


ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: 246660 NAME: DAVID L. TAUB, ESQ FIRM NAME: WILLIAM M. NASSAR & ASSOCIATES STREET ADDRESS: 1461 FORD STREET, STE. 203 CITY: REDLANDS STATE: CA ZIP CODE: 92373-3909 TELEPHONE NO.: (909) 307-2000 FAX NO.: (909) 307-2055 E-MAIL ADDRESS: wnassar@nassarlaw.com ATTORNEY FOR (name): Ruth A. Keves	FOR COURT USE ONLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF SAN BERNARDINO SAN BERNARDINO DISTRICT APR 04 2023  Belyna Fiaz-Berrajia, Deputy
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO STREET ADDRESS: 247 W. THIRD STREET MAILING ADDRESS: 247 W. THIRD STREET CITY AND ZIP CODE: SAN BERNARDINO, CA 92415 BRANCH NAME: SAN BERNARDINO DISTRICT - PROBATE DIVISION	
ESTATE OF (name): Cynthia Diane Tenney aka Cynthia Tenney DECEDENT	
PETITION FOR <input checked="" 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 type="checkbox"/> with Will Annexed <input 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: PROB2300422 HEARING DATE AND TIME: MAY 22 2023 9:00 a.m. DEPT.: S35

1. Publication will be in (specify name of newspaper): City News Group
- Publication requested.
 - Publication to be arranged.
2. Petitioner (name each):
Ruth A. Keyes

DOUGLAS MANN
 NOTICE: This Case is assigned to Dept. S35
 for all purposes and is subject to CCP 170.6(2)

requests that

- decedent's will and codicils, if any, be admitted to probate.
- (name): Frederick Ferquson be appointed
 - executor
 - administrator with will annexed
 - administrator
 - special administrator with general powers and Letters issue upon qualification.
- full limited authority be granted to administer under the Independent Administration of Estates Act.
- bond not be required for the reasons stated in item 3e.
 - \$ 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.)
 - \$ in deposits in a blocked account be allowed. Receipts will be filed. (Specify institution and location):

SEE EXHIBIT "A"

- Decedent died on (date): 2/11/2021 at (place): Redlands, San Bernardino County, California
 - a resident of the county named above.
 - 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):
- Decedent was a citizen of a country other than the United States (specify country):
- Street address, city, and county of decedent's residence at time of death (specify):
28707 Arroyo Vista Drive, Highland, San Bernardino County, California 92346

ESTATE OF (name):	CYNTHIA DIANE TENNEY DECEDENT	CASE NUMBER:
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3. d. Character and estimated value of the property of the estate (complete in all cases):

- (1) Personal property: \$0
- (2) Annual gross income from
- (a) real property: \$
- (b) personal property: \$
- (3) Subtotal (add (1) and (2)): \$ 0
- (4) Gross fair market value of real property: \$ 600,000.00
- (5) (Less) Encumbrances: (\$ 0.00)
- (6) Net value of real property: \$ 600,000.00
- (7) Total (add (3) and (6)): \$ 600,000.00

- 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: 5/2/2014 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):

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):
- (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):
101 Park St, Montclair, NJ 07042
- (3) resident of the United States.
- (4) nonresident of the United States.

ESTATE OF (name): CYNTHIA DIANE TENNEY	DECEDENT	CASE NUMBER:
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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). CYNTHIA DIANE TENNEY	CASE NUMBER
DECEDENT	

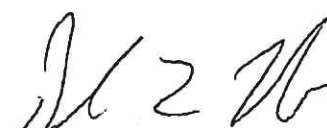
8. Name and relationship to decedent Age Address
 SEE ATTACHED LIST

Continued on Attachment 8.

9. Number of pages attached: 8

Date: 4/3/23

David L. Taub, Esq. _____
 (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: 4/3/23

Ruth A. Keyes _____
 (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.

