

FORM APPROVED COUNTY COUNSEL
 BY: *[Signature]* 8/12/15
 GREGORY P. PRIAMOS DATE

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

255A



**SUBMITTAL DATE:
 AUG 12 2015**

FROM: Don Kent, Treasurer-Tax Collector

SUBJECT: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 196, Item 309. Last assessed to: Hazel M. Skinner, a single woman, and Kathleen E. Ford, an unmarried woman, as joint tenants with right of survivorship. District 3 [\$30,526] Fund 65595 Excess Proceeds from Tax Sale.

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve the claim from Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford, last assessee for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 442375013-1;

(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 April 29, 2013 public auction sale. The deed conveying title to the purchasers at the auction was recorded June 20, 2013. Further, as required by Section 4676 of the California Revenue and Taxation Code, notice of the right to claim excess proceeds was given on July 17, 2013 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)

[Signature]

Don Kent
 Treasurer-Tax Collector

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 30,526	\$ 0	\$ 30,526	\$ 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: *[Signature]* 9/10/15
 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: 3

Agenda Number:

9-43

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

FORM 11: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 196, Item 309. Last assessed to: Hazel M. Skinner, a single woman, and Kathleen E. Ford, an unmarried woman, as joint tenants with right of survivorship. District 3 [\$30,526] Fund 65595 Excess Proceeds from Tax Sale.

DATE: AUG 12 2015

PAGE: Page 2 of 2

RECOMMENDED MOTION:

2. Authorize and direct the Auditor-Controller to issue a warrant to Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford in the amount of \$30,526.78, 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 Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford based on an Assignment of Right to Collect Excess Proceeds dated June 11, 2013, a Grant Deed recorded August 21, 2000 as Instrument No. 2000-327677 and the death certificate of Hazel Mae Skinner.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford be awarded excess proceeds in the amount of \$30,526.78. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimant by certified mail.

Impact on Citizens and Businesses

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

ATTACHMENTS (if needed, in this order):

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



CLAIM SUMMARY

Date: June 20, 2013
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 442375013-1
Last Assessee: SKINNER HAZEL M FORD KATHLEEN E
Sale Date: 4/25/2013
Item Number: 309

Dear Treasurer/Tax Collector:

1. Claimant(s): Global Discoveries, Ltd.

The following proof of claim(s) for excess proceeds and documents are attached:

1. Grant Deed granting interest to Hazel M. Skinner, a single woman, and Kathleen E. Ford, an unmarried woman, as Joint Tenants with right of survivorship as Document Number: 2000-327677, Recorded in Riverside County on 08/21/2000.
2. Certified Certificate of Death for Hazel M. Skinner
3. Marriage Certificate referencing Kathleen E. Ford marries Edward L. Casey.
4. Declaration of one and the Same Person
5. Assignment of Rights To Collect Excess Proceeds signed by Kathleen Ford Casey f.k.a. Kathleen E. Ford
6. Claim form(s) signed by Global Discoveries
7. Photo ID(s) for Assignor: Kathleen Ford Casey f.k.a. Kathleen E. Ford

Upon approval, claimant(s) request that the Treasurer and Tax Collector issue its warrant(s) as follows:

- One warrant in the amount of \$31,023.00 or 100% of the claimant's share of the excess proceeds made payable to Global Discoveries, Ltd. and mailed to P.O. Box 1748, Modesto, California 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Chief Operating Officer, at (209) 593-3913, or e-mail to jed@globaldiscoveries.com.

The Client(s) and the staff of Global Discoveries, Ltd., thank you in advance for your timely review and approval of the attached claim(s).

Certified Tracking Number: 7012-3460-0001-6556-2101



RECORDING REQUESTED BY)
AND WHEN RECORDED MAIL TO:)

Hazel M. Skinner)
1351 Cabrillo Drive)
Hemet, CA 92543)

MAIL TAX STATEMENTS TO:)
SAME AS ABOVE)

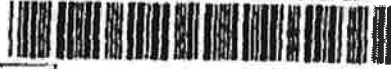
DOC # 2000-327677

05/21/2000 05:00A Fee:0.00

Page 1 of 1

Recorded in Official Records
County of Riverside

Dary L. Orso
Assessor, County Clerk & Recorder



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APN: 443-378-013-1

GRANT DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

HAZEL M. SKINNER, a single woman

hereby GRANT(s) to
HAZEL M. SKINNER, a single woman, and KATHLEEN E. FORD, an unmarried woman, as joint tenants
with right of survivorship

the real property in the City of Hemet, County of Riverside, State of California described as:

Lot 65 of SIERRA DAWN NORTH in Tract No. 6500-2, as shown by Map on file in Book 87, pages 46, 47
and 48 of Maps, Records of Riverside County, CA.

