

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: David G. Greco (SBN 299635); Kristen A. Friedman (SBN 317639) FIRM NAME: CHHOKAR LAW GROUP, P.C. STREET ADDRESS: 6275 Lusk Blvd. CITY: San Diego STATE: CA ZIP CODE: 92121 TELEPHONE NO.: 858-384-5757 FAX NO.: 858-384-5758 E-MAIL ADDRESS: dg@socalclg.com; kf@socalclg.com ATTORNEY FOR (name): Petitioner Noel Madrigal	<b>FOR COURT USE ONLY</b>  <div style="font-size: 2em; font-weight: bold; margin: 10px 0;">FILED</div> Superior Court of California County of Riverside <b>1/18/2024</b> <b>M. Arciniega Estrada</b> Electronically Filed		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> Riverside STREET ADDRESS: 4050 Main Street MAILING ADDRESS: 4050 Main Street CITY AND ZIP CODE: Riverside, CA 92501 BRANCH NAME: Riverside Historic Courthouse			
ESTATE OF (name): Evangelina Madrigal <div style="text-align: right; margin-top: 10px;">DECEDENT</div>			
<b>PETITION FOR</b> <input checked="" type="checkbox"/> <b>Probate of</b> <input type="checkbox"/> <b>Lost Will and for Letters Testamentary</b> <input type="checkbox"/> <b>Probate of</b> <input type="checkbox"/> <b>Lost Will and for Letters of Administration with Will Annexed</b> <input type="checkbox"/> <b>Letters of Administration</b> <input type="checkbox"/> <b>Letters of Special Administration</b> <input type="checkbox"/> <b>with general powers</b> <input checked="" type="checkbox"/> <b>Authorization to Administer Under the Independent Administration of Estates Act</b> <input type="checkbox"/> <b>with limited authority</b>	CASE NUMBER: PRR12302753  <table style="width: 100%;"> <tr> <td style="width: 80%;">HEARING DATE AND TIME: 2/21/24 0830AM</td> <td style="width: 20%;">DEPT.: 12</td> </tr> </table>	HEARING DATE AND TIME: 2/21/24 0830AM	DEPT.: 12
HEARING DATE AND TIME: 2/21/24 0830AM	DEPT.: 12		

1. Publication will be in (specify name of newspaper): Moreno Valley City News

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

2. **Petitioner** (name each):  
 Noel Madrigal

**requests that**

- a. ☒ decedent's will and codicils, if any, be admitted to probate.  
 b. (name): Noel Madrigal 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) ☒ \$650,000.00 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): September 17, 2023 at (place): Moreno Valley, California  
     (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):  
 10529 Cloud Heaven Drive  
 Moreno Valley, California 92557

ESTATE OF (name):

Evangelina Madrigal  
DECEDENTCASE NUMBER:  
PRRI23027533. d. **Character and estimated value of the property of the estate** (complete in all cases):

- (1) Personal property: \$650,000.00
- (2) Annual gross income from
- (a) real property: \$ 0.00
- (b) personal property: \$ 0.00
- (3) **Subtotal** (add (1) and (2)): \$ 650,000.00
- (4) Gross fair market value of real property: \$ 0.00
- (5) (Less) Encumbrances: (\$ 0.00)
- (6) Net value of real property: \$ 0.00
- (7) **Total** (add (3) and (6)): \$ 650,000.00

- e. (1) ☐ Will waives bond. ☐ Special administrator is the named executor, and the will waives bond.
- (2) ☐ All beneficiaries are adults and have waived bond, and the will does not require a bond. (Affix waiver as Attachment 3e(2).)
- (3) ☐ All heirs at law are adults and have waived bond. (Affix waiver as Attachment 3e(3).)
- (4) ☐ Sole personal representative is a corporate fiduciary or an exempt government agency.

