

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: DANIEL J. TRIPATHI (SBN#245317) FIRM NAME: CAL-LAWYER PLC STREET ADDRESS: 4192 BROCKTON AVENUE STE. 103 CITY: RIVERSIDE STATE: CA ZIP CODE: 92501 TELEPHONE NO.: 951-880-7946 FAX NO.: 951-742-7844 EMAIL ADDRESS: DAN@CAL-LAWYER.COM ATTORNEY FOR (name): RAMON VILICANA	FOR COURT USE ONLY FILED Superior Court of California County of Riverside 6/26/2023 M. Branch Electronically Filed
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE STREET ADDRESS: 4050 MAIN STREET MAILING ADDRESS: 4050 MAIN STREET CITY AND ZIP CODE: RIVERSIDE 92501 BRANCH NAME: RIVERSIDE HISTORIC COURTHOUSE	
☒ ESTATE OF (name): ☐ IN THE MATTER OF (name): EMILIANO VILICANA ☒ DECEDENT ☐ TRUST ☐ OTHER	
NOTICE OF HEARING—DECEDENT'S ESTATE OR TRUST	
CASE NUMBER: PRRI2201645	
<i>This notice is required by law. You are not required to appear in court, but you may attend the hearing and object or respond if you wish. If you do not respond or attend the hearing, the court may act on the filing without you.</i>	

1. NOTICE is given that (name): RAMON VILICANA
 (fiduciary or representative capacity, if any): DANIEL J. TRIPATHI
 has filed a petition, application, report, or account (specify complete title and briefly describe):*
 Hearing on Subsequent Petition for Probate of Will and for Letters Testamentary Appointing RAMON VILICANA

☐ The filing is a report of the status of a decedent's estate administration made under Probate Code section 12200. See the NOTICE below.

Please refer to the filed documents for more information about the case. (Some documents filed with the court are confidential.)

2. A HEARING on the matter described in 1 will be held as follows:

Hearing Date	Date: 8/7/2023 Dept.: 8	Time: 8:30AM Room:	Name and address of court, if different from above: See enclosed remote Information
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NOTICE

If the filing described in 1 is a report of the status of a decedent's estate
 administration made under Probate Code section 12200,
**YOU HAVE THE RIGHT TO PETITION FOR AN ACCOUNTING
 UNDER SECTION 10950 OF THE PROBATE CODE.**



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office or go to www.courts.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civ. Code, § 54.8.)

* Do not use this form to give notice of a petition to administer an estate (see Prob. Code, § 8100, and use form DE-121), notice of a hearing in a guardianship or conservatorship case (see Prob. Code, §§ 1511 and 1822, and use form GC-020), or notice of a hearing on a petition to determine a claim to property (see Prob. Code, § 851, and use form DE-115/GC-015).

☒ ESTATE OF (name): Emiliano Villicana	☐ IN THE MATTER OF (name): 	CASE NUMBER: PRRI2201645
☒ DECEDENT ☐ TRUST ☐ OTHER		

CLERK'S CERTIFICATE OF POSTING

1. I certify that I am not a party to this cause.
2. A copy of the foregoing *Notice of Hearing—Decedent's Estate or Trust*
 - a. was posted at (address):

- b. was posted on (date):

Date: _____ Clerk, by _____, Deputy

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):
4192 Brockton Avenue Ste. 103
Riverside, CA 92501
3. I served the foregoing *Notice of Hearing—Decedent's Estate or Trust* on each person named below by enclosing a copy in an envelope addressed as shown below AND
 - a. ☐ **depositing** the sealed envelope on the date and at the place shown in item 4 with the U.S. Postal Service 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 U.S. Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date mailed: 6/26/2023
b. Place mailed (city, state): Riverside, CA
5. ☐ I served with the *Notice of Hearing—Decedent's Estate or Trust* a copy of the petition or other document referred to in item 1 of the Notice.

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

Date: 6/26/2023

Autumn Ramirez

(TYPE OR PRINT NAME)


(SIGNATURE)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

	Name	Address (street & number, city, state, zip code)
1.		*See Service List*
2.		
3.		
4.		
5.		

☐ Continued on an attachment. (You may use Attachment to Notice of Hearing Proof of Service by Mail, form DE-120(MA)/GC-020(MA), for this purpose.)

* Do not use this form for proof of personal service. You may use form DE-120(P) to prove personal service of this Notice.