ASSESSOR'S PARCEL NUMBER 443-375-013-1

Dated: 1/21/00

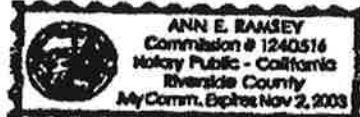
Hazel M. Skinner
HAZEL M. SKINNER

STATE OF CALIFORNIA)
COUNTY OF RIVERSIDE)

On January 21, 2000 before me, ANN E. RAMSEY, a Notary Public, personally appeared HAZEL M. SKINNER, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is subscribed to the within instrument and acknowledged to me that he (or she) executed the same in his her authorized capacity(ies), and that by his (or her) 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 Ann E. Ramsey
APN # 442-375-013-1



mmr-0000-

8 21 00

THIS MICROFILM COPY-RIGHTED
1997 BY SECURITY UNION TITLE
INSURANCE COMPANY
MICROGRAPHICS DIVISION

RIVERSIDE

ASSIGNMENT OF RIGHT TO COLLECT EXCESS PROCEEDS

To expedite processing of this claim, we would strongly suggest you use this form. For this form to be valid it must be completed in its entirety and documentation establishing the assignor as a "party of interest" must be provided at the time this document is filed with the Treasurer-Tax Collector. PLEASE SEE REVERSE SIDE OF THIS DOCUMENT FOR FURTHER INSTRUCTIONS.

As a party of interest (defined in Section 4675 of the California Revenue and Taxation Code), I, the undersigned, do hereby assign to GLOBAL DISCOVERIES, LTD. my right to apply for and collect the excess proceeds which you are holding and to which I am entitled from the sale of assessment number 442375013-1, Tax Sale Number , Item 309 sold at public auction on 4/25/2013 . I understand that the total of excess proceeds available for refund is \$ 31,023.00+/- , and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VALUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

Kathleen Ford Casey 6-11-2013
(Signature of Party of Interest/Assignor) (Date)

Kathleen Ford Casey f.k.a. Kathleen E. Ford
(Name Printed)

Tax ID/SS#

27140 Sesame Street

(Address)

Hemet, CA 92544-8803

(City/State/Zip)

STATE OF CALIFORNIA)
COUNTY OF Riverside) ss.

951 652-9215

(Area Code/Telephone Number)

On June 11, 2013, before me, the undersigned, a Notary Public in and for said State, personally appeared Noelle A. Livingston Kathleen Ford Casey Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to 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. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

Noelle A. Livingston
(Signature of Notary)

(This area for official seal)

I, the undersigned, certify under penalty of perjury that I have disclosed to the party of interest (assignor), pursuant to Section 4675 of the California Revenue and Taxation Code, all facts of which I am aware relating to the value of the right he is assigning, that I have disclosed to him the full amount of excess proceeds available, and that I HAVE ADVISED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN WITHOUT ASSIGNING THAT RIGHT.

Jed Byerly
(Signature of Assignee)

Jed Byerly, Chief Operating Officer
(Name Printed)

Tax ID/SS#

Global Discoveries, Ltd.

(Address)

STATE OF CALIFORNIA)
COUNTY OF Stanislaus) ss.

P.O. Box 1748 Modesto, California 95353-1748

(City/State/Zip)

Phone: (209) 593-3913

On See Attached, before me, the undersigned, a Notary Public in and for said State, personally appeared ***Jed Byerly*** who 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 the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal

(Signature of Notary)

(This area for official seal)

117-174 (3/85) (Ret-Perm)



CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

State of California

County of Stanislaus

On 6-17-13 before me, Cindy M. Shephard Notary Public, personally appeared
(Date) Jed Byerly (here insert name and title of the officer)

Jed Byerly, who 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 the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Cindy M. Shephard (seal)



(Optional)

