Fax: (909) 521-3387

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02/24/2023 5:52 PM

		DE-111
ATTORNEY OR PARTY WITHOUT AT	TTORNEY: STATE BAR NO.: 315-608	FOR COURT USE ONLY
NAME: Robert Clavel		FILED
FIRM NAME: Clavel Law		SUPERIOR COURT OF CALIFORNIA
STREET ADDRESS: 5857 Pine	Ave STE B	COUNTY OF SAN BERNARDINO
CITY: Chino Hills	STATE: CA ZIP CODE: 91709	SAN BERNARDINO DISTRICT
TELEPHONE NO.: (909) 677-25	57.3 FAX NO.:	5, ,,, 52, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,
E-MAIL ADDRESS: rclavel@trus		CED 3 / 2022
		FEB 24 2023
ATTORNEY FOR (name): Christop		
SUPERIOR COURT OF CA	LIFORNIA, COUNTY OF San Bernardino	
STREET ADDRESS: 247 W. 3	3rd Street, San Bernardino, CA 92415	15/1
MAILING ADDRESS: 247 W.	3rd Street, San Bernardino, CA 92415	
CITY AND ZIP CODE: San Ber		37. Brendy Perez-Cordera
BRANCH NAME: Probate		Deah,
Brancina Flobate		
ESTATE OF (name):		*
	DECED	ENT - nocm300
Terry Ryan Vaughn		BK113766-
PETITION FOR P	robate of Lost Will and for Letters Testamentary	CASE NUMBER:
	robate of Lost Will and for Letters of Administra	tion
l w	ith Will Annexed	
	etters of Administration	0:000
F L	atters of Special Administration with general pow	HEARING DATE AND TIME: 9 COM DEPT.:
	uthorization to Administer Under the Independent	
	dministration of Estates Act with limited authority	March 30,2023 535
1 Publication will be in	(specify name of newspaper):	
		DOUGLAG MANIN
		DOUGLAS MANN
b. Publication	to be arranged.	
2. Petitioner (name eac	ch):	
Christopher Ryan		
Christopher Ryan	1 Vaugiiii	The Same is applicated to Part
requests that		MOTIBE This Case is assigned to Dept =
	was a substant to any be admitted to probate	18 all purposes and is subject to CCP 170
	will and codicils, if any, be admitted to probate.	U. SI BRIBBER BLIG IS SANDON IN AN
b. (name): Christo	pher Ryan Vaughn	be appointed
(1) execut		
\''/	istrator with will annexed	
_/ <u></u>		
(3) 🗾 admini	istrator	
(4) specia	al administrator with general powers	
and Latters issue	upon qualification.	
c. v full limited authority be granted to administer under the Independent Administration of Estates Act.		
(2) \$	bond be fixed. The bond will be furnis	shed by an admitted surety insurer or as otherwise
provide	ed by law. (Specify reasons in Attachment 2 if the amount is	different from the maximum required by Prob.
Code	£ 8482)	
(3) \$\int \text{in deposits in a blocked account be allowed. Receipts will be filed.}		
(Speci	ify institution and location):	
Copedi	.,	
	14204 Dante	on Street Loma Linda CA 92357
3. a. Decedent died or	n (date): 08/19/2022 at (place): 11201 Benito	on Street, Loma Linda, CA 92357
	dent of the county named above.	
(1) = 10310	resident of California and left an actate in the county named	above located at (specify location permitting
(2) a nonresident of California and left an estate in the county named above located at (specify location permitting		
public	eation in the newspaper named in item 1):	
	to the second se	eify country):
b. Decedent	was a citizen of a country other than the United States (spec	my country).
Ohne et e dahar e e	city, and county of decedent's residence at time of death (spe	ecify):
c. Street address, o	Sity, and county of decedents residence at time of death (spe	
12615 Gardei	n Ave., Grand Terrace, CA 92313	
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