ATTACHMENT 3f(2)

copy

LAST WILL AND TESTAMENT OF CYNTHIA D. TENNEY/TAYLOR 5/2/2014

I, Cynthia D. Tenney of San Bernardino County and the State of California, being of sound mind, memory, and understanding, do hereby make and declare this to be my Last Will and Testament.

FIRST: I direct my Executor hereinafter named to pay all my just debts, cremation, and testamentary expenses as soon as possible after my death. I further direct that all inheritance and estate taxes assessed with respect to specific bequests of my estate shall be paid out of my residuary estate and shall be the responsibility of the non-charitable beneficiaries if any, otherwise all residuary beneficiaries.

SECOND: I give and devise 50 percent of all my assets, including my tangible property and the value of my home and property at 28707 Arroyo Vista Dr., Highland, Ca. to the following people:

- 1. Karlene Rauhut (SS 550 86 4577), P.O. Box 2848, Crestline, Ca. 92325 Tele: (909) 338 6919
- 2. Jean Giallombardo (SS 564 50 50 47) P.O. Box 1007, Rochester, WA 98579 Tele: (360)273 2907
- 3. Curtis Stock (my cousin)(SS 009 30 6656) 31 Henmar Terr., Harrington Park, N.J. 07640
Tele(201)768-1395
- 4. Victor Stock, 1988 Wright Ave Unit 102, Wahiawa, HI 96786 Tele: (251)545 6211
stockvc@hotmail.com
- 5. Ruth Keyes, 7815 146th Pl., SE, Newcastle, WA 98059 Tele: (425) 228 8546 ruthakeyes@hotmail.com
- 6. Marianne Grant, 17868 Hwy 18, Apple valley, Ca. Tele: (760) 680-9261 Work: (760)247 7930
- 7. William Torres the 3rd, 111 N. Church, Redlands, Ca. 92374 Tele: (909)747 5408 or 307-9432
- 8. Lori Kohnell, 29050 Oak Creek Ln, Highland, Ca 92346
(909) 863 9891
cell 725 1166

THIRD: I give, devise and bequeath all the rest, residue and remainder of my estate, both real and personal, of whatsoever nature and wheresoever situate to the following charities, in equal amounts:

- 1. San Bernardino City Mission. P.O. Box 921, San Bernardino, Ca 02402
- 2. American Red Cross of the Inland Empire, P.O. Box 183, San Bernardino, Ca. 92402
- 3. Compassion International, Colorado Springs, CO 80997
- 4. 4. Salvation Army, Gift Processing, P.O. Box 1389, Temecula, CA 92593-1389
- 5. UNICEF, 125 Maiden Lane, NY, N.Y. 10038
- 6. Redlands Animal Shelter, 504 N. Kansas, Redlands, Ca. (909)798-7644
- 7. San Bernardino City Animal Shelters
- 8. World Vision, P.O. Box 70011, Tacoma, WA 98481-0011
- 9. Feeding America, 35 R. Esvhrt Ft. Suite 2000, Chicago, Il 60601-2200
- 10. Family Service Association, 612 Lawton St., Redlands, Ca 92374

11. ASPCA, 424 East 92nd St., NY, NY 10128
12. Highland Senior Center, PO box 948, Highland, Ca 92346 (909) 862-8104
13. Mary's Mercy Center, PO Box, 7563, San Bernardino 92411
14. Feed the Children, PO Box 36, Oklahoma City, OK 73101-0036 (405)942-0228
15. International Rescue Committee, 122 East 42nd St., NY, NY 10168
16. The Blessing Center in Redlands, 760 Stuart Ave., Redlands, Ca 92374

The share will not be absolutely equal, in that, if any of the beneficiaries are non-charitable institutions, such non-charitable entities shall be responsible for any inheritance or estate tax.

Call Claudine Callison, at Morgan Smith Barney at (973)890-3884 Ext. 3027 or her cell: (201)220-8333. She is my financial advisor and can inform you of some of my assets.

