

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

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)