

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: Samuel G. Lockhart [SBN: 256152] & Adam G. Richardson [SBN: 352232] FIRM NAME: Lockhart Law Firm, APC STREET ADDRESS: 41856 Ivy Street, Suite 201 CITY: Murrieta STATE: CA ZIP CODE: 92562 TELEPHONE NO.: (951) 461-8878 FAX NO.: (951) 823-5715 E-MAIL ADDRESS: nya@lock-law.com ATTORNEY FOR (name): Marie L. McHaffie	FOR COURT USE ONLY ELECTRONICALLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO FONTANA DISTRICT 3/11/2025 4:08 PM By: Angeline Garcia, DEPUTY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 17780 Arrow Boulevard MAILING ADDRESS: 17780 Arrow Boulevard CITY AND ZIP CODE: Fontana, CA 92335 BRANCH NAME: Fontana District - Probate	
ESTATE OF (name): Albert Laurey <div style="text-align: right;">DECEDENT</div>	
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: <div style="text-align: center;">PROVA2500215</div>
	HEARING DATE AND TIME: 4/24/25 9:00am DEPT.: F3

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

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

2. **Petitioner (name each):**
 Marie L. McHaffie

requests that

- a. ☐ decedent's will and codicils, if any, be admitted to probate.
 b. (name): Marie L. McHaffie 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): January 22, 2025 at (place): 775 Buckingham Square, Lake Arrowhead, CA 92352
 (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):
 775 Buckingham Square, Lake Arrowhead, CA 92352