

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

AGENDA DATE: March 15, 2022
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 greater than \$2,500.00. (See Attachment A)

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 greater than \$2,500.00, 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? YES NO

PRIMARY DEPARTMENT: Tax Office

SECONDARY DEPARTMENT: N/A

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

DEPARTMENT HEAD:



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

TAX REFUNDS
March 15, 2022

1. Giles Volvo Cars El Paso LLC, in the amount of \$5,881.21 made an overpayment on December 31, 2020 of 2020 taxes.
(Geo. # 20PP-000-5773-1022)
2. George Marak, in the amount of \$5,295.71 made an overpayment on January 31, 2022 of 2021 taxes.
(Geo. # C214-999-0020-5300)
3. George Marak, in the amount of \$5,295.71 made an overpayment on January 24, 2022 of 2021 taxes.
(Geo. # C214-999-0020-5300)
4. M. Carmen Samaniego, in the amount of \$3,143.01 made an overpayment on January 26, 2022 of 2021 taxes.
(Geo. # E054-999-0230-1700)
5. El Paso Escrow Inc. DBA Commercial Escrow, in the amount of \$2,586.50 made an overpayment on January 20, 2022 of 2021 taxes.
(Geo. #H793-024-0100-0230)
6. Commercial Escrow, in the amount of \$2,586.50 made an overpayment on January 20, 2022 of 2021 taxes.
(Geo. # H793-024-0100-0250)
7. LNK Properties, LLC, in the amount of \$4,030.49 made an overpayment on January 4, 2022 of 2021 taxes.
(Geo. # M842-999-0060-1900)
8. El Paso Escrow Inc. DBA Commercial Escrow, in the amount of \$3,247.32 made an overpayment on January 20, 2022 of 2021 taxes.
(Geo. # S533-000-0010-13W2)
9. Oluwatosin Arowojolu, in the amount of \$3,209.10 made an overpayment on January 10, 2022 of 2021 taxes.
(Geo. # V225-000-0050-0500)
10. Ann Cereghino, in the amount of \$4,074.48 made an overpayment on February 6, 2022 of 2021 taxes.
(Geo. # V893-999-061A-0100)

11. LNK Properties, LLC, in the amount of \$7,720.23 made an overpayment on January 4, 2022 of 2021 taxes.
(Geo. # W564-999-0040-5300)

Laura D. Prine
City Clerk

Maria O. Pasillas

Maria O. Pasillas, RTA
Tax Assessor Collector



TAX OFFICE RECEIVED
FEB 28 2022

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

GILES VOLVO CARS EL PASO LLC
6137 JOHNSTON ST
LAFAYETTE, LA 70503-5618

OP ✓
+2500

Geo No. 20PP-000-5773-1022	Prop ID 689490
Legal Description of the Property DEALER MOTOR VEH INV P156846 6585 S DESERT BLVD	
OWNER: GILES VOLVO CARS EL PASO LLC	
2020 OVERAGE AMOUNT \$5,881.21 ✓	

1: CITY OF EL PASO, 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 whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: Giles Volvo Cars El Paso LLC			
	Address: 6137 Johnston St			
	City, State, Zip: Lafayette LA 70503 ✓			
Daytime Phone No.: 337-354-2758		E-Mail Address: tpontiff@gilescars.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
	ck	2582	12/31/2020	5881.21
	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	
	Tonia Pontiff, CPA		Tonia Pontiff 2/18/22 ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: N.H. Date: 3-1-22				

Notes

Go To:

LUZR
ACT80122 v1.90

03/01/2022 14:16:02
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 A02112179 20PP00057731022

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	P20210000001	01/31/2022	50149658	1840	CH	\$6,111,023.51	\$25,306.39	PA	20PP00057731022	88888-COUNTY TAX OFFI
	EC012822	01/28/2022	49741091	CC004251351	EC	\$25,306.39	\$25,306.39		20PP00057731022	30791411-GILES CARS O
	P20200000001	01/31/2021	46902105	1817	CH	\$6,036,397.91	\$6,056.31	PA	20PP00057731022	GILES VOLVO CARS EL I
	A02112179	12/31/2020	46902859	2582	CH	\$5,881.21	\$5,881.21	PA	20PP00057731022	GILES VOLVO CARS EL I
	R030222167	12/31/2020	46902859	2582	CH	\$0.00	\$5,881.21	LG	20PP00057731022	GILES VOLVO CARS EL I
	R030222167	12/31/2020	46902859	2582	CH	\$0.00	\$5,881.21	TR	20PP00057731022	GILES VOLVO CARS EL I