- f. (1) ☐ Decedent died intestate.
- (2) ☒ Copy of decedent's will dated: 09/01/2023 ☐ codicil dated (specify for each):

are affixed as Attachment 3f(2). (Include typed copies of handwritten documents and English translations of foreign-language documents.)

☐ The will and all codicils are self-proving (Prob. Code, § 8220).

- (3) ☐ The original of the will and/or codicil identified above has been lost. (Affix a copy of the lost will or codicil or a written statement of the testamentary words or their substance in Attachment 3f(3), and state reasons in that attachment why the presumption in Prob. Code, § 6124 does not apply.)

g. **Appointment of personal representative** (check all applicable boxes):

- (1) Appointment of executor or administrator with will annexed:
- (a) ☒ Proposed executor is named as executor in the will and consents to act.
- (b) ☐ No executor is named in the will.
- (c) ☐ Proposed personal representative is a nominee of a person entitled to Letters. (Affix nomination as Attachment 3g(1)(c).)
- (d) ☐ Other named executors will not act because of ☐ death ☐ declination  
☐ other reasons (specify):

☐ Continued in Attachment 3g(1)(d).

- (2) Appointment of administrator:
- (a) ☐ Petitioner is a person entitled to Letters. (If necessary, explain priority in Attachment 3g(2)(a).)
- (b) ☐ Petitioner is a nominee of a person entitled to Letters. (Affix nomination as Attachment 3g(2)(b).)
- (c) ☐ Petitioner is related to the decedent as (specify):
- (3) ☐ Appointment of special administrator requested. (Specify grounds and requested powers in Attachment 3g(3).)
- (4) ☐ Proposed personal representative would be a successor personal representative.

## h. Proposed personal representative is a

- (1) ☐ resident of California.
- (2) ☒ nonresident of California (specify permanent address):  
180 County Road 720  
Nacogdoches, TX 75964
- (3) ☒ resident of the United States.
- (4) ☐ nonresident of the United States.

ESTATE OF (name):

Evangelina Madrigal  
DECEDENTCASE NUMBER:  
PRRI2302753

4. ☒ Decedent's will does not preclude administration of this estate under the Independent Administration of Estates Act.
5. a. Decedent was survived by (check items (1) or (2), and (3) or (4), and (5) or (6), and (7) or (8))
- (1) ☒ spouse.
  - (2) ☐ no spouse as follows:
    - (a) ☐ divorced or never married.
    - (b) ☐ spouse deceased.
  - (3) ☐ registered domestic partner.
  - (4) ☒ no registered domestic partner. (See Fam. Code, § 297.5(c); Prob. Code, §§ 37(b), 6401(c), and 6402.)
  - (5) ☐ child as follows:
    - (a) ☐ natural or adopted.
    - (b) ☐ natural adopted by a third party.
  - (6) ☒ no child.
  - (7) ☐ issue of a predeceased child.
  - (8) ☒ no issue of a predeceased child.
- b. Decedent ☐ was ☒ was not survived by a stepchild or foster child or children who would have been adopted by decedent but for a legal barrier. (See Prob. Code, § 6454.)
6. (Complete if decedent was survived by (1) a spouse or registered domestic partner but no issue (only a or b apply), or (2) no spouse, registered domestic partner, or issue. (Check the **first** box that applies):
- a. ☒ Decedent was survived by a parent or parents who are listed in item 8.
  - b. ☐ Decedent was survived by issue of deceased parents, all of whom are listed in item 8.
  - c. ☐ Decedent was survived by a grandparent or grandparents who are listed in item 8.
  - d. ☐ Decedent was survived by issue of grandparents, all of whom are listed in item 8.
  - e. ☐ Decedent was survived by issue of a predeceased spouse, all of whom are listed in item 8.
  - f. ☒ Decedent was survived by next of kin, all of whom are listed in item 8.
  - g. ☐ Decedent was survived by parents of a predeceased spouse or issue of those parents, if both are predeceased, all of whom are listed in item 8.
  - h. ☐ Decedent was survived by no known next of kin.
7. (Complete only if no spouse or issue survived decedent.)
- a. ☐ Decedent had no predeceased spouse.
  - b. ☐ Decedent had a predeceased spouse who
    - (1) ☐ died not more than 15 years before decedent and who owned an interest in **real property** that passed to decedent,
    - (2) ☐ died not more than five years before decedent and who owned **personal property** valued at \$10,000 or more that passed to decedent, (If you checked (1) or (2), check only the **first** box that applies):
      - (a) ☐ Decedent was survived by issue of a predeceased spouse, all of whom are listed in item 8.
      - (b) ☐ Decedent was survived by a parent or parents of the predeceased spouse who are listed in item 8.
      - (c) ☐ Decedent was survived by issue of a parent of the predeceased spouse, all of whom are listed in item 8.
      - (d) ☐ Decedent was survived by next of kin of the decedent, all of whom are listed in item 8.
      - (e) ☐ Decedent was survived by next of kin of the predeceased spouse, all of whom are listed in item 8.
    - (3) ☐ neither (1) nor (2) apply.
8. Listed on the next page are the names, relationships to decedent, ages, and addresses, so far as known to or reasonably ascertainable by petitioner, of (1) all persons mentioned in decedent's will or any codicil, whether living or deceased; (2) all persons named or checked in items 2, 5, 6, and 7; and (3) all beneficiaries of a trust named in decedent's will or any codicil in which the trustee and personal representative are the same person.

