

**CITY OF EL PASO, TEXAS
AGENDA ITEM
DEPARTMENT HEAD'S SUMMARY FORM**

DEPARTMENT: Tax Department

AGENDA DATE: March 6, 2018

CONTACT PERSON NAME AND PHONE NUMBER: Maria Pasillas, Tax Assessor Collector, 212-1737

DISTRICT(S) AFFECTED: All

SUBJECT:

APPROVE a resolution / ordinance / lease to do what? **OR AUTHORIZE** the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

Approve property tax overpayment refunds.

BACKGROUND / DISCUSSION:

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

This action would allow us to comply with state law which requires approval by the legislative body, of refunds of tax overpayments, greater than \$2,500.00.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one?

Council has considered this previously on a routine basis.

AMOUNT AND SOURCE OF FUNDING:

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

N/A

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

N/A

*****REQUIRED AUTHORIZATION*****

DEPARTMENT HEAD:



(If Department Head Summary Form is initiated by Purchasing, client department should sign also)

Information copy to appropriate Deputy City Manager

TAX REFUNDS
March 6, 2018

1. Villa Ciento Apartments – Monterrey Asset Management, in the amount of \$9,956.78, made an overpayment on January 30, 2018 of 2017 taxes.
(Geo. #X58199920902301)
2. Wells Fargo Home Mortgage, in the amount of \$2500.00, made an overpayment on December 26, 2017 of 2017 taxes.
(Geo. #A52099903205700)
3. Angel Beltran Jr. and or Rosalia S. Berltran, in the amount of \$16,085.15, made an overpayment on January 10, 2018 of 2017 taxes.
(Geo. #B36099900100300)
4. Custodial Acct. for Alicia G. Moreno/Aida L. Moreno – Brown Rep. Payee, in the amount of \$2,527.72, made an overpayment on January 29, 2018 of 2017 taxes.
(Geo. #G56999912003700)
5. Ricardo Marquez, in the amount of \$6,096.78, made an overpayment on January 31, 2018 of 2017 taxes.
(Geo. #V89399906401975)
6. Wells Fargo Home Mortgage, in the amount of \$2,810.97, made an overpayment on December 26, 2017 of 2017 taxes.
(Geo. #T28799913602600)
7. Javier Sierra, in the amount of \$5,241.32, made an overpayment on January 29, 2018 of 2017 taxes.
(Geo. #R24699900203000)
8. Sunflower Bank N.A., in the amount of \$3,700.54, made an overpayment on December 19, 2017 of 2017 taxes.
(Geo. #C75699900205000)
9. Henry Flores, in the amount of \$2,632.25, made an overpayment on December 12, 2017 of 2017 taxes.
(Geo. #P65499908302300)
10. Pacific Life Insurance Company, in the amount of \$3,245.60, made an overpayment on January 29, 2018 of 2017 taxes.
(Geo. #M40399901800200)
11. Corelogic, in the amount of \$2,552.67, made an overpayment on December 26, 2017 of 2017 taxes.
(Geo. #P08600001300800)
12. Corelogic, in the amount of \$7,879.00, made an overpayment on December 26, 2017 of 2017 taxes.
(Geo. #A46299917802600)

13. Timothy J. Wilson, in the amount of \$24,877.65, made an overpayment on January 31, 2018 of 2017 taxes.

(Geo.#A765999006B0218)

14. First Savings Bank, in the amount of \$7,939.76, made an overpayment on January 30, 2018 of 2017 taxes.

(Geo.#E13199900806700)

Laura D. Prine
City Clerk



Maria O. Pasillas, RTA
Tax Assessor Collector



MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE. 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

TAX OFFICE
RECEIVED
FEB 20 2018

8600 GROUP JOINT VENTURE
6431 LOS ROBLES DR
EL PASO, TX 79912-2921

Geo No. X581-999-2090-2301	Prop ID 373089
Legal Description of the Property 81 TSP 2 SEC 9 T & P SURV TR 23-A (3.273 AC) & TR 30-C (0.15 AC)	
8604 DYER ST	
OWNER: 8600 GROUP JOINT VENTURE	

2017 OVERAGE AMOUNT \$9,956.78

1: CITY OF EL PASO, 3: EL PASO ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Villa Ciento Apartments</u> (26253230)			
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Address: <u>Monterrey Asset Mgmt, 9615 Sims Drive - Office</u>			
	City, State, Zip: <u>El Paso, Texas 79925</u>			
	Daytime Phone No.: <u>(915) 592-4549</u>		E-Mail Address: <u>r.baca@monterreyasset.com</u>	
	Payment made by:	Check No.	Date Paid	Amount Paid
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	<u>Villa Ciento Apts</u>	<u>1265</u>	<u>01/30/2018</u>	<u>\$69,150.94</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			
	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund. <input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓ <input type="checkbox"/> I want this payment applied to next year's taxes. This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
			Ray Baca 02/14/18 ✓	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>Booth</u>	Date: <u>02/20/18</u> ✓

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

Deposit Status

SHERRYB
ACT80122 v1.89

02/20/2018 16:06:49
ACTEP

DEPOSIT Remittance Detail

Summary Query

Deposit No. X0205181049 Account No. X58199920902301 Remit Seq No. Check No. Payment Amount Payment Agreement No.

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
X0205181049	01/30/2018	37780293	01265	CH	\$69,150.94	\$9,956.78	LG	X58199920902301	8600 GROUP JOINT VENT	
X0205181049	01/30/2018	37780293	01265	CH	\$69,150.94	\$9,956.78	PA	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33837150	0000208322	CH	\$1,607.17	\$1,607.17	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33837150	0000208322	CH	\$2,696.96	\$2,696.96	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33837150	0000208322	CH	\$4,384.54	\$4,384.54	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33837150	0000208322	CH	\$478.96	\$478.96	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33837150	0000208322	CH	\$832.37	\$832.37	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33753311	0000208322	CH	\$941.79	\$941.79	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33753311	0000208322	CH	\$167.26	\$167.26	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33753311	0000208322	CH	\$1,531.11	\$1,531.11	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33753311	0000208322	CH	\$561.24	\$561.24	RD	X58199920902301	8600 GROUP JOINT VENT	
RD2902772	01/17/2018	33753311	0000208322	CH	\$290.67	\$290.67	RD	X58199920902301	8600 GROUP JOINT VENT	

Applied Total \$955,765.37

STATUS DETAIL

SHERRYB
ACT8006 v1.264

02/20/2018 16:06:04
ACTEP

Expand Fees Summary

Account Information

Account No. 5581 999 2090 2301 Real Code REAL PROPERTY

Certified Owner 8600 GROUP JOINT VENTURE

Parcel Address 8604 OYER ST

Amount Due 02/20/2018 CAD No. 373089

Amount Due as of

Year	Gross Value	H	O	L	V	D	Amount Due/Paid Information
2017	\$2,000,000						\$2,000,000
2016	\$1,800,000						\$50,700.87
2015	\$2,150,000						\$59,596.11
2014	\$2,150,000						\$58,830.06
2013	\$2,150,000						\$57,732.99
2012	\$2,004,160						\$52,282.99
2011	\$2,286,028						\$58,577.30
2010	\$2,135,368						\$54,272.07
2009	\$1,912,704						\$47,651.82
Totals							\$945,908.59
Base Levy							\$59,184.16
Paid Levy							\$59,184.16
Write-Off							\$0.00
Remaining Levy							\$0.00
Fees							\$0.00
Refund							\$0.00
Amount Due							\$9,956.78

Multi Select

Tax Unit, Yr, Rec. Type

Tax Unit

Year

Rec. Type

Remove Fees

Countywide

AG INCLUDED

List of Tax Units

Tax Unit Description

Tax Units

Go To: Documents Notes Summary Appt. Summary Acct. History Acct. Owner Next Owner Prev Owner Next Acct. Next Acct. Status

Deposit Status
Notes
Go To:

