

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: BEATRIZ ALMEDA ALVAREZ FIRM NAME: STREET ADDRESS: 7451 MESADA STREET CITY: RANCHO CUCAMONGA STATE: CA ZIP CODE: 91730 TELEPHONE NO.: 323-382-2194 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): SELF-REPRESENTED	FOR COURT USE ONLY ELECTRONICALLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO FONTANA DISTRICT 7/26/2024 11:31 AM By: Zaynah Gaj, DEPUTY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 17780 Arrow Boulevard MAILING ADDRESS: CITY AND ZIP CODE: Fontana, CA 92335 BRANCH NAME:	
ESTATE OF (name): MARIA EUGENIA ALMEDA	DECEDENT
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 type="checkbox"/> with limited authority	CASE NUMBER: <p style="text-align: center; font-weight: bold;">PROVA2400670</p> HEARING DATE AND TIME: SEP 04 2024 9:00AM DEPT.: F1

1. Publication will be in (specify name of newspaper):

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

2. **Petitioner** (name each):
BEATRIZ ALMEDA ALVAREZ

requests that

- a. decedent's will and codicils, if any, be admitted to probate.
- b. (name): **Beatriz Almeda Alvarez** 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): **February 9, 2024** at (place): **Jalisco, Mexico**

- (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):
15945 BALTRAY WAY, FONTANA, CA 92336

ESTATE OF (name):

MARIA EUGENIA ALMEDA
DECEDENT

CASE NUMBER:

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> :	MARIA EUGENIA ALMEDA DECEDENT	CASE NUMBER:
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8. <u>Name and relationship to decedent</u>	<u>Age</u>	<u>Address</u>
BEATRIZ ALMEDA ALVAREZ, daughter	44	7451 MESADA ST., RANCHO CUCAMONGA, CA 91730
JORGE ALMEDA, son	42	644 E. JUANITA AVE., SAN DIMAS, CA 91773
HECTOR ALMEDA, son	39	7011 BETH ST., FONTANA, CA 92336
MONICA MARCKSTADT, daughter	37	573 PEARLANNA DR., SAN DIMAS, CA 91773
EDUARDO ALMEDA, son	33	15945 BELTRAY WAY, FONTANA, CA 92336
ANTHONY ALMEDA, son	32	15945 BELTRAY WAY, FONTANA, CA 92336

Continued on Attachment 8.

9. Number of pages attached: _____

Date:

(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).)

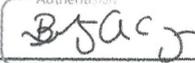
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: JULY 24, 2024

BEATRIZ ALMEDA ALVAREZ

(TYPE OR PRINT NAME OF PETITIONER)

AuthenticSign



(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME OF PETITIONER)

(SIGNATURE OF PETITIONER)

Signatures of additional petitioners follow last attachment.

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