

FORM APPROVED COUNTY COUNSEL
 BY: GREGORY P. PRIAMOS
 DATE: 6/16/15

**SUBMITTAL TO THE BOARD OF SUPERVISORS
 COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

571A



FROM: Don Kent, Treasurer/Tax Collector

SUBMITTAL DATE:
JUN 16 2015

SUBJECT: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 192, Item 192. Last Assessed to: The Elva S. Turley Living Trust dated December 13, 1994; Elva Turley, as trustor(s) and trustee(s). District 5 [\$8,396] Fund 65595 Excess Proceeds from Tax Sale.

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve the claim from Byron Baggett, Successor Trustee for The Elva S. Turley Living Trust dated December 13, 1994, for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 313142030-3;

(continued on page two)

BACKGROUND:

Summary

In accordance with Section 3691 et seq. of the California Revenue and Taxation Code, and with prior approval of the Board of Supervisors, The Tax Collector conducted the March 20, 2012 public auction sale. The deed conveying title to the purchasers at the auction was recorded May 11, 2012. Further, as required by Section 4676 of the California Revenue and Taxation Code, notice of the right to claim excess proceeds was given on June 6, 2012, to parties of interest as defined in Section 4675 of said code. Parties of interest have been determined by an examination of lot book reports as well as Assessor's and Recorder's records, and various research methods were used to obtain current mailing addresses for these parties of interest.

(continued on page two)

Don Kent
 Don Kent

Treasurer-Tax Collector

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 8,396	\$ 0	\$ 8,396	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	

SOURCE OF FUNDS: Fund 65595 Excess Proceeds from Tax Sale
Budget Adjustment: N/A
For Fiscal Year: 15/16

C.E.O. RECOMMENDATION: APPROVE

BY: *Samuel Wong 7/13/15*
 Samuel Wong

County Executive Office Signature

MINUTES OF THE BOARD OF SUPERVISORS

- A-30
- 4/5 Vote
- Positions Added
- Change Order

Prev. Agn. Ref.: | District: 5 | Agenda Number:

9-26

SUBMITTAL TO THE BOARD OF SUPERVISORS, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

FORM 11: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 192, Item 192. Last Assessed to: The Elva S. Turley Living Trust dated December 13, 1994; Elva Turley, as trustor(s) and trustee(s). District 5 [\$8,396] Fund 65595 Excess Proceeds from Tax Sale.

DATE: JUN 16 2015

PAGE: Page 2 of 2

RECOMMENDED MOTION:

2. Authorize and direct the Auditor-Controller to issue a warrant to Byron Baggett, Successor Trustee of the Elva S. Turley Living Trust dated December 13, 1994 in the amount of \$8,396.76, no sooner than ninety days from the date of this order, unless an appeal has been filed in Superior Court, pursuant to the California Revenue and Taxation Code Section 4675.

BACKGROUND:

Summary (continued)

The Treasurer-Tax Collector has received one claim for excess proceeds:

1. Claim from Byron Baggett, Successor Trustee of the Elva S. Turley Living Trust dated December 13, 1994 based on Quitclaim Deed recorded March 7, 1995 as Instrument No. 070515 the Elva S. Turley Living Trust dated December 13, 1994 and the death certificate of Elva S. Turley.

Pursuant to Section 4675 (a) & (f) of the California Revenue and Taxation Code, it is the recommendation of this office that Byron Baggett, Successor Trustee of the Elva S. Turley Living Trust dated December 13, 1994 be awarded excess proceeds in the amount of \$8,396.76. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion.

Impact on Citizens and Businesses

Excess proceeds are being released to the Successor Trustee of the last assessee of the property.

ATTACHMENTS (if needed, in this order):

A copy of the Excess Proceeds Claim form and supporting documentation is attached.

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX-DEFAULTED PROPERTY
(SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS)

To: Don Kent, Treasurer-Tax Collector

Re: Claim for Excess Proceeds

STATE OF CALIFORNIA
COUNTY OF RIVERSIDE
TREASURER/TAX COLLECTOR
BY [Signature]
2013 APR 25 PM 1:18

TC 192 Item 192 Assessment No.: 313142030-3

Assessee: TURLEY, ELVA TR

Situs:

Date Sold: March 20, 2012

Date Deed to Purchaser Recorded: May 11, 2012

Final Date to Submit Claim: May 13, 2013

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ 396.94 from the sale of the above mentioned real property. I/We were the lienholder(s), property owner(s) [check in one box] at the time of the sale of the property as is evidenced by Riverside County Recorder's Document No. 013157; recorded on Mar 19 1995. A copy of this document is attached here to. I/We are the rightful claimants by virtue of the attached assignment of interest. I/We have listed below and attached hereto each item of documentation supporting the claim submitted.

