_			DE-121
	ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): - Agnus Abston	FOR C	COURT USE ONLY
	1124 E. Deerfield Street		
	Ontario, CA 91761 TELEPHONE NO.: 909.653.6435 FAX NO. (Optional):		
	FELEPHONE NO.: 909.653.6435 FAX NO. (Optional): E-MAIL ADDRESS (Optional):		
	ATTORNEY FOR (Name): Agnus Abston, In Pro Per		
	SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Bernardino		
	STREET ADDRESS: 17780 Arrow Blvd		
	MAILING ADDRESS: - SAME -		
	CITY AND ZIP CODE: Fontana, CA 92335		
<u> </u>	BRANCH NAME: Probate Division		
	ESTATE OF (Name):		
'	Mack Wayne Abston DECEDENT		
h	NOTICE OF PETITION TO ADMINISTER ESTATE OF	CASE NUMBER:	
	(Name): Mack Wayne Abston	PROVA2401049	
	·		
1.	To all heirs, beneficiaries, creditors, contingent creditors, and persons who may other or both, of (specify all names by which the decedent was known): Mack Wayne A		ne will or estate,
2.	A Petition for Probate has been filed by (name of petitioner): Agnus Abston		
	in the Superior Court of California, County of (specify): San Bernardino		
3.	The Petition for Probate requests that (name): Agnus Abston		
	be appointed as personal representative to administer the estate of the decedent.		
4.	The petition requests the decedent's will and codicils, if any, be admitted to prob	eate. The will and any c	odicils are available
5	for examination in the file kept by the court. The petition requests authority to administer the estate under the Independent A	dministration of Estate	se Act (This authority
0.	will allow the personal representative to take many actions without obtaining coulimportant actions, however, the personal representative will be required to give have waived notice or consented to the proposed action.) The independent adm	ırt approval. Before tak notice to interested per	king certain very rsons unless they
	interested person files an objection to the petition and shows good cause why the		_
6.	A hearing on the petition will be held in this court as follows:	io ocurr criodia not grai	nt the admonty.
	a. Date: 02.11.2025 Time: 9:00am Dept.:	F1 Room:	
	a. Batel. 921222020 Time. 9100azii Bopti.	11001111	
	b. Address of court: X same as noted above other (specify):		
7	If you object to the granting of the petition, you should appear at the hearing and sta	.t	ilaittara albia atiana
7.	with the court before the hearing. Your appearance may be in person or by your attor	•	ie written objections
8.	If you are a creditor or a contingent creditor of the decedent, you must file your of	•	d mail a copy to the
٥.	personal representative appointed by the court within the later of either (1) four mor		
	a general personal representative, as defined in section 58(b) of the California Proba		
	mailing or personal delivery to you of a notice under section 9052 of the California Pi	obate Code.	
	Other California statutes and legal authority may affect your rights as a credito	r. You may want to co	nsult with an attorney
_	knowledgeable in California law.		
9.	You may examine the file kept by the court. If you are a person interested in the e		
	Request for Special Notice (form DE-154) of the filing of an inventory and appraisal of provided in Probate Code section 1250. A Request for Special Notice form is available.		
10	. X Petitioner Attorney for petitioner (name): Agnes Abston	ie nom the court clerk.	
	(Address): 1124 E. Deerfield Street		
	Ontario, CA 91761		
	(Telephone): 909.653.6435		
for the	TE: If this notice is published, print the caption, beginning with the words NOTICE OF PETITION TO ADMINIS in above the caption. The caption and the decedent's name must be printed in at least 8-point type and the text in caption. Print items preceded by a box only if the box is checked. Do not print the italicized instructions in parent he material on page 2.	TER ESTATE, and do not prin at least 7-point type. Print the heses, the paragraph number	nt the information from the case number as part of s, the mailing information,
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Probate Code, §§ 8100, 9100 www.courts.ca.gov

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ESTATE OF (Name):		CASE NUMBER:
Mack Wayne Abston		PROVA2401049
	DECEDENT	

PROOF OF SERVICE BY MAIL

- 1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.
- 2. My residence or business address is (specify):

330 North D Street, Ste. 520 San Bernardino, CA 92401

- 3. I served the foregoing *Notice of Petition to Administer Estate* on each person named below by enclosing a copy in an envelope addressed as shown below **AND**
 - a. depositing the sealed envelope with the United States Postal Service on the date and at the place shown in item 4, with the postage fully prepaid.
 - b. **Placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service, in a sealed envelope with postage fully prepaid.
- 4. a. Date mailed: 01/07/2024

b. Place mailed (city, state):

San Bernardino, CA

5. X I served, with the *Notice of Petition to Administer Estate*, a copy of the petition or other document referred to in the notice.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 01/07/2024

Rowena	Ε.	Davis			
	(T)(DE (OD DDINIT NAM	F OF PEDOON	LOOMEL ETIMO	TILLO FORM
	(IYPE (JR PRINT NAM	E OF PERSON	I COMPLETING	THIS FURINI)

(SIGNATI RE

F PERSON COMPLETING THIS FORM

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

	Name of person served	Address (number, street, city, state, and zip code)
1.	Agnes Abston	1124 E. Deerfield Street Ontario, CA 91761
2.	Mack Abston, II	13637 Crawford Ct. Fontana, CA 92336
3.		
4.		
5.		
6.		
	Continued on an attachment. (You may u	se form DE-121(MA) to show additional persons served.)

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for *Request for Accommodations by Persons With Disabilities and Order* (form MC-410). (Civil Code section 54.8.)

