ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Debby M. Ehrlich 165257	FOR COURT USE ONLY	
DME & Associates		
4305 Third Ave. Ste. 3405		
San Diego, CA 92103		
TELEPHONE NO.: 805-312-8059 FAX NO. (Optional): 805-312-0551		
E-MAIL ADDRESS (Optional): attorneytrust02@gmail.com		
ATTORNEY FOR (Name): Dalene Ann Sederstrom		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Bernardino		
STREET ADDRESS: 17780 Arrow Blvd.		
MAILING ADDRESS: 17780 Arrow Blvd.		
CITY AND ZIP CODE: Fontana 92335		
BRANCH NAME: Fontana		
ESTATE OF (Name): Elizabeth A. Sederstrom		
NOTICE OF DETITION TO ADMINISTED ESTATE OF	CASE NUMBER:	
NOTICE OF PETITION TO ADMINISTER ESTATE OF	0 0 0 0	
(Name): Elizabeth A. Sederstrom	PROVA 2400987	
1. To all heirs, beneficiaries, creditors, contingent creditors, and persons who may otherwise b	pe interested in the will or estate,	
or both, of (specify all names by which the decedent was known):		
Elizabeth A. Sederstrom		
2. A Petition for Probate has been filed by (name of petitioner): Dalene Ann Sederstrom		
in the Superior Court of California, County of (specify): San Bernardino		
3. The Petition for Probate requests that (name): Dalene Ann Sederstrom		
be appointed as personal representative to administer the estate of the decedent.		
4. The petition requests the decedent's will and codicils, if any, be admitted to probate. The will and any codicils are available		
for examination in the file kept by the court.	described of Forest Aug. (This controlled	
5. X The petition requests authority to administer the estate under the Independent Admir will allow the personal representative to take many actions without obtaining court approach.		
important actions, however, the personal representative will be required to give notic		
have waived notice or consented to the proposed action.) The independent administr	ration authority will be granted unless an	
interested person files an objection to the petition and shows good cause why the co	urt should not grant the authority.	
6. A hearing on the petition will be held in this court as follows:		
a. Date: 02/06/2025 Time: 100 Am Dept.: F1 Roo	om:	
b. Address of court: x same as noted above other (specify):		
7. If you object to the granting of the petition, you should appear at the hearing and state you with the second before the hearing. Your appearance may be in person or by your atternation.	r objections or file written objections	
with the court before the hearing. Your appearance may be in person or by your attorney. 8. If you are a creditor or a contingent creditor of the decedent, you must file your claim with the court and mail a copy to the		
personal representative appointed by the court within the later of either (1) four months from the date of first issuance of letters to		
a general personal representative, as defined in section 58(b) of the California Probate Cod	e, or (2) 60 days from the date of	
mailing or personal delivery to you of a notice under section 9052 of the California Probate	Code.	
Other California statutes and legal authority may affect your rights as a creditor. You knowledgeable in California law.	may want to consult with an attorney	
 You may examine the file kept by the court. If you are a person interested in the estate, 	you may file with the court a	
Request for Special Notice (form DE-154) of the filing of an inventory and appraisal of estat	e assets or of any petition or account as	
provided in Probate Code section 1250. A Request for Special Notice form is available from	the court clerk.	
10. Petitioner X Attorney for petitioner (name): Debby M. Ehrlich		
(Address): 4305 Third Ave. Sto. 3405		
(Address): 4305 Third Ave. Ste. 3405 San Diego, CA 92103		
•		
(<i>Telephone</i>): 805-312-8059	STATE and do not print the information from the	
NOTE: If this notice is published, print the caption, beginning with the words NOTICE OF PETITION TO ADMINISTER ESTATE, and do not print the information from the form above the caption. The caption and the decedent's name must be printed in at least 8-point type and the text in at least 7-point type. Print the case number as part of the caption. Print items preceded by a box only if the box is checked. Do not print the italicized instructions in parentheses, the paragraph numbers, the mailing information,		

or the material on page 2.

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ESTATE OF (Name):		CASE NUMBER:	
_Elizabeth A. Sederstrom	DECEDENT		
1	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): 500 Hall Drive, Winnsboro, TX 75494			
,			
I served the foregoing Notice of Petiti addressed as shown below AND	ion to Administer Estate on each person named belo	ow by enclosing a copy in an envelope	
a. X depositing the sealed envelope with the United States Postal Service on the date and at the place shown in item 4, with the postage fully prepaid.			
b. placing the envelope for consumers business practices. I am remailing. On the same day	collection and mailing on the date and at the place sl eadily familiar with this business's practice for collect that correspondence is placed for collection and ma e United States Postal Service, in a sealed envelope	ting and processing correspondence for ailing, it is deposited in the ordinary	
4. a. Date mailed: 01/06/2025 b. Place mailed (city, state): Winnsboro, TX			
5. X I served, with the Notice of Pet	rition to Administer Estate, a copy of the petition or o	ther document referred to in the notice.	
	he laws of the State of California that the foregoing i		
Date: 01/06/2025			
Kristie Brule) aust	013	
(TYPE OR PRINT NAME OF PERSON COMPLETING	THIS FORM) (SIGNATURI	OF PERSON COMPLETING THIS FORM)	
NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED			
Name of person served	Address (number, street, ca	ity, state, and zip code)	
Dalene Ann Sederstrom	8244 London Ave., Rancho Cucamonga, C	CA 91730	
2. Allan Dale Sederstrom	8750 Milpas Drive, Apple Valley, CA 923	08	
3. Estate of Dale A. Sederstrom	8244 London Ave., Rancho Cucamonga, C	CA 91730	
4.			
5.			
6.			
Continued on an attachment.	(You may use form DE-121(MA) to show additional	l persons served.)	
available upon request if at least 5 d	er-assisted real-time captioning, or sign language int lays notice is provided. Contact the clerk's office for Disabilities and Order (form MC-410). (Civil Code se	Request for	