

ATTORNEY OR PARTY WITHOUT ATTORNEY: TELEPHONE NO.: (951) 722-6251 E-MAIL ADDRESS: Cheryl.henry41@yahoo.com ATTORNEY FOR (name): Self-Represented Cheryl Johnson-Henry	FOR COURT USE ONLY <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: 80%;"> FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF RIVERSIDE JUN 18 2024 S. Goble </div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE <input type="checkbox"/> PALM SPRINGS 3255 E. Tahquitz Canyon Wy., Palm Springs, CA 92262 <input checked="" type="checkbox"/> RIVERSIDE 4050 Main St., Riverside, CA 92501 <input type="checkbox"/> TEMECULA 41002 County Center Dr., Ste. 100, Temecula, CA 92591	
ESTATE OF (name): <u>Richard A. Johnson</u> DECEDENT	
PETITION FOR <input checked="" type="checkbox"/> Probate of <input type="checkbox"/> Lost Will and for Letters Testamentary <input type="checkbox"/> Probate of <input type="checkbox"/> Lost Will and for Letters of Administration <input type="checkbox"/> with Will Annexed <input type="checkbox"/> Letters of Administration <input checked="" type="checkbox"/> Letters of Special Administration <input type="checkbox"/> with general powers <input checked="" type="checkbox"/> Authorization to Administer Under the Independent Administration of Estates Act <input type="checkbox"/> with limited authority	CASE NUMBER: <div style="font-size: 1.2em; font-weight: bold;">PRRI2401519</div> HEARING DATE AND TIME: <u>8:30</u> DEPT.: <div style="font-size: 1.2em; font-weight: bold;">JUL 18 2024 AM 12</div>

1. Publication will be in (specify name of newspaper): <<Select One>>

- a. ☐ Publication requested.
 b. ☒ Publication to be arranged.

2. Petitioner (name each): Cheryl Johnson-Henry

requests that

a. ☐ decedent's will and codicils, if any, be admitted to probate.

be appointed

b. (name):

- (1) ☐ executor
 (2) ☐ administrator with will annexed
 (3) ☐ administrator
 (4) ☐ special administrator ☒ with general powers
 and Letters issue upon qualification.

c. ☒ full ☐ limited authority be granted to administer under the Independent Administration of Estates Act.

d. (1) ☐ bond not be required for the reasons stated in item 3e.

- (2) ☐ \$ bond be fixed. The bond will be furnished by an admitted surety insurer or as otherwise provided by law. (Specify reasons in Attachment 2 if the amount is different from the maximum required by Prob. Code, § 8482.)

(3) ☐ \$ in deposits in a blocked account be allowed. Receipts will be filed.
 (Specify institution and location):

3. a. Decedent died on (date): 4/17/2011 at (place): Kaiser Foundation Hospital

- (1) ☒ a resident of the county named above.
 (2) ☐ a nonresident of California and left an estate in the county named above located at (specify location permitting publication in the newspaper named in item 1):

b. ☐ Decedent was a citizen of a country other than the United States (specify country):

c. Street address, city, and county of decedent's residence at time of death (specify):