_			-111
	ATTORNEY OR PARTY WITHOUT ATTORNEY. STATE BAR NO	FOR COURT USE ONLY	
	NAME DORIS ELLEN POWELL		
	FIRM NAME		
1	STREET ADDRESS 11900 BAYLESS ST.		
	CITY: MORENO VALLEY STATE CA ZIP CODE 92557	FILED	
ı	TELEPHONE NO 850-496-2425 FAX NO.:	Superior Court of California	
ı	E-MAIL ADDRESS	Superior Court of California County of Riverside	
$\vdash$	ATTORNEY FOR (name) IN PRO PER	10/17/2023	
	SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE		
ł	STREET ADDRESS 4050 MAIN STREET	J. Marcial	
ĺ	MAILING ADDRESS 4050 MAIN STREET	Electronically Filed	
	CITY AND ZIP CODE RIVERSIDE, CA 92501		
$\vdash$	BRANCH NAME RIVERSIDE HISTORIC COURTHOUSE		
	ESTATE OF (name): LUANA PEARL MATHEWS		
ı			
-	DECEDENT		
	PETITION FOR Probate of Lost Will and for Letters Testamentary	CASE NUMBER:	
	Probate of Lost Will and for Letters of Administration	PRRI2301034	
	with Will Annexed		
1	Letters of Administration	HEARING DATE AND TIME DE	PT
-	Letters of Special Administration  with general powers	12-5-23 8:30AM 1	
	Authorization to Administer Under the Independent		-
L	Administration of Estates Act  with limited authority		
	Publication will be in (specify name of newspaper): MORENO VALLEY CITY  a. Publication requested. b. Delication to be arranged. Petitioner (name each): DORIS ELLEN POWELL	NEWS	
	requests that		
	a. a decedent's will and codicils, if any, be admitted to probate.		
	b. (name): DORIS ELLEN POWELL	be appointe	ed.
	(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 Indepen	ndent Administration of Estates Act.	
	d. (1) Dond not be required for the reasons stated in item 3e.		
	(2) s bond be fixed. The bond will be furnished by a	an admitted surety insurer or as otherwise	
	provided by law. (Specify reasons in Attachment 2 if the amount is different	ent from the maximum required by Prob.	
	Code, § 8482.)		
	(3) In deposits in a blocked account be allowed. Re	eceipts will be filed.	
	(Specify institution and location):		
3.		MORENO VALLEY, CA	
	(1) 💹 a resident of the county named above.		
	(2) a nonresident of California and left an estate in the county named above	ocated 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 cou	ntry):	
	c. Street address, city, and county of decedent's residence at time of death (specify)	:	
	11900 BAYLESS ST., MORENO VALLEY, CA 92557		
	RIVERSIDE COUNTY		

		DE-111				
ESTATE OF (name):		CASE NUMBER				
LUANA PEARL MATHEWS		PRRI2301034				
	DECEDENT					
3. d. Character and estimated value of the prop	erty of the estate (complete in all ca	ses):				
(1) Personal property:	\$ 1,000.00					
(2) Annual gross income from						
(a) real property:	\$ 0.00					
(b) personal property:	\$ 0.00					
(3) Subtotal (add (1) and (2)):	\$ 1,000.00					
(4) Gross fair market value of real property:	\$ 380,000.00 (\$					
<ul><li>(5) (Less) Encumbrances:</li><li>(6) Net value of real property:</li></ul>	(\$					
(7) <b>Total</b> (add (3) and (6)):		\$ 381,000.00				
<ul> <li>e. (1) Will waives bond. Special administrator is the named executor, and the will waives bond.</li> <li>(2) All beneficiaries are adults and have waived bond, and the will does not require a bond. (Affix waiver as Attachment 3e(2).)</li> <li>(3) All heirs at law are adults and have waived bond. (Affix waiver as Attachment 3e(3).)</li> <li>(4) Sole personal representative is a corporate fiduciary or an exempt government agency.</li> </ul>						
f. (1) Decedent died intestate.	r					
(2) Copy of decedent's will dated:		codicil dated (specify for each):				
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):						
(c) Petitioner is related to the deced	Letters. (If necessary, explain priority son entitled to Letters. (Affix nomination dent as (specify): DAUGHTER requested. (Specify grounds and reproud be a successor personal repres	on as Attachment 3g(2)(b).) quested powers in Attachment 3g(3).)				
(3) resident of the United States. (4) nonresident of the United States.	DETITION FOR DEODATE					