Applied Total



TAX OFFICE RECEIVED

FEB 23 2022

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

Geo No. C214-999-0020-5300	Prop ID 146265
Legal Description of the Property 2 CASITAS CORONADO LOT 53 (4400 SQ FT) 5723 MIRA GRANDE DR 79912	
OWNER: MARAK GEORGE E & JEAN M	

GEORGE MARAK
5723 MIRA GRANDE DR
EL PASO, TX 79912

OP
+2500 ✓

1032

2021 OVERAGE AMOUNT \$5,295.71 ✓

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.

RE PAYMENT 1/28/22 5295.71

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: George MARAK ✓		George-MARAK@	
	Address: 5723 MIRA GRANDE DR		@VERIZON.NET	
	City, State, Zip: EL PASO TX		E-Mail Address: ✓	
Daytime Phone No.: 915-581-4432		E-Mail Address: ✓		
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
	CHECK	752	1/27/22	5295.71
	CHECK	748	2/14/22	5295.71
	TOTAL AMOUNT PAID (sum of the above amounts)			10591.42
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) George Marak		PRINTED NAME & DATE George Marak 2/20/22 ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		By: N.H.		Date: 2-24-22 ✓

Print Date: 02/14/2022 ✓

Notes

Go To:

LUZR
ACT80122 v1.90

02/25/2022 10:39:38
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 T02112200016 C21499900205300

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	RC220224	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	TR	C21499900205300	31052826-MARAK GEOR
	RC220224	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	TR	C21499900205300	MARAK GEORGE E & JE
*	T02112200016	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	LG	C21499900205300	MARAK GEORGE E & JE
	A01252275	01/25/2022	49468182	752	CH	\$5,295.71	\$5,295.71	PA	C21499900205300	MARAK GEORGE E & JE
	EC012422	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	LG	C21499900205300	30681673-GEORGE MAR
	RC220224	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	TR	C21499900205300	30681673-GEORGE MAR
	RC220224	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	TR	C21499900205300	31052826-MARAK GEOR
*	T12212000003	12/21/2020	45414193	00449	CH	\$5,022.23	\$5,022.23	PA	C21499900205300	MARAK GEORGE E & JE
*	T10281900004	10/29/2019	41688935	00313	CH	\$5,024.75	\$5,024.75	PA	C21499900205300	MARAK GEORGE E & JE
	A01081990	01/08/2019	39746520	220	CH	\$4,816.93	\$4,816.93	PA	C21499900205300	26876545-MARAK GEOR
*	T10251740006	10/30/2017	35802221	00423	CH	\$5,135.01	\$5,135.01	PA	C21499900205300	MARAK GEORGE E & JE
*	X1114161006	11/14/2016	32967369	00311	CH	\$5,002.32	\$5,002.32	PA	C21499900205300	MARAK GEORGE E & JE

Applied Total \$136,997.88



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

MARAK GEORGE E & JEAN M
 5723 MIRA GRANDE DR
 EL PASO, TX 79912-2005

OP
 +2500
 2 of 2

Geo No. C214-999-0020-5300	Prop ID 146265
Legal Description of the Property 2 CASITAS CORONADO LOT 53 (4400 SQ FT)	
5723 MIRA GRANDE DR 79912	
OWNER: MARAK GEORGE E & JEAN M	

2021 OVERAGE AMOUNT \$5,295.71

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

2 of 2

Dear Taxpayer:

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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: <u>George Marak</u> ✓			
	Address: <u>5723 Mira Grande Dr</u>			
	City, State, Zip: <u>El Paso, TX 79912</u> ✓			
Daytime Phone No.: <u>915 581-4432</u>		E-Mail Address:		
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
	<u>IE Payment</u>		<u>1/16/22</u>	<u>5295.71</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.			
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>George Marak</u>		PRINTED NAME & DATE <u>George Marak 2/10/22</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>N.H</u> Date: <u>2-24-22</u>				

Notes

Go To :

LUZR
ACT80122 v1.90

02/25/2022 10:39:38
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 EC012422 C21499900205300

