

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



**FROM:** Don Kent, Treasurer-Tax Collector

**SUBMITTAL DATE:**  
**APR 13 2016**

**SUBJECT:** Recommendation for Distribution of Excess Proceeds for Tax Sale No. 197, Item 127. Last assessed to: James D. Tielens. District 3 [\$47,950] Fund 65595 Excess Proceeds from Tax Sale.

**RECOMMENDED MOTION:** That the Board of Supervisors:

1. Approve the claim from Global Discoveries, Ltd., assignee for James R. Tielens, heir to the Estate of James D. Tielens, last assessee for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 446251047-7;

(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 August 20, 2013 public auction sale. The deed conveying title to the purchasers at the auction was recorded October 2, 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 October 30, 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)

*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	\$ 47,950	\$ 0	\$ 47,950	\$ 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*  
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:

**9-11**

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

**FORM 11:** Recommendation for Distribution of Excess Proceeds for Tax Sale No. 197, Item 127. Last assessed to: James D. Tielens. District 3 [\$47,950] Fund 65595 Excess Proceeds from Tax Sale.

**DATE:** APR 13 2016

**PAGE:** Page 2 of 2

**RECOMMENDED MOTION:**

2. Approve the claim from Robert Weekes, agent for Jason D. Tielens, heir to the Estate of James D. Tielens, last assessee for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 446251047-7;
3. Deny the claim from Robert Weekes, agent for James R. Tielens, heir to the Estate of James D. Tielens;
4. Deny the claim from Global Discoveries, Ltd., assignee for Jason Tielens, heir to the Estate of James D. Tielens;
5. Authorize and direct the Auditor-Controller to issue warrants to Global Discoveries, Ltd., assignee for James R. Tielens, heir to the Estate of James D. Tielens in the amount of \$23,975.49 and Robert Weekes, agent for Jason D. Tielens, heir to the Estate of James D. Tielens in the amount of \$23,975.48, 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 four claims for excess proceeds:

1. Claim from Global Discoveries, Ltd., assignee for James R. Tielens, heir to the Estate of James D. Tielens based on an Assignment of Right to Collect Excess Proceeds dated September 26, 2014, a Judgment on Waiver of Accounting recorded June 23, 2009 as Instrument No. 2009-0318990, an Affidavit for Collection of Personal Property and a death certificate for James Dean Tielens.
2. Claim from Robert Weekes, agent for Jason D. Tielens, heir to the Estate of James D. Tielens based on an Authorization for Agent to Collect Excess Proceeds dated September 4, 2013, a Judgment on Waiver of Accounting recorded June 23, 2009 as Instrument No. 2009-0318990, an Affidavit for Collection of Personal Property and a death certificate for James Dean Tielens.
3. Claim from Robert Weekes, agent for James R. Tielens, heir to the Estate of James D. Tielens based on a Contingency Agreement dated September 26, 2013, an Authorization for Agent to Collect Excess Proceeds dated October 4, 2014, a Judgment on Waiver of Accounting recorded June 23, 2009 as Instrument No. 2009-0318990, an Affidavit under California Probate Code Section 13101, a death certificate for James Dean Tielens and a Claim Withdrawal dated December 30, 2015.
4. Claim from Global Discoveries, Ltd., assignee for Jason Tielens, heir to the Estate of James D. Tielens based on an Assignment of Right to Collect Excess Proceeds dated September 21, 2014, a Judgment on Waiver of Accounting recorded June 23, 2009 as Instrument No. 2009-0318990, an Affidavit for Collection of Personal Property, a death certificate for James Dean Tielens and a Claim Withdrawal dated January 5, 2016.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Global Discoveries, Ltd., assignee for James R. Tielens, heir to the Estate of James D. Tielens be awarded excess proceeds in the amount of \$23,975.49 and Robert Weekes, agent for Jason D. Tielens, heir to the Estate of James D. Tielens be awarded excess proceeds in the amount of \$23,975.48. The claim from Robert Weekes, agent for James R. Tielens, heir to the Estate of James D. Tielens be denied since they withdrew their claim December 30, 2015. The claim from Global Discoveries, Ltd., assignee for Jason Tielens, heir to the Estate of James D. Tielens be denied since they withdrew their claim January 5, 2016. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimants by certified mail.

**Impact on Citizens and Businesses**

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

**ATTACHMENTS (if needed, in this order):**

Copies of the Excess Proceeds Claim forms and supporting documentation are attached.

**CLAIM SUMMARY**

Date: September 29, 2014

To: Riverside County Treasurer and Tax Collector

Assessors Parcel Number: 446251047-7

Last Assessee: TIELENS JAMES D

Sale Date: 8/15/2013

TC: TC 197

Item Number: 317 127

Deadline: 10/2/2014

Dear Treasurer/Tax Collector:

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

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

1. Explanation of Events
2. Judgment on Waiver of Accounting for the Estate of Maurice A. Tielens granting above property 100% interest to James D. Tielens as Document Number: 2009-0318990, Recorded in Riverside County on 06/23/2009.
3. Certified Certificate of Death for James D. Tielens
4. Original Probate Affidavit for the Estate of James D. Tielens signed by Two Heirs/Successors; James R. Tielens and Jason Tielens.
5. Certified Certificate of Birth for James R. Tielens
6. Original Billing Statement referencing the **566 E. Johnston Ave Hemet, CA 92543** address; which is one and the same address as the above referenced parcel.
7. Declaration of one and The Same Person
8. Assignment of Rights To Collect Excess Proceeds signed by James R. Tielens, as heir to the Estate of James D. Tielens
9. Claim form(s) signed by Global Discoveries
10. Photo ID for Assignor: James R. Tielens

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

- One warrant in the amount of \$23,975.49 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, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.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: 7014-0510-0001-4046-2250**

# 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 446251047-7, Tax Sale Number TC 197, Item 317 sold at public auction on 8/15/2013. I understand that the total of excess proceeds available for refund is \$ 47,950.97+/-, 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.

[Signature] 9/26/14  
(Signature of Party of Interest/Assignor) (Date)

Tax ID/SS# \_\_\_\_\_

James R. Tielens, as heir to the Estate of James D. Tielens

(Name Printed)

29290 Girard

(Address)

Hemet Ca 92544

(City/State/Zip)

95-287-8976

(Area Code/Telephone Number)

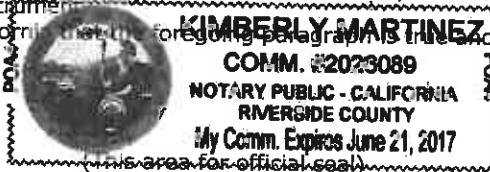
STATE OF CALIFORNIA Riverside ) ss.

On 09/26/2014, before me Kimberly Martinez, Notary Public personally appeared James R. Tielens 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.

[Signature]  
(Signature of Notary)



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.

[Signature]  
(Signature of Assignee)

Jed Byerly, Managing Member

(Name Printed)

Tax ID/SS# \_\_\_\_\_

Global Discoveries Ltd.

(Address)

STATE OF CALIFORNIA ) ss.  
COUNTY OF Stanislaus )

P.O. Box 1748

Modesto, CA 95353-1748

(City/State/Zip)

On 9-30-2014, before me Michelle Reynosa, Notary Public 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]  
(Signature of Notary)



(This area for official seal)

**Explanation of Events**  
**For Property: 566 JOHNSTON AVE E HEMET, CA 92543**  
**{446251047-7}**

- James D. Tielens was the record owner of the above property Per Judgment on Waiver for the Estate of Maurice A. Tielens Recorded on June 23, 2009.
  
- James D. Tielens died on May 26, 2013. He died with No Surviving Spouse, No Last Will and Testament nor was his Estate ever probated in the State of California.
  
- James D. Tielens left two biological children; James Robert Tielens and Jason Dean Tielens.

**\*\*\*\*Therefore, due to the above James Robert Tielens and Jason Dean Tielens are both entitled to collect 50% and/or \$23,975.48+- of the excess proceeds available for the above referenced property. \*\*\*\***

DOC # 2009-0318990

06/23/2009 08:00A Fee:24.00

Page 1 of 6

Recorded in Official Records

County of Riverside

Larry W. Ward

Assessor, County Clerk & Recorder



**RECORDING REQUESTED BY:**

JAMES T. YBARRONDO

**WHEN RECORDED RETURN TO:**

JAMES T. YBARRONDO  
901 E. Morton Place, Suite 1  
Hemet, California 92543

S	R	U	PAGE	SIZE	DA	MISC	LONG	RFD	COPY
			6						
M	A	L	465	426	PCOR	NCOR	SMF	NCHG	EXAM
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25



JUDGMENT ON WAIVER OF ACCOUNTING

Public Record

APR 10 2009

JUN 3 2009

1 JAMES T. YBARRONDO, ESQ.  
2 ATTORNEY AT LAW  
3 901 EAST MORTON PLACE, SUITE 1  
4 HEMET, CALIFORNIA 92543  
5 (951) 925-6666

(Bar No: 58706)

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF RIVERSIDE

JUN 02 2009

ATTORNEYS FOR: Executor

K. Gutknecht *KG*

7 SUPERIOR COURT OF THE STATE OF CALIFORNIA  
8 IN AND FOR THE COUNTY OF RIVERSIDE  
9

10			
11	Estate of	)	CASE NO. HEP000663
12	MAURICE A. TIELENS,	)	JUDGMENT ON WAIVER
13	Decedent.	)	OF ACCOUNTING, ALLOWING
14		)	STATUTORY FEES AND FOR
		)	FINAL DISTRIBUTION

15 JAMES D. TIELENS, as Executor of the Will of MAURICE A.  
16 TIELENS, deceased, having heretofore filed his waiver of account  
17 and petition for final distribution, and the petition being  
18 regularly scheduled for hearing on 4/2, 2009, the Court  
19 finds:

20 Due notice of the hearing of the petition has been  
21 regularly given as required by law.

22 All the allegations of the petition are true.

23 MAURICE A. TIELENS died testate on December 2, 2006, in  
24 the City of Hemet, County of Riverside, State of California, being  
25 at the time of his death a resident thereof.

26 On February 6, 2007, JAMES D. TIELENS was appointed  
27 Executor of the decedent's Will. He qualified as the Executor on  
28 that date, and ever since has been and now is the Executor of the

*DW?*  
Judgment/ Waiver

1

Public Record

1 decedent's Will.

2           The time for filing or presenting claims has expired and  
3 the estate now is in a condition to be closed.

4           All debts of the decedent and of the estate and all  
5 expenses of administration thereof, except closing expenses and  
6 attorneys' fees, have been paid.

7           All personal property taxes due and payable by this  
8 estate have been paid.

9           No federal estate tax return has been made or filed for  
10 this estate for the reason that the estate was not sufficient to  
11 require such a return, and no federal estate tax is due.

12           No California state or federal income taxes are due or  
13 payable by this estate.

14           The estimated expenses of closing this estate, including  
15 the reserve for payment of any tax deficiency which may be assessed  
16 against the estate, are \$1,000.00, and the Executor should be  
17 authorized to withhold that sum from distribution.

18           The Executor should be directed to pay to his attorneys,  
19 LAW OFFICES OF JAMES T. YBARRONDO, the sum hereafter specified as  
20 their statutory fee for their services rendered in the  
21 administration of this estate.

22           All the assets of the estate are the separate property of  
23 the decedent.

24           Distribution should be ordered as prayed for.

25           IT IS ORDERED AND ADJUDGED that:

26           1. The administration of the estate is brought to a  
27 close without the requirement of an accounting.

28           2. All the acts and transactions of the Executor

Judgment/ Waiver

2



1 relating to the matters set forth in the petition are ratified,  
2 confirmed, and approved.

3 3. The Executor is authorized and directed to retain the  
4 sum of \$1,000.00 from distribution at this time to defray closing  
5 expenses and as a reserve for any tax deficiency which may  
6 hereafter be determined to be due, and any unexpended portion of  
7 said reserve is hereby distributed as set forth in paragraph 5  
8 below.

9 4. The Executor is directed to pay to his attorneys, LAW  
10 OFFICES OF JAMES T. YBARRONDO, the sum of ~~\$9,811.13~~ <sup>\$9,630.02</sup> as their  
11 statutory fees for their services rendered in the administration of  
12 this estate.

13 5. The estate in the possession of the Executor  
14 remaining for distribution, after the payments and withholding  
15 herein ordered in Paragraphs 3 and 4 above, consists of cash and  
16 other assets and is distributed as follows:

17 TO JAMES D. TIELENS:

18 Cassini Promissory Note  
19 Secured by property located at:  
31812 Highway 74, Hemet

\$ 30,277.04

20 Home and Real Property located at:  
21 566 East Johnston Avenue  
Hemet, CA 92543

22 Legally described as:  
23 Lot 3 in Block 195 of the Lands of the  
Hemet Land Company, as shown by Map on  
24 file in Book 1 Page 14 of Maps, Riverside  
County Records: Excepting therefrom the  
25 Westerly 208.7 feet of the North half of  
said Lot 3; also excepting therefrom that  
26 portion of said Lot 3 described as  
follows: Beginning at the Southwest  
27 corner; thence North on the West line of  
said Lot 3, 330 feet to the Northwest  
28 corner of the South half of said Lot 3;  
thence East on the North line of the South  
half of Lot 3, 233 feet; thence South,  
parallel with the West line of Lot 3, 97

Judgment/ Waiver

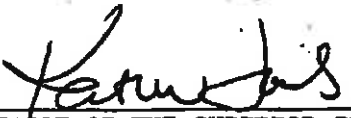
3

1 feet; thence West, parallel with the South  
2 line of Lot 3, 66 feet; thence South,  
3 parallel with the West line of Lot 3, 233  
4 feet to the South line of Lot 3; thence  
5 West, on the South line of Lot 3, 167 feet  
6 to the point of beginning; Also excepting  
7 therefrom an undivided one-half interest  
8 in all oil, gas, petroleum, naptha and  
9 other hydrocarbon substances and minerals  
10 in, upon or beneath the property herein  
11 described, together with right of entry  
12 and all other rights appurtenant thereto  
13 and rights of way and easements necessary  
14 to develop and remove same; also excepting  
15 therefrom any portion thereof included on  
16 Buena Vista Street and Johnston Avenue.  
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290,000.00  
2,000.00 ✓  
2,450.00 ✓  
3,175.00 ✓  
3,000.00 ✓  
104.56  
\$331,006.60

6. Any other property of the estate not now known or  
discovered which may belong to the estate, or in which the decedent  
or the estate may have any interest, shall be distributed as set  
forth above in paragraph 3.