ESTATE OF <i>(name)</i> :	Evangelina Madrigal DECEDENT	CASE NUMBER: PRR12302753
---------------------------	---------------------------------	-----------------------------

8. Name and relationship to decedent	Age	Address
Noel Madrigal Brother	Adult	180 County Rd 720 Nacogdoches, TX 75964
Omar Madrigal Brother	Adult	48761 110th St West Lancaster, CA 93536
Catalina Quinonez Mother	Adult	11757 Camino De la Vista Drive Moreno Valley, CA 92557
Rocio P. Castaneda Sister	Adult	11757 Camino De la Vista Drive Moreno Valley, CA 92557
Uriel Espinoza Brother	Adult	8552 Elegance Court Magna, UT 84044
Maria Andrade (Madrigal) Aunt	Adult	380 W 23rd Street San Bernardino, CA 92405
Jaime Fuentes Cousin	Adult	11242 Borden Avenue Pacoima, CA 91331
Rolando Lopez Cousin	Adult	11242 Borden Avenue Pacoima, CA 91331
Jose Luis Fuentes Cousin	Adult	11242 Borden Avenue Pacoima, CA 91331
Angel Castaneda Niece	Adult	11757 Camino De La Vista Drive Moreno Valley, CA 92557

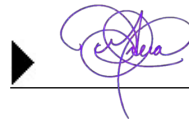
☒ Continued on Attachment 8.

9. Number of pages attached: 15

Date: 1/18/2024

David G. Greco

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY) \*

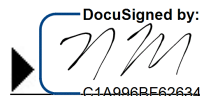
\* (Signatures of all petitioners are also required. All petitioners must sign, but the petition may be verified by any one of them (Prob. Code, §§ 1020, 1021; Cal. Rules of Court, rule 7.103).)

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

Date: 1/18/2024 | 3:03 PM PST

Noel Madrigal

(TYPE OR PRINT NAME OF PETITIONER)

DocuSigned by:  


C1A996BF6263439...

(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME OF PETITIONER)

(SIGNATURE OF PETITIONER)

Signatures of additional petitioners follow last attachment.