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	RC220224	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	TR	C21499900205300	31052826-MARAK GEOR
	RC220224	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	TR	C21499900205300	MARAK GEORGE E & JE
*	T02112200016	01/31/2022	50159753	00748	CH	\$5,295.71	\$5,295.71	LG	C21499900205300	MARAK GEORGE E & JE
	A01252275	01/25/2022	49468182	752	CH	\$5,295.71	\$5,295.71	PA	C21499900205300	MARAK GEORGE E & JE
	EC012422	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	LG	C21499900205300	30681673-GEORGE MAR
	RC220224	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	TR	C21499900205300	30681673-GEORGE MAR
	RC220224	01/24/2022	49500105	CC004199807	EC	\$5,295.71	\$5,295.71	TR	C21499900205300	31052826-MARAK GEOR
*	T12212000003	12/21/2020	45414193	00449	CH	\$5,022.23	\$5,022.23	PA	C21499900205300	MARAK GEORGE E & JE
*	T10281900004	10/29/2019	41688935	00313	CH	\$5,024.75	\$5,024.75	PA	C21499900205300	MARAK GEORGE E & JE
	A01081990	01/08/2019	39746520	220	CH	\$4,816.93	\$4,816.93	PA	C21499900205300	26876545-MARAK GEOR
*	T10251740006	10/30/2017	35802221	00423	CH	\$5,135.01	\$5,135.01	PA	C21499900205300	MARAK GEORGE E & JE
*	X1114161006	11/14/2016	32967369	00311	CH	\$5,002.32	\$5,002.32	PA	C21499900205300	MARAK GEORGE E & JE

Applied Total \$136,997.88



TAX OFFICE RECEIVED

FEB 07 2022

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

Geo No. E054-999-0230-1700	Prop ID 322991
Legal Description of the Property 23 EAST GLEN LOT 9 11128 VOYAGER COVE DR	
OWNER: SEFTON HELEN	

MCARMEN SAMANIEGO
11184 VOYAGER COVE DR.
EL PASO, TX 79936

OP
+2500

2021 OVERAGE AMOUNT \$3,143.01

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:

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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: M. CARMEN SAMANIEGO			
	Address: 11184 Voyager Cove ✓			
	City, State, Zip: EL PASO, TX 79936		Daytime Phone No.: 915 479-1311	
		E-Mail Address: Handsoluke@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
	E check	4226146	1/26/22	3143.01
	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.		
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	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	M. Carmen Samaniego		M. CARMEN SAMANIEGO	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: N/A Date: 2-24-22				

ME 2/25/22

Notes

Go To :

LUZR
ACT80122 v1.90

02/25/2022 10:51:37
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 EC012622 E05499902301700

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC012622	01/26/2022	49606909	CC004226146	EC	\$3,143.01	\$3,143.01	LG	E05499902301700	30728616-M CARMEN SA
	EC012622	01/26/2022	49606851	CC004225795	EC	\$3,143.10	\$3,143.10	PA	E05499902301700	30728558-MCARMEN SAI
	EC12022098	12/02/2020	45070944	CC003251362	EC	\$3,266.01	\$3,266.01	PA	E05499902301700	28843734-M CARMEN SA
	EC12091998	12/08/2019	42172607	CC002661292	EC	\$3,173.58	\$3,173.58	PA	E05499902301700	27721778-M.CARMEN SA
	EC12111898	12/10/2018	39243472	CC002172323	EC	\$3,159.30	\$3,159.30	PA	E05499902301700	26748757-M.CARMEN SA
	EC12181798	12/18/2017	36363428	CC001769740	EC	\$2,868.15	\$2,868.15	PA	E05499902301700	25844658-M.CARMEN SA
	EC11141698	11/14/2016	32964223	CC001391432	EC	\$2,819.27	\$2,819.27	PA	E05499902301700	24907410-M.CARMEN SA
	EC12071598	12/04/2015	30164712	CC001117707	EC	\$2,671.89	\$2,671.89	PA	E05499902301700	24140810-MARCO A. SAM
	EC12151468	12/13/2014	27305151	CC000885338	CH	\$2,651.95	\$2,651.95	PA	E05499902301700	23456823-M.CARMEN SA
	EC12231368	12/20/2013	24528652	CC000705527	CH	\$2,604.66	\$2,604.66	PA	E05499902301700	22801936-M.CARMEN SA
	EC12171250	12/17/2012	21850432	CC000551149	CH	\$2,505.93	\$2,505.93	PA	E05499902301700	22142784-M.CARMEN SA
	EC12191157	12/16/2011	19411954	CC000423914	CH	\$2,442.63	\$2,442.63	PA	E05499902301700	21558125-MARCO SAMAI

