

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

**AGENDA DATE:** July 20, 2021  
**PUBLIC HEARING DATE:** N/A

**CONTACT PERSON(S) NAME AND PHONE NUMBER:** Maria O. Pasillas, (915) 212-1737

**DISTRICT(S) AFFECTED:** All

**STRATEGIC GOAL:** Goal 6 – Set the Standard for Sound Governance and Fiscal Management

**SUBGOAL:** 6.11 Provide efficient and effective services to taxpayers

**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.

That the tax refunds listed on the attachment posted with this agenda be approved. This action would allow us to comply with state law which requires approval by the legislative body of refunds of tax overpayments exceeding the three (3) year limit. (See Attachment B)

**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?

Approve property tax overpayment refunds exceeding the statutory three (3) year limit, per the Texas Property Tax Code, Sec. 31.11 – Refunds of Overpayments or Erroneous Payments.

**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?

**HAVE ALL AFFECTED DEPARTMENTS BEEN NOTIFIED?   X   YES    NO**

**PRIMARY DEPARTMENT:** Tax Office  
**SECONDARY DEPARTMENT:** N/A

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\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

**DEPARTMENT HEAD:**

*Maria O. Pasillas*

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

TAX REFUNDS OVER THREE (3) YEARS  
July 20, 2021

1. Jose Fong Jr., in the amount of \$420.03, made an overpayment on December 28, 2017 of 2017 taxes.  
(Geo. # 2001-999-0165-0042)
2. Carlos Garcia, in the amount of \$31.96, made an overpayment on January 23, 2018 of 2018 taxes.  
(Geo. # 2002-999-3608-0033)
3. Nader Kassen, in the amount of \$814.64, made an overpayment on January 24, 2017 of 2016 taxes.  
(Geo. # 2005-999-0007-0042)

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Laura D. Prine  
City Clerk



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Maria O. Pasillas, RTA  
Tax Assessor Collector



# Internal Audit Office

**MAYOR**  
Oscar Leaser

**DATE:** June 29, 2021

**TO:** Maria O. Pasillas, Tax Assessor/Collector

**CITY COUNCIL**

**FROM:** Edmundo S. Calderon, CIA, CGAP, CRMA, Chief Internal Auditor 

**District 1**  
Peter Svarzbein

**SUBJECT:** Review of Tax Overpayment Refunds that Exceed Three Years

**District 2**  
Alexsandra Annello

The Internal Audit Office conducted a review of the Tax Overpayment Refunds that exceeded a three-year period. This engagement was accepted based on the engagement’s potential to improve management of risks, add value, and/or improve the organization’s operations (IIA 2010.C1). The work performed does not constitute an engagement conducted in accordance with Generally Accepted Government Auditing Standards (GAS 1.16). The observations and conclusions that are reported in this memorandum do not require Management responses.

**District 3**  
Cassandra Hernandez

The following Tax Overpayment Refunds that exceeded a three-year period were reviewed:

**District 4**  
Joe Molinar

TEQUILA SUNRISE C/O FONG JOSE JR	2001-999-0165-0042	\$420.03
CARLOS GARCIA	2002-999-3608-0033	\$31.96
NADER KASSEM	2005-999-0007-0042	\$814.64

**District 5**  
Isabel Salcido

**District 6**  
Claudia L. Rodriguez

The Internal Audit Office reviewed the refund applications, copies of cancelled checks or proof of payments. Attached is a list of days from the date the completed applications were received by the Tax Office and sent to the Internal Audit Office for review. The Tax Office is taking 4 days to process the applications received and send for review.

**District 7**  
Henry Rivera

**District 8**  
Cissy Lizarraga

Based on our review, the Tax Overpayment Refunds that exceeded a three-year period were determined to be appropriate to send to City Council for approval pursuant to Section 31.11 (c-1) of the Texas Tax Code.