IN THE MATTER OF:

The Estate of Evangelina Madrigal

CASE NUMBER:

PRRI2302753

**Riverside County Mandatory Attachment to Form DE-111***(Continued from Petition for Probate (form DE-111).)*

10. I have enclosed a true and correct copy of the decedent's death certificate (with social security number redacted), as required by Local Rule 7200. See Attachment 10
11. (Check one of the following):
- ☐ This is a petition for appointment of a special administrator without general powers, and without power to sell real property.
  - ☐ The decedent's estate does not include any interest in real property.
  - ☒ The physical and mailing addresses of all real property in which the decedent's estate owns an interest is listed in attachment 11c as required by Local Rule 7132.
12. I have completed an internet search to identify and locate the heirs of the decedent as required by Local Rule 7132. A true and correct copy of the entry related to the decedent from each website or, if none, the listing of results, is enclosed as attachment 12.
13. (Check one of the following):
- ☒ Petitioner requests appointment with the bond required by Probate Code 8482.
  - ☐ Petitioner requests either no bond or a minimum bond of \$30,000 based on the will waiving bond or bond waivers filed by all heirs. To support this request, petitioner alleges as follows as required by Local Rule 7203:
    - (1) The decedent is expected to owe the following taxes:
 

i	State income tax:	\$ _____
ii	Federal income tax:	\$ _____
iii	Real and personal property tax:	\$ _____
Total:		\$ _____
    - 2) The decedent's known and reasonably-ascertainable unsecured or contingent creditors are as follows:

Name of Creditor	Address	Maximum Potential Liability
N/A		
Total:		



IN THE MATTER OF:

The Estate of Evangelina Madrigal

CASE NUMBER:

PRRI2302753

- 3) The estate is expected to be: ☒ solvent ☐ insolvent
- 4) The efforts taken to obtain the above information were as follows:

☐ Reviewed decedent's mail for \_\_\_\_\_ days☐ Reviewed current utility bills☐ Reviewed current property tax bills☒ Reviewed bank statements for the last 3 months☐ Reviewed most recent income tax returns☒ Other: Spoken to extensive family members

## 14. (Select the appropriate option)

- a. ☐ Decedent was not married or in a registered domestic partnership at the time of death.
- b. ☒ Decedent was married or in a registered domestic partnership at the time of death. (Select the appropriate option below:)
- i. ☒ Petitioner does not intend to administer the share of the estate passing to the spouse / registered domestic partner in this estate because:
- (aa) ☐ A spousal property petition was filed on (date): \_\_\_\_\_
- (ab) ☒ Petitioner believes a spousal property petition will be filed, or is not necessary (specify reason(s)): There was no community property, and the spouse is disinherited
- ☐ Continued on attachment 14
- ii. ☐ Petitioner intends to administer the share of the estate passing to the spouse / registered domestic partner in this estate. A Consent to Administer Property Passing to Surviving Spouse / Domestic Partner (Riverside County Local Form RI-PR104)
- (aa) ☐ is enclosed as attachment 14.
- (ab) ☐ was filed on (date): \_\_\_\_\_, and a copy is attached as attachment 14.
- (ac) ☐ is not necessary for the following reason(s) (explain): \_\_\_\_\_
- ☐ Continued on attachment 14

Date: 1/18/2024David G. Greco

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY)

\*(Signatures of all petitioners are also required. All petitioners must sign, but the petition may be verified by any one of them (Prob. Code §§ 1020, 1021; Cal. Rules of Court, rule 7.103).)

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

Date: 1/18/2024 | 3:03 PM PSTNoel Madrigal

(TYPE OR PRINT NAME)

DocuSigned by:



64A006DF6263430...

(SIGNATURE)

(TYPE OR PRINT NAME)

(SIGNATURE)

☐ Signatures of additional petitioners follow last attachment.

SHORT TITLE:

In re: The Estate of Evangelina Madrigal

CASE NUMBER:

PRRI2302753

**ATTACHMENT** (Number): 3f(2)*(This Attachment may be used with any Judicial Council form.)*

See below for Will

*(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)*Page 3 of 15*(Add pages as required)*

Evangelina Madrigal

05/28/1983

10529 Cloud Haven Drive Moreno Valley CA, 92557

### Living Will and Last Will and Testament

Introduction: I, Evangelina Madrigal, of Moreno Valley, CA, Riverside, declare this document to be my Living Will and Last Will and Testament. I am of sound mind and acting willingly.

