

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: Chris Scarcella, Esq. FIRM NAME: C.S. Scarcella & Associates STREET ADDRESS: 250 West 1st St., Suite 244 CITY: Claremont TELEPHONE NO.: 909-529-3979 EMAIL ADDRESS: cs@scarcellaw.com ATTORNEY FOR (name): KEVIN MCBEAN	STATE BAR NUMBER: 280213 STATE: CA ZIP CODE: 91711 FAX NO.: 877-795-9845	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 247 W. Third St. MAILING ADDRESS: SAME CITY AND ZIP CODE: San Bernardino, CA 92415 BRANCH NAME: San Bernardino - Probate Division		
<input checked="" type="checkbox"/> ESTATE OF (name): Steven McBEAN <input type="checkbox"/> IN THE MATTER OF (name): <input checked="" type="checkbox"/> DECEDENT <input type="checkbox"/> TRUST <input type="checkbox"/> CONSERVATEE <input type="checkbox"/> MINOR		
NOTICE OF HEARING ON PETITION TO DETERMINE CLAIM TO PROPERTY		CASE NUMBER: PROSB2300915

A petition has been filed asking the court to determine a claim to the property identified in 3, and a hearing on the petition has been set. Please refer to the petition for more information.

If you have a claim to the property described in 3, you may attend the hearing and object or respond to the petition. If you do not want to attend the hearing, you may also file a written response before the hearing.

If you do not respond to the petition or attend the hearing, the court may make orders affecting ownership of the property without your input.

1. NOTICE is given that (name): Kevin McBean
(fiduciary or representative capacity, if any): Petitioner
has filed a petition entitled (state complete title): Petition for Letters of Administration
under Probate Code section 850 asking for a court order determining a claim or claims to the property described in 3.
2. A HEARING on the petition will be held as follows:

<div style="border: 2px solid black; border-radius: 50%; padding: 5px; width: 40px; margin: 0 auto;"> Hearing Date </div>	Date: August 29, 2023 Time: 9:00 a.m. Dept.: S36 Room:	Name and address of court if different from above:
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3. The property that is the subject of the petition is (describe each item of real or personal property; for real property—i.e., land or buildings—give the street address or, if none, describe the property's location and give the assessor's parcel number):

9330 Frankfurt, Fontana, CA 92335

☐ Continued on Attachment 3.

Check 4 only if the petition seeks the additional relief described.

4. ☐ In addition to seeking to recover the property described in 3, the petition also alleges and seeks relief for bad faith conduct, undue influence in bad faith, or elder or dependent adult financial abuse. The petition describes these allegations in detail. Based on the allegations, the petition seeks to recover twice the value of the property described in 3
☐ and requests that the court award attorney's fees and costs to the petitioner. (Prob. Code, § 859.)



Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the hearing. Contact the clerk's office or go to www.courts.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Response (form MC-410). (Civ. Code, § 54.8.)

<input checked="" type="checkbox"/> ESTATE OF (name): <input type="checkbox"/> IN THE MATTER OF (name): Steven McBEAN	CASE NUMBER: PROSB2300915
<input checked="" type="checkbox"/> DECEDENT <input type="checkbox"/> TRUST <input type="checkbox"/> CONSERVATEE <input type="checkbox"/> MINOR	

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.
2. My residence or business address is (specify):
 250 West 1st St., Suite 244
 Claremont, CA 91711
3. I served the foregoing *Notice of Hearing on Petition to Determine Claim to Property* on each person named below by enclosing a copy in an envelope addressed as shown below AND
 - a. ☐ **depositing** the sealed envelope on the date and at the place shown in item 4 with the U.S. Postal Service 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 U.S. Postal Service in a sealed envelope with postage fully prepaid.
4.
 - a. Date mailed: July 28, 2023
 - b. Place mailed (city, state): Claremont, CA
5. ☒ I served with the *Notice of Hearing on Petition to Determine Claim to Property* a copy of the petition 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: July 28, 2023

Tracy White

(TYPE OR PRINT NAME)


 (SIGNATURE)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

	<u>Name</u>	<u>Address (street & number, city, state, zip code)</u>
1.	Kevin McBean	600 Hunters Trail, Apt. 28 Glendora, CA 91740
2.	Arnold McBean	208 S. 91 Ave. Yakema, WA 98908
3.		
4.		
5.		
6.		

☐ Continued on an attachment. (You may use Attachment to Notice of Hearing Proof of Service by Mail, form DE-120(MA)/GC-020(MA), for this purpose.)

* Do **not** use this form to prove personal or electronic service. You may use form DE-120(P) or GC-020(P) to prove personal service.