SHERRYB
ACT80122 v1.89
02/20/2018 16:06:49
ACTEP

Deposit
Remittance
DETAIL

Remittance Detail				Applied			Penalty &	Attorney	
Account No.	Tax Unit	Year	Rec Type	Amount	Levy	Discount	Interest	Fees	Refund
X58199920902301	01	2017	TL	\$16,068.66	\$16,068.66	\$0.00	\$0.00	\$0.00	\$0.00
X58199920902301	03	2017	TL	\$26,200.00	\$26,200.00	\$0.00	\$0.00	\$0.00	\$0.00
X58199920902301	06	2017	TL	\$9,053.88	\$9,053.88	\$0.00	\$0.00	\$0.00	\$0.00
X58199920902301	07	2017	TL	\$2,832.76	\$2,832.76	\$0.00	\$0.00	\$0.00	\$0.00
X58199920902301	08	2017	TL	\$5,038.86	\$5,038.86	\$0.00	\$0.00	\$0.00	\$0.00
X58199920902301	8001	2017	TL	\$9,956.78	\$0.00	\$0.00	\$0.00	\$0.00	\$9,956.78
Applied Total				\$69,150.94	\$59,194.16	\$0.00	\$0.00	\$0.00	\$9,956.78

7-041830438



TAX OFFICE
RECEIVED

JAN 31 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

WELLS FARGO HOME MORTGAGE
1 HOME CAMPUS MAC X2302-04D
DES MOINES, IA 50328

of
\$2500 ✓

Geo No. A520-999-0320-5700	Prop ID 249945
Legal Description of the Property 32 ALTURA PARK 42 & 43 & E 9 FT OF 44 3226 SAVANNAH AVE 79930	
OWNER: BALDERRAMA DAVID & MARIA D L	

2017 OVERAGE AMOUNT \$2,500.00 ✓

1: CITY OF EL PASO, 3: EL PASO ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

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APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: Wells Fargo Home Mortgage ✓			
	Address: 1 Home Campus Mac X2302-04D			
	City, State, Zip: Des Moines IA 50328 ✓			
	Daytime Phone No.: 515 328 6700		E-Mail Address: _____	
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Payment made by:	Check No.	Date Paid	Amount Paid
	WFHM	034772	12-11-17	2584.98
	TOTAL AMOUNT PAID (sum of the above amounts)			2584.98
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	[Signature]		Kyle Morris 1/30/18 ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: [Signature] Date: 02/01/18 ✓				

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

Refund Claim 1/2 ✓

Deposit Status

Notes Go To

SHERRYB
ACT80122 v1.89

ACCOUNT NO (A52099903205700): Bankruptcy 09-31502 has been closed

01/31/2018 17:08:33
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
M1730000001	A52099903205700				

Check No.	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
M1730000001		12/28/2017	36468641	7033634770	CH	\$83,235.613.81	\$2,500.00	LG	A52099903205700	3000-WELLS FARGO HO
M1730000001		12/26/2017	36468641	7033634770	CH	\$63,235.613.81	\$84.88	PA	A52099903205700	3000-WELLS FARGO HO
R92017		10/06/2017	34876966		CA	\$0.00	\$0.00	TR	A52099903205700	BALDERRAMA DAVID & I
A02131778		02/13/2017	34876966		CA	\$2,500.00	\$2,500.00	PA	A52099903205700	BALDERRAMA DAVID & I
M1630000001		12/22/2016	33464275	3183364	CH	\$63,571.354.67	\$2,462.08	PA	A52099903205700	3000-WELLS FARGO HO
M1530000001		12/23/2015	30430546	0002822983	CH	\$64,479.376.52	\$2,418.55	PA	A52099903205700	3000-WELLS FARGO HO
A08251548		08/25/2015	29531853	7028993265	CH	\$1,060.11	\$1,060.11	PA	A52099903205700	20958692-WELLS FARGO
A08251548		08/25/2015	29531852	7028996875	CH	\$2,507.72	\$2,507.72	PA	A52099903205700	20958692-WELLS FARGO
A01261548		01/26/2015	28135609	36173	CH	\$4,433.70	\$4,433.70	PA	A52099903205700	22631454-PROPEL FINA
RD1608851		02/26/2014	24890907	0000175976	CH	\$134.34	\$134.34	RD	A52099903205700	5159-STUART C. COX, T
A02131469		02/13/2014	25817044	1166	CH	\$1,000.00	\$1,000.00	PA	A52099903205700	BALDERRAMA DAVID & I
B01091454		12/31/2013	24890907	222674	CH	\$155.01	\$20.67	PA	A52099903205700	5159-STUART C. COX, T

Applied Total \$53,449.94

STATUS DETAIL

Summary Expand Fees

SHERRYB
ACT8006 v1.284

ACCOUNT NO (A52099903205700): Bankruptcy 09-31502 has been closed

01/31/2018 17:05:54
ACTEP

Go To

Account Information

Account No. A52099903205700

Real Code REAL PROPERT

Certified Owner BALDERRAMA DAVID & MARIA D L

Parcel Address 3226 SAVANNAH AVE

Amount Due 01/31/2018 CAD No. 249945

Amount Due as of

Year Gross Value H O V D

Year	Gross Value	H	O	V	D
2017	\$100,523	Y			
2016	\$100,523	Y			
2015	\$100,523	Y			
2014	\$100,523	Y			
2013	\$100,523	Y			
2012	\$100,523	Y			
2011	\$110,009	Y			
2010	\$110,009	Y			
2009	\$111,258	Y			

Excludes	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
Excludes	\$2,584.08	\$2,584.08	\$0.00	\$0.00	\$0.00	\$2,500.00	\$0.00
Excludes	\$2,462.08	\$2,462.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Excludes	\$2,418.55	\$2,418.55	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Excludes	\$2,507.72	\$2,507.72	\$0.00	\$0.00	\$1,060.11	\$0.00	\$0.00
Excludes	\$2,458.47	\$2,458.47	\$0.00	\$0.00	\$800.80	\$0.00	\$0.00
Excludes	\$2,383.75	\$2,383.75	\$0.00	\$0.00	\$234.32	\$0.00	\$0.00
Excludes	\$2,582.65	\$2,582.65	\$0.00	\$0.00	\$1,646.78	\$0.00	\$0.00
Excludes	\$2,559.83	\$2,559.83	\$0.00	\$0.00	\$1,122.37	\$0.00	\$0.00
Excludes	\$2,323.60	\$2,323.60	\$0.00	\$0.00	\$1,863.58	\$0.00	\$0.00
Totals	\$41,976.76	\$41,976.76	\$0.00	\$0.00	\$8,973.18	\$2,500.00	\$0.00

AG INCLUDED Remove Fee Countrywide

Unit Select

Rec. Type

Year

Tax Unit

Tax Unit, Yr, Rec. Type

List of Tax Units

3 6 7 8 8001 8062

Deposit Status
Notes
Go To:

SHERRYB
ACT80122 v1.89
ACCOUNT NO (A52099903205700): Bankruptcy 09-31512 has been closed
01/31/2018 17:06:33
ACTEP

Deposit
Remittance
DETAIL

Remittance Detail				Tax	Rec	Applied			Penalty &	Attorney	
Account No.	Unit	Year	Type	Amount	Levy	Discount		Interest	Fees	Refund	
A52099903205700	01	2017	TL	\$25.20	\$25.20	\$0.00		\$0.00	\$0.00	\$0.00	
A52099903205700	03	2017	TL	\$32.48	\$32.48	\$0.00		\$0.00	\$0.00	\$0.00	
A52099903205700	06	2017	TL	\$14.20	\$14.20	\$0.00		\$0.00	\$0.00	\$0.00	
A52099903205700	07	2017	TL	\$4.68	\$4.68	\$0.00		\$0.00	\$0.00	\$0.00	
A52099903205700	08	2017	TL	\$8.32	\$8.32	\$0.00		\$0.00	\$0.00	\$0.00	
A52099903205700	8001	2017	TL	\$2,500.00	\$0.00	\$0.00		\$0.00	\$0.00	\$2,500.00	
Applied Total				\$2,584.88	\$84.88	\$0.00		\$0.00	\$0.00	\$2,500.00	

OP
+2500

CREDIT
CARD Refund

THE CITY OF EL PASO
CONSOLIDATED TAX OFFICE
221 N. Kansas, Suite 300
El Paso, Texas 79901
Phone (915) 212-0106, Fax (915) 212-0108

TAX OFFICE
RECEIVED
FEB 05 2018

APPLICATION FOR TAX REFUND

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Refund To: Angel Beltran Jr And/or
Rosalia S. Beltran Phone: (915) 667-0102 Property ID# (One application per account) 14577
HOME (915) 309-6376
WORK B36099200100300

Address (mail refund to:) Back To Citi Bank Property Address: 750 Linda Ave
VISA # 5466-1602-9580-0518 and/or El Paso TX
Legal Description: 79922

Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of refund requested:
1. <u>2017</u>	<u>1-10-2018</u>	<u>CC Payment</u>	<u>16,085.15</u>	<u>16,085.15</u> ✓
2.		<u># 5466-1602-9580</u>	<u>16,085.15</u>	
3.		<u>0518</u>	<u>= 32,170.30</u>	
TOTAL AMOUNT (sum of the above amounts)				

(City Council approval required if over \$2,500)

REQUIRED: Copy of original receipt, front & back of negotiated check, OR
bank statement showing item cleared (both the bank & taxpayer name must appear)

REASON FOR OVERPAYMENT: Paid Twice with Two different Credit Cards
Correct Charge made on 1-23-2018 on VISA # 4147-2021-90513026
Incorrect charge made on 1-10-2018 on VISA # 5466-1602-9580-0518

"I certify that information given to obtain this refund is true and correct."