NOTE: YOUR CLAIM WILL NOT BE CONSIDERED UNLESS THE DOCUMENTATION IS ATTACHED.

070515

If the property is held in Joint Tenancy, the taxsale process has severed this Joint Tenancy, and all Joint Tenants will have to sign the claim unless the claimant submits proof that he or she is entitled to the full amount of the claim, the claimant may only receive his or her respective portion of the claim.

I/We affirm under penalty of perjury that the foregoing is true and correct.

Executed this 20 day of April, 2013 at Perris Calif
County, State

[Signature]
Signature of Claimant

Signature of Claimant

Byron BASSETT
Print Name

Print Name

496 W 4th
Street Address

Street Address

PERRIS ca 925 72
City, State, Zip

City, State, Zip

909-609-7128
Phone Number

Phone Number

INSTRUCTIONS FOR FILING CLAIM

(See Claim Form on Reverse Side)

The California Revenue and Taxation Code, Section 4675, states in part (paraphrased):

For the purposes of this article, parties of interest and their order of priority are:

- (a) First, lienholders of record prior to the recordation of the tax deed to the purchaser in the order of their priority; and
- (b) Then, any person with title of record to all or any portion of the property prior to the recordation of the tax deed to the purchaser.

If you consider yourself to be a party of interest in the sale of tax-defaulted property as defined above, please fill out the reverse of this form stating how you have determined your status as a party of interest. If you need help in filling out the form, please contact our office by telephone at 951-955-3842, mail, or in person.

You must attach copies of documents to support your claim as follows:

1. In case (a), attach a copy of your trust deed or other evidence of lien or security interest, along with a statement under penalty of perjury setting forth the original amount of the lien or interest, the total amount of payments received reducing the original amount of the lien or interest, and the amount still due and payable as of the date of the sale of the tax defaulted property by the Tax Collector.
2. In case (b), attach copies of any other documents (e.g., deed, certified death certificate, will, court order, etc.) supporting your claim.

PLEASE NOTE: We cannot, by law, begin processing of claims until one year has passed from the date of the deed to the purchaser. In order to receive consideration by the Riverside County Board of Supervisors, claims must be filed **ON OR BEFORE THE EXPIRATION OF ONE YEAR** following the date of the recording of the deed to the purchaser. Please see the "Date Deed to Purchaser Recorded" appearing on the attached notice (Form 117-170). The Tax Collector will submit a recommendation to the County Board of Supervisors as to what disposition should be made on your claim. Following the Board's review, the claim will either be approved or denied. The Clerk of the Board of Supervisors will notify you of the action taken by the Board. Should the claim be approved, the Auditor-Controller will issue a County warrant in payment. By law, the Auditor-Controller cannot issue a warrant in payment of the approved claim until 90 days following the action taken by the Board.

MAIL COMPLETED FORMS TO:

Don Kent, Treasurer-Tax Collector
Post Office Box 12005
Riverside, CA 92502-2205

Attention: Excess Proceeds

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

CERTIFICATE OF DEATH

3200433008122

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given)		2. MIDDLE	
Elva		S	
3. LAST (Family)		Turley	
4. DATE OF BIRTH mm/dd/yyyy		5. AGE Yrs.	
09/14/1907		96	
6. UNDER ONE YEAR		7. UNDER 2 HOURS	
Months Days		Hours Minute	
8. SEX		F	
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER	
AR			
11. EVER IN U.S. ARMED FORCES?		12. MARITAL STATUS (at Time of Death)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		Widowed	
13. DATE OF DEATH mm/dd/yyyy		14. HOUR (24 Hours)	
08/09/2004		1400	
15. EDUCATION - Highest Level/Degree (See worksheet on back)		16. DECEDENT'S RACE - Up to 3 races may be listed (See worksheet on back)	
HS Graduate <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		White	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, food construction, employment agency, etc.)	
Homemaker		Own Home	
19. YEARS IN OCCUPATION		80	
20. DECEDENT'S RESIDENCE (Street and number or location)			
496 W 4th St			
21. CITY		22. COUNTY/PROVINCE	
Perris		Riverside	
23. ZIP CODE		24. YEARS IN COUNTY	
92570		53	
25. STATE/FOREIGN COUNTRY		CA	
26. INFORMANT'S NAME, RELATIONSHIP		27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state ZIP)	
Byron Baggett, Grandson		496 W 4th St Perris CA 92570	
28. NAME OF SURVIVING SPOUSE - FIRST		29. MIDDLE	
30. LAST (Maiden Name)			
31. NAME OF FATHER - FIRST		32. MIDDLE	
Jesse		N	
33. LAST		34. BIRTH STATE	
Spoonor		AR	
35. NAME OF MOTHER - FIRST		36. MIDDLE	
Grace		Elizabeth	
37. LAST (Maiden)		38. BIRTH STATE	
Johnson		AR	
39. DISPOSITION DATE mm/dd/yyyy		40. PLACE OF FINAL DISPOSITION	
08/17/2004		Perris Valley Cemetery 915 N Perris Blvd Perris CA 92570	
41. TYPE OF DISPOSITION(S)		42. SIGNATURE OF EMBALMER	
BU		Not Embalmed	
43. LICENSE NUMBER		44. NAME OF FUNERAL ESTABLISHMENT	
		Miller-Jones Mortuary & Crematory Inc	
45. LICENSE NUMBER		46. SIGNATURE OF LOCAL REGISTRAR	
FD 1574		Gary Feldman MD	
47. DATE mm/dd/yyyy		08/16/2004	
101. PLACE OF DEATH		102. IF HOSPITAL, SPECIFY ONE	
Own Residence		<input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA <input type="checkbox"/> Hospice	
103. IF OTHER THAN HOSPITAL, SPECIFY ONE		<input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)	
Riverside		496 W 4th St	
106. CITY		Perris	
107. CAUSE OF DEATH		108. DEATH REPORTED TO CORONER?	
Enter the chain of events - disease, inflex, or complication - that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.		Time Interval Between Onset and Death	
IMMEDIATE CAUSE (A) Final disease or condition resulting in death		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Pulmonary Edema		Wks 2004-4940	
SEQUENTIAL, OR JUNCTIVE, IF ANY, READING TO CAUSE OR LINK A FINAL UNDERLYING CAUSE (B) Disease or injury that included the events resulting in death. LAST		109. BIOPSY PERFORMED?	
Congestive Heart Failure		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Ischemic Heart Disease		110. AUTOPSY PERFORMED?	
		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
111. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107		112. USED IN DETERMINING CAUSE?	
Anemia, Malnutrition, Elevated Sodium Level		<input type="checkbox"/> YES <input type="checkbox"/> NO	
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date)		114. IF FEMALE, PREGNANT IN LAST YEAR?	
No		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
115. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.		116. SIGNATURE AND TITLE OF CERTIFIER	
Decedent Attended Since Decedent Last Seen Alive		A40220 08/12/2004	
117. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		James Dexter MD	
2 West Fern Ave Redlands, CA 92373			
118. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED.		119. INJURED AT WORK?	
MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Hanging <input type="checkbox"/> Investigation <input type="checkbox"/> Could not be determined		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
120. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		121. INJURY DATE mm/dd/yyyy	
		122. HOUR (24 Hours)	
123. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
124. LOCATION OF INJURY (Street and number, or location, and city, and ZIP)			
125. SIGNATURE OF CORONER / DEPUTY CORONER		126. DATE mm/dd/yyyy	
127. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			
STATE REGISTRAR		FAX AUTH. #	
A B C D E		147293	
		CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA }
COUNTY OF RIVERSIDE } SS

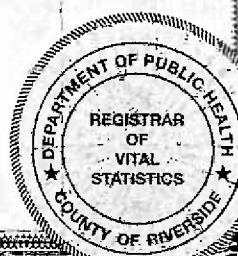
This is a true and exact reproduction of the document officially registered and placed on file in the office of County of Riverside, Department of Health.

Gary Feldman MD
Gary Feldman M.D., Local Registrar
RIVERSIDE COUNTY, CALIFORNIA



DATE ISSUED 08/25/2004

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.



RECEIVED FOR RECORD
AT 8:00 O'CLOCK

MAR - 9 1995

Recorded in Official Records
of Riverside County, California
Recorder
Fee \$ 4

RECORDING REQUESTED BY:
Alliance for Mature Americans

WHEN RECORDED, MAIL TO:
Elva S. Turley
496 West 4th Street
Perris, CA 92570

SPACE ABOVE THIS LINE FOR RECORDER'S USE
QUITCLAIM DEED

APN 313-142-022 -6

The undersigned grantor(s) declare(s): This conveyance transfers the grantor's interest into a Revocable Living Trust R & T 11911. There is no consideration for this transfer and is excluded from reappraisal under Proposition 13, i.e., California Const. 13 A, Section 1, et, seq. (Documentary Transfer Tax - 0 -)

ELVA S. TURLEY, a widow

hereby REMISES, RELEASES AND QUITCLAIMS to:

THE ELVA S. TURLEY LIVING TRUST DATED December 13, 1994
ELVA TURLEY, as Trustor(s) and Trustee(s)

the following described real property in the City of Perris, County of Riverside, State of California.