Applied Total \$63,128.97



TAX OFFICE RECEIVED
MAR 02 2022

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

Geo No. H793-024-0100-0230	Prop ID 341946
Legal Description of the Property 10 HORIZON VIEW ESTATES #24 LOT 23 (8000.00 SQ FT)	
OWNER: PEINADO ADRIAN	

COMMERCIAL ESCROW
10657 VISTA DEL SOL DR - SUITE I
EL PASO, TX 79935-4504

OP ✓
+2500

2021 OVERAGE AMOUNT \$2,586.50 ✓

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 10: CLINT ISD, 14: HORIZON REGIONAL MUD, 15: EMERG. SERVICES DIST #1

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: <u>El Paso Escrow Inc, dba Commercial Escrow</u>			
	Address: <u>10657 Vista Del Sol Ste J</u>			
	City, State, Zip: <u>El Paso TX 79935</u> ✓			
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Daytime Phone No.: <u>915 591 6683</u>		E-Mail Address: <u>juansanchez73@att.net</u>	
	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>Commercial Escrow</u>	<u>3780</u>	<u>1/26/22</u>	<u>2586.50</u>
		<u>3990</u>		<u>287,271.67</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>Juan E. Sanchez</u>		<u>Juan E. Sanchez</u> ✓		
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		By: <u>N.H.</u> Date: <u>3-3-22</u> ✓		

Notes

Go To :

LUZR
ACT80122 v1.90

03/07/2022 09:44:41
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
M214000A0001 H79302401000230

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$824.78	PA	H79302401000230	4000-COMMERCIAL ESCI
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$2,586.50	LG	H79302401000230	4000-COMMERCIAL ESCI
	O012821235	01/28/2021	46663855	451	CH	\$856.98	\$856.98	PA	H79302401000230	29432859-AUSTIN GLENN
*	X0203202002	01/31/2020	43546008	00613	CH	\$4,782.05	\$831.67	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0204192002	01/31/2019	40618646	00164	CH	\$1,826.45	\$5.56	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0205182010	01/30/2018	37760724	05412	CH	\$1,730.87	\$5.49	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0202172005	01/31/2017	34798392	05277	CH	\$1,662.57	\$5.44	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X020216B2003	01/31/2016	31610107	05143	CH	\$65.61	\$5.39	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0205152012	01/31/2015	28764030	05006	CH	\$1,813.29	\$5.24	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0203142003	01/31/2014	25610952	04857	CH	\$1,795.72	\$10.20	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0130122010	01/30/2012	20245070	04559	CH	\$1,689.85	\$4.93	PA	H79302401000230	AUSTIN GLENN L & ROSA
*	X0204112000	01/31/2011	18136973	04400	CH	\$1,663.02	\$4.91	PA	H79302401000230	AUSTIN GLENN L & ROSA

Applied Total \$5,217.40

21-1008



TAX OFFICE RECEIVED
MAR 02 2022

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

COMMERCIAL ESCROW
10657 VISTA DEL SOL DR - SUITE I
EL PASO, TX 79935-4504

OP
+2500 ✓

Geo No. H793-024-0100-0250	Prop ID 292875
Legal Description of the Property 10 HORIZON VIEW ESTATES #24 LOT 25 (8000.00 SQ FT)	
OWNER: PEINADO ADRIAN	

2021 OVERAGE AMOUNT \$2,586.50 ✓

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 10: CLINT ISD, 14: HORIZON REGIONAL MUD, 15: EMERG. SERVICES DIST #1

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: Commercial Escrow ✓			
	Address: 10657 Vista Del Sol Dr Ste I ✓			
	City, State, Zip: El Paso TX 79935 ✓			
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Daytime Phone No.:	915 591 6683	E-Mail Address:	mmassanher 73 a@attne ✓
	Payment made by:	Check No.	Date Paid	Amount Paid
	Commercial Escrow	5980	1/20/22	2586.50
		5990		287,271.67
	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)		PRINTED NAME & DATE	
	Juan E. Juey ✓		Juan E Juey ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: NH Date: 3-3-22 ✓				

am

Notes

Go To:

LUZR
ACT80122 v1.90

03/07/2022 09:41:51
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
M214000A0001 H79302401000250

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$2,586.50	LG	H79302401000250	4000-COMMERCIAL ESCI
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$824.78	PA	H79302401000250	4000-COMMERCIAL ESCI
	O012821235	01/28/2021	46663859	451	CH	\$856.98	\$856.98	PA	H79302401000250	29432863-AUSTIN GLENN
*	X0203202002	01/31/2020	43546008	00613	CH	\$4,782.05	\$831.67	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0204192002	01/31/2019	40618646	00164	CH	\$1,826.45	\$5.56	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0205182010	01/30/2018	37760724	05412	CH	\$1,730.87	\$5.49	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0202172005	01/31/2017	34798392	05277	CH	\$1,662.57	\$5.44	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X020216B2003	01/31/2016	31610107	05143	CH	\$65.61	\$5.39	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0205152012	01/31/2015	28764030	05006	CH	\$1,813.29	\$5.24	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0203142003	01/31/2014	25610952	04857	CH	\$1,795.72	\$10.20	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0130122010	01/30/2012	20245070	04559	CH	\$1,689.85	\$4.93	PA	H79302401000250	AUSTIN GLENN L & ROS/
*	X0204112000	01/31/2011	18136973	04400	CH	\$1,663.02	\$4.91	PA	H79302401000250	AUSTIN GLENN L & ROS/

Applied Total \$5,217.40



TAX OFFICE RECEIVED

FEB 22 2022

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

Geo No. M842-999-0060-1900	Prop ID 158769
Legal Description of the Property 6 MOUNTAIN SHADOWS FOOTHILLS LOT 10 (6688 SQ FT)	
3609 LEMO ST 79904	
OWNER: LNK PROPERTIES LLC	

DEEBEE PLESANT
941 VEREDA DEL VALLE
EL PASO, TX 79932

OP
+2500

2021 OVERAGE AMOUNT \$4,030.49

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: LNK Properties, LLC			
	Address: 941 Vereda Del Valle Ave.			
	City, State, Zip: El Paso, TX 79932			
Daytime Phone No.: 915-422-9578		E-Mail Address: lnkpropso@yahoo.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
	Echeck	4065525	1/4/22	19,707.32
	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 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	
	LNK Properties LLC By: Deebie Pleasant, Manager		01/22/2022 LNK Properties LLC By: Deebie Pleasant, Manager	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: N.H. Date: 2-24-22				

Notes

Go To :

LUZR
ACT80122 v1.90

02/24/2022 15:33:15
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 EC010322F M84299900601900

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC010322F	01/04/2022	48889358	CC004065525	EC	\$19,707.32	\$4,030.49	LG	M84299900601900	30431931-DEEBEE PLES.
	RC220224	01/04/2022	48889358	CC004065525	EC	\$4,030.49	\$4,030.49	TR	M84299900601900	31052591-LNK PROPERTI
	RC220224	01/04/2022	48889358	CC004065525	EC	\$4,030.49	\$4,030.49	TR	M84299900601900	30431931-DEEBEE PLES.
	EC010322	12/31/2021	48880265	CC004072425	EC	\$4,030.49	\$4,030.49	PA	M84299900601900	30432047-DEEBEE DAOL
	EC12302098	12/29/2020	45584494	CC003334851	EC	\$3,219.85	\$3,219.85	PA	M84299900601900	29002346-LNK PROPERTI
	EC12271998	12/27/2019	42475383	CC002704910	EC	\$3,169.64	\$3,169.64	PA	M84299900601900	27800705-DEEBEE PLES.
	EC12311898	12/29/2018	39594590	CC002215666	EC	\$3,482.63	\$3,482.63	PA	M84299900601900	26834425-LNK PROPERTI
	EC12281798	12/27/2017	36622248	CC001792890	EC	\$3,359.87	\$3,359.87	PA	M84299900601900	25907855-LNK PROPERTI
	EC12131698	12/13/2016	33311430	CC001416420	EC	\$3,197.53	\$3,197.53	PA	M84299900601900	24978894-LNK PROPERTI
*	X1228152001	12/28/2015	30496308	00256	CH	\$12,841.10	\$3,146.67	PA	M84299900601900	LNK PROPERTIES LLC
*	X1224141007	12/24/2014	27468467	00193	CH	\$3,087.98	\$3,087.98	PA	M84299900601900	LNK PROPERTIES LLC
*	X1231131027	12/31/2013	24681457	00112	CH	\$2,789.56	\$2,789.56	PA	M84299900601900	LNK PROPERTIES LLC