Description of Attached Document

Title or Type of Document: Assignment of Right to Collect

Document Date: 6-27-13 Number of Pages: 1

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052000 | 4 | 236

CERTIFICATE OF DEATH

3200033007185

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY. NO ERASURES, WHITEOUTS OR ALTERATIONS VB-11 (REV. 1/00)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) HAZEL		2. MIDDLE MAE		3. LAST (FAMILY) SKINNER			
4. DATE OF BIRTH—M/M/DD/CCYY 12/17/1918		5. AGE YRS. 81		6. SEX F		7. DATE OF DEATH—M/M/DD/CCYY 08/15/2000	
8. STATE OF BIRTH MI		10. SOCIAL SECURITY NO.		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		12. MARITAL STATUS NEVER MARRIED	
14. RACE WHITE		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER WOOLWORTHS		13. EDUCATION—YEARS COMPLETED 13	
17. OCCUPATION BOOKKEEPER		18. KIND OF BUSINESS BOOKKEEPING		19. YEARS IN OCCUPATION 50			
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) 1351 CABRILLO DRIVE							
21. CITY HEMET		22. COUNTY RIVERSIDE		23. ZIP CODE 92543		24. PAR IN COUNTY 6	
25. STATE OR FOREIGN COUNTRY CA		28. NAME, RELATIONSHIP KATHLEEN FORD / FRIEND					
26. NAME OF SURVIVING SPOUSE—FIRST		29. MIDDLE		27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 1351 CABRILLO DRIVE, HEMET, CA 92543			
31. NAME OF FATHER—FIRST CAREY		32. MIDDLE		30. LAST (MAIDEN) SKINNER		34. BIRTH STATE NV	
35. NAME OF MOTHER—FIRST LILLIE		36. MIDDLE		37. LAST (MAIDEN) TANNER		38. BIRTH STATE WV	
39. DATE M/M/DD/CCYY 08/21/2000		40. PLACE OF FINAL RESIDENCE AT SEA OFF THE COAST OF SAN DIEGO COUNTY					
41. TYPE OF DISPOSITION(S) CR/SEA		42. SIGNATURE OF REGISTRAR				43. LICENSE NO.	
44. NAME OF FUNERAL DIRECTOR NEPTUNE SOCIETY RIVERSIDE		45. SIGNATURE (E.G. SIGNATURE OR LOCAL REGISTRATION NO.)				47. DATE M/M/DD/CCYY 08/21/2000	
101. PLACE OF DEATH HEMET VALLEY MEDICAL CTR		102. HOSPITAL SPECIFY ONE <input checked="" type="checkbox"/> IP <input type="checkbox"/> ERAS <input type="checkbox"/> ODA <input type="checkbox"/> HOME <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER		103. FACILITY OTHER THAN HOSPITAL		104. COUNTY RIVERSIDE	
105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) 1117 EAST DEWINSKIRE AVENUE		106. CITY HEMET					
107. DEATH WAS CAUSED BY (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)							
IMMEDIATE CAUSE (A) CARDIOPULMONARY ARREST		DUE TO (B) AURICULAR FIBRILLATION		DUE TO (C) CONGESTIVE HEART FAILURE		DUE TO (D)	
TIME INTERVAL BETWEEN ONSET AND DEATH MINUTES		YEARS		YEARS		108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER	
109. SIGNS PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 SEVERE RENAL FAILURE, PERIPHERAL VASCULAR DISEASE							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. PACE MAKER PLACEMENT 08/11/2000							
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSE STATED. OCCIDENT—ATTENDED SINCE DECEASED LAST SEEN ALIVE M/M/DD/CCYY M/M/DD/CCYY 05/18/1999 08/15/2000		115. SIGNATURE AND TITLE OF CERTIFIER		116. LICENSE NO. A062197		117. DATE M/M/DD/CCYY 8/17/00	
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP HEDIA ASHRAF MD., 2390 EAST FLORIDA AVE., HEMET, CA 92544		120. INJURY AT WORK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		121. INJURY DATE M/M/DD/CCYY		122. HOUR	
123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)					
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		125. LOCATION—(STREET AND NUMBER OR LOCATION AND CITY, ZIP)					
126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE M/M/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER			
STATE REGISTRAR		A 1 B X C 2 D E F G H		PAR AUTH. # 852036		CENSUS TRACT	

* 034296363 *

CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF RIVERSIDE

This is a true and exact reproduction of the document officially registered and placed on file in the office of the County of Riverside, Assessor-County Clerk-Recorder.

DATE ISSUED

MAY 3 2003

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

LARRY W. WARD
ASSASSOR-COUNTY CLERK-RECORDER
RIVERSIDE COUNTY, CALIFORNIA

PINCO 0810 2002



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

LICENSE AND CERTIFICATE OF MARRIAGE

MUST BE LEGIBLE - MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS
USE DARK INK ONLY