Last Will and Testament:

Revocation of Previous Wills: I hereby revoke all previous wills and codicils made by me.

Executor: I appoint Noel Madrigal, residing at 180 County Road 720 Nacogdoches Texas, as the executor of this will. The executor shall be responsible for administering my estate and distributing my assets according to the terms outlined herein. I assign Omar Madrigal as successor to the following property 11242 Borden Ave Pacoima CA, 91331. In addition, I assign all Marriott Bonvoy points under the following account (767577267) total points 469,765 to Noel Madrigal. As of 8/22 100,000 points were transferred to Noels account (reference # 484866751). In addition, I would like to add Noel Madrigal as a beneficiary to the following chase accounts 5505 & 4194.

Distribution of Assets: I direct my executor to distribute my assets and property as follows: a. see page listed as Distribution of Assets approved by Evangelina Madrigal.

Witnesses and Notarization:

I sign this document in the presence of the following witnesses: 10529 Cloud Haven Drive  
Moreno Valley CA, 92557

[Witness 1's Full Name] Address: [Witness 1's Address]

Catalina Quinones

[Witness 2's Full Name] Address: [Witness 2's Address]

Catalina Quinones

Bryan Mendoza

I, Evangelina Madrigal, declare that the foregoing is my Living Will and Last Will and Testament and sign my name on this [Date]. 9/1/2023

Evangelina Madrigal [Date]

9/1/2023



Distribution of Assets Approved by Evangelina Madrigal 7/20/2023

Company Name	Phone Number	How to file a claim	Assets	Beneficiaries	Notes / Other
MetLife	(1) 800-638-6420 option #2 Claims  1(800) 523-2894 General Line	Call Met life Directly. Group - #95910 Kaiser Permanente  File a claim directly with MetLife (1) 800-638-6420 option #2  1(800) 523-2894 General Line	400,000 Life Insurance death benefit	100% primary Noel Madrigal  Secondary 100%  Uriel 50% Crystal 25% Angel 25%	Distribute in the following way: ONLY TO BUY A HOME NO EXCEPTIONS  Uriel - 100,000 Angel - 50,000 Crystal - 50,000  Omar - 15,000 Chio - 15,000 Noel - \$15,000 Carlos \$15,000 Luis \$15,000 Tia Maria - \$25,000 to help with my dad's expenses.  Leslie - \$20,000 Noe - \$20,000 Mat - \$20,000 Cat- \$20,000 Isiah - \$20,000
Chase Account Account ending 4194	1(866) 443-0911	Noel go to Chase and obtain the money	Not sure yet as I am adding money	Uriel 100% If she needs for my moms care, she can also take some use your discretion	Do not give the money help invest in properties under LLC or trust.

Distribution of Assets Approved by Evangelina Madrigal 7/20/2023

Vanguard	1(800) 523-1188	File a claim by calling the life events team	\$157,211.51 as of 7/20	Uriel 50% Crystal 25% Angel 25%	Leave money alone until you are 59 ½ otherwise you pay a penalty. This is for your retirement.
Valic They had a name change but the phone # is the same	1(800) 448- 2542	Call in and they will mail a death claim kit. You can leave the money alone for 10 years or transfer the money and withdraw.	\$62,689.14 as of 7/20	Rocio 50% Uriel 50 %	Leave money alone until you are 59 ½ otherwise you pay a penalty. This is for your retirement.
Robinhood	Go online	Download the app and contact customer service; under you profile image select the three bars and you will see Robinhood support	\$20,505.74 8/22 I am working on transferring all my money to the chase account. If not, much is left it is because I already transferred it.	Uriel 33% Angel 33% Crystal 33%	Money is being transferred to chase account
11242 Borden Ave. Pacoima CA, 91331  Loan # 3491676603	Rocket Mortgage 1(800) 863-4332  \$1,750.01	Rocket Mortgage	Pay off amount of loan. Principal \$279,595.85	Noel 100%  Successor in interest in loan Need a will that names an executor for Pacoima.  Quick claim deed	In the event of a sale please distribute the money equally between Luis, Rolando, and Jaime Fuentes
Cash	Crystal will take the envelopes and distribute them	In safe – crystal has the code	\$24,500 for Uriel From that money I owe Aurelio 5,000 and separate 2,000 \$24,345 Moms money to use for her care or		Please help him invest in a property for his retirement; do not give him the money he does not manage it well. If

