CARMEN P TURNER
FORT BEND COUNTY TAX ASSESSOR COLLECTOR

Commissioners Court	**Agenda Date JUNE 24, 2025**			
Submit Date:	**June 13, 2025**			
Account Number	**Owner**	**Refund Amount**	**Reason**	**Precinct #**
8951-03-001-0410-901	**CORELOGIC**	**$ 3,444.49**	**OVERPAYMENT**	**4154-17**
9960-19-220-0133-907	**SLEEP NUMBER**	**$ 2,630.35**	**OVERPAYMENT**	**NA**
	TOTAL	**$ 6,074.84**		

]