ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Sean DeBurgh 264713	FOR COURT USE ONLY				
─DeBurgh Law					
3017 Douglas Boulevard, Suite 300					
Roseville, CA 95661					
TELEPHONE NO.: (888) 215-3001 FAX NO. (Optional):					
E-MAIL ADDRESS (Optional): sean@deburghlaw.com					
ATTORNEY FOR (Name): Sandra Yvette Toles					
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Riverside					
STREET ADDRESS: 4050 Main Street					
MAILING ADDRESS: 4050 Main Street					
CITY AND ZIP CODE: Riverside 92501					
BRANCH NAME: Riverside County Superior Court					
ESTATE OF (Name): Dorothy Louise Robinson					
DECEDENT					
NOTICE OF PETITION TO ADMINISTER ESTATE OF	CASE NUMBER:				
	PRRI2403002				
1. To all heirs, beneficiaries, creditors, contingent creditors, and persons who may otherwise b	e interested in the will or estate,				
or both, of (specify all names by which the decedent was known):					
Dorothy Louise Robinson					
2. A Petition for Probate has been filed by (name of petitioner): Sandra Yvette Toles					
in the Superior Court of California, County of (specify): Riverside					
3. The Petition for Probate requests that (name): Sandra Yvette Toles					
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					
1 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 Administration 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					
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	urt should not grant the authority				
6. A hearing on the petition will be held in this court as follows:	art should not grant the dathonty.				
a. Date: 1/15/2025 Time: 8:30 AM Dept.: 12 Roo	om:				
a. Bate. 1/15/2025 Time. 8.30 AM Bept.: 12					
b. Address of court: X same as noted above other (specify):					
. If you object to the granting of the petition, you should appear at the hearing and state your 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 with the court and mail a copy to the personal representative appointed by the court within the later of either (1) four months from the date of first issuance of letters to					
a general personal representative, as defined in section 58(b) of the California Probate Code, or (2) 60 days from the date of					
mailing or personal delivery to you of a notice under section 9052 of the California Probate Code.					
Other California statutes and legal authority may affect your rights as a creditor. You knowledgeable in California law.	may want to consult with an attorney				
 You may examine the file kept by the court. If you are a person interested in the estate, you 	you may file with the court a				
Request for Special Notice (form DE-154) of the filing of an inventory and appraisal of estate assets or of any petition or account a					
provided in Probate Code section 1250. Á Request for Special Notice form is available from					
10. Petitioner X Attorney for petitioner (name): Sean DeBurgh					
(Address): 3017 Douglas Boulevard, Suite 300					
Roseville, CA 95661					
(Telephone): (888) 215-3001					
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 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,					

Form Adopted for Mandatory Use Judicial Council of California DE-121 [Rev. January 1, 2013]

or the material on page 2.

Page 1 of 2

				DE-121		
	STATE OF (Name):			CASE NUMBER:		
	Dorothy Louise Robinson		FOEDENT	PRRI2403002		
	DECEDENT					
4	PROOF OF SERVICE BY MAIL 1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.					
1. 2.				ne county where the mailing occurred.		
	2. My residence or business address is (specify): 3017 Douglas Boulevard, Suite 300 Roseville, CA 95661					
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.					
	b. placing the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary 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): Roseville, CA					
5.	5. 🗵 I served, with the Notice of Petition to Administer Estate, a copy of the petition or other document referred to in the notice.					
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.						
Date:						
Sea	an DeBurgh					
	(TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM) (SIGNATURE OF PERSON COMPLETING THIS FORM)					
	NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED					
	Name of person served	Address (numb	oer, street, ci	ity, state, and zip code)		
1.	Leonard Frieson	3656 Winged Foot Circle				
		Green Grove Spring, FL 32043	}			
2.	Michelle Robinson-Ross	14754 White Mountain Way				
		Moreno Valley, CA 92555				
3.	Sandra Yvette Toles	16257 Breezewood St				
		Moreno Valley, CA 92551				
4. Stacey Denise Scott 27675 Fairmon		27675 Fairmont Drive				
		Moreno Valley, CA 92555				
		J [
5.						
6.						

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.)

Continued on an attachment. (You may use form DE-121(MA) to show additional persons served.)