Distribution of Assets Approved by Evangelina Madrigal 7/20/2023

			invest in property under LLC for Uriel		needed put in LLC property and when he is at retirement age, he can sell or keep.
Handbags, Jewelry , clothing, and patio furniture					Rocio will take and distribute as she seems appropriate
AAA Policy MOM	(888) 422 -7020	Policy # 4032014807	PENDING Change payment and beneficiaries		
Marriott vacation club / Marriott rewards					For use of all family Noel will manage it for the family

**CALIFORNIA ACKNOWLEDGMENT**

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Riverside }

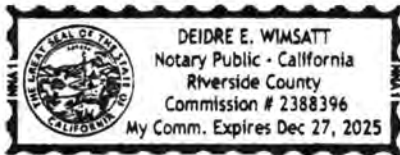
On 09/01/2023 before me, Deidre E. Wimsatt  
Date Here Insert Name and Title of the Officer

personally appeared Evangelina Morrigal  
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal and/or Stamp Above

Signature Deidre E. Wimsatt  
Signature of Notary Public

**OPTIONAL**

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

**Description of Attached Document**

Title or Type of Document: Last Will / Living Will and Testament

Document Date: 09/01/2023 Number of Pages: 4

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

☐ Corporate Officer – Title(s): \_\_\_\_\_

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

☐ Corporate Officer – Title(s): \_\_\_\_\_

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_

SHORT TITLE: Estate of Evangelina Madrigal	CASE NUMBER: PRRI2302753
---	-----------------------------

**ATTACHMENT (Number):** 8*(This Attachment may be used with any Judicial Council form.)*

Crystal Castaneda Niece	Adult	11757 Camino De La Vista Drive Moreno Valley, CA 92557
Catherine Castaneda Niece	Minor	11757 Camino De La Vista Drive Moreno Valley, CA 92557
Carlos Castaneda Brother in Law	Adult	11757 Camino De La Vista Drive Moreno Valley, CA 92557
Leslie Caballero Niece	Adult	8721 Owensmouth Avenue, Apt #201 Canoga Park, CA 91304
Noe Madrigal Nephew	Adult	5028 Bianca Avenue San Diego, CA 92110
Matthew Madrigal Nephew	Adult	48761 110th Street W Lancaster, California 93536
Isiah Espinoza Nephew	Minor	8552 Elegance Court Magna, UT 84044

*(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)*

Page 9 of 15

*(Add pages as required)*



SHORT TITLE:

In re: The Estate of Evangelina Madrigal

CASE NUMBER:

PRRI2302753

ATTACHMENT (Number): 10

(This Attachment may be used with any Judicial Council form.)