DATED: 6/2/09

  
\_\_\_\_\_  
JUDGE OF THE SUPERIOR COURT  
Commissioner

Judgment/ Waiver

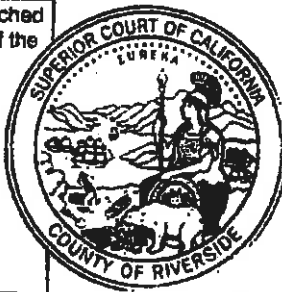
4

This must be in red to be a  
"CERTIFIED COPY"

Each document to which this certificate is attached  
is certified to be a full, true and correct copy of the  
original on file and of record in my office.

Superior Court of California  
County of Riverside

By Mary J. Martiny  
DEPUTY  
Dated: 6/16/09



Certification must be in red to be a  
"CERTIFIED COPY"

Public Record

# CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 446251047-7

Tax Sale Number: TC 197

Item Number: 317

Date of Sale: 8/15/2013

The undersigned claimant, Global Discoveries, Ltd., claims \$23,975.49+/- 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 30<sup>th</sup> day of September, 2014 at Modesto, California.

By: Jed Byerly  
Jed Byerly, Managing Member  
Global Discoveries Ltd. Tax ID #  
P.O. Box 1748  
Modesto, CA 95353-1748

## CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

State of California )

County of Stanislaus )

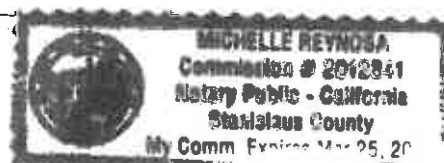
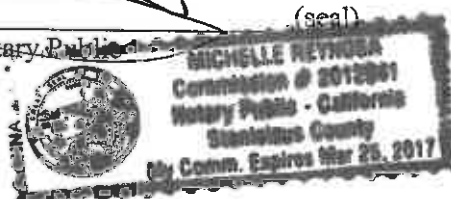
On 9-30-2014 before me, Michelle Reynosa, Notary Public, personally appeared  
(Date) (here insert name and title of the officer)  
Jed Byerly

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 of Notary Public



**COUNTY OF RIVERSIDE**  
**RIVERSIDE, CALIFORNIA**

# CERTIFICATE OF DEATH

3201333006035

STATELINE NUMBER

USE BLACK INK ONLY / PRINTED OR HANDWRITTEN OR ALTERATIONS  
VE-TAKEN 5008

LOCAL REGISTRATION NUMBER

1. NAME OF DECEDENT - FIRST (Given) <b>JAMES</b>		2. MIDDLE <b>DEAN</b>		3. LAST (Family) <b>TIELENS</b>	
4. DATE OF BIRTH mm/dd/yyyy <b>11/18/1955</b>				5. AGE Yrs. <b>57</b>	6. SEX <b>M</b>
7. DATE OF DEATH mm/dd/yyyy <b>05/26/2013</b>				8. HOUR (24 Hours) <b>1115</b>	9. MIN (60 Minutes) <b>00</b>
10. BIRTH STATE/FOREIGN COUNTRY <b>CA</b>		11. SOCIAL SECURITY NUMBER <b>[REDACTED]</b>		12. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
13. EDUCATION - Highest Level/Degree (see worksheet on back) <b>HS GRADUATE</b>		14/15. WAS DECEDENT A HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED <b>MOTORCYCLE BUILDER</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>TRANSPORTATION</b>		19. YEARS IN OCCUPATION <b>30</b>	
20. DECEDENT'S RESIDENCE (Street and number, or location) <b>566 EAST JOHNSTON AVENUE</b>					
21. CITY <b>HEMET</b>		22. COUNTY/PROVINCE <b>RIVERSIDE</b>		23. ZIP CODE <b>92543</b>	
24. YEARS IN COUNTRY <b>50</b>		25. STATE/FOREIGN COUNTRY <b>CA</b>		26. INFORMATION'S NAME, RELATIONSHIP <b>JASON TIELENS, SON</b>	
27. INFORMATION'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>29290 GIRARD STREET, HEMET, CA 92544</b>					
28. NAME OF SURVIVING SPOUSE/SPRP - First <b>[REDACTED]</b>					
29. NAME OF FATHER/PARENT - FIRST <b>MAURICE</b>					
30. NAME OF MOTHER/PARENT - FIRST <b>MARY</b>					
31. MIDDLE <b>ADRIAN</b>					
32. MIDDLE <b>TIELENS</b>					
33. NAME OF FATHER/PARENT - FIRST <b>MAURICE</b>					
34. NAME OF MOTHER/PARENT - FIRST <b>MARY</b>					
35. DATE OF BIRTH mm/dd/yyyy <b>08/04/2013</b>					
36. PLACE OF BIRTH (City, State and Country) <b>HEMET, CA</b>					
37. PLACE OF BIRTH (City, State and Country) <b>HEMET, CA</b>					
38. SIGNATURE OF CORONER <b>[REDACTED]</b>					
39. SIGNATURE OF LOCAL REGISTRAR <b>[REDACTED]</b>					
40. DATE mm/dd/yyyy <b>06/03/2013</b>					
41. PLACE OF DEATH <b>HEMET VALLEY MEDICAL CENTER</b>					
42. CITY <b>HEMET</b>					
43. COUNTY <b>RIVERSIDE</b>					
44. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1117 EAST DEVONSHIRE AVENUE</b>					
45. CAUSE OF DEATH <b>PULMONARY THROMBOEMBOLISM</b>					
46. IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>DEEP VEIN THROMBOSIS</b>					
47. MORBID OBESITY, HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, DIABETES MELLITUS					
48. HAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) <b>NO</b>					
49. SIGNATURE AND TITLE OF CORONER <b>[REDACTED]</b>					
50. LICENSE NUMBER <b>[REDACTED]</b>					
51. DATE mm/dd/yyyy <b>05/31/2013</b>					
52. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>[REDACTED]</b>					
53. TYPE NAME, TITLE OF CORONER, DEPUTY CORONER <b>RACHEL BAKER, DEPUTY CORONER</b>					
54. DATE mm/dd/yyyy <b>05/31/2013</b>					
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97. TYPE NAME, TITLE OF CORONER, DEPUTY CORONER <b>RACHEL BAKER, DEPUTY CORONER</b>					
98. DATE mm/dd/yyyy <b>05/31/2013</b>					

1000

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**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

SEP 17 2014

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

LARRY W. WARD  
ASSESSOR-COUNTY CLERK-RECORDER  
RIVERSIDE COUNTY CALIFORNIA

PAID (Rev. 03-71)

# AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. James D. Tielens died on 05/26/2013 in the County of Riverside, State of California;
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate;
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate;
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$150,000.00;
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$47,950.97 +/-, generated from Assessor's Parcel Number(s) 446251047-7, sold at the Riverside County, California, public auction of tax-defaulted property held on 8/15/2013.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:

James R. Tielens  
Jason Tielens

7. The undersigned (please check which box(s) applies):

- ☒ Is successor(s) of the decedent to the decedent's interest in the described property, or  
☐ Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;

8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

(DATE) 9/21/14  
 (DATE) 9/26/14  
 (DATE) \_\_\_\_\_  
 (DATE) \_\_\_\_\_  
 (DATE) \_\_\_\_\_

Jason Tielens  
 Printed Name  
James Tielens  
 Printed Name  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Printed Name

Jason Tielens  
 signature  
 \_\_\_\_\_  
 signature  
 \_\_\_\_\_  
 signature  
 \_\_\_\_\_  
 signature

(Attach Additional Sheet if Necessary)  
 Page 1 of 2

**CERTIFICATE OF ACKNOWLEDGEMENT**

State of California

County of Riverside

On 9/27/14 before me, Regina M. Anderson, Notary Public, Personally appeared  
(Date) (Here insert name and title of the officer)

Jason Tielens, who proved to me on  
(Name of Signer(s))

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 Regina M. Anderson (Seal)

CERTIFICATE OF ACKNOWLEDGEMENT

State of California

County of Riverside

On 09/26/2014 before me, Kimberly Martinez, Notary Public, Personally appeared  
(Date) James R Tielens (Here insert name and title of the officer), who proved to me on

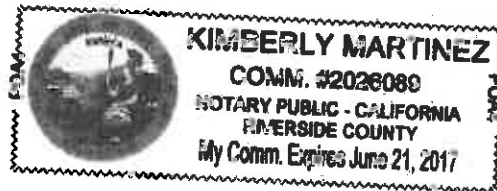
(Name of Signer(s))

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 Kimberly Martinez (Seal)





# STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

### COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

104 - 82-268073

#### CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA

33 007291

STATE BIRTH CERTIFICATE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF CHILD—FIRST	1B. MIDDLE	1C. LAST	
JAMES	ROBERT	TIELENS	
2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH—MONTH, DAY, YEAR
MALE	SINGLE		AUGUST 26, 1982
5A. PLACE OF BIRTH—NAME OF HOSPITAL OR FACILITY		5B. STREET ADDRESS (HOUSE, FLAT, OR LOCATION)	
PARKVIEW COMMUNITY HOSPITAL		3965 JACKSON STREET	
5C. CITY OR TOWN		5D. COUNTY	
RIVERSIDE		RIVERSIDE	
FATHER OF CHILD	6A. NAME OF FATHER—FIRST	6B. MIDDLE	6C. LAST
	JAMES	DEAN	TIELENS
MOTHER OF CHILD	7A. NAME OF MOTHER—FIRST	7B. MIDDLE	7C. LAST (BIRTH NAME)
	BRENDA	DAWN	KURZ
PARENT'S CERTIFICATION	I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.		10. STATE OF BIRTH 11. AGE OF MOTHER
			26
ATTENDANT'S CERTIFICATION	I CERTIFY THAT I ATTENDED THIS BIRTH AND THAT THE CHILD WAS BORN ALIVE AT THE HOUR, DATE AND PLACE STATED.		12. DATE SIGNED
			8-26-82
LOCAL REGISTRAR	15. DEATH—ENTER DATE OF DEATH		16. LOCAL REGISTRAR—SIGNATURE
			C 33273
	13A. PHYSICIAN OR OBSTETRICIAN—SIGNATURE—DEGREE & TITLE		13B. LICENSE NUMBER
	C.W. TODD, JR., M.D.		3838 SHERMAN DRIVE, RIVERSIDE, CA
	17. DATE ACCEPTED FOR REGISTRATION		SEP 09 1982



034415364

#### 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

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

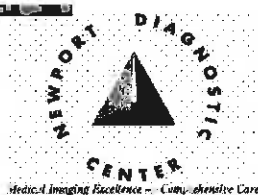
Larry W. Ward  
LARRY W. WARD  
ASSESSOR-COUNTY CLERK-RECORDER  
RIVERSIDE COUNTY, CALIFORNIA

ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CQI Medical Billing  
P.O. Box 10609  
Burbank, CA 91510-0609

RETURN SERVICE REQUESTED

Billing Phone: 800-545-6667  
Billing Fax: 818-526-0258  
Web Address: www.newportdiagnosticcenter.com



IF PAYING BY VISA, MASTERCARD OR AMERICAN EXPRESS, FILL OUT BELOW		
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMER. EXP.
CARD NUMBER	EXP. DATE	AMOUNT
SIGNATURE		MUST INCLUDE 3 DIGIT SECURITY CODE FROM BACK OF CARD

STATEMENT DATE	PAY THIS AMOUNT	ACCOUNT NO.
06/26/2013	\$154.00	

CHARGES AND CREDITS MADE AFTER STATEMENT DATE WILL APPEAR ON NEXT STATEMENT.

SHOW AMOUNT PAID HERE \$

MAKE CHECKS PAYABLE / REMIT TO:

Stmnt ID#: 352248686



53427-2493



JAMES TIELENS  
566 E JOHNSTON AVE  
HEMET CA 92543-7199

Newport Diagnostic Center  
ATTN: PAYMENTS  
1605 AVOCADO AVE  
NEWPORT BEACH CA 92660-7725



Please check box if above address is incorrect or insurance information has changed, and indicate change(s) on reverse side.

### STATEMENT

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT IN ENCLOSED ENVELOPE

PLACE OF SVC: LOMA LINDA UNIV MED CTR MUR ER

ATTENDING: KIM, DAVID

DATE	DESCRIPTION	EXAM	DX CODE	CHARGES	PAYMENTS	ADJUSTMTS	BALANCE
04/09/12	XR Knee 3V	7356226715.96		25.00	.00	.00	25.00
04/09/12	CT Lower Ext w/o	7370026715.96		129.00	.00	.00	129.00

TOTALS 154.00 .00 .00 154.00

\*\*\*Current patient responsibility: 154.00

FOR CREDIT CARD PAYMENT OR INQUIRIES, CALL (800) 545 - 6667.