Applied Total \$50,846.87



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
 MAR 02 2022

19-A010

COMMERCIAL ESCROW
 10657 VISTA DEL SOL DR - SUITE I
 EL PASO, TX 79935-4504

OP ✓
 +2500

Geo No. S533-000-0010-13W2	Prop ID 37470
Legal Description of the Property 1 SOCORRO TR 13-W-1 (1.00 AC) 781 LITTLE CORRINA RD 79927	
OWNER: ORTEGA IGNACIO & ARLIN	
2021 OVERAGE AMOUNT \$3,247.32 ✓	

4: CITY OF SOCORRO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 25: LWR VALLEY WTR DISTRICT, 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 whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <u>El Paso Escrow, Inc. Dba Commercial Escrow</u>			
	Address: <u>10657 Vista Del Sol Dr Ste I</u>			
	City, State, Zip: <u>El Paso TX 79935</u> ✓			
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Daytime Phone No.:	<u>915 591 1683</u>	E-Mail Address:	<u>juanasanchez73@gmail.com</u>
	Payment made by:	Check No.	Date Paid	Amount Paid
	<u>Commercial Escrow</u>	<u>5990</u>	<u>1/20/22</u>	<u>3,247.32</u>
	TOTAL AMOUNT PAID (sum of the above amounts)			<u>287,272.67</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.		
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>Juana E. Jue</u>		<u>Juana E. Jue</u> ✓	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>NH</u>	Date: <u>3-3-22</u> ✓

91

Notes

Go To :

LUZR
ACT00122 v1.90

03/07/2022 09:46:54
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
M214000A0001 S533000001013W2

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$18.99	PA	S533000001013W2	4000-COMMERCIAL ESCI
	M214000A0001	01/20/2022	49357996	5990	CH	\$287,277.67	\$3,247.32	LG	S533000001013W2	4000-COMMERCIAL ESCI
	RD3761148	05/28/2021	47353054	0000235870	CH	\$38.76	\$38.76	RD	S533000001013W2	ORTEGA IGNACIO & ARL
	IP04302185	04/29/2021	47353054	CC003742410	CR	\$60.00	\$60.00	PA	S533000001013W2	29780728-ARLIN ORTEGA
	IP04302185	04/29/2021	47353001	CC003742354	CR	\$31.00	\$31.00	PA	S533000001013W2	29780675-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$15.47	DA	S533000001013W2	ORTEGA IGNACIO & ARL
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$0.00	DA	S533000001013W2	29780728-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$2.26	DA	S533000001013W2	29780728-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$0.00	DA	S533000001013W2	29780728-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$0.00	DA	S533000001013W2	29780728-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$15.47	DA	S533000001013W2	29780728-ARLIN ORTEGA
	RF210525	04/29/2021	47353054	CC003742410	CR	\$0.00	\$0.00	DA	S533000001013W2	29780728-ARLIN ORTEGA

Applied Total \$3,779.07

OP

29916

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: OLUWATOSIN AROWOJOLY ✓	Phone: HOME 702-425-3276 WORK	Property ID# (One application per account) V22500000500500
Address (mail refund to): #562561 LOS ANGELES FEDERAL CREDIT UNION P.O. BOX 53032 LOS ANGELES CA 90053 ✓	Property Address: 10750 THUNDER RD and/or Legal Description: 5 VALLEY RIDGE #2 LOT 5 (5741.00 SQ FT)	

Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of refund requested:
1. 2021	JAN 11, 2022	ACH	\$3209.10	\$3209.10 ✓
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:
 I had scheduled the first payment and did not enter into my calendar that it was already scheduled at the start of the year. By accident and to avoid late fees I rescheduled again.

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

Requestor signature: Mrs. Oluwatosi Arowojoly Date: Feb 25, 2022 ✓
 Printed name: OLUWATOSIN AROWOJOLY Title: MRS.

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: N.H. Date: 3-3-22 ✓
Juc 3/1/22

(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: _____

Notes

Go To:

LUZR
ACT80122 v1.90

03/07/2022 09:48:38
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
EC011022	V22500000500500				

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC011022	01/10/2022	49100568	CC004113446	EC	\$3,209.10	\$3,209.10	LG	V22500000500500	30520108-OLUWATOSIN /
	RC220303	01/10/2022	49100568	CC004113446	EC	\$3,209.10	\$3,209.10	TR	V22500000500500	31094561-AROWOJOLU C
	RC220303	01/10/2022	49100568	CC004113446	EC	\$3,209.10	\$3,209.10	TR	V22500000500500	30520108-OLUWATOSIN /
	EC011022	01/08/2022	49100125	CC004107590	EC	\$3,209.10	\$3,209.10	PA	V22500000500500	30519664-OLUWATOSIN /
	EC01072198	01/07/2021	45821400	CC003381579	EC	\$2,799.57	\$2,799.57	PA	V22500000500500	29088133-OLUWATOSIN /
	EC01062098	01/04/2020	42689053	CC002737426	EC	\$2,791.88	\$2,791.88	PA	V22500000500500	27866906-OLUWATOSIN /
	EC01151998	01/15/2019	39948727	CC002270013	EC	\$2,621.11	\$2,621.11	PA	V22500000500500	26926308-OLUWATOSIN /
	EC02061898	02/05/2018	37712870	CC001953955	EC	\$2,686.58	\$2,686.58	PA	V22500000500500	26216965-OLUWATOSIN /
	EC03201768	03/20/2017	35103530	CC001622461	EC	\$2,721.39	\$2,721.39	PA	V22500000500500	25451339-OLUWATOSIN /
	EC02151698	02/13/2016	31820522	CC001264527	EC	\$2,662.39	\$2,662.39	PA	V22500000500500	24522347-OLUWATOSIN /
	EC01201568	01/16/2015	28043929	CC000926317	CH	\$2,489.40	\$2,489.40	PA	V22500000500500	23578839-OLUWATOSIN /
	EC01131468	01/10/2014	24991709	CC000726467	CH	\$2,377.28	\$2,377.28	PA	V22500000500500	22890855-OLUWATOSIN /

Applied Total \$48,879.36



TAX OFFICE RECEIVED

FEB 22 2022

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

Geo No. V893-999-061A-0100	Prop ID 384104
Legal Description of the Property 61-A VISTA DEL SOL #11 REPLAT A LOT 1 10649 LIMAS DR	
OWNER: GRANADOS ANN	

ANN CEREGHINO
550 14TH RD S APT 312
ARLINGTON, VA 22202

OP ✓

2021 OVERAGE AMOUNT \$4,074.48

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: Ann Cereghino			
	Address: 550 14TH RD S. Apt 312			
	City, State, Zip: Arlington, VA 22202			
Daytime Phone No.: 915 279-6600		E-Mail Address: txanjanet@yahoo.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
	Echeck	4352699	2/6/22	4074.48
	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)		PRINTED NAME & DATE	
	Ann Cereghino		ANN CEREGHINO / 2/15/2022	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: N.H. Date: 2-24-22				

Notes

Go To

LUZR
ACT80122 v1.90

02/24/2022 17:35:46
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 EC020722 V893999061A0100

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC020722	02/06/2022	50080079	CC004352699	EC	\$4,074.48	\$4,074.48	LG	V893999061A0100	30987202-ANN CEREGHIN
	EC020722	02/06/2022	50080078	CC004352697	EC	\$4,359.70	\$4,359.70	PA	V893999061A0100	30987201-ANN CEREGHIN
	RC220224	02/06/2022	50080079	CC004352699	EC	\$4,074.48	\$4,074.48	TR	V893999061A0100	31052859-CEREGHINO AI
	RC220224	02/06/2022	50080079	CC004352699	EC	\$4,074.48	\$4,074.48	TR	V893999061A0100	30987202-ANN CEREGHIN
	EC01212198	01/21/2021	46192192	CC003452276	EC	\$3,346.72	\$3,346.72	PA	V893999061A0100	29222756-ANN CEREGHIN
	EC12091998	12/08/2019	42172583	CC002661004	EC	\$3,252.01	\$3,252.01	PA	V893999061A0100	27721754-ANN CEREGHIN
	EC01251998	01/24/2019	40217921	CC002309082	EC	\$3,268.46	\$3,268.46	PA	V893999061A0100	27002289-ANN GRANADC
	EC03091898	03/09/2018	37978893	CC001991302	EC	\$3,484.70	\$3,484.70	PA	V893999061A0100	26313949-ANN CEREGHIN
	EC01231768	01/23/2017	34222106	CC001501106	EC	\$3,142.48	\$3,142.48	PA	V893999061A0100	25169966-ANN CEREGHIN
	EC01151698	01/25/2016	31247467	CC001195574	EC	\$2,978.20	\$2,978.20	PA	V893999061A0100	24351180-ANN CEREGHIN
	M14800000001	12/24/2014	27452431	141224101136	EF	\$200,035,948.32	\$3,067.38	PA	V893999061A0100	800000-CORELOGIC
	M1315000001	11/29/2013	24233577	0006346705	CH	\$29,585,871.84	\$3,012.68	PA	V893999061A0100	1500-BAC TAX SERVICE