Requestor signature: R Beltran Date: 2-5-2018 ✓
Printed name: Rosalia S. Beltran Title: Co owner, Spouse

Any person knowingly submitting false entries is subject to: (1) Imprisonment of 2 to 10 years, or \$5,000 fine, or both.
(2) Imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after the date of the payment or the taxpayer waives the right to the refund (Sec. 31.11 (c)).

TAX OFFICE Entry: ☒ REFUND APPROVED

Tax Office Approval: SBeth Date: 02/07/18 ✓
Jmc 2/8/18 Date:

(Placed on City Council Agenda over \$2,500)

() DISAPPROVED () Returned to sender. () See below/attached.

() Required documentation (Tax Receipt, Canceled Check, Bank Statement, or Other) not submitted.

() Record of overpayment not found on this property.

() Property not found as identified. resubmit after correction.

() Other: _____

[illegible]

Remittance Detail									
Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
B36099200100300	8001	2017	TL	\$16,085.15	\$0.00	\$0.00	\$0.00	\$0.00	\$16,085.15
Applied Total:				\$16,085.15	\$0.00	\$0.00	\$0.00	\$0.00	\$16,085.15

TAX OFFICE
RECEIVED

FEB 08 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

MORENO ALICIA G
2923 SILVER AVE
EL PASO, TX 79930-3019

OP ✓
+2500

Geo No. G569-999-1200-3700	Prop ID 157169
Legal Description of the Property 120 GOVERNMENT HILL 15 & 16 (7250 SQ FT) 1819 RAYNOLDS ST 79903	
OWNER: MORENO ALICIA G	

2017 OVERAGE AMOUNT \$2,527.72 ✓

1: CITY OF EL PASO, 3: EL PASO ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

(26230381)

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Custodial Acct for Alicia G Moreno / Aida L. Moreno-Brown Rep Payee</u> ✓			
	Address: <u>2923 Silver Avenue</u>			
	City, State, Zip: <u>El Paso, Texas 79930-3019</u>			
Daytime Phone No.: <u>(915) 637-5060</u>		E-Mail Address: <u>lettymoreno@sbcglobal.net</u>		
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipt for all cash payments you made.	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>Check</u>	<u>#1101</u>	<u>1/29/2018</u>	<u>\$ 2,527.72</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			
	Please check one of the following:			
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED) <u>Aida L. Moreno Brown rep payee for Alicia G Moreno</u>		PRINTED NAME & DATE <u>Aida L. Moreno-Brown 2/5/2018</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>Stoott</u> Date: <u>02/08/18</u> ✓				

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

2022

Account Information		Certified Owner		Parcel Address		Amount Due as of		Amount Due/Paid Information		Year Gross Value H O V D		Base Levy		Paid Levy		Write-Off		Remaining Levy		Fees		Retard		Amount Due	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>	Remove Fees	Countywide	Tax Units	3	6	7	8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit	Year	Rec. Type	Units Select	

STATUS DETAIL		Expand Fees		Summary	
SHERYB	ACT8006 v1.284	Next Acc...	Prev Owner	Next Owner	Act History
Next Acc...	Agd Summary	Notes	Documents	Go To	

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8	8001	8005	List of Tax Units	Tax Unit Description	Tax Unit
Year	Rec. Type	Units Select	Tax Unit	Year	Rec. Type

STATUS DETAIL		Expand Fees		Summary	
Account No.	569-999-1200-3700	Roll Code	REAL PROPERTY	1819	RAYNOLDS ST
Certified Owner	MORENO ALICIA G	Parcel Address	1819	RAYNOLDS ST	CAD No.
Amount Due as of	02/08/2018	CAD No.	157169	AG INCLUDED	<input checked="" type="checkbox"/>
Remove Fees	Countywide	Tax Units	3	6	7
8					

[illegible]



MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

TAX OFFICE
RECEIVED

FEB 08 2018

RM SQUARED INVESTMENTS LP
821 N RAYNOR ST
EL PASO, TX 79903-4121

OP
+2500

Geo No. V893-999-0640-1975	Prop ID 663198
Legal Description of the Property 64 VISTA DEL SOL #13 SWLY PT OF 10 (248.43 FT ON ST-210.78 FT ON NLY-252.97 FT ON ELY-163.05 FT ON SLY) (46433.00 SQ FT)	
2000 LOMALAND	
OWNER: RM SQUARED INVESTMENTS LP	

2017 OVERAGE AMOUNT \$6,096.78

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: RICARDO MARQUEZ (2423414)			
	Address: 5417 BUCKLEY DR			
	City, State, Zip: EL PASO, TX 79912			
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Daytime Phone No.: 915 562-7469		E-Mail Address: RICK@ELP.ER.COM	
	Payment made by:	Check No.	Date Paid	Amount Paid
	TOTAL AMOUNT PAID (sum of the above amounts)			
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
Step 4. Sign the form. Unsigned applications cannot be processed.	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED) [Signature]		PRINTED NAME & DATE RICK MARQUEZ 2-5-18	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: [Signature] Date: 02/08/18				

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

OK

Deposit Status

Notes

Go To:

SHERRYB
ACT80122 v1.89

02/08/2018 14:11:05
ACTEP

Deposit
Remittance
DETAIL

Remittance Detail				Tax	Rec	Applied			Penalty &	Attorney	
Account No.	Unit	Year	Type	Amount	Levy	Discount	Interest	Fees	Refund		
V89399906401975	01	2017	TL	\$6,427.46	\$6,427.46	\$0.00	\$0.00	\$0.00	\$0.00		
V89399906401975	05	2017	TL	\$11,680.00	\$11,680.00	\$0.00	\$0.00	\$0.00	\$0.00		
V89399906401975	06	2017	TL	\$3,621.55	\$3,621.55	\$0.00	\$0.00	\$0.00	\$0.00		
V89399906401975	07	2017	TL	\$1,133.10	\$1,133.10	\$0.00	\$0.00	\$0.00	\$0.00		
V89399906401975	08	2017	TL	\$2,015.54	\$2,015.54	\$0.00	\$0.00	\$0.00	\$0.00		
V89399906401975	0001	2017	TL	\$6,096.78	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6,096.78	
Applied Total				\$30,974.43	\$24,877.65	\$0.00	\$0.00	\$0.00	\$0.00	\$6,096.78	



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CITY TAX OFFICE FEB 08 2018
CITY TAX OFFICE FEB 07 2018

WELLS FARGO HOME MORTGAGE
1 HOME CAMPUS MAC X2302-04D
DES MOINES, IA 50328

Handwritten: *Handwritten note with a checkmark and the number 2500.*

Geo No. T287-999-1360-2600	Prop ID 236009
Legal Description of the Property 136 TIERRA DEL ESTE #39 LOT 26 (6214.40 SQ FT) 3348 TIERRA MISION DR	
OWNER: AGUIRRE ARMANDO JR & ROSALVA G	

2017 OVERAGE AMOUNT \$2,810.97 ✓

1: CITY OF EL PASO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Wells Fargo Home Mortgage</u> ✓			
	Address: <u>1 Home Campus Mac X 2302-04D</u>			
	City, State, Zip: <u>Des Moines IA 50328</u>			
	Daytime Phone No.: <u>515 398 6700</u>		E-Mail Address: _____	
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>WFHM</u>	<u>744016</u>	<u>12-11-17</u>	<u>2810.97</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			<u>2810.97</u>
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	<u>Kyle Morris</u>		<u>Kyle Morris 2/6/18</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>Booth</u> Date: <u>02/09/18</u> ✓				

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

Deposit Status

NotesGo To

SHERRYB
ACT80122 v1.8902/08/2018 14:57:10
ACTEP

DEPOSITRemittanceDetail

Summary QuerySummary

Deposit No.
M1730000001

Account No.
T28799913602600

Remit Seq No.

