

Damian G. Garcia  
 NOTICE: This Case is assigned to Dept. FI  
 for all purposes and is subject to CCP 170.6(2)

DE-111

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME <b>VERNON C. TUCKER, ESQ.</b> FIRM NAME <b>LAW OFFICE OF VERNON C. TUCKER</b> STREET ADDRESS <b>2055 1ST STREET, SIO. 250</b> CITY <b>Simi Valley</b> TELEPHONE NO. <b>818-699-0333</b> E-MAIL ADDRESS <b>VERNON@Cvtlaw.com</b> ATTORNEY FOR <b>Teri S. Cullen</b>		STATE BAR NO. <b>213320</b>  SIO: CA      zip: <b>93065</b> FAX NO.: <b>N/A</b>	
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO</b>			
STREET ADDRESS <b>17780 Arrow Boulevard</b> MAILING ADDRESS <b>17780 Arrow Boulevard</b> CITY AND ZIP CODE <b>Fontana CA 92335</b> BRANCH NAME <b>Fontana District</b>			
ESTATE OF (name): <b>William J Ross</b>		<b>DECEDENT</b>	
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 checked="" type="checkbox"/> Letters of Special Administration <input type="checkbox"/> with general powers Authorization to Administer Under the Independent Administration of Estates Act <input type="checkbox"/> with limited authority		CASE NUMBER:  <div style="font-size: 1.5em; font-weight: bold; text-align: center;">PROVA2500068</div>	
HEARING DATE AND TIME: <div style="font-size: 1.5em; font-weight: bold;">MAR 06 2025 9AM</div>		DEPT.: <div style="font-size: 1.5em; font-weight: bold;">FI</div>	

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

8. ☐ Publication requested.
5. ☒ Publication to be arranged.

2. Petitioner (name each)  
TERI S. CULLEN

requests that

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

- b. (name): I en S. Cullen

- (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) ☐ \$ 0.00 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, § 8402.)

- (3) ☐ \$ \_\_\_\_\_ in deposits in a blocked account be allowed. Receipts will be filed.  
(Specify institution and location): \_\_\_\_\_

3. a. Decedent died on (date): 12-22-2024 al (place): Hospice Care Facility

- (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): NU

- c. Street address, city, and county of decedent's residence at time of death (specify):  
1051 WEST SPRINGFIELD UNIT B, UPLAND, CA 91786

**PETITION FOR PROBATE**  
**(Probate—Decedents Estates)**

ESTATE OF (name):	WILLIAM J. ROSS	CASE NUMBER:	
		DECEDENT	

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

- (1) Personal property: \$ 500
- (2) Annual gross income from
- (a) real property: \$ 6,600
- (b) personal property: \$ 0
- (3) Subtotal (add (1) and (2)): \$ 1,100
- (4) Gross fair market value of real property: \$ 450,000.00
- (5) (Less) Encumbrances: (\$ 0)
- (6) Net value of real property: \$ 450,000.00
- (7) Total (add (3) and (6)): \$ 457,100.00

- 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) ☐ Solo 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):

☐ 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): decedent's sister
- (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.