**CITY MANAGER**  
Tommy Gonzalez

cc: Tomas Gonzalez, City Manager  
Robert Cortinas, Deputy City Manager of Support Services & Chief Financial Officer

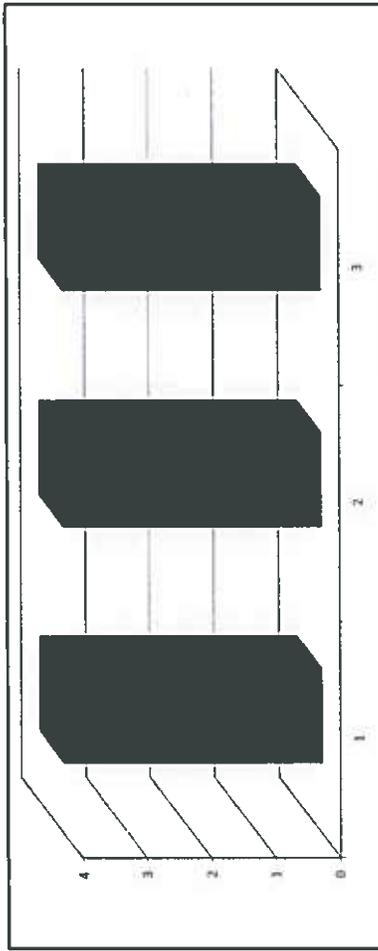
**Edmundo S. Calderon – Chief Internal Auditor**  
Internal Audit Office | 218 N. Campbell | El Paso, TX 79901  
O: (915) 212-0069 | Email: calderones@elpasotexas.gov



City of El Paso  
 Internal Audit Office  
 Tax Office Refund Project  
 Week of 06/21/2021 Reviews- Over Three Years

#	Refund To	P.I.D. Number	Amount of Refund	Date Application was Received	Date of Proof of Payment was Received in the Tax Office	Date Application was approved by the Tax Office	Date Tax Office Sent to Internal Audit for Review	Total Days from Date Proof of Payment to Date Asked to be Reviewed	Date Internal Audit Reviewed Application	Comments
1	Tequila Sunrise C/O Fong Jose JR	2001-999-0165-0042	\$420.03	6/18/2021	6/21/2021	6/22/2021	6/25/2021	4	6/29/2021	
2	Carlos Garcia	2002-999-3608-0033	\$31.96	6/16/2021	6/21/2021	6/23/2021	6/25/2021	4	6/29/2021	
3	Nader Kassem	2005-999-0007-0042	\$814.64	6/16/2021	6/21/2021	6/22/2021	6/25/2021	4	6/29/2021	
			<b>\$1,266.63</b>							

Legend  
 0-10 Days  
 11-20 Days  
 21-30 Days  
 31-40 Days  
 41-50 Days



**RESOLUTION**

**WHEREAS**, pursuant to Section 31.11 (c) of the Texas Code an application for a refund must be made within three (3) years after the date of the payment or the taxpayer waives the right to the refund; and

**WHEREAS**, pursuant to Section 31.11 (c-1) the governing body of the taxing unit may extend the deadline for a single period not to exceed two years on a showing of good cause by the taxpayer; and

**WHEREAS**, taxpayer, Jose Fong through Tequila Sunrise C/O Jose Fong Jr (“Taxpayer”) has applied for a refund with the tax assessor for their 2017 property taxes that were overpaid on December 28, 2017 in the amount of \$420.03 for all taxing entities; and

**WHEREAS**, City Council may extend the deadline for the Taxpayer’s application for the overpayment of the 2017 taxes for a period not to exceed two years on a showing of good cause by the taxpayer; and

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:**

THAT THE City finds that Tequila Sunrise C/O Jose Fong Jr showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2017 taxes and the tax refund in the amount of \$420.03 is approved.

**APPROVED** this \_\_\_\_\_ day of \_\_\_\_\_, 2021.

**CITY OF EL PASO:**

\_\_\_\_\_  
Oscar Leaser  
Mayor

**ATTEST:**

\_\_\_\_\_  
Laura D. Prine  
City Clerk

**APPROVED AS TO FORM:**

*Wendi N. Vineyard*  
\_\_\_\_\_  
Wendi N. Vineyard  
Assistant City Attorney

**APPROVED AS TO CONTENT:**

*Maria O. Pasillas*  
\_\_\_\_\_  
Maria O. Pasillas, RTA  
Tax Assessor/Collector



TAX OFFICE RECEIVED JUN 21 2021

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

TEQUILA SUNRISE  
C/O FONG JOSE JR  
11701 GATEWAY BLVD W  
EL PASO, TX 79936-7407

*JP*  
*+3 bytes*

Geo No. 2001-999-0165-0042	Prop ID 502939
Legal Description of the Property FURN INV MACH SIGN 11701 W GATEWAY BLVD	
OWNER XCAPE	

2017 OVERAGE AMOUNT \$420.03

1: CITY OF EL PASO. 5: SLETA 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.