Check No.

Payment Amount

Payment Agreement No.

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	M1730000001	12/28/2017	36468641	7033634770	CH	\$63,235,613.81	\$2,810.97	LG	T28799913602600	5000-WELLS FARGO HO
	A12181778	12/18/2017	36330127	10054311	CH	\$2,810.97	\$2,810.97	PA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$0.00	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$0.00	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$24.55	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$43.56	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$8.05	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$24.55	DA	T28799913602600	AGUIRRE ARMANDO JR
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$43.56	DA	T28799913602600	AGUIRRE ARMANDO JR
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$14.32	DA	T28799913602600	AGUIRRE ARMANDO JR
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$14.32	DA	T28799913602600	25500651-STEWART TIT
	RF180208	12/18/2017	36330127	10054311	CH	\$0.00	\$0.00	DA	T28799913602600	25500651-STEWART TIT
Applied Total						\$30,195.52				

Alert

Last Payer

Last Payment Date

Year	Gross Value	H	O	V	D	Amount Due/Paid Information
2009	\$121,168	Y				Excodes
2010	\$113,488	Y				Excodes
2011	\$108,687	Y				Excodes
2012	\$107,943	Y				Excodes
2013	\$108,687	Y				Excodes
2014	\$108,687	Y				Excodes
2015	\$109,163	Y				Excodes
2016	\$109,163	Y				Excodes
2017	\$109,163	Y				Excodes
2017	\$109,163	Y				Excodes

Amount Due

as of

02/08/2018

CAD No. 236009

Remove Fee

Countywide

AG INCLUDED

Remove Fee

Countywide

Unit Select

Rec. Type

Year

Tax Unit

Tax Unit, Yr, Rec. Type

Tax Unit Description

Tax Unit

List of Tax Units

Account Information

Account No. 228799913602600

Real Code REAL PROPERT

Certified Owner PAYNE MARCUS

Parcel Address 3348

TERRA MISSION DR

Amount Due 02/08/2018

CAD No. 236009

Expand Fees

Summary

STATUS DETAIL

ACT8006 v1.284

SHERRYB

02/08/2018 14:56:55

ACTEP

Go To

Prev. Acc.

Next Acc.

Prev. Owner

Next Owner

Acct History

Acct Summary

Notes

Documents

02/08/2018 14:57:10
ACTEP

Deposit	Remittance	DETAIL
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Remittance Detail		Tax	Rec		Applied			Penalty &	Attorney	
Account No.	Unit	Year	Type		Amount	Levy	Discount	Interest	Fees	Refund
128799913602600	B001	2017	TL		\$2,810.97	\$0.00	\$0.00	\$0.00	\$0.00	\$2,810.97
Applied Total					\$2,810.97	\$0.00	\$0.00	\$0.00	\$0.00	\$2,810.97



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EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

TAX OFFICE
RECEIVED

FEB 09 2018

SIERRA JAVIER & EUGENIA
12112 CITATION DR
EL PASO, TX 79936-7818

OP ✓
+2500

Geo No. R246-999-0020-3000	Prop ID 363406
Legal Description of the Property 2 RANCHOS DEL SOL LOT 7 12112 CITATION DR	
OWNER: SIERRA JAVIER & EUGENIA	

2017 OVERAGE AMOUNT \$5,241.32 ✓

1: CITY OF EL PASO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Javier Sierra</u> (25425728)			
	Address: <u>12112 Citation Dr.</u>			
	City, State, Zip: <u>El Paso, TX 79936</u>			
Daytime Phone No.: <u>(915)</u>		E-Mail Address:		
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>El Paso Tax Assessor</u>	<u>CE# 115</u>	<u>1/22/18</u>	<u>5,241.32</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED) <u>Eugenia Sierra</u>		PRINTED NAME & DATE <u>Eugenia Sierra</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>SBooth</u> Date: <u>02/09/18</u> ✓				

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

Print Date: 02/06/2018

SHERRYB
ACT80122 v1.89

ACCOUNT NO (R24699900203000): ESCROW AGREEMENT #90239, BEGIN DATE: 01/31/2018, END DATE: 09/30/2018, MONTHLY PAYMENT AMOUNT: \$1,522.16, YEARS: NO OF ACCTS: 1

02/09/2018 14:11:38
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.					
T01291840010	R24699900203000									
Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
A01311878	01/31/2018	37494020	3066055	CH	\$5,241.32	\$5,241.32	LG	R24699900203000	SIERRA JAVIER & EUGEN	
T01291840010	01/29/2018	37446950	00115	CH	\$5,241.32	\$5,241.32	PA	R24699900203000	SIERRA JAVIER & EUGEN	
R92017	10/06/2017	35659983	1555	CH	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	
R92017	10/06/2017	35428160	108	CH	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	
R92017	10/06/2017	35322800	106	CH	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	
A09131741	09/13/2017	35659983	1555	CH	\$4,000.00	\$4,000.00	PA	R24699900203000	SIERRA JAVIER & EUGEN	
A06081778	06/08/2017	35428160	108	CH	\$2,229.04	\$2,229.04	PA	R24699900203000	SIERRA JAVIER & EUGEN	
A05151785	05/15/2017	35322800	106	CH	\$2,229.04	\$2,229.04	PA	R24699900203000	SIERRA JAVIER & EUGEN	
X0130171001	01/30/2017	34477184	00614	CH	\$5,214.21	\$5,214.21	PA	R24699900203000	SIERRA JAVIER & EUGEN	
R92016ACT	10/12/2016	32639104		CA	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	
R92016ACT	10/12/2016	32594493	602	CH	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	
R92016ACT	10/12/2016	32569507	598	CH	\$0.00	\$0.00	TR	R24699900203000	SIERRA JAVIER & EUGEN	

Applied Total \$200,066.67

OP
2500

Year	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2009	\$190,414.90	\$9,031.65	\$0.00	\$0.00	\$4,410.45	\$0.00	\$6,241.32
2010	\$190,414.90	\$10,090.11	\$0.00	\$0.00	\$1,733.77	\$0.00	\$0.00
2011	\$190,414.90	\$10,296.93	\$0.00	\$0.00	\$720.78	\$0.00	\$0.00
2012	\$190,414.90	\$11,845.90	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2013	\$190,414.90	\$12,873.77	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2014	\$190,414.90	\$13,117.41	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2015	\$190,414.90	\$13,159.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2016	\$190,414.90	\$13,374.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2017	\$190,414.90	\$13,699.40	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Account Due/Paid Information

Year: 2017, Gross Value: \$190,414.90, H: 0, V: 0, D: 0

Amount Due: \$13,699.40

Amount Due as of: 02/09/2018

Parcel Address: 12112

CITATION DR

CAD No.: 363406

AG INCLUDED

Remove Fees

Countywide

Rec. Type

Year

Tax Unit

Tax Unit, Yr, Rec. Type

List of Tax Units

Tax Units

Tax Unit Description

AG INCL

Remove Fees

Countywide

Rec. Type

Year

Tax Unit

Tax Unit, Yr, Rec. Type

List of Tax Units

Tax Units

Tax Unit Description

[illegible]

TAX OFFICE
RECEIVED

JAN 30 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

SUNFLOWER BANK NA
PO BOX 800
SALINA, KS 67402

OP
+2500 ✓

Geo No. C756-999-0020-5000	Prop ID 158373
Legal Description of the Property 2 CONTINENTAL INDUSTRIAL PARK PT OF 2 3 & 4 (197 FT ON DIESEL 369.47' ON NLY 298.36' ON ELY 323.37 FT ON CASTNER) (79896 SQ FT)	
8801 CASTNER DR	
OWNER: <u>ABER RICHARD L & DAVID</u>	
2017 OVERAGE AMOUNT \$3,700.54	