DE-111

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Chris Scarcella FIRM NAME: C.S. Scarcella & Associates STREET ADDRESS: 250 W. First St. #244 CITY: Claremont TELEPHONE NO.: (909) 529-3979 E-MAIL ADDRESS: cs@scarcellaw.com ATTORNEY FOR (name): KEVIN McBEAN		STATE BAR NO.: 280213 STATE: CA ZIP CODE: 91711 FAX NO.: (877) 795-9845		FOR COURT USE ONLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO SAN BERNARDINO DISTRICT JUL 14 2023 BY <u>Angelica Segura</u> ANGELICA SEGURA, DEPUTY	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 247 W. Third Street MAILING ADDRESS: SAME CITY AND ZIP CODE: San Bernardino, CA 92415 BRANCH NAME: Probate Division					
ESTATE OF (name): Steven McBean DECEDENT					
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 <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: PROB2300715				HEARING DATE AND TIME: 8-29-23 9:00 AM	
				DEPT: S36	

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

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

2. Petitioner (name each):

Kevin McBean

requests that

a. ☐ decedent's will and codicils, if any, be admitted to probate.

b. (name): Kevin McBean

(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) ☒ \$453,900.00 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):

be appointed

Michelle H. Gilleece
 NOTICE: This Case is assigned to Dept S36
 for all purposes and is subject to CCP 170.6(2)

3. a. Decedent died on (date): April 16, 2023

at (place): 9330 Frankfort, Fontana, CA 92335

(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):

Kaiser Foundation Hospital, 2295 S. Vineyard Ave., Ontario, CA, San Bernardino County

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ESTATE OF (name):

DECEDENT

CASE NUMBER:

3. d. Character and estimated value of the property of the estate (complete in all cases):

- (1) Personal property: \$0.00
- (2) Annual gross income from
- (a) real property: \$ 0.00
- (b) personal property: \$ 0.00
- (3) **Subtotal** (add (1) and (2)): \$ 0.00
- (4) Gross fair market value of real property: \$ 453,900.00
- (5) (Less) Encumbrances: (\$ 0.00)
- (6) Net value of real property: \$ 453,900.00
- (7) **Total** (add (3) and (6)): \$ 453,900.00

- e. (1) ☐ Will waives bond. ☐ Special administrator is the named executor, and the will waives bond.
- (2) ☒ All beneficiaries are adults and have waived bond, and the will does not require a bond. (Affix waiver as Attachment 3e(2).)
- (3) ☐ All heirs at law are adults and have waived bond. (Affix waiver as Attachment 3e(3).)
- (4) ☐ Sole personal representative is a corporate fiduciary or an exempt government agency.

- f. (1) ☒ Decedent died intestate.
- (2) ☐ Copy of decedent's will dated: ☐ codicil dated (specify for each):

are affixed as Attachment 3f(2). (Include typed copies of handwritten documents and English translations of foreign-language documents.)

☐ The will and all codicils are self-proving (Prob. Code, § 8220).

- (3) ☐ The original of the will and/or codicil identified above has been lost. (Affix a copy of the lost will or codicil or a written statement of the testamentary words or their substance in Attachment 3f(3), and state reasons in that attachment why the presumption in Prob. Code, § 6124 does not apply.)

g. Appointment of personal representative (check all applicable boxes):

- (1) Appointment of executor or administrator with will annexed:
- (a) ☐ Proposed executor is named as executor in the will and consents to act.
- (b) ☐ No executor is named in the will.
- (c) ☐ Proposed personal representative is a nominee of a person entitled to Letters. (Affix nomination as Attachment 3g(1)(c).)
- (d) ☒ Other named executors will not act because of ☐ death ☒ declination
- ☒ other reasons (specify):
- Arnold McBean lives out-of-state

☐ Continued in Attachment 3g(1)(d).

- (2) Appointment of administrator:
- (a) ☒ Petitioner is a person entitled to Letters. (If necessary, explain priority in Attachment 3g(2)(a).)
- (b) ☐ Petitioner is a nominee of a person entitled to Letters. (Affix nomination as Attachment 3g(2)(b).)
- (c) ☒ Petitioner is related to the decedent as (specify): Father
- (3) ☐ Appointment of special administrator requested. (Specify grounds and requested powers in Attachment 3g(3).)
- (4) ☐ Proposed personal representative would be a successor personal representative.

h. Proposed personal representative is a

- (1) ☒ resident of California.
- (2) ☐ nonresident of California (specify permanent address):

- (3) ☒ resident of the United States.
- (4) ☐ nonresident of the United States.

