

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: <b>SBN 273315</b> NAME: <b>Georgina Lepe</b> FIRM NAME: <b>The Lepe Law Firm, APC.</b> STREET ADDRESS: <b>1000 W. Foothill Blvd., Ste. A</b> CITY: <b>Claremont</b> STATE: <b>CA</b> ZIP CODE: <b>91711</b> TELEPHONE NO.: <b>(909) 732-2800</b> FAX NO.: <b>(909) 922-0630</b> E-MAIL ADDRESS: <b>Attorney@LepeLaw.com</b> ATTORNEY FOR (name): <b>Catherine A. Rivera</b>	<b>FOR COURT USE ONLY</b>  ELECTRONICALLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO SAN BERNARDINO DISTRICT
SUPERIOR COURT OF CALIFORNIA, COUNTY OF <b>San Bernardino</b> STREET ADDRESS: <b>247 West Third Street</b> MAILING ADDRESS: <b>Same</b> CITY AND ZIP CODE: <b>San Bernardino 92415-0210</b> BRANCH NAME: <b>San Bernardino District - Probate Division</b>	7/20/2023 10:55 AM  By: Taylor McKernan, DEPUTY
ESTATE OF (name): <b>Anita Cisneros Rivera (aka Anita C. Rivera)</b>  DECEDENT	CASE NUMBER: <b>PROSB2300932</b>
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	HEARING DATE AND TIME: <b>8/28/23</b> 9:00 am DEPT.: <b>S35</b>

1. Publication will be in (specify name of newspaper): **Highland Community News**
  - a.  Publication requested.
  - b.  Publication to be arranged.
  
2. Petitioner (name each): **Catherine A. Rivera**  
 requests that
  - a.  decedent's will and codicils, if any, be admitted to probate.
  - b. (name): **Catherine A. Rivera** 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)  \$ **505,000.00** 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): **12/1/2022** at (place): **San Bernardino County, CA**
  - (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): **2349 Center Street, Highland, CA 92346 (San Bernardino County)**