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Sunflower Bank N.A.</u>			
	Address: <u>3025 Cortland Cir</u>			
	City, State, Zip: <u>Salina, KS 67401</u>			
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.	Daytime Phone No.: <u>785-826-5373</u>		E-Mail Address: <u>escrow2@sunflowerbank.com</u>	
	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>Sunflower Bank, NA</u>	<u>022992</u>	<u>12/12/17</u>	<u>\$31,687.92</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
Step 4. Sign the form. Unsigned applications cannot be processed.	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	<u>J Farris</u>		<u>Justine Farris 01/24/18</u> ✓	
TAX OFFICE USE ONLY: <u>Rec'd POP</u> <u>2/14/18</u> <u>2/13/2018</u> <u>By: SBooth</u> <u>Date: 02/14/18</u> ✓				

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

Print Date: 12/10/2017

Deposit Status

NotesGo To:

SHERRYB
ACT80122 v1.89

01/30/2018 16:47:02
ACTEP

DEPOSITRemittanceDetail

Summary Query

Summary

Deposit No.
A12191765

Account No.
C75699900205000

Remit Seq No.

Check No.

Payment Amount

Payment Agreement No.

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	RD2886638	12/20/2017	33289679	0000207852	CH	\$7,807.48	\$7,807.48	RD	C75699900205000	25842039-ABER RICHAR
	RD2886638	12/20/2017	30429940	0000207852	CH	\$7,399.28	\$7,399.28	RD	C75699900205000	25842039-ABER RICHAR
	A12191765	12/19/2017	36374473	022992	CH	\$334,109.25	\$27,987.38	AA	C75699900205000	25843292-SUNFLOWER E
	A12191765	12/19/2017	36374473	022992	CH	\$334,109.25	\$3,700.54	LG	C75699900205000	25843292-SUNFLOWER
	M164800	12/13/2016	33289679	32881	CH	\$479,523.36	\$35,317.91	PA	C75699900205000	4800-CAPITAL BANK
	RC171218	12/13/2016	33289679	32881	CH	\$7,807.48	\$7,807.48	TR	C75699900205000	ABER RICHARD L & DAV
	RC171218	12/13/2016	33289679	32881	CH	\$7,807.48	\$7,807.48	TR	C75699900205000	25842039-ABER RICHAR
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$1,940.32	DA	C75699900205000	ABER RICHARD L & DAV
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$1,156.27	DA	C75699900205000	4800-CAPITAL BANK
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$0.00	DA	C75699900205000	4800-CAPITAL BANK
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$0.00	DA	C75699900205000	4800-CAPITAL BANK
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$0.00	DA	C75699900205000	4800-CAPITAL BANK
	RF171218	12/13/2016	33289679	32881	CH	\$0.00	\$0.00	DA	C75699900205000	4800-CAPITAL BANK
Applied Total						\$603,802.70				

OK
+2500
OP

Alert

Amount Due/Paid Information

Year Gross Value H O V D

Year	Gross Value	H	O	V	D
2017	\$900,000				
2016	\$900,000				
2015	\$900,000				
2014	\$1,149,482				
2013	\$1,149,482				
2012	\$1,084,587				
2011	\$1,200,000				
2010	\$1,200,000				
2009	\$1,200,000				
Totals	\$696,989.22				
Base Levy	\$596,989.22				
Write-Off	\$31,036.00				
Remaining Levy	\$31,036.00				
Fees	\$3,112.94				
Refund	\$3,700.54				
Amount Due	\$0.00				

Account Information

Account No. C75699900205000

Certified Owner ABER RICHARD L & DAV

Parcel Address 8801

Amount Due as of 01/30/2018

CAD No. 158373

AG INCLUDED

Remove Fee

Countywide

Rec. Type

Year

Tax Unit

Tax Unit, Yr, Rec. Type

Tax Unit Description

List of Tax Units

1 3 5 6 7 8 8001

STATUS DETAIL

Expand Fees

Summary

SHERRYB
ACT8006 v1.284

01/30/2018 16:46:44
ACTEP

Go To

Documents

Acct Summary

Acct History

Acct Owner

Next Owner

Prev Owner

Next Acc.

Prev Acc.

Account Status

Deposit Status
Notes
Go To:

SHERRYB
ACT80122 v1.89
01/30/2018 16:47:02
ACTEP

Deposit
Remittance
DETAIL

Remittance Detail				Applied			Penalty &	Attorney	
Account No.	Tax	Rec		Amount	Levy	Discount	Interest	Fees	Refund
	Unit	Year	Type						
C75699900205000	01	2017	TL	\$7,230.90	\$7,230.90	\$0.00	\$0.00	\$0.00	\$0.00
C75699900205000	05	2017	TL	\$13,140.00	\$13,140.00	\$0.00	\$0.00	\$0.00	\$0.00
C75699900205000	06	2017	TL	\$4,074.25	\$4,074.25	\$0.00	\$0.00	\$0.00	\$0.00
C75699900205000	07	2017	TL	\$1,274.74	\$1,274.74	\$0.00	\$0.00	\$0.00	\$0.00
C75699900205000	08	2017	TL	\$2,267.49	\$2,267.49	\$0.00	\$0.00	\$0.00	\$0.00
C75699900205000	8001	2017	TL	\$3,700.54	\$0.00	\$0.00	\$0.00	\$0.00	\$3,700.54
Applied Total				\$31,687.92	\$27,987.38	\$0.00	\$0.00	\$0.00	\$3,700.54

CITY TAX
OFFICE

FEB 13 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

FLORES HENRY
3401 QUANAH PL
EL PASO, TX 79936-1813

OP ✓
+2500

Geo No. P654-999-0830-2300	Prop ID 109534
Legal Description of the Property 83 PEBBLE HILLS LOT 12 3401 QUANAH PL	
OWNER: FLORES HENRY	

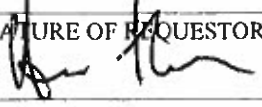
2017 OVERAGE AMOUNT \$2,632.25 ✓

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:		
	Name: Henry Flores ✓		
	Address: 3401 Quanaah Pl ✓		
	City, State, Zip: El Paso, TX 79936		
	Daytime Phone No.: 915 920 5662	E-Mail Address:	
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.	Payment made by:	Check No.	Date Paid
	TOTAL AMOUNT PAID (sum of the above amounts)		
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:		
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.		
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓		
	<input type="checkbox"/> I want this payment applied to next year's taxes.		
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):		
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)		
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE
			Henry Flores ✓ 2/14/18 ✓
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: Booth Date: 2/14/18 ✓			

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

Print Date: 01/10/2019

SHERRYB
ACT80122 v1.89

02/14/2018 12:56:55
ACTEP

DEPOSIT Remittance Detail

Summary Query

Deposit No. A12121781 Account No. P65499908302300 Remit Seq No. Check No. Payment Amount Payment Agreement No.