ESTATE OF (name):

DECEDENT

CASE NUMBER:

4. ☐ Decedent's will does not preclude administration of this estate under the Independent Administration of Estates Act.
5. a. Decedent was survived by (check items (1) or (2), and (3) or (4), and (5) or (6), and (7) or (8))
- (1) ☐ spouse.
 - (2) ☒ no spouse as follows:
 - (a) ☒ divorced or never married.
 - (b) ☐ spouse deceased.
 - (3) ☐ registered domestic partner.
 - (4) ☒ no registered domestic partner. (See Fam. Code, § 297.5(c); Prob. Code, §§ 37(b), 6401(c), and 6402.)
 - (5) ☒ child as follows:
 - (a) ☒ natural or adopted.
 - (b) ☐ natural adopted by a third party.
 - (6) ☐ no child.
 - (7) ☐ issue of a predeceased child.
 - (8) ☐ no issue of a predeceased child.
- b. Decedent ☐ was ☒ was not survived by a stepchild or foster child or children who would have been adopted by decedent but for a legal barrier. (See Prob. Code, § 6454.)
6. (Complete if decedent was survived by (1) a spouse or registered domestic partner but no issue (only a or b apply), or (2) no spouse, registered domestic partner, or issue. (Check the **first** box that applies):
- a. ☐ Decedent was survived by a parent or parents who are listed in item 8.
 - b. ☐ Decedent was survived by issue of deceased parents, all of whom are listed in item 8.
 - c. ☐ Decedent was survived by a grandparent or grandparents who are listed in item 8.
 - d. ☐ Decedent was survived by issue of grandparents, all of whom are listed in item 8.
 - e. ☐ Decedent was survived by issue of a predeceased spouse, all of whom are listed in item 8.
 - f. ☒ Decedent was survived by next of kin, all of whom are listed in item 8.
 - g. ☐ Decedent was survived by parents of a predeceased spouse or issue of those parents, if both are predeceased, all of whom are listed in item 8.
 - h. ☐ Decedent was survived by no known next of kin.
7. (Complete only if no spouse or issue survived decedent.)
- a. ☒ Decedent had no predeceased spouse.
 - b. ☐ Decedent had a predeceased spouse who
 - (1) ☐ died not more than 15 years before decedent and who owned an interest in **real property** that passed to decedent,
 - (2) ☐ died not more than five years before decedent and who owned **personal property** valued at \$10,000 or more that passed to decedent, (If you checked (1) or (2), check only the **first** box that applies):
 - (a) ☐ Decedent was survived by issue of a predeceased spouse, all of whom are listed in item 8.
 - (b) ☐ Decedent was survived by a parent or parents of the predeceased spouse who are listed in item 8.
 - (c) ☐ Decedent was survived by issue of a parent of the predeceased spouse, all of whom are listed in item 8.
 - (d) ☒ Decedent was survived by next of kin of the decedent, all of whom are listed in item 8.
 - (e) ☐ Decedent was survived by next of kin of the predeceased spouse, all of whom are listed in item 8.
 - (3) ☐ neither (1) nor (2) apply.
8. Listed on the next page are the names, relationships to decedent, ages, and addresses, so far as known to or reasonably ascertainable by petitioner, of (1) all persons mentioned in decedent's will or any codicil, whether living or deceased; (2) all persons named or checked in items 2, 5, 6, and 7; and (3) all beneficiaries of a trust named in decedent's will or any codicil in which the trustee and personal representative are the same person.

ESTATE OF (name):

DECEDENT

CASE NUMBER:

8.	<u>Name and relationship to decedent</u>	<u>Age</u>	<u>Address</u>
	Kevin McBean - Son	Adult	600 Hunters Trail, Apt. 28, Glendora, CA 91740
	Arnold McBean - Brother	Adult	208 S. 91 Ave., Yakema, WA 98908

☐ Continued on Attachment 8.
9. Number of pages attached: 0

Date: June 1, 2023

Chris Scarcella

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY) *

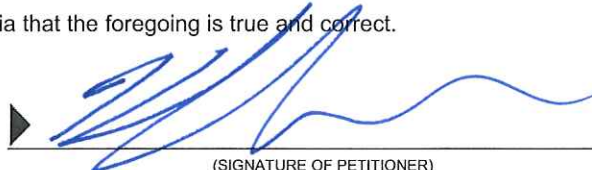
* (Signatures of all petitioners are also required. All petitioners must sign, but the petition may be verified by any one of them (Prob. Code, §§ 1020, 1021; Cal. Rules of Court, rule 7.103).)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: June 1, 2023

Kevin McBean

(TYPE OR PRINT NAME OF PETITIONER)



(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME OF PETITIONER)

(SIGNATURE OF PETITIONER)

Signatures of additional petitioners follow last attachment.