4201033006667

LOCAL REGISTRATION NUMBER

STATE FILE NUMBER				LOCAL REGISTRATION NUMBER		4201033006667	
FIRST PERSON DATA <input type="checkbox"/> Common <input type="checkbox"/> Bride	1A. FIRST NAME	KATHLEEN		1B. MIDDLE	ELLEN		
	1C. CURRENT LAST	FORD		1D. LAST NAME AT BIRTH (IF DIFFERENT THAN 1C)	BROWN		
	2. DATE OF BIRTH (MM/DD/CCYY)	04/14/1943	3. STATE/COUNTRY OF BIRTH	CA	4. #PREV. MARRIAGES/SROP	03	5A. LAST MARRIAGE/SROP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SROP <input type="checkbox"/> NA
	5B. DATE ENDED (MM/DD/CCYY)	10/01/1991		6. ADDRESS	27140 SESAME ST		7. CITY
	HEMET		8. STATE/COUNTRY	CA		9. ZIP CODE	92544
SECOND PERSON DATA <input type="checkbox"/> Common <input type="checkbox"/> Bride	10A. FULL BIRTH NAME OF FATHER/PARENT	HENRY JOHN BROWN		10B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)	NJ		
	11A. FULL BIRTH NAME OF MOTHER/PARENT	ARLINE MAE RENGLER		11B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)	NE		
	12A. FIRST NAME	EDWARD		12B. MIDDLE	LEMOYNE		
	12C. CURRENT LAST	CASEY		12D. LAST NAME AT BIRTH (IF DIFFERENT THAN 12C)			
	13. DATE OF BIRTH (MM/DD/CCYY)	06/05/1936	14. STATE/COUNTRY OF BIRTH	AR	15. #PREV. MARRIAGES/SROP	01	16A. LAST MARRIAGE/SROP ENDED BY: <input type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SROP <input type="checkbox"/> NA
16B. DATE ENDED (MM/DD/CCYY)	03/25/2007		17. ADDRESS	27140 SESAME ST		18. CITY	
HEMET		19. STATE/COUNTRY	CA		20. ZIP CODE	92544	
AFFIDAVIT	21A. FULL BIRTH NAME OF FATHER/PARENT	ALFRED LOIS CASEY		21B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)	AR		
	22A. FULL BIRTH NAME OF MOTHER/PARENT	LILLIAN HELEN RITTER		22B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)	KS		
	23. SIGNATURE OF PERSON LISTED IN FIELDS 1A-1D <i>Kathleen Ellen Ford</i>						
LICENSE TO MARRY	24. SIGNATURE OF PERSON LISTED IN FIELDS 12A-12D <i>Edward Lemoyne</i>			WE, THE UNDERSIGNED DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT WE ARE UNMARRIED AND THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF. WE FURTHER DECLARE THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR TO THE ISSUANCE OF A LICENSE IS KNOWN TO US. WE ACKNOWLEDGE RECEIPT OF THE INFORMATION REQUIRED BY FAMILY CODE SECTION 358 AND HEREBY APPLY FOR A LICENSE AND CERTIFICATE OF MARRIAGE.			
	25. THE UNDERSIGNED DO HEREBY CERTIFY THAT THE ABOVE-NAMED PARTIES TO BE MARRIED HAVE PERSONALLY APPEARED BEFORE ME OR THE PERSON PERFORMING THE CEREMONY HAS PERSONALLY APPEARED BEFORE ME AND PRESENTED AN AFFIDAVIT SIGNED BY THE PARTIES TO BE MARRIED DECLARING THAT ONE OR BOTH OF THE PARTIES ARE PHYSICALLY UNABLE TO APPEAR AND EXPLAINING THE REASONS THEREFOR IN ACCORDANCE WITH FAMILY CODE SECTION 498. THE PARTIES PROVIDED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSONS CLAIMED, HAVE DECLARED THAT THEY MEET ALL OF THE REQUIREMENTS OF THE LAW, AND HAVE PAID THE FEE PRESCRIBED BY LAW. AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF CALIFORNIA TO SOLEMNIZE THE MARRIAGE OF THE ABOVE-NAMED PERSONS. REQUIRED CONSENTS AND AFFIDAVITS FOR THE ISSUANCE OF THIS LICENSE ARE ON FILE.						
	25A. ISSUE DATE (MM/DD/CCYY)	08/11/2010	25B. EXPIRES AFTER (MM/DD/CCYY)	11/08/2010	25C. NAME OF COUNTY CLERK	LARRY W. WARD	
	25D. SIGNATURE OF CLERK OR DEPUTY CLERK	By <i>Larry W. Ward</i>					
	25E. MARRIAGE LICENSE NUMBER	R-41033004561	25F. COUNTY OF ISSUE	RIVERSIDE	25G. RETURN COMPLETED MARRIAGE LICENSE TO (INCLUDE ADDRESS): P.O. BOX 751, RIVERSIDE, CA 92502		
WITNESSES (ONE REQUIRED, NO MORE THAN TWO ALLOWED)	26A. SIGNATURE OF WITNESS	<i>Jennifer M. Swanger</i>		26B. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY)			
	26C. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE			1351 Cabrillo dr. Hemet CA 92543			
	27A. SIGNATURE OF WITNESS	<i>Janet C. Flores</i>		27B. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY)			
27C. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE							
10026 Orange St. Alta Loma CA 91737							
CERTIFICATION OF PERSON SOLEMNIZING MARRIAGE	I, THE UNDERSIGNED, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA, THAT THE ABOVE-NAMED PARTIES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF CALIFORNIA. NOTE: THE MARRIAGE CEREMONY MUST TAKE PLACE IN THE STATE OF CALIFORNIA.						
	28A. DATE OF MARRIAGE (MM/DD/CCYY)	09-08-2010		28B. CITY/TOWN OR MARRIAGE	HEMET		28C. COUNTY OF MARRIAGE
	28D. SIGNATURE OF PERSON SOLEMNIZING MARRIAGE		<i>Marda-Ruth F. Roberts</i>		28E. RELIGIOUS DENOMINATION (IF CLERGY)		
	28F. NAME OF PERSON SOLEMNIZING MARRIAGE (TYPE OR PRINT CLEARLY)			LUTHERAN - ELCA			
	28G. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE			28D. OFFICIAL TITLE			
28H. PASTOR							
NEW NAMES (IF ANY)	28I. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE						
	27340 BIG SPRINGS RANCH RD. HEMET, CA 92544						
	30A. FIRST - MUST BE SAME AS 1A	KATHLEEN	30B. MIDDLE	FORD	30C. LAST	CASEY	
NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 12A-12D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE REVERSE FOR INFORMATION)							
31A. FIRST - MUST BE SAME AS 12A	---	31B. MIDDLE	---	31C. LAST	---		
LOCAL REGISTRAR	32A. NAME OF LOCAL REGISTRAR			32B. SIGNATURE OF CLERK OR DEPUTY CLERK		32C. DATE ACCEPTED FOR REGISTRATION	
	LARRY W. WARD			By <i>Larry W. Ward</i>		SEP 29 2010	