The East 1/2 of Lot 14, Lot 15, 16 and Lot 17 all in Block 1 of Wise and Knight's Subdivision, as shown by map on file in Book 2, page 49 of Maps, Riverside County Records.

More commonly known as: 496 West 4th Street, Perris, CA

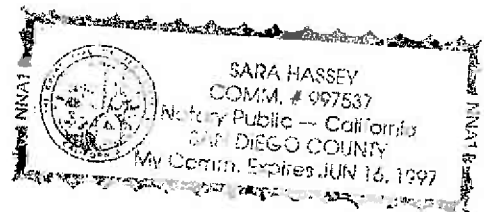
DATED: December 13, 1994

STATE OF CALIFORNIA)
County of Riverside)ss.

Elva S. Turley
Elva S. Turley
Elva S. Turley

On December 13, 1994 before me, Sara Hassey, personally appeared, Elva S. Turley, known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their/ signature(s) on this instrument the person(s) or the entity upon behalf of which person(s) acted, executed the instrument.

WITNESS my hand and official seal



(THIS AREA FOR OFFICIAL NOTARY STAMP)

Signature Sara Hassey

Mail Tax Statements to: Elva S. Turley 496 West 4th Street, Perris, CA 92570
Name Address City, State & Zip

RECEIVED FOR RECORD
AT 8:00 O'CLOCK

RECORDING REQUESTED BY:
Alliance for Mature Americans

WHEN RECORDED, MAIL TO:
Elva S. Turley
496 West 4th Street
Perris, CA 92570

MAR - 7 1995

Recorded in Official Records
of Riverside County, California

Recorder
Page # 6

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

APN 313-142-001 - 7

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ELVA TURLEY, as Trustor(s) and Trustee(s)

the following described real property in the City of Perris, County of Riverside, State of California.

The Lots 9, 10, 11 and 12 all in Block 1 of Wise and Knight's Subdivision, as shown by map on file in Book 2, page 49 of Maps, Riverside County Records.

More commonly known as: 4 lots in Riverside County

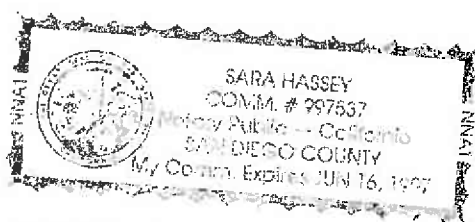
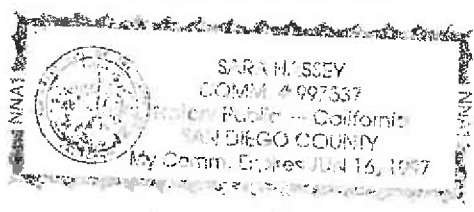
DATED: December 13, 1994

Elva S. Turley
Elva S. Turley

STATE OF CALIFORNIA)
County of Riverside)ss.

On December 13, 1994 before me, Sara Hassey, personally appeared, Elva S. Turley, known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their/ signature(s) on this instrument the person(s) or the entity upon behalf of which person(s) acted, executed the instrument.

WITNESS my hand and official seal



Signature Sara Hassey

(THIS AREA FOR OFFICIAL NOTARY STAMP)

Mail Tax Statements to: Elva S. Turley
Name

496 West 4th Street
Address

Perris, CA 92570
City, State & Zip

DECLARATION OF TRUST

OVERVIEW OF PERTINENT INFORMATION

I. Initial Settlor(s) and Trustee(s):

A. ELVA S. TURLEY

II. Successor Trustee(s):

In the event of death or incapacitation of the above-named Trustee(s), the below named individuals are appointed to serve in line of succession as Successor Trustee(s), as specified in the Trust agreement.

A. BYRON BAGGETT

B.

C.

D.

E.

III. Trust Property

Initial corpus of all assets listed on Schedule A.

**FIRST AMENDMENT AND COMPLETE RESTATEMENT OF
DECLARATION OF TRUST**

Named

THE ELVA S. TURLEY LIVING TRUST,

Dated: DECEMBER 13, 1994

I, **ELVA S. TURLEY**, Social Security Number _____, acting both as Settlor and Trustee, declare that I set aside all property described in Schedule "A" in addition to any Addendum to Schedule "A" attached to this instrument. **THE PRIMARY BENEFICIARY** of this trust estate is the Settlor, as named above.

This Declaration of Trust is a First Amendment and Complete Restatement of **THE ELVA S. TURLEY LIVING TRUST**, dated **DECEMBER 13, 1994**; **ELVA S. TURLEY** Settlor and Trustee, and as such, amend and replace the original Trust in its entirety. This Declaration of Trust shall be known as **THE ELVA S. TURLEY LIVING TRUST**, dated **DECEMBER 13, 1994**, **ELVA S. TURLEY**, Settlor and Trustee.

