

ATTORNEY OR PARTY WITHOUT ATTORNEY: Michael Robin Morris 6557 Jaffe Ct. #8 San Diego, Ca. 92119 TELEPHONE NO.: 909-239-5020 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): Self-Represented	FOR COURT USE ONLY <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF RIVERSIDE FEB 07 2022 M. Cason </div>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE <input type="checkbox"/> PALM SPRINGS 3255 E. Tahquitz Canyon Wy., Palm Springs, CA 92262 <input checked="" type="checkbox"/> RIVERSIDE 4050 Main St., Riverside, CA 92501 <input type="checkbox"/> TEMECULA 41002 County Center Dr., Ste. 100, Temecula, CA 92591	
ESTATE OF (name): Holly Robin Morris	
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 type="checkbox"/> Authorization to Administer Under the Independent Administration of Estates Act <input type="checkbox"/> with limited authority	
CASE NUMBER: PRR12200212	
HEARING DATE AND TIME: APR 01 2022 8:30am	DEPT.: 8

1. Publication will be in (specify name of newspaper): <<Select One>>

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

2. **Petitioner (name each):** Michael Robin Morris

requests that

- a. ☐ decedent's will and codicils, if any, be admitted to probate.
 b. (name): Michael Robin Morris
 (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) ☐ \$ 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

3. a. Decedent died on (date): 11/27/2021 at (place): San Bernardino, 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): Riverside County

14160 Travers Dr. Moreno Valley, Ca. 92553