ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): CELIO RUVALCABA	FOR COURT USE ONLY		
753 N. EL DORADO AVENUE ONTARIO CA 91764			
TELEPHONE NO.: 909-717-5688 FAX NO. (Optional): 888-649-1998			
E-MAIL ADDRESS (Optional): srgt777@gmail.com ATTORNEY FOR (Name): IN PRO PER			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Bernardino			
STREET ADDRESS: 247 West Third Street			
MAILING ADDRESS: 247 West Third Street			
CITY AND ZIP CODE: San Bernardino 92415-0210			
BRANCH NAME: San Bernardino District - Probate Division	_		
ESTATE OF (Name):			
CELIO RUVALCABA			
DECEDENT			
NOTICE OF PETITION TO ADMINISTER ESTATE OF	PROVA2300183		
(Name): CELIO RUVALCABA	1 10 1 12 20 0 10 2		
1. To all heirs, beneficiaries, creditors, contingent creditors, and persons who may otherwise b	pe interested in the will or estate.		
or both, of (specify all names by which the decedent was known):			
CELIO RUVALCABA			
2. A Petition for Probate has been filed by (name of petitioner): CELIO RUVALCABA			
in the Superior Court of California, County of (specify): San Bernardino			
. The Petition for Probate requests that (name): CELIO RUVALCABA			
be appointed as personal representative to administer the estate of the decedent.			
The petition requests the decedent's will and codicils, if any, be admitted to probate. The will and any codicils are available for examination in the file kept by the court.			
 The petition requests authority to administer the estate under the Independent Admir 	histration of Estates Act (This authority		
will allow the personal representative to take many actions without obtaining court ap	proval. Before taking certain very		
important actions, however, the personal representative will be required to give notice	e to interested persons unless they		
have waived notice or consented to the proposed action.) The independent administr interested person files an objection to the petition and shows good cause why the co			
6. A hearing on the petition will be held in this court as follows:	art should not grant the authority.		
a. Date: DEC 1 1 2023 Time: 01: (Y) Dept.: 77 Roo	im.		
a. Date: DEC 112023 Time: 9; Warm Dept.: 72 Roo	111.		
b. Address of court: same as noted above other (specify):			
7. If you object to the granting of the petition, you should appear at the hearing and state you	r chiections or file written chiections		
with the court before the hearing. Your appearance may be in person or by your attorney.			
8. If you are a creditor or a contingent creditor of the decedent, you must file your claim w	ith the court and mail a copy to the		
personal representative appointed by the court within the later of either (1) four months fro a general personal representative, as defined in section 58(b) of the California Probate Cod	m the date of first issuance of letters to		
mailing or personal delivery to you of a notice under section 9052 of the California Probate Co			
Other California statutes and legal authority may affect your rights as a creditor. You			
knowledgeable in California law.			
 You may examine the file kept by the court. If you are a person interested in the estate, y Request for Special Notice (form DE-154) of the filing of an inventory and appraisal of estate 	assets or of any netition or account as		
provided in Probate Code section 1250. A Request for Special Notice form is available from	the court clerk.		
10. Petitioner Attorney for petitioner (name):			
(Address): 753 N. EL DORADO AVENUE			
ONTARIO CA 91764			
(Telephone): 909-717-5688			
NOTE: If this notice is published, print the caption, beginning with the words NOTICE OF PETITION TO ADMINISTER E			
form above the caption. The caption and the decedent's name must be printed in at least 8-point type and the text in at least 7-point type. Print the case number as part of the caption. Print items preceded by a box only if the box is checked. Do not print the italicized instructions in parentheses, the paragraph numbers, the mailing information,			

COPY

or the material on page 2.

Page 1 of 2

ES	STATE OF (Name):		CASE NUMBER:			
(CELIO RUVALCABA					
		DECEDENT				
		PROOF OF SERVICE BY MAIL				
1.	I am over the age of 18 and not a party t	o this cause. I am a resident of or employed in the	ne county where the mailing occurred.			
	My residence or business address is (sp					
		CLAREF ONT CA 91711				
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					
	 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. 					
		ction and mailing on the date and at the place sh				
	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:	b. Place mailed (city, state): Claremont CA	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
5.	I served, with the Notice of Petition	n to Administer Estate, a copy of the petition or of	ther document referred to in the notice.			
I de	eclare under penalty of perjury under the l	aws of the State of California that the foregoing is	s true and correct.			
Da						
٩nc	gela F oses	•				
	(TYPE OR PRINT NAME OF PERSON COMPLETING THIS	FORM) (SIGNATURE	OF PERSON COMPLETING THIS FORM)			
	NAME AND AD					
		DRESS OF EACH PERSON TO WHOM NOTICE				
	Name of person served	Address (number, street, cit	y, state, and zip code)			
1.	RAXUEL HONYALEY	1845 VOLTI WAQ				
		SACRAF ENTO CA 95833				
2.	EYEXUIEL RUVALCABA	9308 F ARCONA AVENUE				
		GONTANA CA 92335				
	CIZIODEDO DINALOADA	DAG WEDLIEWOOD COURT				
3.	SIZIGRREDO RUVALCABA	849 WEDHEWOOD COURT RIALTO CA 92376				
		RIAL 10 CA 92376				
	F ARIA CONCEPCION HARCIA	9934 F ALOOG COURT				
4.	F ARIA CONCEPCION HARCIA	GONTANA CA 92335				
		GONTANA CA 92555				
	IEOUO DUNALOADA	HOOLE ON ALL DOOMOTREET				
5.	JESUS RUVALCABA	18215 SKAF ROCMSTREET GONTANA CA 92336				
		GONTANA CA 92330				
5 .	ROSA LIDIA VAYXUEY	1037 S. TEAMWOOD AVENUE				
		BLOOF INHTON CA 92316				
		L				
	Continued on an attachment. (You may use 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.)



ESTATE OF (Name):		CASE NUMBER:
CELIO RUVALCABA		
	DECEDENT	4

ATTACHMENT TO NOTICE OF PETITION TO ADMINISTER ESTATE—PROOF OF SERVICE BY MAIL

(This attachment is for use with form DE-121.)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

No.	Name of person served	Address (number, street, city, state, and zip code)
7	CELIO RUVALCABA	753 N. EL DORADO AVENUE ONTARIO CA 91764
_		
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