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
T01171840018	01/17/2018	37081340	07807	CH	\$2,632.25	\$2,632.25	LG	P65499908302300	FLORES HENRY	
A12121781	12/12/2017	36254881	2798	CH	\$2,632.25	\$2,632.25	PA	P65499908302300	FLORES HENRY	
M16300080001	12/22/2016	33464275	3183364	CH	\$83,571,354.87	\$2,569.88	PA	P65499908302300	3000-WELLS FARGO HO	
M1530000001	12/23/2015	30430548	0002822983	CH	\$84,479,376.52	\$2,589.71	PA	P65499908302300	3000-WELLS FARGO HO	
M1430000001	12/18/2014	27355759	1003381859	CH	\$86,307,267.92	\$2,712.83	PA	P65499908302300	3000-WELLS FARGO HO	
M1330000001	12/16/2013	24416909	1003006699	CH	\$63,218,801.28	\$2,656.27	PA	P65499908302300	3000-WELLS FARGO HO	
M12300010001	12/19/2012	21869457	9004908268	CH	\$58,622,918.87	\$2,547.50	PA	P65499908302300	3000-WELLS FARGO HO	
M11300010001	12/20/2011	19419463	1002082571	CH	\$51,574,363.88	\$2,456.47	PA	P65499908302300	3000-WELLS FARGO HO	
M1030000001	12/20/2010	17107028	1224061	CH	\$48,942,809.70	\$2,432.99	PA	P65499908302300	3000-WELLS FARGO HO	
M0930000001	12/18/2009	14861390	1028688	CH	\$44,471,829.37	\$2,597.33	PA	P65499908302300	3000-WELLS FARGO HO	
M0830000001	12/30/2008	12811231	7000595226	CH	\$38,302,197.97	\$2,587.40	PA	P65499908302300	3000-WELLS FARGO HO	
RD566139	08/13/2008	10354831	144523	CH	\$561.13	\$561.13	RD	P65499908302300	FLORES, HENRY	
Applied Total						\$48,525.83				

OP
T2500

SHERRYB
ACT8006 v1.284

02/14/2018 12:56:41
ACTEP

STATUS DETAIL Expand Fees Summary

Account Information

Account No. P65499908302300 Certified Owner FLORES HENRY Parcel Address 3401 QUANAH PL CAD No. 108534

Amount Due as of 02/14/2018 \$108,601.00

Year	Gross Value	H O V D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2017	\$108,601	Y	\$2,632.25	\$2,632.25	\$0.00	\$0.00	\$0.00	\$2,632.25	\$0.00
2016	\$108,601	Y	\$2,569.88	\$2,569.88	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2015	\$113,864	Y	\$2,589.71	\$2,589.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2014	\$114,876	Y	\$2,712.83	\$2,712.83	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2013	\$114,876	Y	\$2,656.27	\$2,656.27	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2012	\$114,876	Y	\$2,547.50	\$2,547.50	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2011	\$113,195	Y	\$2,456.47	\$2,456.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2010	\$113,195	Y	\$2,432.99	\$2,432.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2009	\$122,629	Y	\$2,597.33	\$2,597.33	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals	\$108,601		\$16,893.58	\$16,893.58	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

AG INCLUDED Remove Fee Countywide

Tax Unit Description Tax Units List of Tax Units 1 5 6 7 8 9001 8005

Tax Unit, Yr, Rec. Type Tax Unit, Yr, Rec. Type

[illegible]



TAX OFFICE
RECEIVED
FEB 13 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

PACIFIC LIFE
700 NEWPORT CENTER DRIVE
PO BOX 9000
NEWPORT BEACH, CA 92658-995

OP
+2500 ✓

Geo No. M403-999-0180-0200	Prop ID 405291
Legal Description of the Property 18 MESQUITE TRAILS #4 LOT 2 (12.3790 AC) 910 SUNFIRE BLVD	
OWNER: PASEO PALMS LTD	

2017 OVERAGE AMOUNT \$3,245.60 ✓

1: CITY OF EL PASO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:				
	Name: <u>Pacific Life Insurance Company</u> ✓ (20408387)				
	Address: <u>700 Newport Center Drive</u>				
	City, State, Zip: <u>Newport Beach, CA 92660</u> ✓				
	Daytime Phone No.: <u>949-219-6854</u>		E-Mail Address: <u>Kimberly-garrett@pacificlife.com</u>		
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.	Payment made by:		Check No.	Date Paid	Amount Paid
	<u>PACIFIC LIFE</u>		<u>000014038</u>	<u>1/16/2018</u>	<u>134,848.20</u>
	TOTAL AMOUNT PAID (sum of the above amounts)				
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:				
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.				
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓				
	<input type="checkbox"/> I want this payment applied to next year's taxes.				
	<input type="checkbox"/> This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):				
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)				
	SIGNATURE OF REQUESTOR (REQUIRED)			PRINTED NAME & DATE	
	<u>Kim Garrett</u>			<u>Kim Garrett 2/5/2018</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>Scott</u> Date: <u>2/14/18</u> ✓					

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

SHERRYB
ACT80122 v1.89

02/14/2018 13:07:36
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
A01291875	M40399901800200				

Check No.	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
A01291875	01/29/2018	37314575	000016038	CH	\$134,848.20	\$131,602.60	LG	M40399901800200	22275034-PACIFIC LIFE	
A01291875	01/29/2018	37314575	000016038	CH	\$134,848.20	\$131,602.60	PA	M40399901800200	22275034-PACIFIC LIFE	
A01251741	01/25/2017	34280536	000014382	CH	\$137,438.36	\$137,438.36	PA	M40399901800200	22275034-PACIFIC LIFE	
A01201685	01/20/2016	31048593	12321	CH	\$152,822.40	\$152,822.40	PA	M40399901800200	20408387-PACIFIC LIFE	
A01131565	01/13/2015	27888842	9864	CH	\$104,295.52	\$104,295.52	PA	M40399901800200	20408387-PACIFIC LIFE	
A01221448	01/22/2014	25129129	000007299	CH	\$102,378.46	\$102,378.46	PA	M40399901800200	20408387-PACIFIC LIFE	
A01231363	01/23/2013	22507429	000005148	CH	\$99,503.19	\$99,503.19	PA	M40399901800200	22275034-PACIFIC LIFE	
A01241248	01/24/2012	20007378	350005923	CH	\$95,321.14	\$95,321.14	PA	M40399901800200	20408387-PACIFIC LIFE	
A01261148	01/26/2011	17781674	350002125	CH	\$87,207.56	\$87,207.56	PA	M40399901800200	20408387-PACIFIC LIFE	
A02101054	02/10/2010	15928767	252	CH	\$188,474.35	\$188,474.35	PA	M40399901800200	PASEO PALMS LTD	
A01201055	01/20/2010	15348579	550004949	CH	\$16,157.57	\$16,157.57	PA	M40399901800200	20756816-PACIFIC LIFE	
X0126091010	01/26/2009	13329036	02085	CH	\$16,262.76	\$16,262.76	PA	M40399901800200	PASEO PALMS LTD	

Applied Total \$1,132,709.51

SHERRYB
ACT8006 v1.284

02/14/2018 13:07:09

STATUS DETAIL Expand Fees Summary

Account Information

Account No. M40399901800200
Certified Owner PASEO PALMS LTD
Parcel Address 910
SUNFIRE BLVD
CAD No. 405291
Amount Due 02/14/2018

Amount Due/Paid Information

Year	Gross Value	H	O	V	D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2017	\$4,500.00					\$131,602.60	\$131,602.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2016	\$4,811.410					\$137,438.36	\$137,438.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2015	\$5,435.220					\$152,822.40	\$152,822.40	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2014	\$3,756.940					\$104,295.52	\$104,295.52	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2013	\$3,756.940					\$102,378.46	\$102,378.46	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2012	\$3,756.940					\$99,503.19	\$99,503.19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2011	\$3,756.940					\$95,321.14	\$95,321.14	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2010	\$3,507.600					\$87,207.56	\$87,207.56	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2009	\$8,317.837					\$202,631.92	\$202,631.92	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals	\$1,129,463.91					\$1,129,463.91	\$1,129,463.91	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Amount Due/Paid Information

Amount Due 02/14/2018
CAD No. 405291
AG INCLUDED
Remove Fees Countywide
Tax Unit Description
Tax Unit
Tax Unit Yr. Rec. Type
Tax Unit
Rec. Type
Year
Multi Select

Deposit Status

Notes Go To:

SHERRYB
ACT80122 v1.89

SHERRYB
ACT80122 v1.89

Deposit	Remittance	DETAIL
---------	------------	--------

Remittance Detail		Tax	Rec	Applied			Penalty &	Attorney	
Account No.	Unit	Year	Type	Amount	Levy	Discount	Interest	Fees	Refund
M40399901800200	01	2017	TL	\$36,154.49	\$38,154.49	\$0.00	\$0.00	\$0.00	\$0.00
M40399901800200	06	2017	TL	\$20,371.23	\$20,371.23	\$0.00	\$0.00	\$0.00	\$0.00
M40399901800200	07	2017	TL	\$6,373.71	\$6,373.71	\$0.00	\$0.00	\$0.00	\$0.00
M40399901800200	08	2017	TL	\$11,337.44	\$11,337.44	\$0.00	\$0.00	\$0.00	\$0.00
M40399901800200	09	2017	TL	\$57,365.73	\$57,365.73	\$0.00	\$0.00	\$0.00	\$0.00
M40399901800200	8001	2017	TL	\$3,245.80	\$0.00	\$0.00	\$0.00	\$0.00	\$3,245.80
Applied Total				\$134,848.20	\$131,602.80	\$0.00	\$0.00	\$0.00	\$3,245.60