See below for Death Certificate

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page 10 of 15

(Add pages as required)



## STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

## COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052023207334

## CERTIFICATE OF DEATH

3202333013064

STATE FILE NUMBER		USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV 3/08)				LOCAL REGISTRATION NUMBER										
DECEDENT'S PERSONAL DATA	1. NAME OF DECEDENT- FIRST (Given) EVANGELINA		2. MIDDLE MADRIGAL		3. LAST (Family) AQUINO											
	AKA: ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)				4. DATE OF BIRTH mm/dd/yyyy 05/28/1983		5. AGE Yrs. 40		6. SEX F							
	9. BIRTH STATE/FOREIGN COUNTRY CA		10. SOCIAL SECURITY NUMBER [REDACTED]		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		12. MARITAL STATUS/SDP* (at Time of Death) MARRIED		7. DATE OF DEATH mm/dd/yyyy 09/17/2023							
	13. EDUCATION - Highest Level/Degree (see worksheet on back) MASTER'S		14/15. WAS DECEDENT HISPANIC/LATIN(A)/SPANISH? (if yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN AMERICAN		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) HISPANIC		8. HOUR (24 Hour) 1403									
	17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED RETENTION MANAGER				18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) MEDICAL FACILITY				19. YEARS IN OCCUPATION 7							
USUAL RESIDENCE	20. DECEDENT'S RESIDENCE (Street and number, or location) 10529 CLOUD HAVEN DR															
	21. CITY MORENO VALLEY		22. COUNTY/PROVINCE RIVERSIDE		23. ZIP CODE 92557		24. YEARS IN COUNTY 4		25. STATE/FOREIGN COUNTRY CA							
INFORMANT	26. INFORMANT'S NAME, RELATIONSHIP JOVI CASTRO AQUINO, SPOUSE				27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 10529 CLOUD HAVEN DR, MORENO VALLEY, CA 92557											
	28. NAME OF SURVIVING SPOUSE/SDP*-FIRST JOVI		29. MIDDLE CASTRO		30. LAST (BIRTH NAME) AQUINO											
SPOUSE/SDP AND PARENT INFORMATION	31. NAME OF FATHER/PARENT-FIRST MANUEL		32. MIDDLE -		33. LAST MADRIGAL				34. BIRTH STATE MICH, MX							
	35. NAME OF MOTHER/PARENT-FIRST MARIA		36. MIDDLE CATALINA		37. LAST (BIRTH NAME) MACHADO				38. BIRTH STATE DGO, MX							
	39. DISPOSITION DATE mm/dd/yyyy 09/22/2023		40. PLACE OF FINAL DISPOSITION RES OF JOVI CASTRO AQUINO 10529 CLOUD HAVEN DR, MORENO VALLEY, CA 92557													
FUNERAL DIRECTORY / LOCAL REGISTRATION	41. TYPE OF DISPOSITION(S) CREMATE/RESIDENCE				42. SIGNATURE OF EMBALMER LEAH M CHAPMAN				43. LICENSE NUMBER EMB9763							
	44. NAME OF FUNERAL ESTABLISHMENT MONTECITO MEMORIAL PARK AND MORTUARY				45. LICENSE NUMBER FD958		46. SIGNATURE OF LOCAL REGISTRAR GEOFFREY LEUNG, M.D., ED. MD		47. DATE mm/dd/yyyy 09/22/2023							
PLACE OF DEATH	101. PLACE OF DEATH KAISER FOUNDATION HOSPITAL-MORENO VALLEY				102. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> IP <input type="checkbox"/> EP/OP <input type="checkbox"/> OCA		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other									
	104. COUNTY RIVERSIDE		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 27300 IRIS AVE				106. CITY MORENO VALLEY									
CAUSE OF DEATH	107. CAUSE OF DEATH: Enter the chain of events --- diseases, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>CARDIAC ARREST</b>										Time Interval Between Onset and Death (AT) DAYS		108. DEATH REPORTED TO CORONER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
	Sequentially, list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST <b>STAGE IV GASTRIC CANCER WITH METASTASIS TO LUNGS, BONE, AND LYMPH NODES</b>										(BT) MOS		109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
											(CT) MOS		110. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
											(DT) MOS		111. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
	112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 INTERMITTENT ASTHMA, SOLILOQUY OF COVID-19															
PHYSICIAN'S CERTIFICATION	113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) NO										113A. DECEDENT PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK.					
	114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: 09/11/2023 Decedent Last Seen Alive: 09/17/2023				115. SIGNATURE AND TITLE OF CERTIFIER BONEY NINAN, MD		116. LICENSE NUMBER A140190		117. DATE mm/dd/yyyy 09/22/2023							
	118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE BONEY NINAN, MD 10800 MAGNOLIA AVE, RIVERSIDE, CA 92505															
CORONER'S USE ONLY	119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending investigation <input type="checkbox"/> Could not be determined										120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK.		121. INJURY DATE mm/dd/yyyy		122. HOUR (24 Hour)	
	123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)															
	124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)															
	125. LOCATION OF INJURY (Street and number, or location, and city, and zip)															
	126. SIGNATURE OF CORONER / DEPUTY CORONER				127. DATE mm/dd/yyyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER									
STATE REGISTRAR		A		B		C		D		E		FAX AUTH.#		CENSUS TRACT		

## CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA } SS  
COUNTY OF RIVERSIDE

This is a true and exact reproduction of the document officially registered and placed on file by the Riverside University Health System, Department of Public Health.

DATE ISSUED **Oct 11, 2023**Dr. Geoffrey Leung, M.D., Ed.M., County Health Officer  
RIVERSIDE COUNTY, CALIFORNIA

This copy is not valid unless prepared on an engraved border, displaying the date, seal, and signature of the Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE





SHORT TITLE: In re: The Estate of Evangelina Madrigal	CASE NUMBER: PRRI2302753
--	-----------------------------

**ATTACHMENT** (Number): 11C

*(This Attachment may be used with any Judicial Council form.)*

- 1) 10529 Cloud Haven Dr, Moreno Valley, CA 92557; APN: 474-750-019
- 2) 2290 Celeste Dr, Memphis, TN 38127; APN: 07-2094-0-0022
- 3) 3870 Pinbranch Ct, Memphis, TN 38115; APN: 09-3417-J0-0133  
Mailing Address: 10529 Cloud Haven Dr, Moreno Valley, CA 92557
- 4) 11242 Borden Ave, Pacoima, CA 91331; APN: 2532-031-016

*(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)*

Page 12 of 15

*(Add pages as required)*

SHORT TITLE:

In re: The Estate of Evangelina Madrigal

CASE NUMBER:

PRRI2302753

ATTACHMENT (Number): 12*(This Attachment may be used with any Judicial Council form.)*

See below for search results from legacy.com and findagrave.com. Neither resulted in any entries for Evangelina Madrigal.

*(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)*

Page 13 of 15*(Add pages as required)*

Evangelina

Madrigal



Publish Date ▾

Result Type ▾

Location ▾

Newspaper ▾

More Filters

## "Evangelina Madrigal" obituaries (1)

Applied Filters:

California ✕

### Evangelina Madrigal Rios

Published 11/17/2016

Arrangements under the direction of Bastian & Perrott, Oswald Mortuary, Northridge, California. [Read More](#)



#### Published In



[Last Name](#)  
"Madriga..



[San](#)  
[Fernando,](#)  
[CA](#)



[Bastian](#)  
[and](#)  
[Perrott,...](#)

Search for



1. **DECEASED RECORDS FREE SEARCH**



2. **DECEASED PEOPLE SEARCH**



3. **FIND PERSON BY NAME**



4. **FREE PUBLIC RECORDS SEARCH**



5. **FIND SOMEONE SEARCH**









Yahoo! Search



Showing 1 - 1 of 1 results



 No matches found for

Evangelina Madrigal Aquino Born 1983 Died 2023 California, USA [Refine Search](#)[+ Add a memorial](#)

### Explore more

[Evangelina Aquino in Newspapers](#)[Evangelina Aquino in Military Records](#)[View more records for Evangelina Aquino at Ancestry.com](#)[Discover more with a simple DNA test](#)[More about the Aquino family name](#)

Sponsored by Ancestry