THE EFFECTIVE DATE OF THIS FIRST AMENDMENT AND COMPLETE RESTATEMENT SHALL BE THE DATE THAT I SIGN THIS INSTRUMENT.

I. GENERAL PURPOSE AND FACT

A. **PURPOSE:** This Trust was created to hold the Settlor's combined estate and provide continuity of management of the estate, both during the Settlor's lifetime and upon the Settlor's death and to avoid probate of the estate. During the life of the Settlor, all trust benefits shall accrue to the Settlor. At the death of the Settlor, any property remaining outside the Trust may pass to the Trust estate through provisions of the deceased Settlor's Last Will and Testament (Pour-Over Will). After the death of the Settlor, all trust benefits shall pass to the beneficiaries as provided herein.

B. **THIS TRUST IS REVOCABLE AND AMENDABLE** by the Settlor as provided under the terms of this agreement.

C. **BENEFICIAL INTEREST:** The Settlor has intentionally omitted naming any successor beneficiaries of this Trust agreement except those that are named herein. There shall be no other beneficiaries unless the Settlor dies without any living descendants.

II. TRUST PROPERTY

A. **THE TRUST ESTATE:** All property subject to this agreement of any trust created hereunder from time to time, including the property listed in Schedule "A," is referred to as the Trust estate and shall be held, administered and distributed according to this instrument.

1. THE SUCCESSOR TRUSTEE(S) ARE AS PER MY/OUR WISHES.

(Please Initial Option b OR c)

- a) 1. **BYRON BAGGETT**
2.
3.
4.
5.

b) EBB
please initial

THE ABOVE-NAMED PARTIES SHALL SERVE SEPARATELY AS SUCCESSOR TRUSTEE, IN THE ORDER SET FORTH.

OR

c) _____
please initial

THE ABOVE-NAMED PARTIES (OR THE SURVIVORS OF THEM) SHALL SERVE JOINTLY AS CO-TRUSTEES.

D. RESIGNATION OF TRUSTEE: A Trustee may resign at any time by submitting a notice of resignation to the Settlor or to a Co-Trustee or Successor Trustee, in that order. A resigning Trustee shall be obligated to continue serving as Trustee the lesser of thirty (30) days or until a Successor Trustee takes office, and shall execute all documents and actions necessary to vest title to the Trust estate in the Successor Trustee without court accounting.

E. POWER TO APPOINT A SUCCESSOR TRUSTEE: If at any time the Trust or trusts created herein has only one remaining Trustee and no designated Successor Trustee, that remaining Trustee shall have absolute and discretionary power to appoint a Co-Trustee or Successor Trustee from among the adult and legally competent descendants of the Settlor, or from among the adult and legally competent spouses of such descendants. If, in the opinion of the Trustee, there is no individual qualified for such appointment, said Trustee may select a bank trust department to act as Co-Trustee or a Successor Trustee.

F. ACCOUNTABILITY RESPECTING SUCCESSION: No Successor Trustee shall bear responsibility for acts or omissions of any prior Trustee or have a duty to audit the accounts or activities of such Trustee unless requested to do so by the Settlor or persons having at least a Thirty Percent (30%) beneficial interest in the Trust estate. Such request for audit or any claim against a previous Trustee must be made in writing within one (1) year after the Successor Trustee takes office. In the event of discovery of any wrongdoing, the existing Trustee shall, in his sole discretion, determine and take whatever action he deems appropriate or necessary.

G. TERM OF OFFICE: A Trustee may serve until death or resignation as provided herein.

H. BONDS: No Trustee shall be required to post a bond or a security for performance of duties while Trustee.

IN WITNESS WHEREOF:

I, the undersigned Settlor, having read the provisions of this Trust agreement, and understand the provisions herein, it is my intent to enter into this Trust agreement as written.

THEREFORE, the provisions of this Trust agreement shall bind the undersigned Settlor, and the undersigned Co-Trustees, as well as any Successor Trustees assuming the role of Trustee hereunder, and all beneficiaries of this Trust and their successors and assigns.

Dated and Signed at PERRIS, this _____ day of FEB 20 2002, 20_____.

