

TAX REFUNDS
July 18, 2023

1. Lorena Ortiz, in the amount of \$6,083.07 made an overpayment on February 27, 2023 of 2022 taxes.
(Geo. #A670-999-0040-1800)
2. Flowar Properties LLC, in the amount of \$4,031.02 made an overpayment on February 8, 2022 of 2021 taxes.
(Geo. #F607-999-0240-0100)
3. CoreLogic, in the amount of \$8,111.44 made an overpayment on December 20, 2021 of 2021 taxes.
(Geo. #T820-999-0630-1100)



Laura D. Prine

Laura D. Prine
City Clerk

Maria O. Pasillas

Maria O. Pasillas, RTA
Tax Assessor Collector



CITY OF EL PASO OFFICE JUN 28 2023

Credit card

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 Email: taxforms@elpasotexas.gov

LORENA ORTIZ
1201 AIRWAY A1
EL PASO, TX 79925

OP ✓
+2500

| | |
|---|-------------------|
| Geo No. A670-999-0040-1800 | Prop ID 109095 |
| Legal Description of the Property 4 ARBOUR GREEN #1 LOT 18 (5842.28 SQ FT) 3232 MANNY AGUILERA DR | |
| OWNER: ORTIZ LORENA | |

2022 OVERAGE AMOUNT \$6,083.07 ✓

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

| | | | | |
|---|---|--|---------------------------------------|--------------|
| Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund. | Who should the refund be issued to: | | | |
| | Name: Lorena Ortiz | | | |
| | Address: 1201 Airway A-1 | | | |
| | City, State, Zip: El Paso TX 79925 | | | |
| Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement. | Daytime Phone No.: 915-630-6313 | | E-Mail Address: Cradlecrumors@aol.com | |
| | Payment made by: Check No. Date Paid Amount Paid | | | |
| | 1. Credit | 5216143 | 2/27/23 | 6083.07 |
| | 2. credit | 5216021 | 2/27/23 | 6083.07 |
| 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 checked="" type="checkbox"/> | I paid this account in error and I am entitled to the refund. | | ✓ |
| | <input 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. Edith Morale 713/23 | 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 | |
| | | Lorena Ortiz 6/28/23 ✓ | | |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved | <input type="checkbox"/> Denied | By: JME | Date: 7/3/23 |



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 Email: taxforms@elpasotexas.gov

TAX OFFICE
RECEIVED
JUN 20 2023

FLOWAR PROPERTIES LLC
1200 E YANDELL
EL PASO, TX 79902

OP ✓
+2500

| | |
|--|------------------|
| Geo No. F607-999-0240-0100 | Prop ID 76089 |
| Legal Description of the Property 24 FRANKLIN HEIGHTS 1 TO 4 (12000 SQ FT) 1200 E YANDELL DR | |
| OWNER: FLOWAR PROPERTIES LLC | |

2021 OVERAGE AMOUNT \$4,031.02 ✓

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

| | | | | |
|--|---|--|----------------------------------|---------------------------------------|
| Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund. | Who should the refund be issued to: | | | |
| | Name: <i>Flomar Properties LLC</i> | | | |
| | Address: <i>1200 E Yandell Dr</i> ✓ | | | |
| | City, State, Zip: <i>El Paso, Texas 79902</i> ✓ | | | |
| | Daytime Phone No.: | <i>(915) 519-4213</i> | E-Mail Address: | <i>Property.manager@flomarinc.com</i> |
| Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement. | Payment made by: | Check No. | Date Paid | Amount Paid |
| | <i>Echeck</i> | <i>4355885</i> | <i>2/8/22</i> | <i>4063.12</i> |
| | 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. | | |
| | 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 | |
| | <i>[Signature]</i> | | <i>Kaleb Warnock 6/15/2023</i> ✓ | |
| TAX OFFICE USE ONLY: | <input checked="" type="checkbox"/> Approved | <input type="checkbox"/> Denied | By: <i>NH</i> | Date: <i>6-20-23</i> ✓ |



TAX OFFICE RECEIVED JUN 15 2023

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 Email: taxforms@elpasotexas.gov

CORELOGIC
PO BOX 9205
COPPELL, TX 75019-9214

OP ✓
+2500

| | |
|---|--------------------------|
| Geo No. T820-999-0630-1100 | Prop ID 686882 |
| Legal Description of the Property BLK 63 TRES SUENOS #19 LOT 11 4605 CHRISTIAN AZCARATE ST 79938 | |
| OWNER: GALINDO FRANK & MEDRANO ALMA | |

2021 OVERAGE AMOUNT \$8,111.44 ✓

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Dear Taxpayer:

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| | | | | |
|--|---|--|---|-------------|
| Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund. | Who should the refund be issued to: | | | |
| | Name: CoreLogic | | | |
| | Address: PO Box 9202 ✓ | | | |
| | City, State, Zip: Coppell, Texas, 75019 ✓ | | E-Mail Address: customerproductsupport@corelogic. | |
| Daytime Phone No.: 800-225-4707 | | | | |
| Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement. | Payment made by: | Check No. | Date Paid | Amount Paid |
| | CoreLogic | | | \$8,111.44 |
| | 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. | 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) Corelogic K. Vineetha | | PRINTED NAME & DATE k.vineetha & 6/15/2023 ✓ | |
| | Junc 6/20/23 | | | |
| TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: N.N. Date: 6-16-23 ✓ | | | | |