To pay your bill online visit: www.myzpay.com/NDC

ACCOUNT:  
PATIENT: JAMES TIELENS

PLACE OF SVC: LOMA LINDA UNIV MED CTR MUR ER

Office Hours: 8:00 AM - 5:00 PM Monday - Friday  
Tax ID: 33-0460785

Newport Diagnostic Center  
1605 AVOCADO AVE  
NEWPORT BEACH CA 92660-7725

PAY THIS AMOUNT

154.00

### STATEMENT

SEE REVERSE SIDE FOR IMPORTANT BILLING INFORMATION

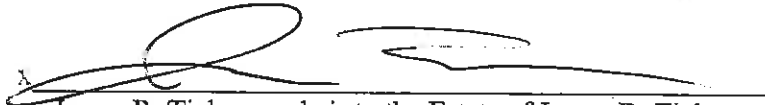
53427-2493 -2415222

DECLARATION  
OF ONE AND THE SAME PERSON(S)

I, James R. Tielens, as heir to the Estate of James D. Tielens, 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 as James R. Tielens, James Robert Tielens and James Tielens.
3. I am a biological son to James D. Tielens who is one and the same person as James Dean Tielens and James Tielens.
4. James Tielens is also one and the same person who is noted on the referenced Judgment on Waiver of Accounting for the Estate of Maurice A. Tielens as Document Number: 2009-0318990, Recorded in Riverside County on 06/23/2009.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 446251047-7.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 26 day of 09, 2014, at menifee ca

  
James R. Tielens, as heir to the Estate of James D. Tielens

State of California  
County of Riverside

IURAT

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

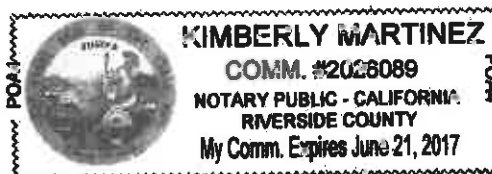
26 day of 09, 2014, by  
Date                      Month                      Year  
James R. Tielens  
Name of Signer

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

Signature Kimberly Martinez  
Signature of Notary Public

(Place Notary Seal Above)

GD Number: 18780-188229



**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

TC 197 Item 127 Assessment No.: 446251047-7

Assessee: TIELENS, JAMES D

Situs: 566 E JOHNSTON AVE HEMET 92543

Date Sold: August 20, 2013

Date Deed to Purchaser Recorded: October 2, 2013

Final Date to Submit Claim: October 2, 2014

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$56,651 or \$48,447 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. \_\_\_\_\_; recorded on \_\_\_\_\_. A copy of this document is attached hereto. 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.**

attach to preceding paperwork submitted:  
letter from Sack Rosendin, LLP (Dana Sack)  
death certificate for James D. Tielen  
agent authorization form - Jason Tielen / Robert Weekes

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 1st day of October, 2014 at Los Angeles County, CA  
County, State

[Signature]  
Signature of Claimant

Robert Weekes  
Print Name

5270 W 64th St.  
Street Address

Inglewood, CA 90302  
City, State, Zip

520-440-8296  
Phone Number

c/o Dana Sack, Attorney At Law  
Sack Rosendin, LLP  
One Kaiser Plaza, Ste. 340  
Oakland, CA 94612  
510-286-2200

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

# AUTHORIZATION FOR AGENT 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's claim 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 make Robert Weekes my agent to apply for and collect the excess proceeds which you are holding and to which I am entitled from the sale of assessment number 446251047-7 Item: 127 sold at public auction on August 15, 2013. I understand that I AM NOT SELLING MY RIGHT TO THE REFUND, but merely naming an agent for collection purposes for my convenience.

I also understand that the total of excess proceeds available for refund is \$ 48,447 and that I have a right to file a claim for this refund on my own, without the help of an agent. For valuable consideration received my agent is appointed to act on my behalf.

Jason D Tielens  
(Signature of Party of Interest)

Jason D Tielens  
(Name Printed)

29290 Grand  
(Address)

Hemet CA 92544  
(City/State/Zip)

951-216-0480  
(Area Code/Telephone Number)

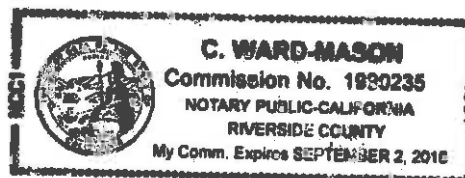
STATE OF CALIFORNIA )ss.  
COUNTY OF Riverside

On September 4, 2013, before me, C. Ward-Mason, Notary Public personally appeared Jason D Tielens, 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.

Captal Ward-Mason  
(Signature of Notary)



I, the undersigned, certify under penalty of perjury that I have disclosed to the party of interest, pursuant to Section 4675 of the California Revenue and Taxation Code, the full amount of excess proceeds available and ADVISED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN, WITHOUT THE HELP OF AN AGENT.

[Signature]  
(Signature of Agent)

Robert Weekes, President, Wealth Trackers Inc.  
(Name Printed)

5270 W 64th St.  
(Address)

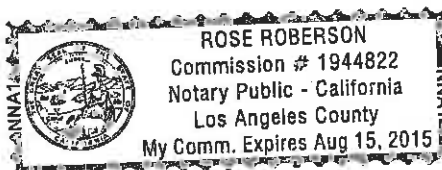
Inglewood, CA 90302  
(City/State/Zip)

STATE OF CALIFORNIA )ss.  
COUNTY OF Los Angeles

On September 15, 2014, before me, the undersigned, a Notary Public in and for said State, personally appeared ROBERT WEEKES, 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.

WITNESS my hand and official seal.

Rose Roberson  
(Signature of Notary)



DOC # 2009-0318990 ✓  
✓06/23/2009 08:00A Fee:24.00  
Page 1 of 6

Recorded in Official Records  
County of Riverside

Larry W. Ward  
Assessor, County Clerk & Recorder



**RECORDING REQUESTED BY:**

JAMES T. YBARRONDO

**WHEN RECORDED RETURN TO:**

JAMES T. YBARRONDO  
901 E. Morton Place, Suite 1  
Hemet, California 92543

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JUDGMENT ON WAIVER OF ACCOUNTING 25



APR 10 2009

JUN 3 2009

1 JAMES T. YBARRONDO, ESQ.  
2 ATTORNEY AT LAW  
3 901 EAST MORTON PLACE, SUITE 1  
4 HEMET, CALIFORNIA 92543  
5 (951) 925-6666

(Bar No: 58706)

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF RIVERSIDE

JUN 02 2009

K. Gutknecht K6

ATTORNEYS FOR: Executor

SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF RIVERSIDE

Estate of

MAURICE A. TIELENS,

Decedent.

CASE NO. HEP000663 ✓

JUDGMENT ON WAIVER  
OF ACCOUNTING, ALLOWING  
STATUTORY FEES AND FOR  
FINAL DISTRIBUTION

JAMES D. TIELENS, as Executor of the Will of MAURICE A.  
TIELENS, deceased, having heretofore filed his waiver of account  
and petition for final distribution, and the petition being  
regularly scheduled for hearing on 6/2, 2009, the Court  
finds:

Due notice of the hearing of the petition has been  
regularly given as required by law.

All the allegations of the petition are true.

MAURICE A. TIELENS died testate on December 2, 2006, in  
the City of Hemet, County of Riverside, State of California, being  
at the time of his death a resident thereof.

On February 6, 2007, JAMES D. TIELENS was appointed  
Executor of the decedent's Will. He qualified as the Executor on  
that date, and ever since has been and now is the Executor of the

Judgment/ Waiver

1

1 decedent's Will.

2 The time for filing or presenting claims has expired and  
3 the estate now is in a condition to be closed.

4 All debts of the decedent and of the estate and all  
5 expenses of administration thereof, except closing expenses and  
6 attorneys' fees, have been paid.

7 All personal property taxes due and payable by this  
8 estate have been paid.

9 No federal estate tax return has been made or filed for  
10 this estate for the reason that the estate was not sufficient to  
11 require such a return, and no federal estate tax is due.

12 No California state or federal income taxes are due or  
13 payable by this estate.

14 The estimated expenses of closing this estate, including  
15 the reserve for payment of any tax deficiency which may be assessed  
16 against the estate, are \$1,000.00, and the Executor should be  
17 authorized to withhold that sum from distribution.

18 The Executor should be directed to pay to his attorneys,  
19 LAW OFFICES OF JAMES T. YBARRONDO, the sum hereafter specified as  
20 their statutory fee for their services rendered in the  
21 administration of this estate.

22 All the assets of the estate are the separate property of  
23 the decedent.

24 Distribution should be ordered as prayed for.

25 IT IS ORDERED AND ADJUDGED that:

26 1. The administration of the estate is brought to a  
27 close without the requirement of an accounting.

28 2. All the acts and transactions of the Executor

Judgment/ Waiver



1 relating to the matters set forth in the petition are ratified,  
2 confirmed, and approved.

3 3. The Executor is authorized and directed to retain the  
4 sum of \$1,000.00 from distribution at this time to defray closing  
5 expenses and as a reserve for any tax deficiency which may  
6 hereafter be determined to be due, and any unexpended portion of  
7 said reserve is hereby distributed as set forth in paragraph 5  
8 below.

9 4. The Executor is directed to pay to his attorneys, LAW  
10 OFFICES OF JAMES T. YBARRONDO, the sum of ~~\$9,611.15~~ <sup>\$9,630.02</sup> as their  
11 statutory fees for their services rendered in the administration of  
12 this estate.

13 5. The estate in the possession of the Executor  
14 remaining for distribution, after the payments and withholding  
15 herein ordered in Paragraphs 3 and 4 above, consists of cash and  
16 other assets and is distributed as follows:

17 TO JAMES D. TIELENS:

\$ 30,277.04

18 Cassini Promissory Note  
19 Secured by property located at:  
31812 Highway 74, Hemet ✓

20 Home and Real Property located at:  
21 566 East Johnston Avenue  
Hemet, CA 92543

22 Legally described as:  
23 Lot 3 in Block 195 if the Lands of the  
24 Hemet Land Company, as shown by Map on  
25 file in Book 1 Page 14 of Maps, Riverside  
26 County Records: Excepting therefrom the  
27 Westerly 208.7 feet of the North half of  
28 said Lot 3; also excepting therefrom that  
portion of said Lot 3 described as  
follows: Beginning at the Southwest  
corner; thence North on the West line of  
said Lot 3, 330 feet to the Northwest  
corner of the South half of said Lot 3;  
thence East on the North line of the South  
half of Lot 3, 233 feet; thence South,  
parallel with the West line of Lot 3, 97

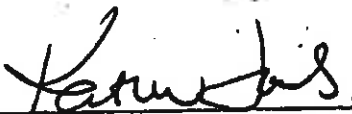
Judgment/ Waiver

3

1	feet; thence West, parallel with the South	
2	line of Lot 3, 66 feet; thence South,	
3	parallel with the West line of Lot 3, 233	
4	feet to the South line of Lot 3; thence	
5	West, on the South line of Lot 3, 167 feet	
6	to the point of beginning; Also excepting	
7	therefrom an undivided one-half interest	
8	in all oil, gas, petroleum, naptha and	
9	other hydrocarbon substances and minerals	
	in, upon or beneath the property herein	
	described, together with right of entry	
	and all other rights appurtenant thereto	
	and rights of way and easements necessary	
	to develop and remove same; also excepting	
	therefrom any portion thereof included on	
	Buena Vista Street and Johnston Avenue.	290,000.00
10	Household furniture and furnishings	2,000.00
11	1987 Chevrolet Suburban	
12	VIN#1GKER16KXHF514591	2,450.00
13	1990 Chevrolet	
14	VIN#2GCHC39N7L1200148	3,175.00
15	1989 Chevrolet Suburban	
16	VIN#1GNR26N9KF185255	3,000.00
17	Cash Residue	104.56
		\$331,006.60

19 6. Any other property of the estate not now known or  
20 discovered which may belong to the estate, or in which the decedent  
21 or the estate may have any interest, shall be distributed as set  
22 forth above in paragraph 3.

23 DATED: 6/24/09

24   
25 \_\_\_\_\_  
26 JUDGE OF THE SUPERIOR COURT  
27 Commissioner  
28

Judgment/ Waiver

4

This must be in red to be a  
"CERTIFIED COPY"

Each document to which this certificate is attached  
is certified to be a full, true and correct copy of the  
original on file and of record in my office.

Superior Court of California  
County of Riverside

By Mary J. Martinez  
DEPUTY  
Dated: 10/16/09



Certification must be in red to be a  
"CERTIFIED COPY"

# STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

# COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052013105744

### CERTIFICATE OF DEATH

3201333006035

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) <b>JAMES</b>		2. MIDDLE <b>DEAN</b>	
3. LAST (Family) <b>TELENS</b>			
4. DATE OF BIRTH mm/dd/yyyy <b>11/18/1955</b>		5. AGE /yr. <b>57</b>	
6. IF UNDER ONE YEAR Months Days Hours Minutes <b>57</b>		7. IF UNDER 24 HOURS Hours Minutes <b>1115</b>	
8. BIRTH STATE/PROVINCE/COUNTRY <b>CA</b>		9. BIRTH STATE/PROVINCE/COUNTRY <b>CA</b>	
10. EDUCATION - Highest Level/deg. <b>HS GRADUATE</b>		11. USUAL OCCUPATION - Type of work (last 12 months if not retired) <b>MOTORCYCLE BUILDER</b>	
12. USUAL OCCUPATION - Type of work (last 12 months if not retired) <b>MOTORCYCLE BUILDER</b>		13. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>TRANSPORTATION</b>	
14. DECEDENT'S RESIDENCE (Street, house number, or location) <b>566 EAST JOHNSTON AVENUE</b>		15. YEARS IN OCCUPATION <b>30</b>	
16. CITY <b>HEMET</b>		17. COUNTY/PROVINCE <b>RIVERSIDE</b>	
18. ZIP CODE <b>92543</b>		19. STATE/FOREIGN COUNTRY <b>CA</b>	
20. INFORMANT'S NAME/RELATIONSHIP <b>JASON TELENS, SON</b>		21. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>29290 GIRARD STREET, HEMET, CA 92544</b>	
22. NAME OF SURVIVING SPOUSE/SPD - FIRST <b>MAURICE</b>		23. MIDDLE <b>ADRIAN</b>	
24. LAST (BIRTH NAME) <b>TELENS</b>		25. BIRTH STATE <b>CA</b>	
26. NAME OF MOTHER/PARENT - FIRST <b>MARY</b>		27. MIDDLE <b>MARGARET</b>	
28. LAST (BIRTH NAME) <b>SHUMACHER</b>		29. BIRTH STATE <b>KS</b>	
30. DISPOSITION DATE mm/dd/yyyy <b>06/04/2013</b>		31. PLACE OF FINAL DISPOSITION <b>RESIDENCE OF JASON TELENS</b>	
32. PLACE OF DISPOSITION <b>CR/RES</b>		33. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>	
34. NAME OF FUNERAL ESTABLISHMENT <b>MCWANE FAMILY FUNERAL HOME</b>		35. SIGNATURE OF LOCAL REGISTRAR <b>CAMERON KAISER, MD</b>	
36. PLACE OF DEATH <b>HEMET VALLEY MEDICAL CENTER</b>		37. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IF <input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> OOA	
38. COUNTY <b>RIVERSIDE</b>		39. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Nursing Home <input type="checkbox"/> Other	
40. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1117 EAST DEVONSHIRE AVENUE</b>		41. CITY <b>HEMET</b>	
42. CAUSE OF DEATH <b>(A) PULMONARY THROMBOEMBOLISM</b>		43. DEATH REFERRED TO CORONER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
44. IMMEDIATE CAUSE <b>(B) DEEP VEIN THROMBOSIS</b>		45. DAYS <b>2013-04964</b>	
46. UNDERLYING CAUSE <b>(C) MORBID OBESITY, HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, DIABETES MELLITUS</b>		47. DAYS <b>(D) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></b>	
48. OTHER SIGNIFICANT CAUSE <b>(E) MORBID OBESITY, HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, DIABETES MELLITUS</b>		49. DAYS <b>(F) YES <input checked="" type="checkbox"/> NO <input type="checkbox"/></b>	
50. WERE OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) <b>NO</b>		51. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> LINK	
52. SIGNATURE AND TITLE OF CERTIFIER <b>RACHEL BAKER</b>		53. LICENSE NUMBER <b>317</b>	
54. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>RACHEL BAKER, DEPUTY CORONER</b>		55. DATE mm/dd/yyyy <b>05/31/2013</b>	
56. TYPE OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending <input type="checkbox"/> Investigation <input type="checkbox"/> Cause not determined		57. INJURED AT WORK? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> LINK	
58. PLACE OF INJURY (e.g., home, construction site, railroad area, etc.)		59. INJURY DATE mm/dd/yyyy	
60. HOUR (24 Hour)		61. INJURY DATE mm/dd/yyyy	
62. SIGNATURE OF CORONER/DEPUTY CORONER <b>RACHEL BAKER</b>		63. DATE mm/dd/yyyy <b>05/31/2013</b>	
64. TYPE NAME, TITLE OF CORONER/DEPUTY CORONER <b>RACHEL BAKER, DEPUTY CORONER</b>		65. DATE mm/dd/yyyy <b>05/31/2013</b>	

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 Department of Health.

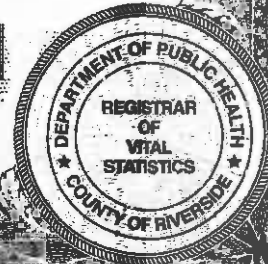
DATE ISSUED **Jun 18, 2013**

Cameron Kaiser, M.D., Health Officer  
RIVERSIDE COUNTY, CALIFORNIA

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

PRINTED (REV) 01/02

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



# AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. James D. Tielens died on 05/26/2013 in the County of Riverside, State of California;
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate;
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate;
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$150,000.00;
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$47,950.97 +-, generated from Assessor's Parcel Number(s) 446251047-7, sold at the Riverside County, California, public auction of tax-defaulted property held on 8/15/2013.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:

James R. Tielens  
Jason Tielens

7. The undersigned (please check which box(s) applies):

- ☒ Is successor(s) of the decedent to the decedent's interest in the described property, or  
☐ Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;

8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

9/21/14  
(DATE)  
9/26/14  
(DATE)  
  
(DATE)  
  
(DATE)  
  
(DATE)

Jason Tielens  
Printed Name  
James Tielens  
Printed Name  
  
Printed Name  
  
Printed Name

Jason Tielens  
signature  
  
signature  
  
signature  
  
signature

(Attach Additional Sheet if Necessary)

Page 1 of 2

**CERTIFICATE OF ACKNOWLEDGEMENT**

State of California

County of Riverside

On 9/21/14 before me, Regina M. Anderson, Notary Public, Personally appeared  
(Date) (Here insert name and title of the officer)  
Jason Tielens, who proved to me on  
(Name of Signer(s))

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 Regina M. Anderson (Seal)

**CERTIFICATE OF ACKNOWLEDGEMENT**

State of California

County of Riverside

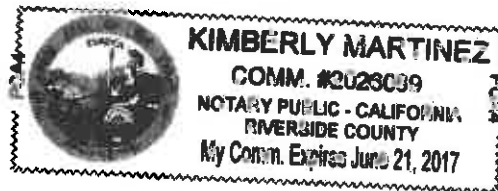
On 09/26/2014 before me, Kimberly Martinez Notary Public, Personally appeared  
(Date) James R Tielens (Here insert name and title of the officer), who proved to me on  
(Name of Signer(s))

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 Kimberly Martinez (Seal)



**POWER OF ATTORNEY**  
(Limited)

I, Jason D. Tielens, hereby appoint Robert Weekes, President, Wealth Trackers Inc. as my true and lawful attorney and in my name and stead, and for my use and benefit to collect and process unclaimed funds held for me by Riverside County or other jurisdictions if applicable.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the execution of the powers authorized hereby, as fully to all intents and purposes as the Grantor might or could do if personally present.

This Power of Attorney will cease six (6) months from date hereof.

Dated this 4th day of September, 2013.

Jason D. Tielens  
Signed, Jason D. Tielens (Principal)

24/9/2013  
Date

Robert Weekes  
Signed, Robert Weekes (Attorney-In-Fact)

9-4-2013  
Date

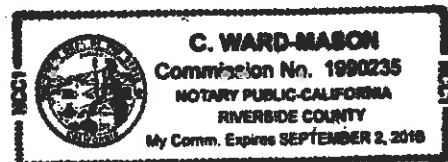
State of California)  
: ss.  
County of Riverside)

On September 4, 2013, before me, C. Ward-Mason, notary public, personally appeared JASON D. TIELENS, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

Captal Ward-Mason  
(Signature of Notary)





JOANNE ROSENDIN  
DANA SACK  

---

CHRISTOPHER J. DYAS  
BARBARA A. NASH, OF COUNSEL

**SACK ROSENDIN, LLP**  
ATTORNEYS AT LAW  
THE ORDWAY  
ONE KAISER PLAZA, SUITE 340  
OAKLAND, CALIFORNIA 94612

TELEPHONE: (510) 286-2200  
FACSIMILE: (510) 286-8887  
WEBSITE: [www.sackrosendin.com](http://www.sackrosendin.com)

September 26, 2014

Don Kent, Riverside County Treasurer-Tax Collector  
P.O. Box 12005  
Riverside, CA 92502-2205  
Fax: 951- 955-3923  
Email: [ttc@co.riverside.ca.us](mailto:ttc@co.riverside.ca.us)

Re: Riverside Assessment No. 446351047-7 Item: 127, 566 East Johnston Avenue, Hemet  
Claim to Excess Proceeds from Tax Sale

Dear Treasurer Kent:

My law firm and I have been engaged by Robert Weekes to assist him in collecting the Excess Proceeds from the Tax Sale of the home at 566 East Johnston Avenue in Hemet, on behalf of the heirs of the owner at the time of the sale. Attached are a copy of the Death Certificate for James Dean Tielens and your office's Authorization to Collect form signed by the son named on the Death Certificate. Mr. Weekes, Jason Tielens and I will be distributing the Excess Proceeds to all of James Tielens' children in equal shares.

Should you require any additional information or documents, please call me or email me at [ds@sackrosendin.com](mailto:ds@sackrosendin.com).

Very truly yours,

  
Dana Sack

Attachments

cc: Mr. Robert Weekes

Jason D. Tielens  
40854 Gibbel Rd  
Hemet, CA 92544  
Phone: 951-216-0480

October 3, 2014


Office of the Treasurer-Tax Collector  
Riverside County, California  
P.O. Box 12005  
Riverside, CA 92502-2205

To Whom It May Concern:

I, Jason Dean Tielens, hereby revoke my assignment, agent authorization, Power of Attorney, collection agreement, and all other documents associated with Global Discoveries, Ltd. for my excess proceeds claim from county public auction dated August 15, 2013 (Assessment No. 446251047-7 Item 127). I have already named Wealth Trackers, Inc. as my agent for collection of excess proceeds as of September of last year, and was unaware that Global Discoveries was a different company. I was misled into signing paperwork with them when I was already under contract with Wealth Trackers.

I wish to terminate my arrangement with Global Discoveries and proceed with my original agent Wealth Trackers under the care of Dana Sack, Attorney At Law. Please continue your correspondence with him and him only.

Sincerely,

Sincerely,  
  
 Jason Dean Tielens

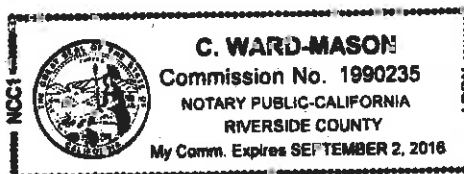
State of California )  
County of Riverside ) ss.

On Oct 3, 2014, before me, C. Ward - Mason, Notary Public, personally appeared JASON DEAN TELEN, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

Clyde Ward-Mason  
(Signature of Notary)



# POWER OF ATTORNEY

(Limited)

I, Jason D. Tielens, hereby appoint Robert Weekes, President, Wealth Trackers Inc. as my true and lawful attorney and in my name and stead, and for my use and benefit to collect and process unclaimed funds held for me by Riverside County, CA.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the execution of the powers authorized hereby, as fully to all intents and purposes as the Grantor might or could do if personally present.

This Power of Attorney will cease twelve (12) months from date hereof.

Dated this 3rd day of October, 20 14.

Jason D. Tielens  
Signed, Jason D. Tielens (Principal)

10-3-14  
Date

Robert Weekes  
Signed, Robert Weekes (Attorney-In-Fact)

10-3-14  
Date

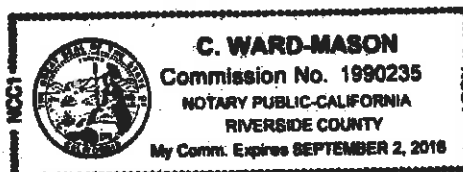
State of California)  
: ss.  
County of Riverside)

On OCT 3, 2014, before me, C. Ward-Mason, Notary Public, personally appeared JASON D. TIELENS, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

Cupril Ward-Mason  
(Signature of Notary)



**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

TC 197 Item 127 Assessment No.: 446251047-7

Assessee: TIELENS, JAMES D

Situs: 566 E JOHNSTON AVE HEMET 92543

Date Sold: August 20, 2013

Date Deed to Purchaser Recorded: October 2, 2013

Final Date to Submit Claim: October 2, 2014

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$56,65  
\$ or \$48,449 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. \_\_\_\_\_; recorded on \_\_\_\_\_. A copy of this document is attached hereto.  
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.**

attach to preceding paperwork submitted:  
letter from Sack Rosendin, LLP (Dana Sack)  
death certificate for James D. Tielen  
agent authorization form - Jason Tielen/Robert Weekes

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 1st day of October, 2014 at Los Angeles County, CA  
County, State

[Signature]  
Signature of Claimant

\_\_\_\_\_  
Signature of Claimant

Robert Weekes  
Print Name

\_\_\_\_\_  
Print Name

5270 W 64th St.  
Street Address

\_\_\_\_\_  
Street Address

Inglewood, CA 90302  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

520-440-8296  
Phone Number

\_\_\_\_\_  
Phone Number

c/o Dana Sack, Attorney At Law  
Sack Rosendin, LLP  
One Kaiser Plaza, Ste. 340  
Oakland, CA 94612  
510-286-2200

# AUTHORIZATION FOR AGENT 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's claim 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 make Robert Weekes my agent to apply for and collect the excess proceeds which you are holding and to which I am entitled from the sale of assessment number 446251047-7 Item: 127 sold at public auction on August 15, 2013. I understand that I AM NOT SELLING MY RIGHT TO THE REFUND, but merely naming an agent for collection purposes for my convenience.

I also understand that the total of excess proceeds available for refund is \$ 48,447 and that I have a right to file a claim for this refund on my own, without the help of an agent. For valuable consideration received my agent is appointed to act on my behalf.

[Signature]  
(Signature of Party of Interest)

James R Tielens  
(Name Printed)

29290 Girard St  
(Address)

Hemet ca  
(City/State/Zip)

92544 - 951-925-9450  
(Area Code/Telephone Number)

STATE OF CALIFORNIA OR )ss.  
COUNTY OF Riverside Orange

On October 4, 2014, before me, Rebecca L Ruben, notary Public, personally appeared James R. Tielens, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]  
(Signature of Notary)



I, the undersigned, certify under penalty of perjury that I have disclosed to the party of interest, pursuant to Section 4675 of the California Revenue and Taxation Code, the full amount of excess proceeds available and ADVISED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN, WITHOUT THE HELP OF AN AGENT.

[Signature]  
(Signature of Agent)

Robert Weekes, President, Wealth Trackers Inc.  
(Name Printed)

5270 W 64th St.  
(Address)

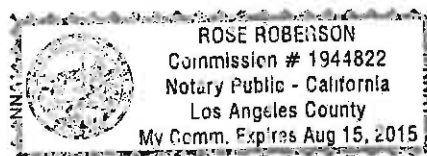
Inglewood, CA 90302  
(City/State/Zip)

STATE OF CALIFORNIA )ss.  
COUNTY OF Los Angeles

On 12/10/2014, before me, the undersigned, a Notary Public in and for said State, personally appeared ROBERT WEEKES, 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.

WITNESS my hand and official seal.

[Signature]  
(Signature of Notary)



# AUTHORIZATION FOR AGENT 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's claim 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 make Robert Weekes my agent to apply for and collect the excess proceeds which you are holding and to which I am entitled from the sale of assessment number 446251047-7 Item: 127 sold at public auction on August 15, 2013. I understand that I AM NOT SELLING MY RIGHT TO THE REFUND, but merely naming an agent for collection purposes for my convenience.

I also understand that the total of excess proceeds available for refund is \$ 48,447 and that I have a right to file a claim for this refund on my own, without the help of an agent. For valuable consideration received my agent is appointed to act on my behalf.

(Signature of Party of Interest)

(Name Printed)

(Address)

(City/State/Zip)

(Area Code/Telephone Number)

STATE OF CALIFORNIA )  
COUNTY OF Riverside ) ss.

On October 4, 2014 before me, Rebecca L. Ruben, Notary Public, personally appeared James R. Tielens 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)



I, the undersigned, certify under penalty of perjury that I have disclosed to the party of interest, pursuant to Section 4675 of the California Revenue and Taxation Code, the full amount of excess proceeds available and ADVISED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN, WITHOUT THE HELP OF AN AGENT.

(Signature of Agent)

Robert Weekes, President, Wealth Trackers Inc.  
(Name Printed)

5270 W 64th St.  
(Address)

Inglewood, CA 90302  
(City/State/Zip)

STATE OF CALIFORNIA )  
COUNTY OF Los Angeles ) ss.

On \_\_\_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \_\_\_\_\_, 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.

WITNESS my hand and official seal.

(Signature of Notary)


## CLAIM WITHDRAWAL

The undersigned party(ies) of interest, Robert Weeks., hereby withdraw my claim to the excess proceeds that are the result of property(ies) sold on 8/15/2013 at the Riverside County, California, public auction of tax defaulted property, described as follows: Riverside County Assessor's Parcel Number(s): 446251047-7. I am withdrawing my claim filed on behalf of James R. Tielens. My claim filed on behalf of Jason Tielens shall not be affected by this claim withdrawal.

Therefore, the undersigned does hereby authorize and instruct the Riverside County Treasurer-Tax Collector to return to Robert Weeks. the full and complete claim package that we are now requesting to be withdrawn.

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

Executed this 30 day of December, 2015 at Inglewood, California.

By:   
Robert Weeks  
5270 W. 64<sup>th</sup> St.  
Inglewood, CA 90302

## CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of CALIFORNIA

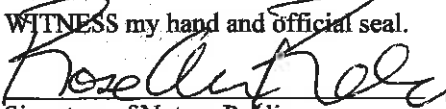
County of Los Angeles

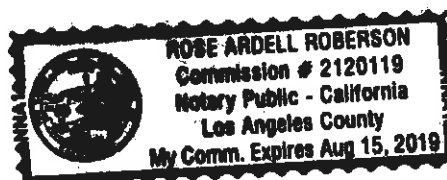
On 12/30/2015 before me, Rose Ardele Roberson, Notary Public personally appeared  
(Date) (here insert name and title of the officer)

Robert Weeks, 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.

 (seal)  
Signature of Notary Public



DOC # 2009-0318990 ✓

✓06/23/2009 08:00A Fee:24.00

Page 1 of 6

Recorded in Official Records

County of Riverside

Larry W. Ward

Assessor, County Clerk & Recorder



RECORDING REQUESTED BY:

JAMES T. YBARRONDO

WHEN RECORDED RETURN TO:

JAMES T. YBARRONDO

901 E. Morton Place, Suite 1

Hemet, California 92543

S	R	U	PAGE	SIZE	DA	MISC	LONG	RFD	COPY
			6						1
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JUDGMENT ON WAIVER OF ACCOUNTING ✓

25



Public Record



APR 10 2009

JUN 3 2009

1 JAMES T. YBARRONDO, ESQ.  
2 ATTORNEY AT LAW  
3 901 EAST MORTON PLACE, SUITE 1  
4 HEMET, CALIFORNIA 92543  
5 (951) 925-6666

(Bar No: 58706)

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF RIVERSIDE

JUN 02 2009

6 ATTORNEYS FOR: Executor

K. Gutknecht KG

7 SUPERIOR COURT OF THE STATE OF CALIFORNIA  
8 IN AND FOR THE COUNTY OF RIVERSIDE  
9

10 Estate of

11 MAURICE A. TIELENS,

12 Decedent.

13 CASE NO. HEP000663 ✓

14 JUDGMENT ON WAIVER  
15 OF ACCOUNTING, ALLOWING  
16 STATUTORY FEES AND FOR  
17 FINAL DISTRIBUTION

18 JAMES D. TIELENS, as Executor of the Will of MAURICE A.  
19 TIELENS, deceased, having heretofore filed his waiver of account  
20 and petition for final distribution, and the petition being  
21 regularly scheduled for hearing on 6/2, 2009, the Court  
22 finds:

23 Due notice of the hearing of the petition has been  
24 regularly given as required by law.

25 All the allegations of the petition are true.

26 MAURICE A. TIELENS died testate on December 2, 2006, in  
27 the City of Hemet, County of Riverside, State of California, being  
28 at the time of his death a resident thereof.

On February 6, 2007, JAMES D. TIELENS was appointed  
Executor of the decedent's Will. He qualified as the Executor on  
that date, and ever since has been and now is the Executor of the

Judgment/ Waiver

1 decedent's Will.

2 The time for filing or presenting claims has expired and  
3 the estate now is in a condition to be closed.

4 All debts of the decedent and of the estate and all  
5 expenses of administration thereof, except closing expenses and  
6 attorneys' fees, have been paid.

7 All personal property taxes due and payable by this  
8 estate have been paid.

9 No federal estate tax return has been made or filed for  
10 this estate for the reason that the estate was not sufficient to  
11 require such a return, and no federal estate tax is due.

12 No California state or federal income taxes are due or  
13 payable by this estate.

14 The estimated expenses of closing this estate, including  
15 the reserve for payment of any tax deficiency which may be assessed  
16 against the estate, are \$1,000.00, and the Executor should be  
17 authorized to withhold that sum from distribution.

18 The Executor should be directed to pay to his attorneys,  
19 LAW OFFICES OF JAMES T. YBARRONDO, the sum hereafter specified as  
20 their statutory fee for their services rendered in the  
21 administration of this estate.

22 All the assets of the estate are the separate property of  
23 the decedent.

24 Distribution should be ordered as prayed for.

25 IT IS ORDERED AND ADJUDGED that:

26 1. The administration of the estate is brought to a  
27 close without the requirement of an accounting.

28 2. All the acts and transactions of the Executor

Judgment/ Waiver

2

1 relating to the matters set forth in the petition are ratified,  
2 confirmed, and approved.

3 3. The Executor is authorized and directed to retain the  
4 sum of \$1,000.00 from distribution at this time to defray closing  
5 expenses and as a reserve for any tax deficiency which may  
6 hereafter be determined to be due, and any unexpended portion of  
7 said reserve is hereby distributed as set forth in paragraph 5  
8 below.

9 4. The Executor is directed to pay to his attorneys, LAW  
10 OFFICES OF JAMES T. YBARRONDO, the sum of ~~\$9,011.13~~ <sup>\$9,630.02</sup> as their  
11 statutory fees for their services rendered in the administration of  
12 this estate.

13 5. The estate in the possession of the Executor  
14 remaining for distribution, after the payments and withholding  
15 herein ordered in Paragraphs 3 and 4 above, consists of cash and  
16 other assets and is distributed as follows:

17 TO JAMES D. TIELENS:

\$ 30,277.04

18 Cassini Promissory Note  
19 Secured by property located at:  
31812 Highway 74, Hemet ✓

20 Home and Real Property located at:  
21 566 East Johnston Avenue  
Hemet, CA 92543

22 Legally described as:  
23 Lot 3 in Block 195 of the Lands of the  
Hemet Land Company, as shown by Map on  
24 file in Book 1 Page 14 of Maps, Riverside  
County Records: Excepting therefrom the  
25 Westerly 208.7 feet of the North half of  
said Lot 3; also excepting therefrom that  
26 portion of said Lot 3 described as  
follows: Beginning at the Southwest  
27 corner; thence North on the West line of  
said Lot 3, 330 feet to the Northwest  
28 corner of the South half of said Lot 3;  
thence East on the North line of the South  
half of Lot 3, 233 feet; thence South,  
parallel with the West line of Lot 3, 97

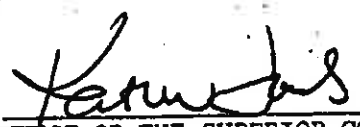
Judgment/ Waiver

3

1	feet; thence West, parallel with the South	
2	line of Lot 3, 66 feet; thence South,	
3	parallel with the West line of Lot 3, 233	
4	feet to the South line of Lot 3; thence	
5	West, on the South line of Lot 3, 167 feet	
6	to the point of beginning; Also excepting	
7	therefrom an undivided one-half interest	
8	in all oil, gas, petroleum, naptha and	
9	other hydrocarbon substances and minerals	
10	in, upon or beneath the property herein	
11	described, together with right of entry	
12	and all other rights appurtenant thereto	
13	and rights of way and easements necessary	
14	to develop and remove same; also excepting	
15	therefrom any portion thereof included on	
16	Buena Vista Street and Johnston Avenue.	290,000.00
17		
18	Household furniture and furnishings	2,000.00 ✓
19		
20	1987 Chevrolet Suburban	
21	VIN#1GKER16KXHF514591	2,450.00 ✓
22		
23	1990 Chevrolet	
24	VIN#2GCHC39N7L1200148	3,175.00 ✓
25		
26	1989 Chevrolet Suburban	
27	VIN#1GNGR26N9KF185255	3,000.00 ✓
28		
		?
		104.56
	Cash Residue	\$331,006.60

6. Any other property of the estate not now known or discovered which may belong to the estate, or in which the decedent or the estate may have any interest, shall be distributed as set forth above in paragraph 3.

DATED: 6/2/09

  
 JUDGE OF THE SUPERIOR COURT  
 Commissioner

Judgment/ Waiver

4

This must be in red to be a  
"CERTIFIED COPY"

Each document to which this certificate is attached  
is certified to be a full, true and correct copy of the  
original on file and of record in my office.

Superior Court of California  
County of Riverside

By Mary J. Martinez  
DEPUTY  
Dated: 10/16/09



Certification must be in red to be a  
"CERTIFIED COPY"

# COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052013105744

### CERTIFICATE OF DEATH

3201333006035

STATE-FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (Given) <b>JAMES</b>		2. MIDDLE <b>DEAN</b>	
3. LAST (Family) <b>TELENS</b>			
4. AKA, ALSO KNOWN AS—Trade name, AKA (FIRST, MIDDLE, LAST) <b>AKA, ALSO KNOWN AS—Trade name, AKA (FIRST, MIDDLE, LAST)</b>		5. DATE OF BIRTH mm/dd/yyyy <b>11/18/1955</b>	
6. AGE Yrs. <b>57</b>		7. SEX <b>M</b>	
8. BIRTH STATE/FOREIGN COUNTRY <b>CA</b>		9. MARITAL STATUS/SDP* (at Time of Death) <b>DIVORCED</b>	
10. DATE OF DEATH mm/dd/yyyy <b>06/26/2013</b>		11. HOUR (24 Hours) <b>1115</b>	
12. EDUCATION—Highest Level/Degree <b>HS GRADUATE</b>		13. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see instruction on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
14. USUAL OCCUPATION—Type of work for most of life (DO NOT USE RETIRED) <b>MOTORCYCLE BUILDER</b>		15. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>TRANSPORTATION</b>	
16. DECEDENT'S RACE—Up to 3 races may be listed (see Worksheet on back) <b>CAUCASIAN</b>		17. YEARS IN OCCUPATION <b>30</b>	
18. DECEDENT'S RESIDENCE (Street and number, or location) <b>566 EAST JOHNSTON AVENUE</b>			
19. CITY <b>HEMET</b>			
20. COUNTY/PROVINCE <b>RIVERSIDE</b>			
21. ZIP CODE <b>92543</b>			
22. YEARS IN COUNTY <b>50</b>			
23. STATE/FOREIGN COUNTRY <b>CA</b>			
24. INFORMANT NAME/RELATIONSHIP <b>JASON TELENS, SON</b>		25. INFORMANT ADDRESS (Street and number, or location, city or town, state and zip) <b>29290 GIRARD STREET, HEMET, CA 92544</b>	
26. NAME OF SURVIVING SPOUSE/SDP—FIRST <b>MAURICE</b>		27. LAST (Family Name) <b>TELENS</b>	
28. NAME OF FATHER/PARENT—FIRST <b>ADRIAN</b>		29. LAST <b>TELENS</b>	
30. NAME OF MOTHER/PARENT—FIRST <b>MARY</b>		31. LAST (Family Name) <b>SHUMACHER</b>	
32. BIRTH STATE <b>CA</b>		33. BIRTH STATE <b>KS</b>	
34. DISPOSITION DATE mm/dd/yyyy <b>06/04/2013</b>		35. PLACE OF FINAL DISPOSITION <b>RESIDENCE OF JASON TELENS</b>	
36. TYPE OF DISPOSITION <b>CR/RES</b>		37. SIGNATURE OF EMERALMFR <b>NOT EMBALMED</b>	
38. NAME OF FUNERAL ESTABLISHMENT <b>MCVANE FAMILY FUNERAL HOME</b>		39. SIGNATURE OF LOCAL REGISTRAR <b>CAMERON KAISER, MD</b>	
40. DATE <b>06/03/2013</b>		41. LICENSE NUMBER <b>66/03/2013</b>	
42. PLACE OF DEATH <b>HEMET VALLEY MEDICAL CENTER</b>			
43. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input checked="" type="checkbox"/> SVGP <input type="checkbox"/> UOA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/ATC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other			
44. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input checked="" type="checkbox"/> SVGP <input type="checkbox"/> UOA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/ATC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other			
45. COUNTY <b>RIVERSIDE</b>			
46. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1117 EAST DEVONSHIRE AVENUE</b>			
47. CITY <b>HEMET</b>			
48. CAUSE OF DEATH <b>PULMONARY THROMBOEMBOLISM</b>			
49. IMMEDIATE CAUSE (Direct cause of death) <b>PULMONARY THROMBOEMBOLISM</b>			
50. UNDERLYING CAUSE (Underlying cause of death) <b>DEEP VEIN THROMBOSIS</b>			
51. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>MORBID OBESITY, HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, DIABETES MELLITUS</b>			
52. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 108? (If yes, list type of operation and date) <b>NO</b>			
53. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED <b>DECEDENT ATTENDED SHOW</b>		54. SIGNATURE AND TITLE OF CERTIFIER <b>RACHEL BAKER, DEPUTY CORONER</b>	
55. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>RACHEL BAKER, DEPUTY CORONER</b>		56. LICENSE NUMBER <b>66/03/2013</b>	
57. DATE <b>06/26/2013</b>		58. TYPE NAME TITLE OF CORONER/DEPUTY CORONER <b>RACHEL BAKER, DEPUTY CORONER</b>	
59. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending investigation <input type="checkbox"/> Could not be determined		60. INJURY DATE mm/dd/yyyy <b>06/26/2013</b>	
61. PLACE OF INJURY (e.g., home, construction site, workplace, etc.) <b>HEMET VALLEY MEDICAL CENTER</b>		62. HOUR (24 Hours) <b>1115</b>	
63. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury) <b>HEMET VALLEY MEDICAL CENTER</b>			
64. EDUCATION OF INJURY (Highest level and number, location, and city, and zip) <b>HEMET VALLEY MEDICAL CENTER</b>			
65. SIGNATURE OF DONORER / DEPUTY CORONER <b>RACHEL BAKER</b>			
66. DATE <b>06/26/2013</b>			
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287. LICENSE NUMBER <b>66/03/2013</b>			

## CONTINGENCY AGREEMENT

This Agreement is made by and between James R. Tielens,  
(hereafter referred to as CLIENT) and Wealth Trackers, Inc.,  
(hereafter referred to as COMPANY).

**1. RECITALS:** This agreement is made with reference to the following facts and circumstances.

- a) COMPANY is in the business of processing claims for unclaimed funds it has located.
- b) CLIENT is eligible to claim funds of approximately \$48,000.

**2. PERFORMANCE:**

- a) COMPANY will pay all costs and perform all reasonable duties necessary to obtain the funds for CLIENT.
- b) COMPANY agrees to provide all forms and documents required to process the claim. CLIENT agrees to provide additional documentation as necessary when available.
- c) CLIENT authorizes COMPANY to act as their exclusive agent to process the claim and disburse funds to CLIENT in a timely manner (within 30 days after receipt of funds).
- d) COMPANY agrees to mail CLIENT copies of all documents upon receipt.
- e) Both parties agree to cooperate fully with all reasonable requests from the other in performance of this Agreement.

**3. COMPENSATION:**

- a) *CLIENT and COMPANY agree that this Agreement is contingent upon CLIENT actually receiving CLIENT'S share of the funds. In the event the claim is not paid out, all parties are released of their duties and obligations under this Agreement and CLIENT will have no obligation whatsoever to compensate COMPANY. CLIENT is aware of their right to file a claim on their own without assistance provided by COMPANY. CLIENT agrees that contingency fee listed below is reasonable.*
- b) CLIENT and COMPANY agree to a 40 % contingency fee. CLIENT will not pay COMPANY any fee on any amount that is not due to CLIENT or that must be shared or paid out to another party.
- c) CLIENT is not required to pay any of COMPANY's expenses. All expenses will be paid by COMPANY and will come out of COMPANY's fee.
- d) For clarification, COMPANY is ONLY entitled to 40 % of the funds that are actually collected and CLIENT is entitled to 60 % of funds collected.


**4. MISCELLANEOUS PROVISIONS:**

- a) *Counterparts and Facsimile Transmission* - This Agreement may be signed in

counterparts. A signed copy received by fax or email shall be deemed an original.

- b) *Governing Law, Venue, and Relief* - This Agreement shall be governed under the laws of the State of California. In the event a dispute arises by either party, the venue shall be in Los Angeles County, California. The prevailing party shall be entitled to reasonable attorney's fees and other relief awarded by the Court.
- c) *Binding* - This Agreement is binding upon all heirs, successors in interest, and assigns.

Dated this 26th day of September, 20 13.

  
Authorized Signature for Company  
Wealth Trackers, Inc.  
5270 W 64<sup>th</sup> St  
Inglewood, CA 90302  
520-440-8296

Dated this 26 day of September, 20 13.

James R Tielens  
Print Client's Name

702-465-8963  
Phone

  
Client's Signature

Fax

1221 S. 15<sup>th</sup> Street

Print Client's Name

Address

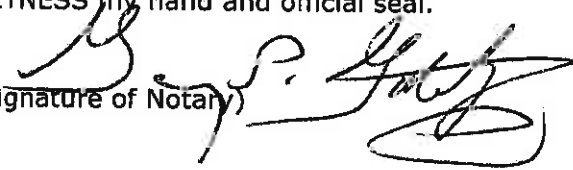
Client's Signature

Las Vegas NV 89104  
City State Zip

On 26 September 2013, before me, GARY S GUBITZ, Notary Public, personally appeared JAMES R. TIELENS, 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)



GARY S. GUBITZ  
Notary Public  
State of Nevada  
Appt. No. 11-5706-1  
My Appt. Expires Sep. 22, 2015



## CONTINGENCY AGREEMENT

This Agreement is made by and between James R. Tielens  
(hereafter referred to as CLIENT) and Wealth Trackers, Inc.  
(hereafter referred to as COMPANY).

**1. RECITALS:** This agreement is made with reference to the following facts and circumstances.

- a) COMPANY is in the business of processing claims for unclaimed funds it has located.
- b) CLIENT is eligible to claim funds of approximately \$24,000.

### 2. PERFORMANCE:

- a) COMPANY will pay all costs and perform all reasonable duties necessary to obtain the funds for CLIENT.
- b) COMPANY agrees to provide all forms and documents required to process the claim. CLIENT agrees to provide additional documentation as necessary when available.
- c) CLIENT authorizes COMPANY to act as their exclusive agent to process the claim and disburse funds to CLIENT in a timely manner (within 30 days after receipt of funds).
- d) COMPANY agrees to mail CLIENT copies of all documents upon receipt.
- e) Both parties agree to cooperate fully with all reasonable requests from the other in performance of this Agreement.

### 3. COMPENSATION:

- a) *CLIENT and COMPANY agree that this Agreement is contingent upon CLIENT actually receiving CLIENT'S share of the funds. In the event the claim is not paid out, all parties are released of their duties and obligations under this Agreement and CLIENT will have no obligation whatsoever to compensate COMPANY. CLIENT is aware of their right to file a claim on their own without assistance provided by COMPANY. CLIENT agrees that contingency fee listed below is reasonable.*
- b) CLIENT and COMPANY agree to a 30 % contingency fee. CLIENT will not pay COMPANY any fee on any amount that is not due to CLIENT or that must be shared or paid out to another party.
- c) CLIENT is not required to pay any of COMPANY's expenses. All expenses will be paid by COMPANY and will come out of COMPANY's fee.
- d) For clarification, COMPANY is ONLY entitled to 30 % of the funds that are actually collected and CLIENT is entitled to 70 % of funds collected.

### 4. MISCELLANEOUS PROVISIONS:

- a) *Counterparts and Facsimile Transmission* - This Agreement may be signed in

counterparts. A signed copy received by fax or email shall be deemed an original.

- b) *Governing Law, Venue, and Relief* - This Agreement shall be governed under the laws of the State of California. In the event a dispute arises by either party, the venue shall be in Los Angeles County, California. The prevailing party shall be entitled to reasonable attorney's fees and other relief awarded by the Court.
- c) *Binding* - This Agreement is binding upon all heirs, successors in interest, and assigns.

Dated this 4th day of October, 20 14.

Authorized Signature for Company  
Wealth Trackers, Inc.  
5270 W 64<sup>th</sup> St  
Inglewood, CA 90302  
520-440-8296

Dated this 4 day of October, 20 14.

James R. Trevis  
Print Client's Name

951-287-8976  
Phone

[Signature]  
Client's Signature

Fax

[Signature]  
Print Client's Name

29290 Girard St.  
Address

[Signature]  
Client's Signature

Hemet CA 92544  
City State Zip

State of California County of Orange

On October 4, 2014, before me, Rebecca L. Ruben, Notary Public, personally appeared James R. Trevis, 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]  
(Signature of Notary)



**POWER OF ATTORNEY**

(Limited)

I, James R Tielens, hereby appoint Robert Weekes, President, Wealth Trackers Inc. as my true and lawful attorney and in my name and stead, and for my use and benefit to collect and process unclaimed funds held for me by Riverside County or other jurisdictions if applicable.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the execution of the powers authorized hereby, as fully to all intents and purposes as the Grantor might or could do if personally present.

This Power of Attorney will cease six (6) months from date hereof.

Dated this 26th day of September, 20 13.

  
Signed, James R. Tielens (Principal)

26-9-13  
Date

  
Signed, Robert Weekes (Attorney-In-Fact)

9-26-13  
Date

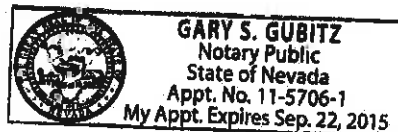
State of NEVADA )  
~~California~~ )  
County of CLARK : ss.  
~~Riverside~~ )

On 26 SEPTEMBER 2013, before me, GARY S GUBITZ, Notary Public, personally appeared JAMES R. TIELENS, 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)



**POWER OF ATTORNEY**  
(Limited)

I, James R. Tielens, hereby appoint Robert Weekes, President, Wealth Trackers Inc. as my true and lawful attorney and in my name and stead, and for my use and benefit to collect and process unclaimed funds held for me by Riverside County or other jurisdictions if applicable.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the execution of the powers authorized hereby, as fully to all intents and purposes as the Grantor might or could do if personally present.

This Power of Attorney will cease twelve (12) months from date hereof.

Dated this 4th day of October, 2014.

[Signature]  
Signed, James R. Tielens (Principal)

10-4-14  
Date

Signed, Robert Weekes (Attorney-In-Fact) \_\_\_\_\_  
Date \_\_\_\_\_

State of California )  
County of Orange : ss.

On October 4, 2014, before me, Rebecca L. Ruben, Notary Public, personally appeared James R. Tielens, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]  
(Signature of Notary)



James R. Tielens  
15123 Brookhurst St. Apt. 186  
Westminster, CA 92683  
Phone: 951-218-7092

October 4, 2014


Office of the Treasurer-Tax Collector  
Riverside County, California  
P.O. Box 12005  
Riverside, CA 92502-2205

To Whom It May Concern:

I, James R Tielens, hereby revoke my assignment, agent authorization, Power of Attorney, collection agreement, and all other documents associated with Global Discoveries, Ltd. for my excess proceeds claim from county public auction dated August 15, 2013 (Assessment No. 446251047-7 Item 127). I have already named Wealth Trackers, Inc. as my agent for collection of excess proceeds as of September of last year, and was unaware that Global Discoveries was a different company. I was misled into signing paperwork with them when I was already under contract with Wealth Trackers.

I wish to terminate my arrangement with Global Discoveries and proceed with my original agent Wealth Trackers under the care of Dana Sack, Attorney At Law. Please continue your correspondence with him and him only.

Sincerely,

  
James Robert Tielens


State of California

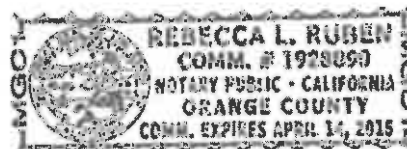
County of Orange : ss.

On October 4, 2014, before me, Rebecca L. Ruben, personally appeared James Robert Tielens, 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)



# AFFIDAVIT UNDER CALIFORNIA PROBATE CODE SECTION 13101

The undersigned state(s) as follows:

James Dean Tielens

(name of decedent) died on

May 26, 2013

in the County of Riverside

State of California and:

1. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of decedent's death certificate.
2. Either of the following, as appropriate:
  - a) No proceeding is now being or has been conducted in California for administration of the decedent's estate.
  - b) The decedent's personal representative has consented in writing to the payment, transfer, or delivery to the affiant or declarant of the property described in the affidavit or declaration.
3. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in the California Probate Code §13050, does not exceed \$150,000.
4. ☐ An Inventory and Appraisalment of the real property in the decedent's estate is attached, or  
☒ There is no real property in the estate.
5. A description of the property that is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code §13100 (*attach additional sheets if necessary*)

Riverside County Excess proceeds TC 197 Item 127 (APN 446251047-7)

6. The successor(s) of the decedent, as defined in Probate Code §13006, is/are  
Jason Dean Tielens and James Robert Tielens (sons)
7. ☒ The undersigned is/are successor(s) of the decedent to the decedent's interest in the described property, or  
☐ The undersigned is/are authorized under California Probate Code §13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property.
8. No other person has a superior right to the interest of the decedent in the described property.
9. The undersigned requests that the described property be paid, delivered or transferred to the undersigned.

I/we declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct (*attach additional sheets if necessary*).

Date

Printed name

Signature

7-14-2015

Jason D Tielens

James D Tielens

7-20-2015

James R Tielens

1. Attach a certified copy of death certificate and if there is real property in the decedent's estate attach a completed Inventory and Appraisalment (Probate Form DE-160, DE-161).
2. Have this affidavit notarized.

**Please See Attached  
California Notarial  
Certificate**

**HAWAII ALL-PURPOSE ACKNOWLEDGMENT**  
**H.R.S 502-41(6)**

State of Hawaii

County of Hawaii

} ss.

On this 20<sup>th</sup> day of July, 2015, in the 3<sup>rd</sup> Circuit Court, State of Hawaii,  
Day Month Year Name of Circuit

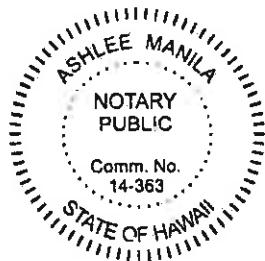
before me personally appeared James R. Tielens, (,) ~~and~~  
Name of Signer 1

\_\_\_\_\_, (,) to me personally known or proved  
Name of Signer 2 (if any)

to me on the basis of satisfactory evidence to be the person(s) whose name(s)  
is/are subscribed to this instrument, who, being by me duly sworn or affirmed, did say  
that such person(s) executed the foregoing instrument identified or described as  
Affidavit Under California Probate as the free act and deed of such person(s),  
Type of Document

and if applicable, in the capacity shown having been duly authorized to execute such instrument  
in such capacity. The foregoing instrument is dated Undated and  
Date of Document

contained 1 pages at the time of this acknowledgment/certification.  
No. of Pages



Ashlee Manila

Printed Name of Notary Public

Notary Public — STATE OF HAWAII

My commission expires: 10-12-2018

[Signature]

Signature of Notary Public

Place Notary Seal or Stamp Above

## ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Riverside

On July 14<sup>th</sup>, 2015 before me, Michael Joseph Brundige II  
(insert name and title of the officer)

personally appeared Jason Dean Tielens  
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.

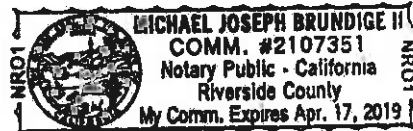
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature

[Handwritten Signature]

(Seal)





**CLAIM SUMMARY**

Date: September 29, 2014

To: Riverside County Treasurer and Tax Collector

Assessors Parcel Number: 446251047-7

Last Assessee: TIELENS JAMES D

Sale Date: 8/15/2013

TC: TC 197

Item Number: 317 187

Deadline: 10/2/2014

Dear Treasurer/Tax Collector:

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

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

1. Explanation of Events
2. Judgment on Waiver of Accounting for the Estate of Maurice A. Tielens granting above property 100% interest to James D. Tielens as Document Number: 2009-0318990, Recorded in Riverside County on 06/23/2009.
3. Certificate of Death for James D. Tielens **(Certified Copy of DC in the claim package for James R. Tielens).**
4. Probate Affidavit for the Estate of James D. Tielens signed by Two Heirs/Successors; James R. Tielens and Jason Tielens. **(Original in the claim package for James R. Tielens).**
5. Certified Certificate of Birth for Jason Tielens
6. Original Notice of Action referencing the **566 E. Johnston Ave Hemet, CA 92543** address; which is one and the same address as the above referenced parcel.
7. Declaration of one and The Same Person
8. Assignment of Rights To Collect Excess Proceeds signed by Jason Tielens, as heir to the Estate of James D. Tielens
9. Claim form(s) signed by Global Discoveries
10. Photo ID for Assignor: Jason Tielens

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

- One warrant in the amount of \$23,975.48 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, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.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: 7014-0510-0001-4046-2250**

**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 446251047-7, Tax Sale Number TC 197, Item 317 sold at public auction on 8/15/2013. I understand that the total of excess proceeds available for refund is \$ 47,950.97+/-, 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.

[Signature]  
(Signature of Party of Interest/Assignor) (Date)  
Tax ID/SS# \_\_\_\_\_

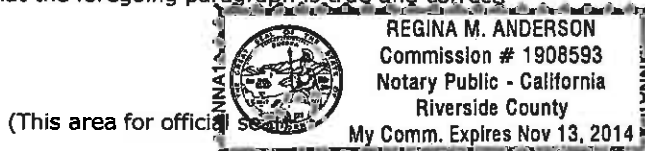
Jason Tielens, as heir to the Estate of James D. Tielens  
(Name Printed)  
40854 Gibbel Road  
(Address)  
Hemet, CA 92544  
(City/State/Zip)  
29290 Girard St  
951-0216-0480  
(Area Code/Telephone Number)

STATE OF CALIFORNIA  
COUNTY OF Riverside ss.

On 9/21/14, before me Regina M. Anderson, notary public personally appeared Jason Tielens 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.

[Signature]  
(Signature of Notary)



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.

[Signature]  
(Signature of Assignee)

Jed Byerly, Managing Member  
(Name Printed)

Tax ID/SS# \_\_\_\_\_

Global Discoveries Ltd.  
(Address)  
P.O. Box 1748  
Modesto, CA 95353-1748  
(City/State/Zip)

STATE OF CALIFORNIA  
COUNTY OF Stanislaus ) ss.

On 9-30-2014, before me Michelle Reynosa, Notary Public 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]  
(Signature of Notary)



(This area for official seal)

# CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 446251047-7

Tax Sale Number: TC 197

Item Number: 317

Date of Sale: 8/15/2013

The undersigned claimant, Global Discoveries, Ltd., claims \$23,975.48+/- 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 30<sup>th</sup> day of September 2014 at Modesto, California.

By: [Signature]  
Jed Byerly, Managing Member  
Global Discoveries Ltd. Tax ID #  
P.O. Box 1748  
Modesto, CA 95353-1748

## CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

State of California

County of Stanislaus

On 9-30-2014 before me, Michelle Reynosa, 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]  
Signature of Notary Public

(seal)





December 1, 2015

**VIA CERTIFIED MAIL**

Riverside County Treasurer-Tax Collector  
Attn: Jennifer Pazicni  
4080 Lemon Street  
4<sup>th</sup> Floor  
Riverside, CA 92501

**RE: Parcel #446251047-7 TC 197 Item #317 / 27**

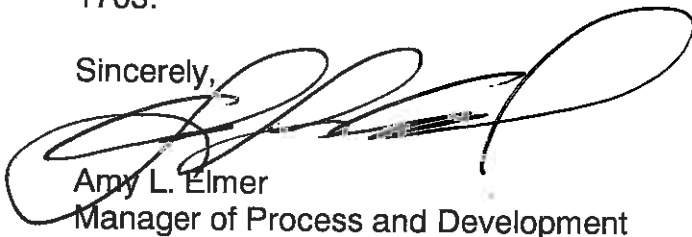
Dear Ms. Pazicni:

Global Discoveries, Ltd has worked directly with the competing claimant, Robert Weeks, who filed a claim on behalf of James R. Tielens and Jason Tielens. In an effort to save the county time and resources Global and Mr. Weeks have come to an agreement that Mr. Weeks will withdraw his claim on behalf of James R. Tielens and Global Discoveries, Ltd will withdraw their claim on behalf of Jason Tielens.

In light of the above, Global Discoveries, Ltd will now have a claim in place for James R. Tielens and Robert Weeks will have a claim in place for Jason Tielens. Enclosed you will find Global Discoveries, Ltd withdrawal of our claim on behalf of Jason Tielens and a withdrawal from Robert Weeks' claim on behalf of James R. Tielens.

We would like to take this time to thank you in advance for your assistance with this matter. If there is anything further that you may need, please contact me at (209) 593-3917 or (800) 710-1703.

Sincerely,



Amy L. Elmer  
Manager of Process and Development

Cc: Client File

Mr. Robert Weeks



## CLAIM WITHDRAWAL

The undersigned party(ies) of interest, Global Discoveries Ltd., hereby withdraw my claim to the excess proceeds that are the result of property(ies) sold on 8/15/2013 at the Riverside County, California, public auction of tax defaulted property, described as follows: Riverside County Assessor's Parcel Number(s): 446251047-7. Global is withdrawing our claim filed on behalf of Jason. Tielens. Our claim filed on behalf of James R. Tielens shall not be affected by this claim withdrawal.

Therefore, the undersigned does hereby authorize and instruct the Riverside County Treasurer-Tax Collector to return to Global Discoveries Ltd. the full and complete claim package that we are now requesting to be withdrawn.

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

Executed this 5<sup>th</sup> day of January, 2016 at Modesto, California.

By: [Signature]  
Jed Byerly, Managing Member  
Global Discoveries Ltd. Tax ID #  
P.O. Box 1748  
Modesto, CA 95353-1748

### CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Stanislaus

On 01-05-2016 before me, Michelle Reynosa, Notary Public, personally appeared  
(Date) (here insert name and title of the officer)

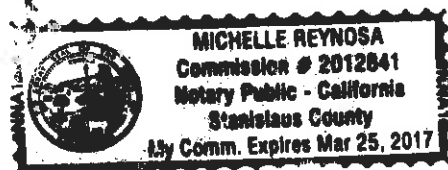
Jed Byerly, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument 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]  
Signature of Notary Public

(seal)



**Explanation of Events**  
**For Property: 566 JOHNSTON AVE E HEMET, CA 92543**  
**(446251047-7}**

- James D. Tielens was the record owner of the above property Per Judgment on Waiver for the Estate of Maurice A. Tielens Recorded on June 23, 2009.
- James D. Tielens died on May 26, 2013. He died with No Surviving Spouse, No Last Will and Testament nor was his Estate ever probated in the State of California.
- James D. Tielens left two biological children; James Robert Tielens and Jason Dean Tielens.

**\*\*\*\*Therefore, due to the above James Robert Tielens and Jason Dean Tielens are both entitled to collect 50% and/or \$23,975.48+- of the excess proceeds available for the above referenced property. \*\*\*\***

DOC # 2009-0318990

06/23/2009 08:00A Fee:24.00

Page 1 of 6

Recorded in Official Records

County of Riverside

Larry W. Ward

Assessor, County Clerk & Recorder

**RECORDING REQUESTED BY:**

JAMES T. YBARRONDO

**WHEN RECORDED RETURN TO:**

JAMES T. YBARRONDO  
901 E. Morton Place, Suite 1  
Hemet, California 92543



S	R	U	PAGE	SIZE	DA	MISC	LONG	RFD	COPY
			6						1
M	A	L	465	426	PCOR	NCOR	SMF	NCHG	EXAM
					T:	CTY	UNI	0/0	

25



JUDGMENT ON WAIVER OF ACCOUNTING

Public Record

APR 10 2009

JUN 3 2009

1 JAMES T. YBARRONDO, ESQ.  
2 ATTORNEY AT LAW  
3 901 EAST MORTON PLACE, SUITE 1  
4 HEMET, CALIFORNIA 92543  
5 (951) 925-6666

(Bar No: 58706)

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF RIVERSIDE

JUN 02 2009

6 ATTORNEYS FOR: Executor

K. Gutknecht K6

7 SUPERIOR COURT OF THE STATE OF CALIFORNIA  
8 IN AND FOR THE COUNTY OF RIVERSIDE  
9

10			
11	Estate of	)	CASE NO. HEP000663
12	MAURICE A. TIELENS,	)	JUDGMENT ON WAIVER
13	Decedent.	)	OF ACCOUNTING, ALLOWING
14		)	STATUTORY FEES AND FOR
		)	FINAL DISTRIBUTION

15 JAMES D. TIELENS, as Executor of the Will of MAURICE A.  
16 TIELENS, deceased, having heretofore filed his waiver of account  
17 and petition for final distribution, and the petition being  
18 regularly scheduled for hearing on 6/2, 2009, the Court  
19 finds:

20 Due notice of the hearing of the petition has been  
21 regularly given as required by law.

22 All the allegations of the petition are true.

23 MAURICE A. TIELENS died testate on December 2, 2006, in  
24 the City of Hemet, County of Riverside, State of California, being  
25 at the time of his death a resident thereof.

26 On February 6, 2007, JAMES D. TIELENS was appointed  
27 Executor of the decedent's Will. He qualified as the Executor on  
28 that date, and ever since has been and now is the Executor of the

Judgment/ Waiver

Public Record



1 decedent's Will.

2           The time for filing or presenting claims has expired and  
3 the estate now is in a condition to be closed.

4           All debts of the decedent and of the estate and all  
5 expenses of administration thereof, except closing expenses and  
6 attorneys' fees, have been paid.

7           All personal property taxes due and payable by this  
8 estate have been paid.

9           No federal estate tax return has been made or filed for  
10 this estate for the reason that the estate was not sufficient to  
11 require such a return, and no federal estate tax is due.

12           No California state or federal income taxes are due or  
13 payable by this estate.

14           The estimated expenses of closing this estate, including  
15 the reserve for payment of any tax deficiency which may be assessed  
16 against the estate, are \$1,000.00, and the Executor should be  
17 authorized to withhold that sum from distribution.

18           The Executor should be directed to pay to his attorneys,  
19 LAW OFFICES OF JAMES T. YBARRONDO, the sum hereafter specified as  
20 their statutory fee for their services rendered in the  
21 administration of this estate.

22           All the assets of the estate are the separate property of  
23 the decedent.

24           Distribution should be ordered as prayed for.

25           IT IS ORDERED AND ADJUDGED that:

26           1. The administration of the estate is brought to a  
27 close without the requirement of an accounting.

28           2. All the acts and transactions of the Executor

Judgment/ Waiver

2

1 relating to the matters set forth in the petition are ratified,  
2 confirmed, and approved.

3 3. The Executor is authorized and directed to retain the  
4 sum of \$1,000.00 from distribution at this time to defray closing  
5 expenses and as a reserve for any tax deficiency which may  
6 hereafter be determined to be due, and any unexpended portion of  
7 said reserve is hereby distributed as set forth in paragraph 5  
8 below.

9 4. The Executor is directed to pay to his attorneys, LAW  
10 OFFICES OF JAMES T. YBARRONDO, the sum of ~~\$9,811.13~~ <sup>\$9,630.02</sup> as their  
11 statutory fees for their services rendered in the administration of  
12 this estate.

13 5. The estate in the possession of the Executor  
14 remaining for distribution, after the payments and withholding  
15 herein ordered in Paragraphs 3 and 4 above, consists of cash and  
16 other assets and is distributed as follows:

17 TO JAMES D. TIELENS:

18 Cassini Promissory Note \$ 30,277.04  
19 Secured by property located at:  
31812 Highway 74, Hemet

20 Home and Real Property located at:  
21 566 East Johnston Avenue  
Hemet, CA 92543

22 Legally described as:  
23 Lot 3 in Block 195 of the Lands of the  
Hemet Land Company, as shown by Map on  
24 file in Book 1 Page 14 of Maps, Riverside  
County Records: Excepting therefrom the  
25 Westerly 208.7 feet of the North half of  
said Lot 3; also excepting therefrom that  
26 portion of said Lot 3 described as  
follows: Beginning at the Southwest  
27 corner; thence North on the West line of  
said Lot 3, 330 feet to the Northwest  
28 corner of the South half of said Lot 3;  
thence East on the North line of the South  
half of Lot 3, 233 feet; thence South,  
parallel with the West line of Lot 3, 97

Judgment/ Waiver

3

1 feet; thence West, parallel with the South  
2 line of Lot 3, 66 feet; thence South,  
3 parallel with the West line of Lot 3, 233  
4 feet to the South line of Lot 3; thence  
5 West, on the South line of Lot 3, 167 feet  
6 to the point of beginning; Also excepting  
7 therefrom an undivided one-half interest  
8 in all oil, gas, petroleum, naptha and  
9 other hydrocarbon substances and minerals  
10 in, upon or beneath the property herein  
11 described, together with right of entry  
12 and all other rights appurtenant thereto  
13 and rights of way and easements necessary  
14 to develop and remove same; also excepting  
15 therefrom any portion thereof included on  
16 Buena Vista Street and Johnston Avenue.

290,000.00

10 Household furniture and furnishings

2,000.00 -

11 1987 Chevrolet Suburban  
12 VIN#1GKER16KXHF514591

2,450.00 -

13 1990 Chevrolet  
14 VIN#2GCHC39N7L1200148

3,175.00 -

15 1989 Chevrolet Suburban  
16 VIN#1GNCR26N9KF185255

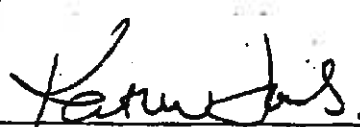
3,000.00 -

17 Cash Residue

104.56  
\$331,006.60

18  
19 6. Any other property of the estate not now known or  
20 discovered which may belong to the estate, or in which the decedent  
21 or the estate may have any interest, shall be distributed as set  
22 forth above in paragraph 3.

23 DATED: 6/2/09

24  
25   
26 JUDGE OF THE SUPERIOR COURT  
27 Commissioner  
28

Judgment/ Waiver

4

This must be in red to be a  
"CERTIFIED COPY"

Each document to which this certificate is attached  
is certified to be a full, true and correct copy of the  
original on file and of record in my office.

Superior Court of California  
County of Riverside

By

*Mary J. Martinez*  
DEPUTY  
Dated: *10/16/09*



Certification must be in red to be a  
"CERTIFIED COPY"

# STATE OF CALIFORNIA

## CERTIFICATE OF VITAL RECORD

# COUNTY OF RIVERSIDE

## RIVERSIDE, CALIFORNIA

3052013105744

### CERTIFICATE OF DEATH

3201333006035

STATE FILE NUMBER		USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-1 (REV 2/05)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) <b>JAMES</b>		2. MIDDLE <b>DEAN</b>		3. LAST (Family) <b>TIELENS</b>	
AKA, ALSO KNOWN AS - Include full AKA (First, Middle, Last)		4. DATE OF BIRTH mm/dd/yyyy <b>11/18/1955</b>		5. AGE Yrs. Mths. Ds. <b>57</b>	
6. BIRTH STATE/FOREIGN COUNTRY <b>CA</b>		10. SOCIAL SECURITY NUMBER [REDACTED]		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS/ORDINANCE (in Time of Death) <b>DIVORCED</b>		7. DATE OF DEATH mm/dd/yyyy <b>05/26/2013</b>		8. HOUR (24 Hours) <b>1115</b>	
13. EDUCATION - Highest Level/Degree (see worksheet on back) <b>HS GRADUATE</b>		14/15. WAS DECEDENT HISpanic/Latino/Hispanic? (If yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED <b>MOTORCYCLE BUILDER</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>TRANSPORTATION</b>		19. YRS IN OCCUPATION <b>30</b>	
20. DECEDENT'S RESIDENCE (Street and number, or location) <b>566 EAST JOHNSTON AVENUE</b>					
21. CITY <b>HEMET</b>		22. COUNTY/PROVINCE <b>RIVERSIDE</b>		23. ZIP CODE <b>92543</b>	
24. YEARS IN COUNTY <b>50</b>		25. STATE/FOREIGN COUNTRY <b>CA</b>			
26. INFORMANT'S NAME, RELATIONSHIP <b>JASON TIELENS, SON</b>		27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>29290 GIRARD STREET, HEMET, CA 92544</b>			
28. NAME OF SURVIVING SPOUSE/SPouse-First <b>MAURICE</b>		29. MIDDLE <b>ADRIAN</b>		30. LAST (Family) <b>TIELENS</b>	
31. NAME OF FATHER/PARENT-FIRST <b>MARY</b>		32. MIDDLE <b>MARGARET</b>		33. LAST (Family) <b>SHUMACHER</b>	
34. BIRTH STATE <b>CA</b>		35. BIRTH STATE <b>KS</b>			
36. PLACE OF BIRTH (City and State) <b>06/04/2013</b>		37. PLACE OF BIRTH (City and State) <b>29290 GIRARD STREET, HEMET, CA 92544</b>			
38. TYPE OF DISPOSITION <b>CR/RES</b>		39. SIGNATURE OF EMBALLER [REDACTED]		40. LICENSE NUMBER [REDACTED]	
41. NAME OF FUNERAL ESTABLISHMENT <b>MCWANE FAMILY FUNERAL HOME</b>		42. DATE OF LOCAL REGISTRATION <b>06/03/2013</b>		43. DATE mm/dd/yyyy <b>06/03/2013</b>	
101. PLACE OF DEATH <b>HEMET VALLEY MEDICAL CENTER</b>		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> IP <input checked="" type="checkbox"/> ER/ICU <input type="checkbox"/> DCU		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY <b>RIVERSIDE</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1117 EAST DEVONSHIRE AVENUE</b>		106. CITY <b>HEMET</b>	
107. CAUSE OF DEATH Enter the chain of events --- diseases, injuries, or complications --- 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.					
IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>(A) PULMONARY THROMBOEMBOLISM</b>		108. DEATH REPORTED TO CORONER? (A) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		109. DEATH REPORTED TO CORONER? (B) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Sequentially list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST <b>(B) DEEP VEIN THROMBOSIS</b>		110. BODILY PERFORMED? (C) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. AUTOPSY PERFORMED? (D) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>MORBID OBESITY, HYPERTENSIVE CARDIOVASCULAR DISEASE, CHRONIC OBSTRUCTIVE PULMONARY DISEASE, DIABETES MELLITUS</b>		113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) <b>NO</b>		114. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: (A) mm/dd/yyyy (B) mm/dd/yyyy		115. SIGNATURE AND TITLE OF CERTIFIER [REDACTED]		116. LICENSE NUMBER [REDACTED]	
117. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE [REDACTED]		118. DATE mm/dd/yyyy <b>05/31/2013</b>			
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/yyyy <b>05/31/2013</b>	
122. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		123. HOUR (24 Hours) <b>1115</b>			
124. DESCRIBE HOW INJURY OCCURRED (events which resulted in injury)					
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126. SIGNATURE OF CORONER / DEPUTY CORONER [REDACTED]		127. DATE mm/dd/yyyy <b>05/31/2013</b>		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER <b>RACHEL BAKER, DEPUTY CORONER</b>	
STATE REGISTRAR		FAX AUTH.#		CENSUS TRACT	



\* 034415404 \*

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.

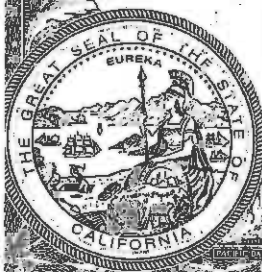
DATE ISSUED

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

LARRY V. WARE  
ASSESSOR-COUNTY CLERK-RECORDER  
RIVERSIDE COUNTY, CALIFORNIA

PRINTED BY: 10072

ANY ALTERATION OR ERASURE VOID THIS CERTIFICATE



# AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. James D. Tielens died on 05/26/2013 in the County of Riverside, State of California;
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate;
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate;
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$150,000.00;
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$47,950.97 +/-, generated from Assessor's Parcel Number(s) 446251047-7, sold at the Riverside County, California, public auction of tax-defaulted property held on 8/15/2013.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:

James R. Tielens  
Jason Tielens

7. The undersigned (please check which box(s) applies):

- ☒ Is successor(s) of the decedent to the decedent's interest in the described property, or  
☐ Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;

8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

9/21/14  
(DATE)  
9/26/14  
(DATE)

Jason Tielens  
Printed Name  
James Tielens  
Printed Name

(DATE)  
(DATE)

Printed Name  
Printed Name

(DATE)

Printed Name

(Attach Additional Sheet if Necessary)

Page 1 of 2

James Tielens  
signature  
signature  
signature  
signature

**CERTIFICATE OF ACKNOWLEDGEMENT**

State of California

County of Riverside

On 9/21/14 before me, Regina M. Anderson, Notary Public, Personally appeared  
(Date) (Here insert name and title of the officer)

JASON TIELEKS, who proved to me on  
(Name of Signer(s))

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/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 Regina M. Anderson (Seal)

CERTIFICATE OF ACKNOWLEDGEMENT

State of California

County of Riverside

On 09/26/2014 before me, Kimberly Martinez, Notary Public, Personally appeared  
(Date) James R Tielens (Here insert name and title of the officer)

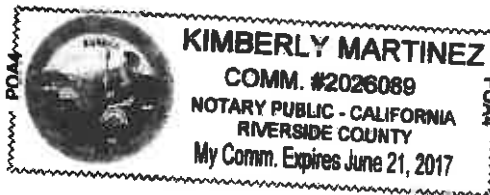
(Name of Signer(s))

, 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 Kimberly Martinez (Seal)





# STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

## COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

104 -

84-408881

### CERTIFICATE OF LIVE BIRTH STATE OF CALIFORNIA

33 011085

STATE BIRTH CERTIFICATE NUMBER		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF CHILD—FIRST	1B. MIDDLE	1C. LAST	
JASON	DEAN	TIELENS	
2. SEX	3A. THIS BIRTH SINGLE, TWIN, OR IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH—MONTH, DAY, YEAR	4B. HOUR—(24 HOUR CLOCK TIME)
Male	Single	Dec 5, 1984	1119
5A. PLACE OF BIRTH—NAME OF HOSPITAL OR FACILITY	5B. STREET ADDRESS (STREET, NUMBER, OR LOCATION)		
Hemet Valley Hospital	1116 E. Latham		
5C. CITY OR TOWN	5D. COUNTY		
Hemet	Riverside		
6A. NAME OF FATHER—FIRST	6B. MIDDLE	6C. LAST	7. STATE OF BIRTH
James	Dean	Tielems	CA
8A. NAME OF MOTHER—FIRST	8B. MIDDLE	8C. LAST (BIRTH NAME)	9. AGE OF FATHER
Brenda	Dawn	Kurz	29
10. AGE OF MOTHER	11. DATE OF BIRTH		
26	CA		
12. I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE	13A. PHYSICIAN OR OTHER ATTENDANT—SIGNATURE		13B. RELATIONSHIP TO CHILD
			12C. DATE SIGNED
			12-6-84
14. I CERTIFY THAT I ATTENDED THIS BIRTH AND THAT THE CHILD WAS BORN ABOVE AT THE HOUR, DATE AND PLACE STATED	15. PHYSICIAN OR OTHER ATTENDANT—SIGNATURE		16. DATE SIGNED
			12-13-84
17. TYPED NAME AND ADDRESS	18. LOCAL REGISTRAR—SIGNATURE		
Robert V. Tate M.D. 1600 E. Florida Ave #103 Hemet			
19. DATE ACCEPTED FOR REGISTRATION	20. DATE OF DEATH		
DEC 27 1984			



\*034415365\*

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Larry W. Ward  
LARRY W. WARD  
ASSESSOR-COUNTY CLERK-RECORDER  
RIVERSIDE COUNTY, CALIFORNIA

28 NOV 1985 0313

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



## NOTICE OF ACTION

Jason Tielens  
566 E JOHNSTON AVE  
HEMET, CA 92543-7199

**Worker Name:** Christi Andre

**Worker ID:**

**Worker Phone Number:** (951) 791-3673

**Notice Date:** 05/12/2012

**Case Name:** Jason Tielens

**Case Number:**

**Office Hours:** Mon. - Thur. 7:00 AM - 5:30 PM Closed Fri.

**TDD - For Hearing Impaired:** (800) 952-8349

Questions? Ask your Worker.

State Hearing: If you think this action is wrong, you can ask for a hearing. The back of this page tells how. Your benefits may not be changed if you ask for a hearing before this action takes place.

As of 05/31/2012, the County is stopping your:

☐ Cash Aid

☒ CalFresh

Here's why:

As of the 11th of this month, the County has not received your quarterly report (QR 7) due this month.

TO STOP THIS ACTION, the County must RECEIVE your COMPLETE report no later than the FIRST WORKING DAY OF NEXT MONTH.

The information you give us may change or stop your cash aid.

### CalFresh Only:

You must report any new household members and their social security numbers. If you have already reported a new member but not their social security number, it must be reported now.

If you need help in completing the quarterly report, the County will help you to do so. Please contact the County and ask for help.

YOU MUST RETURN THE QR 7 IF YOU WANT TO CONTINUE TO GET Cal/WORKs CASH AID.

You and your family may still continue to get Medi-Cal if your cash aid stops and:

- you have earnings from a job, a business you started or a pay raise.
- you have started to receive or had an increase in child/spousal support payments.

**Medi-Cal:** This notice DOES NOT change or stop Medi-Cal Benefits. If there is a change in your Medi-Cal benefits, you will receive another notice. **Keep using your plastic Benefits Identification Card(s).**

**Rules:** These rules apply. You may review them at your welfare office - Cash Aid: MPP 40-105.1, 40-181.22; CalFresh: 63-103(n), 63-508.6.

DECLARATION  
OF ONE AND THE SAME PERSON(S)

I, Jason Tielens, as heir to the Estate of James D. Tielens, 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 as Jason Dean Tielens, Jason D. Tielens and Jason Tielens.
3. I am a biological son to James D. Tielens who is one and the same person as James Dean Tielens and James Tielens.
4. James Tielens is also one and the same person who is noted on the referenced Judgment on Waiver of Accounting for the Estate of Maurice A. Tielens as Document Number: 2009-0318990, Recorded in Riverside County on 06/23/2009.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 446251047-7.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 21<sup>st</sup> day of Sept., 2014, at Hemet, California

x Jason Tielens  
Jason Tielens, as heir to the Estate of James D. Tielens

State of California  
County of Riverside

IURAT

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

21<sup>st</sup> day of Sept., 2014, by  
Date Jason Tielens Name of Signer

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

Signature Regina M. Anderson  
Signature of Notary Public

(Place Notary Seal Above)

GD Number: 18780-188987