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS

V8-117 (01/01/2010)



034078466

CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, COUNTY OF RIVERSIDE

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

OCT 25 2010

DATE ISSUED

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



Larry W. Ward
ASSASSOR-COUNTY CLERK-RECORDER
RIVERSIDE COUNTY, CALIFORNIA



DECLARATION
OF ONE AND THE SAME PERSON

I, Kathleen Ford Casey f.k.a. Kathleen E. Ford, do hereby declare:

1. I am over the age of 18 and a resident of Hemet, CA. The facts set forth herein are true of my own personal knowledge. If called to testify as a witness in a judicial proceeding, I could, and would, testify truthfully and competently thereto.
2. I am one and the same person who was formerly known as Kathleen ELLEN Ford, Kathleen E. Ford and Kathleen Ford.
3. I am one and the same person as Kathleen Ford Casey, Kathleen F. Casey and Kathleen Casey.
4. I am one and the same person who was mentioned on the referenced Grant Deed as Document Number: 2000-327677, Recorded in Riverside County on 08/21/2000.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 442375013-1 on 6-11-13.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 11 day of JUNE, 2013, at HEMET, CALIFORNIA

x Kathleen Ford Casey
Kathleen Ford Casey f.k.a. Kathleen E. Ford

JURAT

State of California

County of Riverside

Subscribed and sworn to (or affirmed) before me on this

11 day of June, 2013, by
Date Month Year
Kathleen Ford Casey
Name of Signer

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.



Signature Noelle A Livingston
Signature of Notary Public

(Place Notary Seal Above)

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 442375013-1
Item Number: 309
Date of Sale: 4/25/2013

The undersigned claimant, Global Discoveries, Ltd., claims \$31,023.00+/- or 100% of the claimant's share of the actual amount of excess proceeds from the sale of the property referenced above.

Global Discoveries, Ltd., claims its status as a party of interest pursuant to Section 4675 of the California Revenue and Taxation Code based upon the attached documentation:

Please refer to Claim Summary and attached Documents

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed this 25th day of JUNE, 2013 at Modesto, California.

By: [Signature]
Jed Byerly Chief Operating Officer
Global Discoveries, Ltd. Tax ID #
P.O. Box 1748
Modesto, CA 95353-1748
(209) 593-3913

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

State of California)

County of Stanislaus)

On 6-27-13 before me, Cindy Shepard, Notary Public personally appeared
(Date) (here insert name and title of the officer)

Jed Byerly, who 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 the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.
[Signature] (seal)
Signature of Notary Public