APPLICATION FOR TAX REFUND

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Refund To: Corelogic (26246921) Phone: 817-699-3488 Property ID# (One application per account) 670438
HOME PO8600001300800
WORK ERRONEOUS Prc1

Address (mail refund to:) Refund Dept 11899 ✓ Property Address: 770 Covington Rd
PO BOX 9202 and/or
Coppell TX 75019 Legal Description: Blk 13 Painted Sky @
Mission Ridge Lot 8 (paid in error)

Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of refund requested:
1. <u>2017</u>	<u>12/15/17</u>	<u>4509470</u>	<u>2,552.67</u>	<u>2,552.67</u> ✓
2.				
3.				
TOTAL AMOUNT (sum of the above amounts)				

(City Council approval required if over \$2,500)

REQUIRED: Copy of original receipt, front & back of negotiated check, OR
bank statement showing item cleared (both the bank & taxpayer name must appear)

REASON FOR OVERPAYMENT: ERRONEOUS PAYMENT

parcel PO8600001300800 paid in error

correct parcel is PO8600001300900 for David Ciriza at
774 Covington Rd

"I certify that information given to obtain this refund is true and correct."

Requestor signature: Ofelia Castillo Date: 1/30/18
Printed name: Ofelia Castillo Title: Tax Service Sp ✓

Any person knowingly submitting false entries is subject to: (1) Imprisonment of 2 to 10 years, or \$5,000 fine, or both.
(2) Imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after
the date of the payment or the taxpayer waives the right to the refund (Sec. 31.11 (c)).

TAX OFFICE Entry: ☒ REFUND APPROVED

Tax Office Approval: Shoottk

Date: 02/16/18 ✓

(Placed on City Council Agenda over \$2,500)

() DISAPPROVED () Returned to sender. () See below/attached.

() Required documentation (Tax Receipt, Canceled Check, Bank Statement, or Other) not submitted.

() Record of overpayment not found on this property.

() Property not found as identified, resubmit after correction.

() Other: _____

Deposit Status

Notes Go To:

SHERRYB
ACT80122 v1.89

02/16/2018 09:45:16
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.

A12261765 P08600001300800

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	A12261765	12/26/2017	36425259	4509470	CH	\$2,552.67	\$2,552.67	PA	P08600001300800	25775562-NEW AMERICA
	R030218598	12/26/2017	36425259	4509470	CH	\$0.00	\$2,552.67	TR	P08600001300800	25775562-NEW AMERICA
	R030218598	12/26/2017	36425259	4509470	CH	\$0.00	\$2,552.67	TR	P08600001300800	25775562-NEW AMERICA
	RC180216	12/26/2017	36425259	4509470	CH	\$2,552.67	\$2,552.67	TR	P08600001300800	25775562-NEW AMERICA
	RC180216	12/26/2017	36425259	4509470	CH	\$2,552.67	\$2,552.67	TR	P08600001300800	26246921-CORELOGIC
						Applied Total	\$2,552.67			

Alert

Last Payment Date

2017

Amount Due/Paid Information

Year Gross Value H O V D

Base Levy

Paid Levy

Write-Off

Remaining Levy

Fees

Refund

Amount Due

\$2,731.36

\$2,552.67

\$178.69

\$2,552.67

\$178.69

\$2,731.36

Amount Due

Amount Due

as of

02/16/2018

CAD No. 670638

Parcel Address 770

OVINGTON RD

Certified Owner FUENTES AARON & REBECA

Account No. 8000-000-0130-0000

Role Code REAL PROPERTY

STATUS DETAIL

Expand Fees

Summary

SHERRYB

ACT8006 v1.284

02/16/2018 09:44:54

ACTEP

Go To:

Documents

Notes

Agpt Summary

Acct History

Next Owner

Prev Owner

Next Acct.

Prev Acct.

SHERRYB
ACT80122 v1.89

02/16/2018 09:45:16
ACTEP

Deposit

Remittance

DETAIL

Remittance Detail									
Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
P08600001300B00	0001	2017	TL	\$2,552.67	\$0.00	\$0.00	\$0.00	\$0.00	\$2,552.67

JAN 30 2018

APPLICATION FOR TAX REFUND

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Refund To: **Corelogic** (26246315) Phone: 817-699-3488
HOME WORK
Property ID# (One application per account) **650733**
A46299917802600
#Wrong parcel paid
Address (mail refund to): Refund Dept: c/o 3001 Hackberry Rd
Irving TX 75063 New American Funding
Property Address: correct address 2323 N ST VRAIN St
and/or
Legal Description: 178 Alexander
7 to 10 N 18' OF 6 14884 SFT

Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of refund requested:
1. 2017	12/15/17	4509472	\$7,879.00	\$7,879.00 ✓
2.				
3.				
TOTAL AMOUNT (sum of the above amounts)				

(City Council approval required if over \$2,500)

REQUIRED: Copy of original receipt, front & back of negotiated check, OR
bank statement showing item cleared (both the bank & taxpayer name must appear)

REASON FOR OVERPAYMENT:

Erroneous payment: made on parcel A46299917802600 at
Address 2321 ST VRAIN to property of Randy Ponce
Correct Parcel: A46299917803100 at 2323 N St Vrain for Mariacarmen Ventura

"I certify that information given to obtain this refund is true and correct."

Requestor signature: Ofelia Castillo Date: 1/25/18
Printed name: Ofelia Castillo Title: Tax Service Sp

Any person knowingly submitting false entries is subject to: (1) Imprisonment of 2 to 10 years, or \$5,000 fine, or both.
(2) Imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after
the date of the payment or the taxpayer waives the right to the refund (Sec. 31.11 (c)).

TAX OFFICE Entry: (X) REFUND APPROVED

Tax Office Approval: Booth Date: 02/15/18
Juc 2/16/18 Date:

(Placed on City Council Agenda over \$2,500)

- () DISAPPROVED () Returned to sender. () See below/attached.
() Required documentation (Tax Receipt, Canceled Check, Bank Statement, or Other) not submitted.
() Record of overpayment not found on this property.
() Property not found as identified, resubmit after correction.
() Other:

o/c

99 Deposit Status

Notes

Go To :

SHERRYB
ACT60122 v1.89

02/15/2018 16:13:30
ACTEP

Deposit

Remittance

DETAIL

Remittance Detail									
Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
A46208917602800	8001	2017	TL	\$7,879.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,879.00



TAX OFFICE
RECEIVED
FEB 08 2018

MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

UNION AVENUE, LLC
420 S KENAZO
EL PASO, TX 79928

Handwritten: ~~420~~ OP +2500

Geo No. A765-999-006B-0218	Prop ID 50004
Legal Description of the Property 6 ASCARATE 2-A-3 (2.971 AC), 2-S-2-C (0.0122 AC), 2-S-2-A-1 (0.0008 AC), 2-S-2-B (0.904 AC), & 2-S-2-D (0.052 AC) (5.0394 AC) 1212 LAFAYETTE DR	
OWNER: EL PASO ROADRUNNER RV PARK LLC	

2017 OVERAGE AMOUNT \$24,877.65

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whom ever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>Timothy J Wilson</u> (2623 4361)			
	Address: <u>420 S. Kenazo</u>			
	City, State, Zip: <u>El Paso, Tx 79928</u>			
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Daytime Phone No.: <u>985-727-1979</u>		E-Mail Address: <u>twilsoncorporate@gmail.com</u>	
	Payment made by: <u>United Bank</u> Check No. <u>e-check</u> Date Paid <u>1/31/18</u> Amount Paid <u>24,877.65</u>			
	TOTAL AMOUNT PAID (sum of the above amounts)			
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1. ✓			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
Step 4. Sign the form. Unsigned applications cannot be processed.	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED) <u>[Signature]</u>		PRINTED NAME & DATE <u>Tim J Wilson</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>02/08/18</u> ✓				

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

SHERRYB
ACT80122 v1.89

02/08/2018 17:01:09
ACTEP

DEPOSIT Remittance Detail

Summary Query

Deposit No.
EC01311898

Account No.
A76599900680218

Remit Seq No.