<b>Step 1. Identify the refund recipient.</b> Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <i>Jose Fong Jr</i>			
	Address: <i>11710 Gateway Palms</i>			
	City, State, Zip: <i>El Paso TX 79936</i>			
	Daytime Phone No.:	E-Mail Address:		
	<i>915)383-9888</i>			
<b>Step 2. Provide payment information.</b> 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>04127</i>	<i>12/28/17</i>	<i>\$420.03</i>
	<b>TOTAL AMOUNT PAID (sum of the above amounts)</b>			
<b>Step 3. Provide reason for this refund.</b> 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 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):				
<b>Step 4. Sign the form.</b> 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>Jose Fong Jr 6/22/21</i>		<i>Jose Fong - 6-18-21</i>		
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		By: <i>[Signature]</i> Date: <i>06/22/2021</i>		

Notes

Go To:

ANDREA  
ACT80122 v1.90

07/08/2021 09:03:53  
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
X1228171006	200199901650042				

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	A03112179	03/11/2021	47078869	139	CH	\$494.76	\$494.76	PA	200199901650042	29630162-F W INC
	R0111242091	07/31/2020	36612056	0000229754	CH	\$420.03	\$420.03	LG	200199901650042	TEQUILA SUNRISE
	RD3517537	07/31/2020	36612056	0000229754	CH	\$420.03-	\$420.03-	LG	200199901650042	TEQUILA SUNRISE
	A03102081	03/10/2020	43915469	1384	CH	\$480.75	\$480.75	PA	200199901650042	XCAPE
	A03071979	03/07/2019	40914679	1084	CH	\$469.13	\$469.13	PA	200199901650042	XCAPE
	RC210622	12/28/2017	36612056	04127	CH	\$420.03	\$420.03	LG	200199901650042	29884644-TEQUILA SUNRISE
	RC210622	12/28/2017	36612056	04127	CH	\$420.03-	\$420.03-	TR	200199901650042	TEQUILA SUNRISE
	X1228171006	12/28/2017	36612056	04127	CH	\$420.03	\$420.03	LG	200199901650042	TEQUILA SUNRISE
	T10251740006	10/30/2017	35802234	04040	CH	\$420.03	\$420.03	PA	200199901650042	TEQUILA SUNRISE
	A12211677	12/21/2016	33452968	4009	CH	\$420.39	\$420.39	PA	200199901650042	TEQUILA SUNRISE
	X1104151012	11/04/2015	29802162	03662	CH	\$31.14	\$31.14	PA	200199901650042	TEQUILA SUNRISE
	R92015ACT	10/13/2015	29586973	13622	CH	\$0.00	\$0.00	TR	200199901650042	TEQUILA SUNRISE

Applied Total \$11,345.64

**RESOLUTION**

**WHEREAS**, pursuant to Section 31.11 (c) of the Texas Code an application for a refund must be made within three (3) years after the date of the payment or the taxpayer waives the right to the refund; and

**WHEREAS**, pursuant to Section 31.11 (c-1) the governing body of the taxing unit may extend the deadline for a single period not to exceed two years on a showing of good cause by the taxpayer; and

**WHEREAS**, taxpayer, Carlos Garcia through Anthony Auto Sales C/O Carlos Garcia (“Taxpayer”) has applied for a refund with the tax assessor for their 2018 property taxes that were overpaid on January 23, 2018 in the amount of \$31.96 for all taxing entities; and

**WHEREAS**, City Council may extend the deadline for the Taxpayer’s application for the overpayment of the 2018 taxes for a period not to exceed two years on a showing of good cause by the taxpayer; and

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**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:**

THAT THE City finds that Anthony Auto Sales C/O Carlos Garcia showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2018 taxes and the tax refund in the amount of \$31.96 is approved.

