

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: 107844 NAME: Donna Lee Sturgill Diaz FIRM NAME: Hiroshima Daggett STREET ADDRESS: 1200 Nevada Street, Suite 102 CITY: Redlands STATE: CA ZIP CODE: 92374 TELEPHONE NO.: (909) 845-2750 FAX NO.: (916) 929-7335 E-MAIL ADDRESS: ddiaz@hiroshimadaggett.com ATTORNEY FOR (name): CESAR SANDOVAL	FOR COURT USE ONLY <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO SAN BERNARDINO DISTRICT DEC 07 2023 BY <u>Jasmin Espejo</u> JASMIN ESPEJO, DEPUTY </div>		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 17780 Arrow Blvd MAILING ADDRESS: SAME ABOVE CITY AND ZIP CODE: Fontana, CA 92335 BRANCH NAME: Fontana District			
ESTATE OF (name): FRANCES SANDOVAL <div style="text-align: right;">DECEDENT</div>			
PETITION FOR <input 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 with Will Annexed <input checked="" type="checkbox"/> Letters of Administration <input 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 checked="" type="checkbox"/> with limited authority	CASE NUMBER: PROVA2300084 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;"> HEARING DATE AND TIME: JAN 24 2024 9:00am </td> <td style="width: 30%; padding: 5px;"> DEPT.: F3 </td> </tr> </table>	HEARING DATE AND TIME: JAN 24 2024 9:00am	DEPT.: F3
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1. Publication will be in (specify name of newspaper): Metropolitan News

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

2. **Petitioner (name each):**
 CESAR SANDOVAL

requests that

- a. ☐ decedent's will and codicils, if any, be admitted to probate.
 b. (name): CESAR SANDOVAL be appointed
 (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): 03/04/2002 at (place): San Bernardino, CA
 (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):
 1012 W. Olive Street, San Bernardino, CA 92411
 County of San Bernardino