</b> PARTRIDGE ESTATES LOT 11  2916 DRIFTWOOD LN 78574
OWNER: ASSAD KATIA JOSEPHIN ♣ ✓

**2024 OVERAGE AMOUNT \$9,034.00** ♣ ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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

<b>Step 1: Identify the Payer requesting the refund if different than shown above</b>	Name	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number
	City, State, Zip Code	Email Address:
<b>Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.</b>	I paid the taxes for year _____ and am the party entitled to the refund.	
<b>Step 3: Mark the reason for the refund and provide a brief explanation</b>	<input type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
<b>Step 4: Provide payment information</b> 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	
<b>Step 5: How should the refund be processed?</b>	<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 ♣	
<b>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</b>	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	
	<b>SIGN HERE</b> <i>Katy</i> ♣ ✓	Date of application <b>9/30/25</b>
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: <b>12/3/2025</b>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> ♣ Date: <b>10/14/25</b>

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

# RECEIVED

10/21/2025

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis 12/1/25  
DATE: 11/05/25 KR 11/06/25

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 SECOND NOTICE

JUL 01 2025  
Ryan LLC  
PTS-Scottsdale

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

JUN 25 2025

Account Number  
N3000-99-000-0001-06 ✓  
HCAD No. 1217802 ✓  
Legal Description of the Property  
INVENTORY SUPPLIES FURNITURE FIXTURES &  
EQUIPMENT AT 3920 N 23RD ST / NEW ACCT  
2019 ✓  
3920 N 23RD ST 78501  
OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$3,180.18 ✓

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	Ryan, LLC paying for 7-11 ✓	Relationship to Property Owner	Tax agent
	Mailing Address	16220 N. Scottsdale Road, Suite 650	Daytime Telephone Number	(469) 399-4871
	City, State, Zip Code	Scottsdale, AZ 85254	Email Address:	REIT.Compliance@ryan.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	\$6,740.14 ✓		
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed	\$3,180.18 ✓		
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		Date of application	10/9/2025 ✓
	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: 12/3/2025
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓	<input type="checkbox"/> Denied	By:	Date: 10/21/25 ✓

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

# RECEIVED

10/21/2025

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis 11/21/25

DATE: 11/05/25 ke 11/06/25

*36*

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: 02/09/2024

## RECEIVED

JUL 01 2025

Ryan LLC  
PTS-Scottsdale

# SECOND NOTICE

JUN 25 2025

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

Account Number N2970-99-000-001B-06 ✓ HCAD No. 1217801 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 100 W NOLANA LOOP / NEW ACCT 2019 ✓ 100 W NOLANA LOOP 78577 OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$4,113.16 ✓

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	Ryan, LLC paying for 7-11 ✓	Relationship to Property Owner	Tax agent
	Mailing Address	16220 N. Scottsdale Road, Suite 650	Daytime Telephone Number	(469) 399-4871
	City, State, Zip Code	Scottsdale, AZ 85254	Email Address:	REIT.Compliance@ryan.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	\$6,633.42 ✓		
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed	\$4,113.16 ✓		
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		Date of application	10/9/2025 ✓
	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: 12/3/2025
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓	<input type="checkbox"/> Denied	By:	Date: 10/21/25 ✓

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

RECEIVED  
10/21/2025

HIDALGO COUNTY AUDITOR'S OFFICE

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis 12/1/25  
DATE: 11/04/25 KE 11/06/25

*JK*



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: 02/09/2024

RECEIVED

JUL 01 2025

Ryan LLC  
PTS-Scottsdale

SECOND  
NOTICE

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

JUN 25 2025

Account Number N2970-00-000-001B-00 ✓ HCAD No. 547397 ✓
Legal Description of the Property NOLANA SQUARE LOT 1B ✓ 100 W NOLANA LOOP  OWNER: MDC COAST 10 LLC ✓

2023 OVERAGE AMOUNT \$17,444.34 ✓

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	Ryan, LLC paying for 7-11 ✓	Relationship to Property Owner	Tax agent
	Mailing Address	16220 N. Scottsdale Road, Suite 650	Daytime Telephone Number	(469) 399-4871
	City, State, Zip Code	Scottsdale, AZ 85254	Email Address:	REIT.Compliance@ryan.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	\$28,133.05 ✓		
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed	\$17,444.34 ✓		
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	10/9/2025 ✓
	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: 12/3/2025
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 10/21/25 ✓

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

# RECEIVED

10/21/2025

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis

DATE: 11/05/25 KR 11/06/25 12/1/25

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

JUL 01 2025

Ryan LLC  
PTS-Scottsdale

# SECOND NOTICE

JUN 25 2025

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

Account Number  
N2060-99-000-0002-05 ✓  
HCAD No. 1217803 ✓

Legal Description of the Property  
INVENTORY SUPPLIES FURNITURE FIXTURES &  
EQUIPMENT AT 10701 SOUTH CAGE / NEW  
ACCT 2019 ✓

10701 S CAGE BLVD 78577

OWNER: STRIPES STORE ✓

2023 OVERAGE AMOUNT \$7,470.08 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 57: HIDALGO 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	Ryan, LLC paying for 7-11 ✓	Relationship to Property Owner	Tax agent
	Mailing Address	16220 N. Scottsdale Road, Suite 650	Daytime Telephone Number	(469) 399-4871
	City, State, Zip Code	Scottsdale, AZ 85254	Email Address:	REIT.Compliance@ryan.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	\$12,876.56 ✓		
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed	\$7,470.08 ✓		
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		Date of application	10/9/2025 ✓
	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: 12/3/2025
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved ✓	<input type="checkbox"/> Denied	By:	Date: 10/21/25 ✓

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