MORGAN STANLEY
Overlook at Great Notch
150 Clove Road,
Little Falls, NJ 07424-9809

*also contact CALSTRS (Retired Teacher)
1 (800) 22 8-5453 for my death
benefits.*

FOURTH: I hereby nominate, constitute and appoint Frederick C. Ferguson as Executor of this my Last Will and Testament, (973)744-7040 cell(973) 715-9900; Gerguson & Gille, Attorneys at Law, 101 Park St., Montclair, N.J. 07042; He handled my Dad's & sister's estates (both are deceased)

FIFTH: I authorize my Executor to do any and all things necessary for the complete administration of my estate, including the power to compound, compromise or otherwise adjust or settle any claim or demand whatsoever, either against or in favor of my estate.

I, CYNTHIA D. TENNEY (also named, Cynthia Taylor or Cynthia Amundson), the Testatrix, sign my name to this instrument this 3rd day of 2014, and being duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my last Will and that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed, and that I am 18 years of age or older, of sound mind, and under no constraint or undue influence.

Cynthia D. Tenney

Cynthia D. Tenney

Date: 5/2 2014

SS # 152-40-7113

*7/18/15 I wish to be cremated
Contact Bobbi 852-3761*

ATTACHMENT 8

Curtis Stock (1st cousin)
31 Henmar Terr
Harrington Park, NJ 07640

Ruth Keyes (1st cousin once removed)
7815 146th Pl, SE
Newcastle, WA 98059

Karlene Rauhut (named beneficiary in will)
PO Box 2848
Crestline, CA 92325

Jean Giallombardo (named beneficiary in will)
PO Box 1007
Rochester, WA 98579

Victor Stock (named beneficiary in will)
1988 Wright Ave Unit 102
Wahlawa, HI 96786

Marianne Grant (named beneficiary in will)
17868 Hwy 18
Apple Valley, CA

William Torres III (named beneficiary in will)
111 N. Church
Redlands, CA 92374

Lori Kornell (named beneficiary in will)
29050 Oak Creek Ln
Highland, CA 92346

San Bernardino City Mission (named beneficiary
in will)
PO Box 921
San Bernardino, CA 02402

American Red Cross of the Inland Empire
(named beneficiary in will)
PO Box 183
San Bernardino, CA 92402

Compassion International (named beneficiary in
will)
Colorado Springs, CO 80997

Salvation Army (named beneficiary in will)
PO Box 183
San Bernardino, CA 92402

UNICEF (named beneficiary in will)
125 Maiden Lane
NY, NY 10038

Redlands Animal Shelter (named beneficiary in
will)
504 N Kansas St
Redlands, CA 92373

San Bernardino City Animal Shelter (named
beneficiary in will)
333 Chandler Pl
San Bernardino, CA 92408

World Vision (named beneficiary in will)
PO Box 70011
Tacoma, WA 98481-0011

Feeding America (named beneficiary in will)
35 R. Esvhrt Ft Suite 2000
Chicago, IL 60601-2200

Family Service Association (named beneficiary
in will)
612 Lawton St
Redlands, CA 92374

ASPCA (named beneficiary in will)
424 East 92nd St
NY, NY 10128

Highland Senior Center (named beneficiary in
will)
PO Box 948
Highland, CA 92346

ATTACHMENT 8

Mary's Mercy Center (named beneficiary in will)
PO Box 7563
San Bernardino, 92411

Feed the Children (named beneficiary in will)
PO box 36
Oklahoma City, OK 73101-0036

International Rescue Committee (named
beneficiary in will)
122 East 42nd St
NY, NY 10168

The Blessing Center (named beneficiary in will)
760 Stuart Ave
Redlands, CA 92374

Claudine Callison (named in will)
150 Clove Rd
Little Falls, NJ 07424-9809

Frederick C. Ferguson (named in will)
101 Park St
Monclair, NJ 07042

EXHIBIT A

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

SAN BERNARDINO COUNTY
SAN BERNARDINO, CALIFORNIA

CERTIFICATE OF DEATH

3202136003509

Form containing personal data, usual residence, informant, spouse/parent information, funeral director, place of death, cause of death, physician certification, and coroner's use only sections.

