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ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Don M. Ross II (SBN: 342047)	FOR COURT USE ONLY	
Hi-Desert Law, Inc		
57382 29 Palms Hwy		
Yucca Valley, CA 92284		
TELEPHONE NO.: 760-999-2095 FAX NO. (Optional): 760-610-0528		
E-MAIL ADDRESS (Optional): dross@hidesertlaw.com		
ATTORNEY FOR (Name): Nathan J. Gibson		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Bernardino		
STREET ADDRESS: 14455 Civic Dr MAILING ADDRESS: 14455 Civic Dr		
CITY AND ZIP CODE: Victorville 92392		
BRANCH NAME: Victorville		
ESTATE OF (Name):		
JOHN WAYNE GIBSON		
DECEDENT		
NOTICE OF PETITION TO ADMINISTER ESTATE OF	CASE NUMBER:	
(Name): JOHN WAYNE GIBSON	PROVV2300156	
${\bf 1.} {\bf To \ all \ heirs, \ beneficiaries, \ creditors, \ contingent \ creditors, \ and \ persons \ who \ may \ otherwise \ beneficiaries, \ creditors, \ contingent \ creditors, \ and \ persons \ who \ may \ otherwise \ beneficiaries, \ creditors, \ contingent \ creditors, \ and \ persons \ who \ may \ otherwise \ beneficiaries, \ creditors, \ contingent \ creditors, \ and \ persons \ who \ may \ otherwise \ beneficiaries, \ creditors, \ contingent \ creditors, \ and \ persons \ who \ may \ otherwise \ beneficiaries, \ creditors, \ contingent \ creditors, \ credito$	ne interested in the will or estate,	
or both, of (specify all names by which the decedent was known):		
JOHN WAYNE GIBSON		
2. A Petition for Probate has been filed by <i>(name of petitioner):</i> Nathan J. Gibson		
in the Superior Court of California, County of (specify): San Bernardino		
3. The Petition for Probate requests that (name): Nathan J. Gibson		
be appointed as personal representative to administer the estate of the decedent.	The will and any codicile are evailable	
4. The petition requests the decedent's will and codicils, if any, be admitted to probate. for examination in the file kept by the court.	The will and any codiciis are available	
5. The petition requests authority to administer the estate under the Independent Admin	nistration 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 notic have waived notice or consented to the proposed action.) The independent administ		
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:		
a. Date: 01/22/2024 Time: 09:00AM Dept.: v12 - VICTORVILLE ROO	om: V12	
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 objections or file written objections	
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		
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		
mailing or personal delivery to you of a notice under section 9052 of the California Probate		
Other California statutes and legal authority may affect your rights as a creditor. You	may want to consult with an attorney	
knowledgeable in California law.	you may file with the court o	
9. You may examine the file kept by the court. If you are a person interested in the estate, yellow Request for Special Notice (form DE-154) of the filing of an inventory and appraisal of estate		
provided in Probate Code section 1250. A <i>Request for Special Notice</i> form is available from		
10. Petitioner Attorney for petitioner (name): Don M. Ross II		
(Address): 57382 29 Palms Hwy		
Yucca Valley, CA 92284		
(Telephone): 760-999-2095		
NOTE: If this notice is published, print the caption, beginning with the words NOTICE OF PETITION TO ADMINISTER E	STATE, and do not print the information from the	
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 the caption. Print items preceded by a box only if the box is checked. Do not print the italicized instructions in parentheses	ast 7-point type. Print the case number as part of	

or the material on page 2.

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ESTATE OF (Name):	CASE NUMBER:
JOHN WAYNE GIBSON	PROVV2300156
DECEDI	ENT

		PROOF OF SERVICE BY MAIL		
1.		to this cause. I am a resident of or employed in the county where the mailing occurred.		
2.	My residence or business address is (sp	pecify): 57382 29 Palms Hwy		
		Yucca Valley, CA 92284		
3.	I served the foregoing <i>Notice of Petition to Administer Estate</i> on each person named below by enclosing a copy in an envelope addressed as shown below AND			
	a. 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.			
	business practices. I am read mailing. On the same day the	ection and mailing on the date and at the place shown in item 4 following our ordinary dily familiar with this business's practice for collecting and processing correspondence for at correspondence is placed for collection and mailing, it is deposited in the ordinary United States Postal Service, in a sealed envelope with postage fully prepaid.		
4.	a. Date mailed: 12/21/2023 b. Place mailed (city, state): Yucca Valley, California			
5.	I served, with the Notice of Petitio	on to Administer Estate, a copy of the petition or other document referred to in the notice.		
۱de	eclare under penalty of perjury under the	laws of the State of California that the foregoing is true and correct.		
Da	te: 12/21/2023			
Me	linda Piantedosi	► moo a 1		
VIC	(TYPE OR PRINT NAME OF PERSON COMPLETING THI	(SIGNATURE OF PERSON COMPLETING THIS FORM)		
	NAME AND AD	DDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED		
	Name of person served	Address (number, street, city, state, and zip code)		
1.	Brenna L. Gibson	1467 Falcon Dr.		
		Unit #5		
		Ammon, ID 83406		
2.	Nathan J. Gibson	32717 Azurite Rd.		
		Lucerne Valley, CA 92356		
3.	ALL PERSONS UNKNOWN	32717 Azurite Rd. Lucerne Valley, CA 92356		
		Lucerne Valley, CA 92336		
4.				
٦.				
5.				
6.				
		(construction of the DE 404(444) to also an additional manager and a		
	Continued on an attachment. (Y	ou may use form DE-121(MA) to show additional persons served.)		
	Assistive listening systems, computer-as	ssisted 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 <i>Request for</i>		
	Accommodations by Persons With Disa	bilities and Order (form MC-410). (Civil Code section 54.8.)		