SETTLOR:

TRUSTEE:

Elva S. Turley
ELVA S. TURLEY

Elva S. Turley
ELVA S. TURLEY

NOTARY PUBLIC
STATE OF CALIFORNIA)
)ss.
COUNTY OF RIVERSIDE)

On FEB 20 2002 before me MATTHEW MORRISON, personally appeared ELVA S. TURLEY, personally known to me (or proved to me on the basis of satisfactory evidence) to be person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal:



Signature Matthew Morrison

(this area for official notarial stamp)

**LAST WILL AND TESTAMENT
(Pour-Over Will)
OF
ELVA S. TURLEY**

I, ELVA S. TURLEY, residing in the County of RIVERSIDE, State of California, being of sound mind and memory, and not acting under duress or undue influence of any person whomsoever, hereby declare this to be my Last Will and Testament, and I do hereby revoke all other former Wills and Codicils to Wills heretofore made by me. My Social Security Number is

All reference made herein to "children or my children (including step-children)" refers to TOM TALMADGE (Deceased) born NOVEMBER 1, 1926.

DEBTS, TAXES AND ADMINISTRATION EXPENSES

I have provided for the payment of all my debts, expenses of administration of property wherever situated passing under this Will or otherwise, and estate, inheritance, transfer and succession taxes, other than any tax on a generation-skipping transfer that is not a liability of my Estate (including interest and penalties, if any) that become due by reason of my death, under THE ELVA S. TURLEY LIVING TRUST executed on DECEMBER 13, 1994, (the "Living Trust"). If the Living Trust assets should be insufficient for these purposes, my Executor shall pay my unpaid items from the residue of my Estate passing under this Will, without any apportionment or reimbursement. In the alternative, my Executor may demand in a writing addressed to the Trustee of the Trust an amount necessary to pay all or part of these items, plus claims, pecuniary legacies and family allowances by court order.

PERSONAL AND HOUSEHOLD EFFECTS

It is my intent that all my personal and household effects were transferred to the Living Trust as a result of the Assignment contained in said Trust. If there are any questions regarding the ownership or disposition of these assets, it is my desire that such assets pour into the Living Trust, signed by me this date in accordance with the provisions of the section titled "Residue of Estate."

RESIDUE OF ESTATE

I give, devise and bequeath all the rest, residue and remainder of my property of every kind and description (including lapsed legacies and devises), wherever situated and whether acquired before or after the execution of this Will, to the Trustee under that certain Trust executed by me on the same date of the execution of this Will. The Trustee shall add the property bequeathed and devised by this item to the corpus of the above described Trust and shall hold, administer and distribute said property in accordance with the provisions of said Trust, including any amendments thereto made before my death.

If for any reason the said Trust shall not be in existence at the time of my death, or if for any reason a court of competent jurisdiction shall declare the foregoing testamentary disposition to the Trustee under said Trust as it exists at the time of my death to be invalid, then I give all my Estate including the residue and remainder thereof to that person who would have been the Trustee under the Trust, as Trustee, and to their substitutes and successors under the Trust, described herein above, to be held, managed, invested, reinvested and distributed by the Trustee upon the terms and conditions pertaining to the period beginning with the date of my death as are constituted in the Trust as at present constituted giving effect to amendments, if any, hereafter made and for that purpose I do hereby incorporate such Trust by reference into this my Will.

EXECUTOR

I hereby nominate and appoint as my Executor of this Last Will and Testament to serve without bond the person(s) as stated below.

In the event the first named Executor shall predecease me, or is unable or unwilling to act as my Executor for any reason whatsoever, then and in that event I hereby nominate and appoint the following to serve without bond as my Independent Executor.

(Please Initial Option E1 or E2)

1. **BYRON BAGGETT**
- 2.
- 3.
- 4.

please initial

(E1)

BSJ

THE ABOVE-NAMED PARTIES SHALL SERVE SEPARATELY AS EXECUTOR, IN THE ORDER SET FORTH.

OR

please initial

(E2)

THE ABOVE-NAMED PARTIES (OR THE SURVIVORS OF THEM) SHALL SERVE JOINTLY AS CO-EXECUTORS.

Whenever the word "Executor" or any modifying or substituted pronoun therefore is used in this my Will, such words and respective pronouns shall be held and taken to include both the singular and the plural, the masculine, feminine and neuter gender thereof, and shall apply equally to the Executor named herein and to any successor or substitute Executor acting hereunder, and such successor or substitute Executor shall possess all the rights, powers, duties, authority, and responsibility conferred upon the Executor originally named herein.

GUARDIAN FOR MINOR CHILDREN

In the event that a guardian of the person and or estate should be necessary for any minor child of mine, I nominate:

Address:

If no guardian is nominated, it is presumed there are no minor children.

In the event the above-named person is unwilling or unable to serve in the above capacity for any reason, I nominate:

Address:

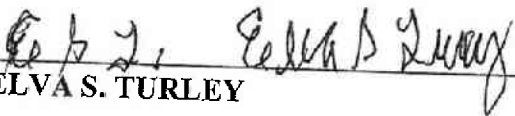
If no guardian is nominated, it is presumed there are no minor children.