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SAN BERNARDINO

This is a true and exact reproduction of the document officially registered and placed on file in the OFFICE OF THE SAN BERNARDINO ASSESSOR-RECORDER-CLERK.

DATE ISSUED JAN 30 2023



002762563

Signature of Bob Dutton, Assessor-Recorder-Clerk

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Assessor-Recorder-Clerk.

CASANBERG

SAN BERNARDINO COUNTY
 SAN BERNARDINO, CALIFORNIA

3052021062144
 STATE FILE NUMBER

PHYSICIAN/CORONER'S AMENDMENT
 NO ERASURES, WHITEOUTS, PHOTOCOPIES
 OR ALTERATIONS

3202136003509
 LOCAL REGISTRATION NUMBER

1.1

BIRTH DEATH FETAL DEATH

TYPE OR PRINT CLEARLY IN BLACK INK ONLY - THIS AMENDMENT BECOMES AN ACTUAL PART OF THE OFFICIAL RECORD

PART I INFORMATION TO LOCATE RECORD				2 of 2
INFORMATION AS IT APPEARS ON ORIGINAL RECORD	1A. NAME—FIRST CYNTHIA	1B. MIDDLE DIANE	1C. LAST TENNEY	2. SEX F
	3. DATE OF EVENT—MM/DD/CCYY 02/11/2021	4. CITY OF EVENT REDLANDS	5. COUNTY OF EVENT SAN BERNARDINO	

PART II STATEMENT OF CORRECTIONS		
6. CERTIFICATE ITEM NUMBER	7. INFORMATION AS IT APPEARS ON ORIGINAL RECORD	8. INFORMATION AS IT SHOULD APPEAR
107A	PENDING	ENCEPHALOPATHY
107AT		WEEKS
107B		STATUS EPILEPTICUS
107BT		WEEKS
107C		BENZODIAZEPINE WITHDRAWAL
107CT		UNKNOWN
112		NONE
113		PERCUTANEOUS ENDOSCOPIC GASTROSTOMY TUBE PLACEMENT
119	PENDING INVESTIGATION	COULD NOT BE DETERMINED

DECLARATION OF CERTIFYING PHYSICIAN OR CORONER	I HEREBY DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.			
	9. SIGNATURE OF CERTIFYING PHYSICIAN OR CORONER ALONDRA VALENTIN	10. DATE SIGNED—MM/DD/CCYY 01/19/2023	11. TYPED OR PRINTED NAME AND TITLE/DEGREE OF CERTIFIER ALONDRA VALENTIN, DEP CORONER	
	12. ADDRESS—STREET AND NUMBER 175 SOUTH LENA ROAD	13. CITY SAN BERNARDINO	14. STATE CA	15. ZIP CODE 92415-0037
STATE/LOCAL REGISTRAR USE ONLY	16. OFFICE OF VITAL RECORDS OR LOCAL REGISTRAR CDPH-VR	17. DATE ACCEPTED FOR REGISTRATION—MM/DD/CCYY 01/20/2023		

CERTIFIED COPY OF VITAL RECORD
 STATE OF CALIFORNIA, COUNTY OF SAN BERNARDINO

This is a true and exact reproduction of the document officially registered and placed on file in the OFFICE OF THE SAN BERNARDINO ASSESSOR-RECORDER-CLERK.



DATE ISSUED **JAN 30 2023**

[Signature]
 BOB DUTTON
 ASSESSOR-RECORDER-CLERK

This copy is not valid unless prepared on an engraved border displaying the date, seal and signature of the Assessor-Recorder-Clerk.



CASANBEND2