**APPROVED** this \_\_\_\_\_ day of \_\_\_\_\_, 2021.

**CITY OF EL PASO:**

\_\_\_\_\_  
Oscar Leaser  
Mayor

**ATTEST:**

\_\_\_\_\_  
Laura D. Prine  
City Clerk

**APPROVED AS TO FORM:**

*Wendi N. Vineyard*  
\_\_\_\_\_  
Wendi N. Vineyard  
Assistant City Attorney

**APPROVED AS TO CONTENT:**

*Maria O. Pasillas*  
\_\_\_\_\_  
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  
 JUN 21 2021

ANTHONY AUTO SALES  
 % CARLOS GARCIA  
 PO BOX 1423  
 CANUTILLO, TX 79835-1423

OP  
 + 3 yrs

Geo No. 2002-999-3608-0033	Prop ID 507542
Legal Description of the Property DEALER MOTOR VEH INV P108433	
7044 FOURTH ST	
OWNER: ANTHONY AUTO SALES	

2018 OVERAGE AMOUNT \$31.96

6. COUNTY OF EL PASO. 7. EL PASO COMMUNITY COLLEGE. 8. UNIVERSITY MEDICAL CENTER OF EL PASO. 18. CANUTILLO ISD. 27. EMERG. SERVICES DIST. #2

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 whom ever will be receiving the refund.	Who should the refund be issued to:			
	Name: Carlos Garcia			
	Address: PO Box 1423			
	City, State, Zip: Canutillo, TX 79835			
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) 886-2571		E-Mail Address: cgarciere@juno.com	
	Payment made by:	Check No.	Date Paid	Amount Paid
		0003242999	10/13/18	\$36.32
	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 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)		PRINTED NAME & DATE	
	[Signature]		Carlos Garcia 6-16-21	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: [Signature]	Date: 06/22/2021

Notes

Go To :

ANDREA  
ACT80122 v1.90

07/08/2021 09:03:53  
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.  
 B02021875 200299936080033

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	SI0212221	10/13/2018	34642390	2980630	CH	\$0.00	\$6.76	LG	200299936080033	ANTHONY AUTO SALES
	SI0212221	10/13/2018	34642390	2980630	CH	\$0.00	\$6.76	TR	200299936080033	ANTHONY AUTO SALES
	P20184000001	01/31/2018	37801560	88888	CH	\$5,173,530.45	\$36.32	PA	200299936080033	88888-COUNTY TAX OFF
	R030218398	01/31/2018	37598569	0003242999	CH	\$0.00	\$36.32	LG	200299936080033	ANTHONY AUTO SALES
	R030218398	01/31/2018	37598569	0003242999	CH	\$0.00	\$36.32	TR	200299936080033	ANTHONY AUTO SALES
	R030918398	01/31/2018	37598569	0003242999	CH	\$0.00	\$36.32	TR	200299936080033	ANTHONY AUTO SALES
	R030918398	01/31/2018	37598569	0003242999	CH	\$0.00	\$36.32	TR	200299936080033	ANTHONY AUTO SALES
	B02021875	01/23/2018	37598569	0003242999	CH	\$36.32	\$36.32	PA	200299936080033	ANTHONY AUTO SALES
	P201740001	01/31/2017	34881384	1713	CH	\$4,984,903.08	\$23.46	PA	200299936080033	88888-COUNTY TAX OFF
	R030918398	01/31/2017	34642390	2980630	CH	\$0.00	\$23.46	TR	200299936080033	ANTHONY AUTO SALES
	R030918398	01/31/2017	34642390	2980630	CH	\$0.00	\$23.46	TR	200299936080033	ANTHONY AUTO SALES
	X02021741	01/31/2017	34642390	2980630	CH	\$23.46	\$23.46	LG	200299936080033	ANTHONY AUTO SALES

Applied Total \$1,037.23

**RESOLUTION**

**WHEREAS**, pursuant to Section 31.11 (c) of the Texas Code an application for a refund must be made within three (3) years after the date of the payment or the taxpayer waives the right to the refund; and

**WHEREAS**, pursuant to Section 31.11 (c-1) the governing body of the taxing unit may extend the deadline for a single period not to exceed two years on a showing of good cause by the taxpayer; and

**WHEREAS**, taxpayer, Nader Kassem through Avalance Preowned Vehicles LP C/O Nader Kassen ("Taxpayer") has applied for a refund with the tax assessor for their 2016 property taxes that were overpaid on January 24, 2017 in the amount of \$814.64 for all taxing entities; and

**WHEREAS**, City Council may extend the deadline for the Taxpayer's application for the overpayment of the 2016 taxes for a period not to exceed two years on a showing of good cause by the taxpayer; and

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:**

THAT THE City finds that Avalance Preowned Vehicles LP C/O Nader Kassen showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2016 taxes and the tax refund in the amount of \$814.64 is approved.