INVALIDITY

If any provision of this Will is deemed unenforceable, the remaining provisions shall remain in full force and effect.

BOND

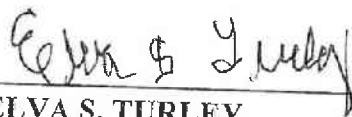
My signature means a bond is not required for any person named as executor.


ELVA S. TURLEY

Notice: You must sign this Will in the presence of two (2) adult witnesses. The witnesses must sign their names in your presence and in each other's presence. You must first read to them the following two sentences:

THIS IS MY WILL. I ASK THE PERSONS WHO SIGN BELOW TO BE MY WITNESSES.

SIGNED ON FEB 20 2002, AT PERRIS CA
(date) (city)


ELVA S. TURLEY

NOTICE TO WITNESSES:

Two (2) adults must sign as witnesses. Each witness must read the following clause before signing. The witnesses should not receive assets under this Will.

Each of us declares under penalty of perjury under the laws of the State of California that the following is true and correct:

- a) On the date written below the maker of this Will declared to us that this instrument was the maker's Will and requested us to act as witnesses to it;
- b) We understand this is the maker's Will;
- c) The maker signed this Will in our presence, all of us being present at the same time;
- d) We, now, at the maker's request, and in the maker's and each other's presence, sign as witnesses;
- e) We believe the maker is of sound mind and memory;
- f) We believe that this Will was not procured by duress, menace, fraud or undue influence;
- g) The maker is age 18 or older;
- h) Each of us is now age 18 or older, is a competent witness, and resides at the address set forth after his or her name.

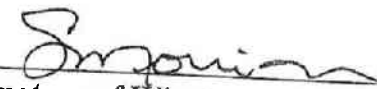
WITNESS OUR HANDS this _____ day of FEB 20 2002 20_____.


Signature of Witness

MATTHEW MORRISON
Print Name

1455 S STATE ST
Residence Address

HEMET CA 92543
City, State & Zip


Signature of Witness

SUSAN MORRISON
Print Name

1455 S. STATE ST
Residence Address

HEMET CA 92543.
City, State & Zip

TRUST CERTIFICATION

It is hereby certified by the undersigned that:

THE ELVA S. TURLEY LIVING TRUST

Dated: DECEMBER 13, 1994

was made under the laws of the State of California, and is in full force and effect.

The only Trustee(s) currently qualified and now acting are:

ELVA S TURLEY

A true and complete copy of the Trust Document, including all amendments and/or supplements, which is in the possession of the Trustee(s), is attached to this certificate.

No amendments, supplements, modifications or revocations have been made to the Trust since the document was executed.

Dated: FEB 20 2002

Elva S Turley
Trustee

**ABSTRACT OF
THE ELVA S. TURLEY LIVING TRUST**

Dated: DECEMBER 13, 1994

NOTE: This document is an abstract of certain key provisions of the above-named Revocable Living Trust. The Settlor intends that this abstract may be presented to interested third parties as proof of the Trust's validity and the authorities and powers of the Trustee. The undersigned Settlor affirms that the abstracted provisions are herein set forth below as they appear in the original document, and that this document and the original were executed on the same date.

I, ELVA S. TURLEY, acting as Settlor and Trustee, declare that I have set aside and hold in Trust all property described in Schedule A attached to this instrument.

THE PRIMARY BENEFICIARY of this Trust estate is the Settlor, as named above.

THE EFFECTIVE DATE of this Trust agreement shall be the date that I sign this instrument.

I. GENERAL PURPOSE AND FACT

A. PURPOSE: This Trust was created to hold the Settlor's combined estate and provide continuity of management of the estate, both during the Settlor's lifetime and upon the Settlor's death and to avoid probate of the estate. During the life of the Settlor, all trust benefits shall accrue to the Settlor. At the death of the Settlor, any property remaining outside the Trust may pass to the Trust estate through provisions of the deceased Settlor's Last Will and Testament (Pour-Over Will). After the death of the Settlor, all trust benefits shall pass to his/her beneficiaries as provided herein.

B. THIS TRUST IS REVOCABLE AND AMENDABLE by the Settlor as provided under the terms of this agreement.

C. BENEFICIAL INTEREST: The Settlor has intentionally omitted naming any successor beneficiaries of this Trust agreement except those that are named herein. There shall be no other beneficiaries unless the Settlor dies without any living descendants.

II. TRUST PROPERTY

A. THE TRUST ESTATE: All property subject to this agreement of any trust created hereunder from time to time, including the property listed in Schedule "A" is referred to as the Trust estate and shall be held, administered and distributed according to this instrument.