Check No.

Payment Amount

Payment Agreement No.

Check No.	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
EC01311898	01/31/2018	37530805	CC001935315	✓	EC	\$24,877.65	\$24,877.65	LG	A76599900680218	26150610-UNION AVENU
EC01311898	01/31/2018	37530760	CC001934762	✓	EC	\$24,877.65	\$24,877.65	PA	A76599900680218	26150545-EL PASO ROA
A11281673	11/28/2016	33081101	15017162		CH	\$24,453.72	\$24,453.72	PA	A76599900680218	1495453-STEWART TITL
EC06141668	08/13/2016	32372849	CC001334904		EC	\$4,000.00	\$4,000.00	PA	A76599900680218	24734882-EL PASO ROA
IP06151668	08/13/2016	32371238	CC001334893		CR	\$13,586.09	\$13,586.09	PA	A76599900680218	24734472-TIMOTHY WIL
A05021673	05/02/2016	32215629	1000000104		CH	\$5,000.00	\$5,000.00	PA	A76599900680218	EL PASO ROADRUNNER
A12151465	12/15/2014	27276912	20669		CH	\$23,860.64	\$23,860.64	PA	A76599900680218	BYRD JOANNE M
X1218131002	12/18/2013	24468365	20285		CH	\$23,508.71	\$23,508.71	PA	A76599900680218	BYRD JOANNE M
X1221121006	12/21/2012	21942961	19869		CH	\$22,508.96	\$22,508.96	PA	A76599900680218	BYRD JOANNE M
X1021111001	10/21/2011	18898457	19348		CH	\$21,308.92	\$21,308.92	PA	A76599900680218	BYRD JOANNE M
X1104101002	11/04/2010	16725687	18863		CH	\$18,780.95	\$18,780.95	PA	A76599900680218	BYRD JOANNE M
X1123092001	11/23/2009	14640147	18410		CH	\$22,263.11	\$17,739.96	PA	A76599900680218	BYRD JOANNE M
Applied Total						\$407,602.94				

Account Information

Account No. A76599900680218
Certified Owner EL PASO ROADRUNNER RV PARK LLC
Parcel Address 1212 LAFAYETTE DR
Amount Due as of 02/08/2018 CAD No. 50004

AG INCLUDED Remove Fee Countywide

Rec. Type Year Tax Unit Tax Unit Description Tax Unit Yr. Rec. Type

Unit Select

STATUS DETAIL

Expand Fees Summary

SHERRYB
ACT8006 v1.284
02/08/2018 17:00:57
ACTEP

Go To: Account Status Prev. Acc. Next Acc. Prev. Owner Next Owner Acct History Acct Summary Notes Documents

Year	Gross Value	H O V D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2017	\$800,000		\$24,877.65	\$24,877.65	\$0.00	\$0.00	\$0.00	\$24,877.65	\$0.00
2016	\$800,000		\$24,453.72	\$19,796.78	\$0.00	\$0.00	\$2,769.29	\$0.00	\$0.00
2015	\$683,375		\$19,796.78	\$23,860.64	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2014	\$833,914		\$23,860.64	\$23,508.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2013	\$636,533		\$23,508.71	\$22,508.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2012	\$632,517		\$22,508.96	\$21,308.92	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2011	\$601,870		\$21,308.92	\$18,780.95	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2010	\$712,329		\$18,780.95	\$17,739.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2009	\$685,912		\$17,739.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Totals			\$379,936.96	\$379,936.96	\$0.00	\$0.00	\$2,769.29	\$24,877.65	\$0.00

Deposit Status

Notes Go To:

SHERRYB
ACT80122 v1.89

02/08/2018 17:01:09
ACTEP

Deposit Remittance DETAIL

Remittance Detail				Tax Unit	Rec Year Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
A7659990068621A	8001	2017 TL	\$24,877.65	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$24,877.65	
Applied Total						\$24,877.65	\$0.00	\$0.00	\$0.00	\$0.00	\$24,877.65



MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

TAX OFFICE
RECEIVED

FEB 16 2018

FIRST SAVINGS BANK
520 S GOLD
P.O. BOX 1678
DEMING, NM 88031-0000

Geo No. E131-999-0080-6700	Prop ID 106836
Legal Description of the Property 8 EASTSIDE INDUSTRIAL DIST 86 TO 88 & E 25 FT OF 83 & W 10 FT OF 89 (93724.60 SQ FT) 6999 MARKET AVE OWNER: LLARENA DAVID	

2017 OVERAGE AMOUNT \$7,939.76

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>First Savings Bank</u>			
	Address: <u>520 South Gold Ave.</u>			
	City, State, Zip: <u>Deming, NM 88030</u>			
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made	Daytime Phone No.: <u>575-546-2707</u>		E-Mail Address:	
	Payment made by: <u>First Savings Bank</u> Check No. <u>1640759</u> Date Paid <u>1/23/18</u> Amount Paid <u>37,481.98</u>			
	TOTAL AMOUNT PAID (sum of the above amounts)			37,481.98
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
Step 4. Sign the form. Unsigned applications cannot be processed.	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)		SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE
		<u>Kinda Nichols</u>		<u>Kinda Nichols 2-13-18</u>
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>SB</u> Date: <u>02/16/18</u>				

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

Account Information									
Account No.	E131-999-0000-6700		Real Property						
Certified Owner	LARENA DAVID								
Parcel Address	6999 MARKET AVE								
Amount Due as of	02/16/2018			CAD No. 106836					
<div> <div> STATUS DETAIL </div> <div> Expand Fees </div> <div> Summary </div> </div>									
<div> <div> Go To </div> <div> 02/16/2018 17:26:53 </div> </div>									
<div> <div> Prev Acc... </div> <div> Next Acc... </div> <div> Prev Owner </div> <div> Next Owner </div> <div> Acct History </div> <div> Acct Summary </div> <div> Notes </div> <div> Documents </div> </div>									
<div> <div> SHERRYB </div> <div> ACT0006 </div> <div> V1 284 </div> </div>									
<div> <div> STATUS DETAIL </div> <div> Expand Fees </div> <div> Summary </div> </div>									
<div> <div> Tax Unit Description </div> <div> Tax Units </div> </div>									
<div> <div> Tax Unit, Yr, Rec. Type </div> <div> Tax Unit </div> <div> Year </div> <div> Rec. Type </div> </div>									
<div> <div> Countywide </div> <div> Remove Fee </div> <div> AG INCLUDED </div> </div>									
<div> <div> Units Select </div> <div> Amount Due </div> </div>									
<div> <div> Amount Due/Paid Information </div> <div> Year Gross Value </div> <div> H O V D </div> </div>									
<div> <div> Base Levy </div> <div> Paid Levy </div> <div> Write-Off </div> <div> Remaining Levy </div> <div> Fees </div> <div> Refund </div> <div> Amount Due </div> </div>									
<div> <div> 2017 </div> <div> \$950,000 </div> <div> Y </div> <div> \$7,939.76 </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2016 </div> <div> \$950,000 </div> <div> Y </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2015 </div> <div> \$910,426 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2014 </div> <div> \$1,131,344 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2013 </div> <div> \$1,131,344 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2012 </div> <div> \$1,003,611 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2011 </div> <div> \$1,003,611 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2010 </div> <div> \$1,003,611 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> 2009 </div> <div> \$1,003,611 </div> <div> </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> </div>									
<div> <div> Totals </div> <div> \$26,195.47 </div> <div> \$26,195.47 </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$0.00 </div> <div> \$7,939.76 </div> </div>									
<div> <div> Last Payment </div> <div> Last Payer </div> </div>									

Deposit Status

Notes

Go To:

SHERRYB
ACT80122 v1.89

02/16/2018 17:27:25
ACTEP

Deposit

Remittance

DETAIL

Remittance Detail									
Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
E131899000006Z00	8001	2017	TL	\$7,939.76	\$0.00	\$0.00	\$0.00	\$0.00	\$7,939.76