E	STATE	OF (name): LUANA PEARL MATHEWS  DECEDE	CASE NUMBER: PRRI2301034	_	
4. 5.		Decedent's will does not preclude administration of this estate under the ecedent was survived by (check items (1) or (2), and (3) or (4), and (5)			
	(1 (2 (3 (4 (5 (6 (7 (8	no spouse as follows:  (a)	Prob. Code, §§ 37(b), 6401(c), and 6402.)		
		ecedent  was  was not survived by a stepchild or foster cecedent but for a legal barrier. (See Prob. Code, § 6454.)	hild or children who would have been adopted by		
6.	<ul> <li>(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):</li> <li>a. Decedent was survived by a parent or parents who are listed in item 8.</li> <li>b. Decedent was survived by issue of deceased parents, all of whom are listed in item 8.</li> <li>c. Decedent was survived by a grandparent or grandparents who are listed in item 8.</li> <li>d. Decedent was survived by issue of grandparents, all of whom are listed in item 8.</li> <li>e. Decedent was survived by issue of a predeceased spouse, all of whom are listed in item 8.</li> <li>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.</li> <li>h. Decedent was survived by no known next of kin.</li> </ul>				
7.	(Comp	lete only if no spouse or issue survived decedent.)  Decedent had no predeceased spouse.			
	b. <b></b>	Decedent had a predeceased spouse who			
	(1	died not more than 15 years before decedent and who owned a	an interest in <b>real property</b> that passed to decedent,		
	(2	died not more than five years before decedent and who owned passed to decedent, (If you checked (1) or (2), check only the f			
		<ul> <li>(a) Decedent was survived by issue of a predeceased spouse</li> <li>(b) Decedent was survived by a parent or parents of the predeceased</li> <li>(c) Decedent was survived by issue of a parent of the predeceased</li> <li>(d) Decedent was survived by next of kin of the decedent, all (e) Decedent was survived by next of kin of the predeceased</li> </ul>	eceased spouse who are listed in item 8. eased spouse, all of whom are listed in item 8. of whom are listed in item 8.		
	(3	neither (1) nor (2) apply.			
8.	ascert named	on the next page are the names, relationships to decedent, ages, and a ainable by petitioner, of (1) all persons mentioned in decedent's will or a l or checked in items 2, 5, 6, and 7; and (3) all beneficiaries of a trust na a and personal representative are the same person.	any codicil, whether living or deceased; (2) all persor	s	

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ESTATE OF (name): LUANA PEARL MATHEWS			DE-111 CASE NUMBER:
LSTATE OF (Hame). HOANA PHARE PATTENS			PRRI2301034
		DECEDENT	
8. Name and relationship to decedent	<u>Age</u>		Address
DORIS ELLEN POWELL	54	11900 BA	YLESS ST.
DAUGHTER			ALLEY, CA 92557
CHRISTOPHER DAVID MATHEWS GRANDSON	37		YLESS ST. ALLEY, CA 92557
EDITH BERNICE NUMATA	N/A		4-25-2001
SISTER			
LYDEE MARIE KAWANAKA	N/A	DECEASED	10-9-2001
SISTER DORIS JEAN MARKWELL	N/A	DECEASED	9-2020
SISTER	,	2-0-13-2	3 =0=0
Continued on Attachment 8.			
9. Number of pages attached:			
c. Hamber of pages attached.			
Date:			
IN PRO PER		•	
(TYPE OR PRINT NAME OF ATTORNEY)			(SIGNATURE OF ATTORNEY)*
*(Signatures of all petitioners are also required. All petitioners must sign, but the petition m	nay be verified t	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 Califor	nia that the foreg	oing is true and correct.
Date: 3 Oct. 2023			
Date: 5 00 20 20		^	
		· Coris	E. Powell
DORIS ELLEN POWELL	<del> </del>		
(TYPE OR PRINT NAME OF PETITIONER)			(SIGNATURE OF PETITIONER)
(TVDE OD DOWE AND OF SETTIONES)			(CONSTRUCT OF DETITIONES)
(TYPE OR PRINT NAME OF PETITIONER) Signatures of additional petitioners follow last attachme	nt.		(SIGNATURE OF PETITIONER)