Applied Total \$69,456.32



TAX OFFICE RECEIVED

FEB 22 2022

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

Geo No. W564-999-0040-5300	Prop ID 358185
Legal Description of the Property 4 WILLOWLANE LOT 26 (10920 SQ FT) 5520 OAKBRIAR CIR	
OWNER: LNK PROPERTIES LLC	

DEEBEE PLESANT
941 VEREDA DEL VALLE
EL PASO, TX 79932

OP
+2500

2021 OVERAGE AMOUNT \$7,720.23

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:	LNK Properties, LLC		
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Address:	941 Vereda Del Valle Ave.		
	City, State, Zip:	El Paso, TX 79932		
	Daytime Phone No.:	915-422-9578	E-Mail Address:	lnkcomp@vlnho.com
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Payment made by:	Check No.	Date Paid	Amount Paid
	Echeck	4065525	11/4/22	19,707.32
TOTAL AMOUNT PAID (sum of the above amounts)				
Step 4. Sign the form. Unsigned applications cannot be processed.	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):				
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		
By: Deebee Pleasant, Manager		LNK Properties, LLC By: Deebee Pleasant, Manager		
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied		By: N/A Date: 2-24-22		

Notes

Go To:

LUZR
ACT80122 v1.90

02/24/2022 15:22:51
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.
 EC010322F W56499900405300

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC010322F	01/04/2022	48889358	CC004065525	EC	\$19,707.32	\$7,720.23	LG	W56499900405300	30431931-DEEBEE PLES.
	RC220224	01/04/2022	48889358	CC004065525	EC	\$7,720.23	\$7,720.23	TR	W56499900405300	30431931-DEEBEE PLES.
	RC220224	01/04/2022	48889358	CC004065525	EC	\$7,720.23	\$7,720.23	TR	W56499900405300	31052591-LNK PROPERTI
	EC010322	12/31/2021	48880267	CC004072427	EC	\$7,720.23	\$7,720.23	PA	W56499900405300	30432049-DEEBEE DAOL
	EC12302098	12/29/2020	45584496	CC003334853	EC	\$5,752.82	\$5,752.82	PA	W56499900405300	29002348-LNK PROPERTI
	EC12271998	12/27/2019	42475384	CC002704912	EC	\$5,663.10	\$5,663.10	PA	W56499900405300	27800706-DEEBEE PLES.
	EC12311898	12/29/2018	39594589	CC002215668	EC	\$5,515.35	\$5,515.35	PA	W56499900405300	26834424-LNK PROPERTI
	EC12281798	12/27/2017	36622252	CC001792894	EC	\$5,360.38	\$5,360.38	PA	W56499900405300	25907859-LNK PROPERTI
	EC12281698	12/28/2016	33578934	CC001441055	EC	\$5,101.41	\$5,101.41	PA	W56499900405300	25032065-LNK PROPERTI
*	X1228152001	12/28/2015	30496308	00256	CH	\$12,841.10	\$5,020.26	PA	W56499900405300	LNK PROPERTIES LLC
*	X1224141007	12/24/2014	27468466	00192	CH	\$4,955.72	\$4,955.72	PA	W56499900405300	LNK PROPERTIES LLC
	M1330000001	12/16/2013	24416909	1003006699	CH	\$63,218,801.28	\$4,863.31	PA	W56499900405300	3000-WELLS FARGO HOI

Applied Total \$122,410.82