**APPROVED** this \_\_\_\_\_ day of \_\_\_\_\_, 2021.

**CITY OF EL PASO:**

\_\_\_\_\_  
Oscar Leeser  
Mayor

**ATTEST:**

\_\_\_\_\_  
Laura D. Prine  
City Clerk

**APPROVED AS TO FORM:**

*Wendi N. Vineyard*  
\_\_\_\_\_  
Wendi N. Vineyard  
Assistant City Attorney

**APPROVED AS TO CONTENT:**

*Maria O. Pasillas*  
\_\_\_\_\_  
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  
 JUN 21 2021

AVALANCHE PREOWNED VEHICLES LP  
 C/O KASSEN NADER  
 7317 ALAMEDA AVE  
 EL PASO, TX 79915-3600

OP  
 3 yrs ✓

Geo No. 2005-999-0007-0042	Prop ID 513563
Legal Description of the Property DEALER MOTOR VEH INV	
7317 ALAMEDA AVE-A	
OWNER: AVALANCHE PREOWNED VEHICLES LP	

2016 OVERAGE AMOUNT \$814.64 ✓

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: 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: NADER KASSEM			
	Address: 7317 ALAMEDA AVE # A ✓			
	City, State, Zip: EL PASO TX, 79915			
Daytime Phone No.: 915 525 1720		E-Mail Address: nakassem@aol.com		
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
		03167	1/24/17	\$814.64
	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) [Signature]		PRINTED NAME & DATE NADER KASSEM 6-16-21 ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: [Signature] Date: 6/22/21 ✓				

Notes

Go To :

ANDREA  
ACT80122 v1.90

07/08/2021 09:03:53  
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.  
 X0124171003 200599900070042

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	P2020000001	01/31/2021	46902105	1817	CH	\$6,036,397.91	\$766.47	PA	200599900070042	AVALANCHE PREOWNEC
	P20190001	01/31/2020	43721639	1791	CH	\$5,651,502.86	\$674.51	PA	200599900070042	AVALANCHE PREOWNEC
	P20180001	01/31/2019	40753029	88888	CH	\$5,173,266.47	\$883.60	PA	200599900070042	88888-COUNTY TAX OFF
	P20184000001	01/31/2018	37801560	88888	CH	\$5,173,530.45	\$994.11	PA	200599900070042	88888-COUNTY TAX OFF
	P201740001	01/31/2017	34881384	1713	CH	\$4,984,903.08	\$837.81	PA	200599900070042	88888-COUNTY TAX OFF
	R030217398	01/31/2017	34254042	03167	CH	\$0.00	\$814.64	TR	200599900070042	AVALANCHE PREOWNEC
	R030217398	01/31/2017	34254042	03167	CH	\$0.00	\$814.64	LG	200599900070042	AVALANCHE PREOWNEC
	RC210622	01/31/2017	34254042	03167	CH	\$814.64	\$814.64	TR	200599900070042	AVALANCHE PREOWNEC
	RC210622	01/31/2017	34254042	03167	CH	\$814.64	\$814.64	LG	200599900070042	29884551-NADER KASSI
	X0124171003	01/24/2017	34254042	03167	CH	\$814.64	\$814.64	PA	200599900070042	AVALANCHE PREOWNEC
	P201640001	01/31/2016	31792814	88888	CH	\$4,619,874.73	\$758.30	PA	200599900070042	88888-COUNTY TAX OFF
	P201540001	01/31/2015	28776808	1657	CH	\$4,084,072.73	\$862.83	PA	200599900070042	88888-COUNTY TAX OFF

Applied Total \$11,415.35