C. THE FIRST SUCCESSOR TRUSTEE, serving as a sole Trustee, shall have authority to appoint the Second Successor Trustee as a full Co-Trustee. If, for any reason, a First Successor Trustee ceases to serve as Trustee, the next Successor Trustee nominated herein shall, without court approval, serve as Trustee hereunder.

1. THE SUCCESSOR TRUSTEE(S) ARE AS PER MY/OUR WISHES.

(Please Initial Option b OR c)

- a) 1. BYRON BAGGETT
2.
3.
4.
5.

b)

_____ *please initial*

THE ABOVE-NAMED PARTIES SHALL SERVE SEPARATELY AS SUCCESSOR TRUSTEE, IN THE ORDER SET FORTH.

OR

c)

_____ *please initial*

THE ABOVE-NAMED PARTIES (OR THE SURVIVORS OF THEM) SHALL SERVE JOINTLY AS CO-TRUSTEES.

D. RESIGNATION OF TRUSTEE: A Trustee may resign at any time by submitting a notice of resignation to the Settlor or to a Co-Trustee or Successor Trustee, in that order. A resigning Trustee shall be obligated to continue serving as Trustee the lesser of thirty (30) days or until a Successor Trustee takes office, and shall execute all documents and actions necessary to vest title to the Trust estate in the Successor Trustee without court accounting.

E. POWER TO APPOINT A SUCCESSOR TRUSTEE: If at any time the Trust or trusts created herein has only one remaining Trustee and no designated Successor Trustee, that remaining Trustee shall have absolute and discretionary power to appoint a Co-Trustee or Successor Trustee from among the adult and legally competent descendants of the Settlor, or from among the adult and legally competent spouses of such descendants. If, in the opinion of the Trustee, there is no individual qualified for such appointment, said Trustee may select a bank trust department to act as Co-Trustee of a Successor Trustee.

F. ACCOUNTABILITY RESPECTING SUCCESSION: No Successor Trustee shall bear responsibility for acts or omissions of any prior Trustee or have a duty to audit the accounts or activities of such Trustee unless requested to do so by the Settlor or, upon the Settlor's death, a person or persons having at least a Thirty Percent (30%) beneficial interest in the Trust estate. Such request for audit or any claim against a previous Trustee must be made in writing within one (1) year after the Successor Trustee takes office. In the event of discovery of any wrongdoing, the existing

IN WITNESS WHEREOF:

I, Settlor, having read the provisions of this Trust Abstract, approve same as being correct and understood the provisions herein, state that it is my intent to enter into this Trust agreement as written.

THEREFORE, the provisions of this Trust agreement shall bind the undersigned Settlor, and the undersigned Co-Trustee, as well as any Successor Trustees assuming the role of Trustee hereunder, and all beneficiaries of this Trust and their successors and assigns.

Dated and Signed at PEARRIS CA., this _____ day of FEB 20 2002, 20_____.

SETTLOR:

TRUSTEE:

Elva S. Turley
ELVA S. TURLEY

Elva S. Turley
ELVA S. TURLEY

NOTARY PUBLIC
STATE OF CALIFORNIA

COUNTY OF RIVERSIDE)
)ss.
)

On FEB 20 2002 before me MATTHEW MORRISON, personally appeared ELVA S. TURLEY personally known to me (or proved to me on the basis of satisfactory evidence) to be person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal:

[Signature]
Signature



(this area for official notarial stamp)

SCHEDULE "A"
Incorporated by reference into the following
Revocable Living Trust

THE ELVA S. TURLEY LIVING TRUST,

Dated: DECEMBER 13, 1994

The undersigned Settlor(s) herein confirm(s) that the following property is conveyed and transferred to the above-named Revocable Living Trust, as of the date given.

1. REAL ESTATE

- a) 496 WEST 4TH STREET PERRIS, CALIFORNIA 92570
APN #: 313142022-6
- b) LOTS 9, 10, 11 & 12, BLK 1 SITUATED IN THE CITY OF PERRIS, STATE OF CA
APN #: 313142001-7
- c) LOT 8, BLK 1 SITUATED IN THE CITY OF PERRIS, STATE OF CALIFORNIA
APN #: 313142002-8
- d)

2. BANK & SAVINGS ACCOUNTS

- a) VALLEY BANK
211 EAST 4TH STREET PERRIS, CALIFORNIA 92570
Account Number: CHECKING
- b) WELLS FARGO BANK
P.O. BOX 6995 PORTLAND, OREGON 97228
Account Number: INTEREST BEARING
- c) WELLS FARGO BANK
P.O. BOX 6995 PORTLAND, OREGON 97228
Account Number: - INTEREST BEARING
- d)
Account Number: