

FORM APPROVED COUNTY COUNSEL 7/27/15  
 BY: GREGORY P. PRAMOS DATE

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

765A



**SUBMITTAL DATE:  
 JUL 27 2015**

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

**SUBJECT:** Recommendation for Distribution of Excess Proceeds for Tax Sale No. 196, Item 245. Last assessed to: Josie Mary Smith, a single woman. District 1 [\$17,144] Fund 65595 Excess Proceeds from Tax Sale.

**RECOMMENDED MOTION:** That the Board of Supervisors:  
 1. Approve the claim from Found Extra Money, LLC, assignee for David Thompson, Successor Trustee to the Estate of Josie Mary Smith, last assessee, for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 374093011-0;  
 (continued on page two)

**BACKGROUND:**

**Summary**

In accordance with Section 3691 et seq. of the California Revenue and Taxation Code, and with prior approval of the Board of Supervisors, The Tax Collector conducted the April 29, 2013 public auction sale. The deed conveying title to the purchasers at the auction was recorded June 20, 2013. Further, as required by Section 4676 of the California Revenue and Taxation Code, notice of the right to claim excess proceeds was given on July 17, 2013 to parties of interest as defined in Section 4675 of said code. Parties of interest have been determined by an examination of lot book reports as well as Assessor's and Recorder's records, and various research methods were used to obtain current mailing addresses for these parties of interest.  
 (continued on page two)

*Don Kent*  
 Don Kent  
 Treasurer-Tax Collector

Departmental Concurrence

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 17,144	\$ 0	\$ 17,144	\$ 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 8/10/15*  
 County Executive Office Signature Samuel Wong

**MINUTES OF THE BOARD OF SUPERVISORS**

On motion of Supervisor Tavaglione, seconded by Supervisor Jeffries and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Tavaglione, Washington and Benoit  
 Nays: None  
 Absent: Ashley  
 Date: August 18, 2015  
 xc: Treasurer, Auditor

Kecia Harper-Ihem  
 Clerk of the Board  
 By: *Kecia Harper-Ihem*  
 Deputy

A-30  
 Positions Added  
 4/5 Vote  
 Change Order

Prev. Agn. Ref.: District: 1 Agenda Number:

9-16

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

**FORM 11:** Recommendation for Distribution of Excess Proceeds for Tax Sale No. 196, Item 245. Last assessed to: Josie Mary Smith, a single woman. District 1 [\$17,144] Fund 65595 Excess Proceeds from Tax Sale.

**DATE:** JUL 27 2015

**PAGE:** Page 2 of 2

**RECOMMENDED MOTION:**

2. Authorize and direct the Auditor-Controller to issue a warrant to Found Extra Money, LLC, assignee for David Thompson, Successor Trustee to the Estate of Josie Mary Smith in the amount of \$17,144.83, no sooner than ninety days from the date of this order, unless an appeal has been filed in Superior Court, pursuant to the California Revenue and Taxation Code Section 4675.

**BACKGROUND:**

**Summary (continued)**

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

1. Claim from Found Extra Money, LLC, assignee for David Thompson, Successor Trustee to the Estate of Josie Mary Smith based on an Assignment of Right to Collect Excess Proceeds dated June 12, 2014, an Order Approving Final Report and for Distribution Under Will recorded May 1, 1961 as Instrument No. 36938, the Josie Smith Revocable Trust dated July 14, 2003 and the death certificate of Josie Mary Smith.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Found Extra Money, LLC, assignee for David Thompson, Successor Trustee to the Estate of Josie Mary Smith be awarded excess proceeds in the amount of \$17,144.83. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimant by certified mail.

**Impact on Citizens and Businesses**

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

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

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

**CLAIM 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 196 Item 245 Assessment No.: 374093011-0

Assessee: SMITH, JOSIE M

Situs: 307 SILVER ST LAKE ELSINORE 92530

Date Sold: April 29, 2013

Date Deed to Purchaser Recorded: June 20, 2013

Final Date to Submit Claim: June 20, 2014

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$~~17,600.00 (PAY)~~ from the sale of the above mentioned real property. I/We were the  lienholder(s), **ASSIGNEE**  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. 2013-0295363; recorded on 06/20/2013. 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.**

ASSIGNMENT of RIGHT TO COLLECT EXCESS PROCEEDS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 16<sup>th</sup> day of JUNE, 2014 at LOS ANGELES, CA  
County, State

Dennis A. Murkey  
Signature of Claimant

DENNIS A. MURKEY, MANAGER  
FOUND EXTRA MONEY, LLC  
Print Name

9420 RESEDA BLVD., # 830  
Street Address

NORTHRIDGE, CA 91324  
City, State, Zip

(888) 867-4785  
Phone Number

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

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

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

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

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

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Re: Claim for Excess Proceeds

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COPY of THE DEED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 12 day of June, 2014 at San Bernardino, CA  
County, State

David Thompson  
Signature of Claimant

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

DAVID THOMPSON, EXECUTOR  
Print Name

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

6155 PALM AVE, # 805  
Street Address

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

SAN BERNARDINO, CA 92407  
City, State, Zip

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

(909) 731-3013  
Phone Number

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

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'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 assign to FOUNDERS MONEY, LLC 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 374-093-011-0 sold at public auction on 04/29/2013. I understand that the total of excess proceeds available for refund is \$17,600.00 (APPROX.) 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.

David Thompson  
(Signature of Party of Interest/Assignor)

DAVID THOMPSON, EXECUTOR  
(Name Printed)

6155 PALM AVE., # 805  
(Address)

STATE OF CALIFORNIA )ss.  
COUNTY OF SAN BERNARDINO

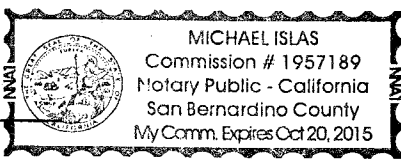
SAN BERNARDINO, CA 92407  
(City/State/Zip)

(909) 731-3013  
(Area Code/Telephone Number)

On June 12 2014, before me, Michael Islas, Notary Public, personally appeared DAVID THOMPSON, 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)



(This area for official seal)

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

Dennis A. Murkey  
(Signature of Assignee)

DENNIS A. MURKEY, MANAGER  
(Name Printed)

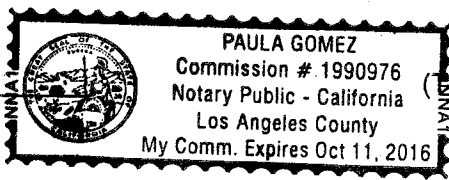
FOUNDERS MONEY, LLC  
9420 RESERVA BLVD., # 830  
(Address)

STATE OF CALIFORNIA )ss.  
COUNTY OF LOS ANGELES

NORWIDGE, CA 91324  
(City/State/Zip)

On June 16-2014, before me, the undersigned, a Notary Public in and for said State, personally appeared Dennis A. Murkey, 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.  
Paula Gomez  
(Signature of Notary)



(This area for official seal)

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF LOS ANGELES

April 17, 1961. Order and Decree No. 27

Dept. 9 of the above entitled Court convened, the Honorable

Clyde C. Triplett, Judge Presiding, and the following proceedings were had:

No. 423807

In the Matter of the Estate

ORDER APPROVING FINAL REPORT  
AND FOR DISTRIBUTION UNDER WILL

of  
ETHEL WILLIAMS,  
also known as  
ETHEL WASHINGTON, and as  
ETHEL SMITH,  
Deceased.

The final report and petition for allowance of fees and extra fees and for distribution herein of Josie Mary Smith, as administratrix with-will-annexed of the estate of said deceased, by Easton and Gould, her attorneys, coming on this 17th day of April, 1961, for hearing and approval by the Court, all notices of said hearing having been given as required by law, the Court, after hearing the evidence, and finding that the property of said estate is separate property, and that there are no inheritance taxes nor personal property taxes due and payable by said estate, approves said report, and orders distribution of said estate as follows:

It is Ordered, Adjudged and Decreed by the Court that due notice to the creditors of said deceased has been given; that said administratrix with-will-annexed has in her possession belonging to said estate, an accounting being waived, a balance consisting of \$1,592.19 in cash, and the property hereinafter described, at the value of the appraisal, and said report is hereby approved and allowed; that said attorneys are hereby allowed the sum of \$412.00 as statutory fees and the further sum of \$350.00 for extraordinary services rendered said estate; and that in pursuance of and according to the provisions of the last will of said deceased, the residue of cash, and the property hereinafter described, and all other property belonging to said estate, whether described herein or not, be and is hereby distributed as follows:

To Daniel Williams, one-half of furniture and furnishings located at 11419 South Stanford, Los Angeles, California;

To Josie Mary Smith, daughter of decedent, all the residue, residue and remainder of said estate.

The property of said estate, hereby distributed, so far as the same is known, is described as follows:

Real property located at 11419 South Stanford, Los Angeles, California, more particularly described as: So. 40 ft. of the No. 80 ft. of Lot 171, of Tract 3754, in the County of Los Angeles, State of California, as per map recorded in Book 41, page 7, of Maps, Records of said County;

Undivided one-half interest in Lots 7 and 9 in Block 65 of Elsinore, in the County of Riverside, State of California, as shown by Map on file in Book 6, page 302, of Maps, Records of San Diego County, California;

Furniture and furnishings at 11419 South Stanford, Los Angeles, California;

Personal effects;  
Residue of cash.

THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED IS A TRUE, FULL AND CORRECT COPY OF THE ORIGINAL ON FILE AND OF RECORD IN MY OFFICE

ATTEST APR 25 1961 19.....

County Clerk and Clerk of the Superior Court of the State of California, in and for the County of Los Angeles.

W. J. Jackson DEPUTY

PROBATE ORDER AND DECREE

RECEIVED FOR RECORD  
MAY 1 1961  
Attest  
Easton & Gould  
Attorneys  
Recorded in Official Records  
San Bernardino County, California  
No. 36938  
MAY 1 1961  
Records

W. J. EASTON  
1961  
LOS ANGELES, CALIF.

36938

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF LOS ANGELES**  
**DEPARTMENT OF HEALTH SERVICES**

**CERTIFICATE OF DEATH**

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV 1/03)		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT --- FIRST (Given) <b>Josie</b>		2. MIDDLE <b>Mary</b>		3. LAST (Family) <b>Smith</b>	
AKA ALSO KNOWN AS --- Include full AKA (FIRST, MIDDLE, LAST)		4. DATE OF BIRTH mm/dd/yyyy <b>05/06/1933</b>		5. AGE Yrs. <b>71</b>	
9. BIRTH STATE/FOREIGN COUNTRY <b>LOUISIANA</b>		10. SOCIAL SECURITY NUMBER		6. SEX <b>FEMALE</b>	
13. EDUCATION --- Highest Level Degree (see worksheet on back) <b>SOME COLLEGE</b>		11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12. MARITAL STATUS (at Time of Death) <b>NEVER MARRIED</b>	
14/15. WAS DECEDENT SPANISH/HISPANIC/LATINO? (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>AFRICAN AMERICAN</b>		7. DATE OF DEATH mm/dd/yyyy <b>08/27/2004</b>	
17. USUAL OCCUPATION --- Type of work for most of life. DO NOT USE RETIRED <b>EMPLOYMENT DEVELOPER</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>EMPLOYMENT DEVELOPMENT DEPARTMENT</b>		8. HOUR (24 Hours) <b>1358</b>	
20. DECEDENT'S RESIDENCE (Street and number or location) <b>11419 SOUTH STANFORD AVENUE</b>					
21. CITY <b>LOS ANGELES</b>		22. COUNTY/PROVINCE <b>LOS ANGELES</b>		23. ZIP CODE <b>90059</b>	
24. YEARS IN COUNTY <b>45</b>		25. STATE/FOREIGN COUNTRY <b>CALIFORNIA</b>		26. INFORMANT'S NAME, RELATIONSHIP <b>DAVID THOMPSON-SON</b>	
27. INFORMANT'S MAILING ADDRESS (Street and number or rural route number, city or town, state, ZIP) <b>2023 GIFFORD ST. CANOGA PARK, CA 91306</b>					
28. NAME OF SURVIVING SPOUSE --- FIRST		29. MIDDLE		30. LAST (Maiden Name)	
31. NAME OF FATHER --- FIRST <b>JOHNNY</b>		32. MIDDLE <b>B.</b>		33. LAST <b>UNKNOWN</b>	
34. BIRTH STATE <b>LA</b>		35. NAME OF MOTHER --- FIRST <b>ETHEL</b>		36. MIDDLE <b>MARY</b>	
37. LAST (Maiden) <b>WILLIAMS</b>		38. BIRTH STATE <b>LA</b>		39. DISPOSITION DATE mm/dd/yyyy <b>09/02/2004</b>	
40. PLACE OF FINAL DISPOSITION <b>ROSE HILLS MEMORIAL PARK 3900 WORKMAN MILL ROAD WHITTIER, CA.</b>					
41. TYPE OF DISPOSITION(S) <b>BURIAL</b>		42. SIGNATURE OF EMBALMER <i>James Hawthorne Jr.</i>		43. NUMBER	
44. NAME OF FUNERAL ESTABLISHMENT <b>SIMPSON FAMILY MORTUARY</b>		45. LICENSE NUMBER <b>FD1559</b>		46. SIGNATURE OF LOCAL REGISTRAR <i>Thomas L. Hawthorne</i>	
47. DATE mm/dd/yyyy <b>09/02/2004</b>					
101. PLACE OF DEATH <b>Kaiser Foundation Hospital</b>		102. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home Etc <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104. COUNTY <b>Los Angeles</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location) <b>25825 S Vermont Avenue</b>		106. CITY <b>Harbor City</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 (A) <b>Respiratory Failure</b>		108. TIME INTERVAL BETWEEN CHEST AND DEATH (A) <b>Mins.</b>		109. DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" 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>Pneumonia</b>		(B) <b>Days</b>		110. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
(C) <b>Metastatic Lung Cancer</b>		(C) <b>Years</b>		111. AUTOPSY PERFORMED? <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>Atrial Fibrillation, Congestive Heart Failure, Disseminated Intravascular Coagulopathy, Myocardial Infarction, Chronic Obstructive Pulmonary Disease</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 checked="" 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 Decedent Last Seen Alive (A) mm/dd/yyyy (B) mm/dd/yyyy <b>08/16/2004 08/27/2004</b>		115. SIGNATURE AND TITLE OF CERTIFIER <i>Timothy Yee M.D.</i>		116. LICENSE NUMBER <b>G 063616</b>	
117. DATE mm/dd/yyyy <b>08/30/2004</b>					
118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>Timothy Yee, MD 25825 S Vermont Avenue, Harbor City, CA 90710</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 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	
122. HOUR (24 Hours)		123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		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		127. DATE mm/dd/yyyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
STATE REGISTRAR		A B C D E		FAX AUTH. # CENSUS TRACT	



This is a true certified copy of the record filed in the County of Los Angeles Department of Health Services if it bears the Registrar's signature in purple ink.

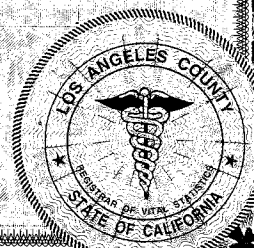
*Thomas L. Hawthorne*

**246 SEP 02 2004**  
DATE ISSUED

Director of Health Services and Registrar

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



**1**



**CERTIFICATION OF VITAL RECORD**

**COUNTY OF LOS ANGELES • REGISTRAR-RECORDER/COUNTY CLERK**

STATE FILE NO.		CERTIFICATE OF LIVE BIRTH		REGISTRATION YEAR 1901	REGISTRAR NO. 9612
THIS CHILD (TYPE OR PRINT NAME)	1A CHILD'S FIRST NAME <b>David</b>	1B MIDDLE NAME <b>Jerome</b>	1C LAST NAME <b>Thompson</b>		
	2 SEX <b>Male</b>	3A THIS BIRTH SINGLE, TWIN, OR TRIPLET <b>Single</b>	3B TWIN OR TRIPLET THIS CHILD BORN FIRST, 2ND, OR 3RD	4A TIME OF BIRTH (MONTH, DAY, YEAR) <b>March 14, 1954</b>	4B HOUR <b>3:46 P.</b>
PLACE OF BIRTH	5A COUNTY <b>LOS ANGELES</b>	5B CITY OR TOWN <b>LOS ANGELES</b>	5C ADDRESS (STREET, NUMBER, OR RURAL ADDRESS, COUNTY, STATE, CITY, ZIP CODE) <b>1200 NO. STATE STREET</b>		
	5D FULL NAME OF HOSPITAL OR INSTITUTION <b>LOS ANGELES COUNTY GENERAL HOSPITAL</b>				
USUAL RESIDENCE OF MOTHER (ZIP CODE)	6A STATE <b>California</b>	6B COUNTY <b>Los Angeles</b>	6C CITY OR TOWN <b>Los Angeles</b>	6D STREET OR RURAL ADDRESS (COUNTY, STATE, CITY, ZIP CODE) <b>11419 Stanford Avenue</b>	
	7A MAIDEN NAME OF MOTHER—FIRST NAME <b>Josie</b>		7B MIDDLE NAME <b>Mary</b>	7C LAST NAME <b>Smith</b>	7D COLOR OR RACE OF MOTHER <b>Negro</b>
MOTHER OF CHILD	9 AGE OF MOTHER AT TIME OF THIS BIRTH (YEARS) <b>20</b>	10 BIRTHPLACE (STATE OR FOREIGN COUNTRY) <b>Louisiana</b>		11 MAILING ADDRESS OF MOTHER (COUNTY, STATE, CITY, ZIP CODE)	
	12A NAME OF FATHER—FIRST NAME <b>Delmar</b>		12B MIDDLE NAME	12C LAST NAME <b>Thompson</b>	13 COLOR OR RACE OF FATHER <b>Negro</b>
FATHER OF CHILD	14 AGE OF FATHER AT TIME OF THIS BIRTH (YEARS) <b>27</b>	15 BIRTHPLACE (STATE OR FOREIGN COUNTRY) <b>Colorado</b>		16A OCCUPATION <b>Health Inspector</b>	16B KIND OF BUSINESS OR INDUSTRY <b>L.A. City Health Dept.</b>
	17 I HEREBY CERTIFY THAT THE ABOVE STATED INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE		17A SIGNATURE OF FATHER OR OTHER INFORMANT (PRINT NAME) <i>William E Peterson</i>		17B DATE SIGNED BY FATHER OR OTHER INFORMANT <b>March 15, 1954</b>
ATTENDANT'S CERTIFICATION	18 I HEREBY CERTIFY THAT I ATTENDED THIS BIRTH AND THAT THE CHILD WAS BORN ALIVE AT THE HOUR, DATE AND PLACE STATED ABOVE		18A SIGNATURE OF ATTENDANT <i>William E Peterson</i>		18B ADDRESS <b>L.A. County General Hospital</b>
REGISTRAR'S CERTIFICATION	19 DATE RECEIVED BY LOCAL REGISTRAR <b>MAR 25 1954</b>		20 SIGNATURE OF LOCAL REGISTRAR <i>Beatriz M. Valdez M.D.</i>		21 DESIGNATION OF FATHER (PRINT FULL NAME AND BIRTH DATE)

This is to certify that this document is a true copy of the official record filed with the Registrar-Recorder/County Clerk.

*Beatriz Valdez*


BEATRIZ VALDEZ  
Registrar-Recorder/County Clerk

This copy not valid unless prepared on engraved border displaying the Seal and Signature of the Registrar-Recorder/County Clerk.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

**CALIFORNIA** COMMERCIAL DRIVER LICENSE



DL / CLASS A  
END NONE

EXP 03/14/2017  
LN THOMPSON  
FN DAVID JEROME

DOB 03/14/1954  
RSTR. CORR LENS

03141954

*David V*

SEX M HAIR BLK EYES BRN  
HGT 6'-02" WGT 200 lb

DD 10/22/2012 61288/AAF017 ISS 10/22/2013

11



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

Recorder  
P.O. Box 751  
Riverside, CA 92502-0751  
(951) 486-7000  
(951) 486-7479 Certified Section  
(951) 486-7050 Fax  
www.riversideacr.com

Date: May 27, 2014

Dennis Murkey  
9420 Reseda Blvd. #830  
Northridge, CA 91324

Regarding Document #: 1973-0001012  
Fees: \$6.50 first page, \$1.00 each additional page  
\$1.00 for certification of complete record

### Notice Letter – Official Records

- We are unable to process your request for one or more of the following reasons.
- Based on the information provided, we are unable to locate the requested document.
- Complete the attached application and (if known) provide the year of recording, document title, type of document and full name of parties listed on the document.
- Checks we cannot accept:  Altered money orders  Insufficient Fee  Without signature  Over 90 days old  
 Temporary.
- Enclosed you will find your check/money order number(s) 2694 for/or NTE \$10.00.
- The credit card number provided was declined. You may contact us to confirm the card number and expiration date or provide another credit card number.
- For further assistance, you may want to consult with a professional title insurance company or real estate attorney.
- We do not verify information. You may purchase a copy of the record which is verification of the recording by one of the below options:
  - (1) **Phone:** You must have the year and document number of the record and a credit card. Be advised that there is an additional fee of \$6.00 for processing a credit card payment.
  - (2) **Online:** Copies are available online from 1990 to present. You may visit our website at [www.riversideacr.com](http://www.riversideacr.com) and under the online services link, select the record index search link. The \$6.00 fee for processing the credit card payment does still apply. Express mail services are available for an additional fee starting at \$19.00.
  - (3) **Mail:** Mail your request to Assessor County Clerk-Recorder, P.O. Box 751, Riverside, CA 92502-0751, Attn: Certified Section. Mail processing time is 2-4 weeks.
- See the attached pamphlet for office locations.
- If you are disputing a record that appears on your credit report, you will need to purchase a certified copy of the release (if recorded) and mail it to each of the credit reporting agencies listed below and they should update their records.
  - Experian - P.O. Box 2002, Allen, TX 75013, 1-888-397-3742
  - Equifax - P.O. Box 740241, Atlanta, GA 30378, 1-800-685-1111
  - Trans Union - 760 W. Sproul Rd, Springfield, PA, 19064-0390, 1-800-888-4213
- To expedite your request, please return this notice with your remittance and/or required information. For more information or additional office locations, you may visit our website online at [www.riversideacr.com](http://www.riversideacr.com). If you have any questions, please feel free to contact us directly at (951) 486-7479.
- Notes: We conducted a search from 1972-1973 and did not find a deed for Josie Smith. Please contact a title company.

Thank you,  
Robert #175



**COUNTY OF RIVERSIDE  
ASSESSOR-COUNTY CLERK-RECORDER  
LARRY W. WARD**

**Recorder**  
P.O. Box 751  
Riverside, CA 92502-0751  
(951) 486-7000  
(951) 486-7479 Certified Section  
(951) 486-7050 Fax  
[www.riversideacr.com](http://www.riversideacr.com)

**Date:** May 12, 2014

**Dennis Murkey**  
9420 Reseda Blvd. #830  
  
Northridge, CA 91324

**Regarding Document #: 1973-0001012**  
**Fees: \$6.50 first page, \$1.00 each additional page**  
**\$1.00 for certification of complete record**

## Notice Letter – Official Records

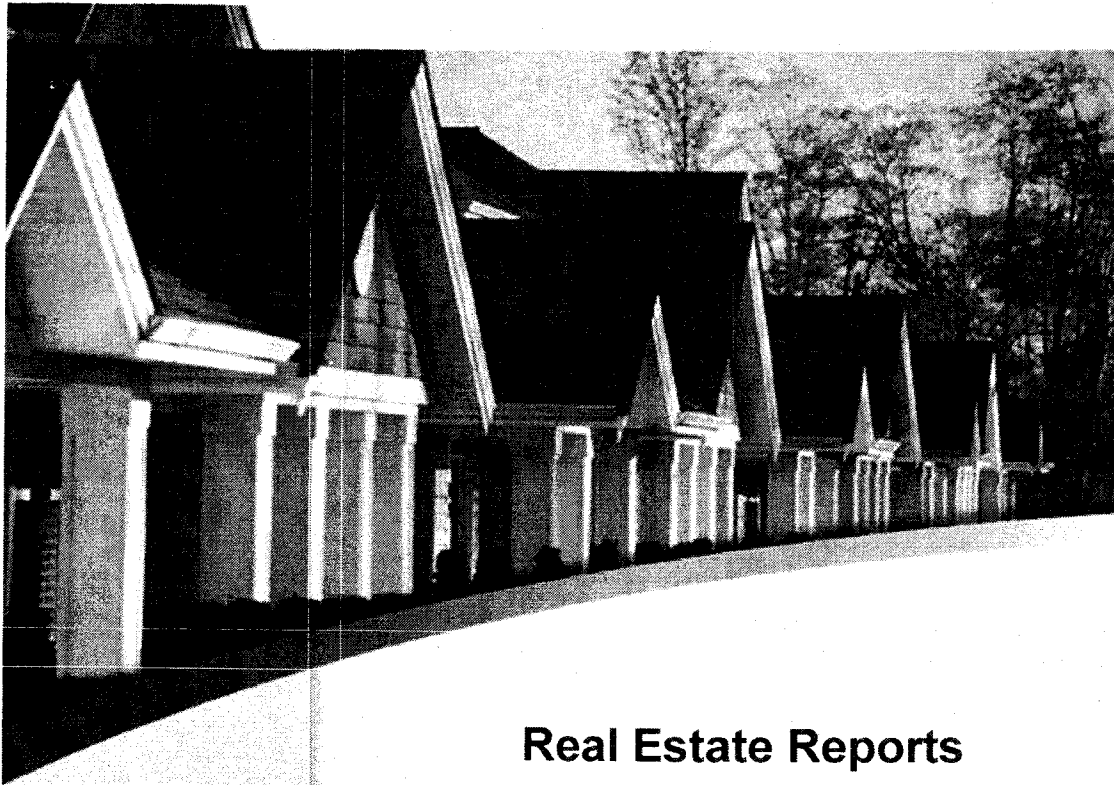
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- Based on the information provided, we are unable to locate the requested document.
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- Checks we cannot accept:  Altered money orders  Insufficient Fee  Without signature  Over 90 days old  
 Temporary.
- Enclosed you will find your check/money order number(s) 2694 for/or NTE \$ 10.00
- The credit card number provided was declined. You may contact us to confirm the card number and expiration date or provide another credit card number.
- For further assistance, you may want to consult with a professional title insurance company or real estate attorney.
- We do not verify information. You may purchase a copy of the record which is verification of the recording by one of the below options:
  - (1) **Phone:** You must have the year and document number of the record and a credit card. Be advised that there is an additional fee of \$6.00 for processing a credit card payment.
  - (2) **Online:** Copies are available online from 1990 to present. You may visit our website at [www.riversideacr.com](http://www.riversideacr.com) and under the online services link, select the record index search link. The \$6.00 fee for processing the credit card payment does still apply. Express mail services are available for an additional fee starting at \$19.00.
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  - Equifax - P.O. Box 740241, Atlanta, GA 30378, 1-800-685-1111
  - Trans Union - 760 W. Sproul Rd, Springfield, PA, 19064-0390, 1-800-888-4213
- To expedite your request, please return this notice with your remittance and/or required information. For more information or additional office locations, you may visit our website online at [www.riversideacr.com](http://www.riversideacr.com). If you have any questions, please feel free to contact us directly at (951) 486-7479.
- Notes: We conducted a search back to 1971 and did not find a Deed for Josie Smith. Please provide us with dates narrowed down to 3-5 years prior to 1965 for a better search. The document number you provided is of a REMAP.

Thank you,

3. *Nader 9/1*

COUNTY OF RIVERSIDE  
OFFICE OF THE TREASURER-TAX COLLECTOR  
SALE OF TAX DEFAULTED PROPERTY - TC196  
APRIL 25, 2013 - APRIL 29, 2013

<u>ITEM#</u>	<u>ASSESSMENT#</u>	<u>STATUS</u>	<u>SALE PRICE</u>
226	362180002-4	OFF SALE	
227	362290002-4	OFF SALE	
228	362430001-5	OFF SALE	
229	362430003-7	OFF SALE	
230	362430004-8	OFF SALE	
231	363271005-5	OFF SALE	
232	364043037-6	REDEEMED	
233	365103020-2	SOLD	\$8,100.00
234	365123007-3	REDEEMED	
235	366023006-0	REDEEMED	
236	366300001-1	NO BID	
237	368100065-5	SOLD	\$76,116.00
238	373221034-9	REDEEMED	
239	373231010-8	SOLD	\$7,681.00
240	373253010-6	SOLD	\$45,100.00
241	373253011-7	SOLD	\$27,211.00
242	374063014-0	SOLD	\$17,837.00
243	374063015-1	SOLD	\$19,812.00
244	374073001-9	SOLD	\$126,567.00
245	374093011-0	SOLD	\$23,600.00
246	375034029-1	NO BID	
247	375062009-0	NO BID	
248	375062010-0	NO BID	
249	375121022-3	SOLD	\$3,642.00
250	375121023-4	SOLD	\$3,651.00
251	375124011-2	SOLD	\$10,100.00
252	375131039-0	NO BID	
253	375131077-4	NO BID	
254	375140027-7	NO BID	
255	375152044-9	NO BID	
256	375152050-4	NO BID	
257	375171065-7	NO BID	
258	375171066-8	NO BID	
259	375182022-2	SOLD	\$3,950.00
260	375201025-3	NO BID	
261	375201026-4	NO BID	
262	375201027-5	NO BID	
263	375211004-5	NO BID	
264	375211005-6	NO BID	
265	376114020-6	REDEEMED	
266	380120001-9	REDEEMED	
267	380120002-0	REDEEMED	
268	380130002-1	REDEEMED	
269	382120007-9	REDEEMED	
270	383091025-3	SOLD	\$13,650.00



## Real Estate Reports

**Property:**  
307 Silver St  
Lake Elsinore, CA 92530  
APN: 374-093-011

Data deemed reliable, but not guaranteed. LPS Data Services 2009.  
Copyright 2009 AgentPro247.com LoanPro247.com TitlePro247.com



## Property Details

Taha, Nahian  
307 Silver St, Lake Elsinore, CA 92530

APN: 374-093-011  
Riverside County

## Owner Information

Primary Owner: TAHA, NAHIAN

Secondary Owner:

Mail Address: 160 W FOOTHILL PKWY STE  
105  
CORONA CA 92882

Site Address: 307 SILVER ST  
LAKE ELSINORE CA 92530

Assessor Parcel Number: 374-093-011

Census Tract: 0430.06

Housing Tract Number:

Lot Number: 7,9

Legal description: Lot: 7,9 Block: 65 Abbreviated Description: LOT:7,9 BLK:65 CITY:LAKE ELSINORE .41 ACRES M/L IN LOTS 7 & 9 BLK 65 MB 008/378 SD HEALDS RESUB City/Muni/Twp: LAKE ELSINORE

## Sale Information

Sale Date: 06/20/2013

Document #: 2013-0295363

Sale Amount: \$23,600

Seller: SMITH, JOSIE M

Sale Type:

Cost/SF: \$61

## Assessment &amp; Tax Information

Assessed Value: \$6,306

Land Value: \$5,082

Imp. Value: \$1,224

Homeowner  
Exemption:

% Improvement: 19.41%

Tax Amount: \$564.20

Tax Status: Delinquent: 2007

Tax Year: 2013

Tax Rate Area: 5-043

Tax Account ID:

## Property Characteristics

Bedrooms: 1

Year Built: 1940

Pool:

Bathrooms:

Square Feet: 384 SF

Lot Size: 17,859 SF

Partial Baths: 1

Number of Units: 0

No of Stories:

Total Rooms:

Garage:

Fire Place:

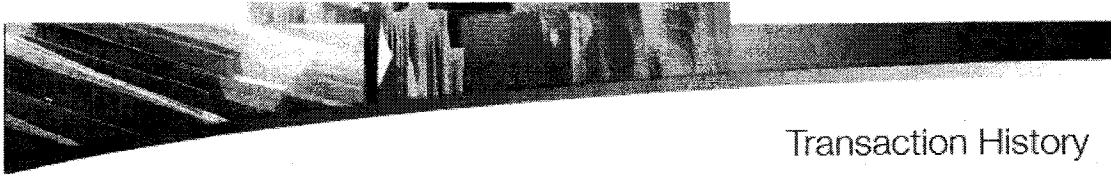
Property Type: Single Family Residential Properties

Building Style:

Use Code: Single Family Residential

Zoning:





## Transaction History

Taha, Nahian  
307 Silver St, Lake Elsinore, CA 92530

APN: 374-093-011  
Riverside County

## Prior Transfer

Recording Date: 06/20/2013

Price: \$23,600

First TD: N/A

Mortgage Doc #:

Lender Name:

Buyer Name: TAHA, NAHIAN

Buyer Vesting: N/A

Seller Name: SMITH, JOSIE M

Legal description: Lot: 7&9 Map Ref: MB8 PG378

City/Muni/Twp: LAKE ELSINORE

Document #: 2013-0295363 BK-PG -

Document Type: Public Action

Type of Sale: Sold For Taxes

Interest Rate:

## Prior Transfer

Recording Date: 09/00/1973

Price: N/A

First TD: N/A

Mortgage Doc #:

Lender Name: N/A

Buyer Name: SMITH JOSIE M

Buyer Vesting: N/A

Seller Name: N/A

Legal description: Lot: 7,9 Block: 65

Abbreviated Description: .41 ACRES M/L IN LOTS 7 & 9 BLK 65 MB 008/378 SD HEALDS RESUB

City/Muni/Twp: LAKE ELSINORE

Document #: 1973-0001012 BK-PG -

Document Type: N/A

Type of Sale: Per Assessor Transaction  
History

Interest Rate:



## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return) <b>David Thompson</b>	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input checked="" type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____  <input type="checkbox"/> Other (see instructions) ▶ _____	Exemptions (see instructions):  Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____
	Address (number, street, and apt. or suite no.)  City, state, and ZIP code	Requester's name and address (optional)
List account number(s) here (optional)		

### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

<b>Social security number</b>
* _____
<b>Employer identification number</b>
-

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

### Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

<b>Sign Here</b>	Signature of U.S. person ▶ * <i>David Thompson</i>	Date ▶ * <i>6/12/14</i>
------------------	--	-------------------------

### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** The IRS has created a page on [IRS.gov](http://IRS.gov) for information about Form W-9, at [www.irs.gov/w9](http://www.irs.gov/w9). Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

#### Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

**Note.** If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

██████████

██████████  
██████████

# Request for Taxpayer Identification Number and Certification

Give Form to the  
requester. Do not  
send to the IRS.

Name (as shown on your income tax return)  
**Found Extra Money, LLC**

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:  
 Individual/sole proprietor     C Corporation     S Corporation     Partnership     Trust/estate  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ **C**  
 Other (see instructions) ▶

Exemptions (see instructions):  
 Exempt payee code (if any) \_\_\_\_\_  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_

Address (number, street, and apt. or suite no.)  
**9420 Reseda Blvd., #830**

City, state, and ZIP code  
**Northridge, CA 91324**

List account number(s) here (optional)

Requester's name and address (optional)

Print or type  
See Specific Instructions on page 2.

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

**Social security number**

			-			-			
--	--	--	---	--	--	---	--	--	--

**Employer identification number**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Note.** If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

**Sign Here**

Signature of U.S. person ▶ *David A. Qualey, Manager*

Date ▶ *06/16/2014*

**General Instructions**

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- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and

4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

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**FOUND EXTRA MONEY, LLC**

UNCLAIMED MONEY CONSULTANTS

WWW.FoundExtraMoney.com

Email: Richard@foundextramoney.com

**LAS VEGAS OFFICE:**

8022 S. Rainbow Blvd. #362  
Las Vegas, NV 89139  
Toll Free: (888) 867-4785  
Fax No: (702) 331-4992

**LOS ANGELES OFFICE**

9420 Reseda Blvd. #830  
Northridge, CA 91324  
Toll Free: (888) 867-4785  
Fax No.: (818) 701-7184

**LIMITED POWER OF ATTORNEY**

**BE IT KNOWN that David Thompson** has made and appointed and by these presents does hereby make and appoint **Found Extra Money, LLC**, in his/her name, place and stead, for the following and limited purposes only: TO DO ALL THINGS NECESSARY TO THE FILING, COLLECTION AND RECOVERY OF ANY AND ALL UNCLAIMED PROPERTY AND/OR EXCESS PROCEEDS FUNDS FROM ANY/ALL FINANCIAL INSTITUTIONS AND/OR GOVERNMENT AGENCIES, giving and granting said attorney full power and Authority to do and perform all and every act and thing whatsoever necessary to be done in And about the specific and limited premises (set out herein) as fully, to all intents and purposes as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney shall lawful do or cause to be done by virtue hereof.

**IN WITNESS WHEREOF**, I have hereunto set my hand and seal on this 12<sup>th</sup> day of June 12, 2014.

David Thompson  
(Signature)

David Thompson  
(Please Print)

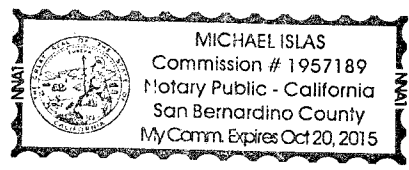
State of California

County of San Bernardino

On June 12 2014, before me, Michael Islas, Notary Public, personally appeared DAVID THOMPSON, who proved to me the basis of satisfactory evidence to be the person (s) whose name (s) is/are subscribed to the within instrument and acknowledge 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.

Notary Public  
My Commission Expires on: OCT 20 2015



(Place Notary Seal above)

**FOUND EXTRA MONEY, LLC**  
UNCLAIMED MONEY CONSULTANTS  
[WWW.FoundExtraMoney.com](http://WWW.FoundExtraMoney.com)  
Email: [Richard@foundextramoney.com](mailto:Richard@foundextramoney.com)

**LAS VEGAS OFFICE:**  
8022 S. Rainbow Blvd. #362  
Las Vegas, NV 89139  
Toll Free: (888) 867-4785  
Fax No: (702) 331-4992

**LOS ANGELES OFFICE**  
9420 Reseda Blvd. #830  
Northridge, CA 91324  
Toll Free: (888) 867-4785  
Fax No.: (818) 701-7184

PLEASE REPLY TO: **LOS ANGELES (CLAIM #: 2RI35-CA)**

**AUTHORIZATION AND FEE AGREEMENT**

By executing this Agreement, the undersigned hereby authorizes Found Extra Money, LLC, ("FEM, LLC") by its agents and its representatives, as Claimants' exclusive agent, and its assignee, to locate, prepare, and process all documents and receive and disburse all funds owed to Claimant, according to the terms of this Agreement, either as an individual, trustee, agent for a business entity, or as a personal representative or heir of an estate.

In consideration and for the time and expense to locate Claimant and in preparing and in processing the claims for these funds, that FEM, LLC has located for Claimant's benefit, Claimant agrees that FEM, LLC shall receive **25% (twenty-five percent)** of the total funds recovered. FEM, LLC is solely responsible for all processing costs including research costs, document preparation, filing fees and other costs associated with the processing of this claim, or claims. **No fee will be charged to Claimant if there is no recovery of funds.**

Claimant agrees to sign and return all documents necessary to process this claim, within 3 business days of FEM, LLC's request for such. In the event that the claim is not paid, both parties are released of their duties and obligations under this Agreement and Claimant will have no obligation to pay FEM, LLC for any expenses it has incurred.

This Agreement may be signed in counterparts and a signed copy received electronically, or by fax, shall be deemed an original and shall be governed by the laws of the State of California. In the event a dispute arises, the prevailing party shall be entitled to attorney's fees, costs and other relief by the Court. Venue shall be in Los Angeles County, California.

I agree to the above.

Date: 3/24/14

**JOSIE M. SMITH (DECEASED)**

DAVID THOMPSON  
APPLICANT/CLAIMANT (PLEASE PRINT):

David Thompson  
(SIGNATURE):

**FOUND EXTRA MONEY, LLC**

*DENNIS A. MURKIN*

By: *Dennis A. Murkin*

Title: MANAGER

Date: 06/16/2014

**FOUND EXTRA MONEY, LLC**

UNCLAIMED MONEY CONSULTANTS

**WWW.FoundExtraMoney.com**

Email: [Richard@foundextramoney.com](mailto:Richard@foundextramoney.com)

**LAS VEGAS OFFICE:**

8022 S. Rainbow Blvd. #362  
Las Vegas, NV 89139  
Toll Free: (888) 867-4785  
Fax No: (702) 331-4992

**LOS ANGELES OFFICE**

9420 Reseda Blvd. #830  
Northridge, CA 91324  
Toll Free: (888) 867-4785  
Fax No.: (818) 701-7184

**PLEASE REPLY TO LOS ANGELES OFFICE**

June 18, 2014

Mr. Don Kent  
Riverside County Treasurer-Tax Collector  
P.O. Box 12005  
Riverside, CA 92502

**RE: Excess Proceeds Claim: Parcel Number 374-093-011-0 (307 Silver Street, Lake Elsinore, CA 92530)**

Sale Date: 04/29/2013

Recorded Date: 06/20/2013

Claimant: JOSIE M. SMITH (deceased), DAVID THOMPSON (surviving son)—75% of \$17,600.00 = \$13,200.00

Claimant: FOUND EXTRA MONEY, LLC ("FEM, LLC")—25% of \$17,600.00 = \$4,400.00

Total Amount of Excess Proceeds: approximately \$17,600.00

Dear Mr. Kent:

Enclosed for your reference, please find the following documents in support of our claim(s) for the excess proceeds resulting from the tax sale of the above-referenced property at the Tax Collector's Public Tax Auction held on April 29, 2013:

1. We were unable to obtain a copy of the deed showing JOSIE M. SMITH as having been granted the property. The Riverside County Recorder's office sent correspondence dated May 27, 2014, indicating that they had conducted a search from 1972-1973, and did not find a deed for Josie Smith. In a letter dated May 12, 2014, the Recorder's office said that they had researched back to 1971, and were unable to locate a deed for JOSIE M. SMITH (2 pages);

2. County of Riverside, Office of the Treasurer-Tax Collector Sale of Tax-Defaulted Property (Sale #TC196) on April 25, 2013 thru April 29, 2013, showing the above referenced parcel to be Item# 245 on the sale list (1 page);
3. Property Report showing the legal description of the property, and JOSIE M. SMITH as having been the seller of the property at the time of the Public Auction which was recorded on 06/20/2013, and having been the buyer of the property in 1973 as evidenced by Document #: 1973-0001012 BK-PG (3 pages);
4. Birth Certificate for DAVID JEROME THOMPSON dated March 15, 1954, showing JOSIE MARY SMITH as being his Mother (1 page);
5. Certified copy of the Certificate of Death for JOSIE MARY SMITH dated September 2, 2004, and showing the informant to be DAVID THOMPSON-son (1 page);
6. Riverside County Claim for Excess Proceeds from the Sale of Tax-Defaulted Property signed by DAVID THOMPSON on June 12, 2014 (1 page);
7. Authorization, Assignment and Fee Agreement signed by DAVID THOMPSON (Assignor) on 03/24/2014 and FEM, LLC (Assignee) signed on 06/16/2014 to pay 25% of the amount to FEM, LLC (1 page);
8. Notarized Assignment of Right to Collect Excess Proceeds to Found Extra Money, LLC, signed by DAVID THOMPSON on June 12, 2014, and by DENNIS A. MURKEY, Manager for Found Extra Money, LLC on June 16, 2014 (1 page);

Pursuant to California Courts of Appeals case law and statutory authority you must recognize that our rights, as an assignee, must be protected in any distribution of proceeds by issuing of a separate draft in the name of Found Extra Money, LLC. (*Marion Drive, LLC v. Saladino* (2006) 136 Cal.App.4<sup>th</sup> 1432, 1437; *Fjaeran v. Board of Supervisors* (1989) 210 Cal.App.3d 434,442; CA Rev. & Tax Code Sec. 4675, subd (e) (2). Assignments are permitted (Section 4675, subd. (b));



9. Riverside County Claim for Excess Proceeds from the Sale of Tax - Defaulted Property signed by FEM, LLC on 06/16/2014 (1 page);
10. A valid photo ID for DAVID JEROME THOMPSON (1 page);
11. A completed and signed W-9 Form by DAVID THOMPSON dated 06/12/2014 (1 page);
12. A completed and signed W-9 Form by Found Extra Money, LLC dated 06/16/2014 (1 page);
13. Notarized Limited Power of Attorney authorizing Found Extra Money, LLC to represent DAVID THOMPSON as true and lawful attorney to do all things with regard to the collection of excess proceeds, and signed by DAVID THOMPSON on June 12, 2014 (2 pages).

Please issue separate checks as follow:

DAVID THOMPSON—75% = \$13,200.00  
FOUND EXTRA MONEY, LLC—25% = \$4,400.00

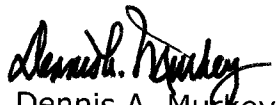
Mail to:

Found Extra Money, LLC  
9420 Reseda Blvd., #830  
Northridge, CA 91324

If you have any questions regarding the above, please do not hesitate to contact me at 888-867-4785.

Thank you.

Sincerely,

  
Dennis A. Murkey  
FEM, LLC

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Found Extra Money, LLC  
 C/O Dennis A. Murkey, Manager  
 9420 Reseda Blvd., #830  
 Northridge, CA 91324

2. Article Number

(Transfer from service label)

*EP 196-245*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

Agent

**PAK & SHIP ALL**  Addressee

B. Received by (Printed Name) **9420 RESEDA BLVD. #830**

**NORTHRIDGE, CA 91324**

C. Date of Delivery **818-349-2252**

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No

3. Service Type

Certified Mail  Express Mail

Registered  Return Receipt for Merchandise

Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

7003 2260 0004 1548 9483

May 14, 2015

Found Extra Money, LLC  
 C/O Dennis A. Murkey, Manager  
 9420 Reseda Blvd., #830  
 Northridge, CA 91324

Re: APN: 374093011-0  
 Situs: 307 Silver St., La  
 TC 196 Item 245  
 Date of Sale: April 29, 2013

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-154

To Whom It May Concern:

This office is in receipt of your claim for excess proceeds from the above-mentioned tax sale.

**Please submit the necessary proof to establish your right to claim the excess proceeds. The document(s) listed below may assist the Tax Collector in making the determination.**

Notarized Affidavit for Collection of  
 Personal Property under California  
 Probate Code 13100 (If no Will or Trust is  
 Available)

Notarized Statement of  
different/misspelled

Notarized Statement Giving Authorization to  
claim on behalf of

Certified Death Certificate for

Copy of Last Will or Trust for Josie M Smith

Copy of Marriage Certificate for

Original Note/Payment Book

Updated Statement of Monies Owed  
(as of dated of tax sale)

Articles of Incorporation (if applicable  
Statement by Domestic Stock)

Court Order Appointing Administrator

Deed (Quitclaim/Grant etc...)

Other – **Statement or document showing if  
Josie M Smith had any other children.**

If you should have any questions, please contact me at the number listed below.

Sincerely,

Jennifer Pazicni  
 Tax Sale Operations Unit  
 (951) 955-3336  
 (951) 955-3990 Fax

EP 196-245

**FOUND EXTRA MONEY, LLC**  
**UNCLAIMED MONEY CONSULTANTS**  
**WWW.FoundExtraMoney.com**  
Email: [Richard@foundextramoney.com](mailto:Richard@foundextramoney.com)

**LAS VEGAS OFFICE:**

8022 S. Rainbow Blvd. #362  
Las Vegas, NV 89139  
Toll Free: (888) 867-4785  
Fax No: (702) 331-4992

**LOS ANGELES OFFICE**

9420 Reseda Blvd. #830  
Northridge, CA 91324  
Toll Free: (888) 867-4785  
Fax No.: (702) 906-1219

May 27, 2015

Ms. Jennifer Pazicni  
Tax Sales Operations Unit  
Riverside County Treasurer-Tax Collector  
4080 Lemon Street, 4<sup>th</sup> Floor  
Riverside, CA 92502

Re: APN 374093011-0  
Situs: 307 Silver St., Lake Elsinore, CA 92530  
TC 196 Item 245  
Date of Sale: April 29, 2013

**RECEIVED**  
2015 MAY 29 PM 4:40  
RIVERSIDE COUNTY  
TREAS-TAX COLLECTOR

Jennifer:

I just had a conversation with David J. Thompson, the son of Josie M. Smith, and he informed me of his new mailing address.

His new address is:

Mr. David J. Thompson  
11466 Golden Street  
Adelanto, CA 92301

Please update your records to reflect his new mailing address.

Thank you.

  
Dennis Murkey

Found Extra Money, LLC

**Pazicni, Jennifer**

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**From:** Dennis Advocates <dennisfemllc@gmail.com>  
**Sent:** Wednesday, May 27, 2015 8:56 AM  
**To:** Pazicni, Jennifer  
**Subject:** APN 374093011-0  
**Attachments:** 05-27-2015 Document.pdf

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Re: TC 196, Item 245

Jennifer:

I have attached the Josie Smith Revocable Trust which I believe will satisfy the requirements of your letter dated May 14, 2015.

If there is a need for additional documents, please contact me either thru e-mail, or call me at (888) 867-4785.

Thank you.

Dennis  
Found Extra Money, LLC

## THE JOSIE SMITH REVOCABLE TRUST

### ARTICLE ONE

#### 1.1. Declaration of Trust

JOSIE SMITH is Trustor and Trustee of this Revocable Trust, also known as a "Living Trust" depending on the context, hereby declares that she/he holds certain property (the "trust estate") in trust, to be held, administered, and distributed according to the terms of this instrument.

#### 1.2. Name of Trust: The name of the trust created by this instrument shall be

"THE JOSIE SMITH REVOCABLE TRUST"

#### 1.3. Effective Date: This declaration shall be effective immediately on notarization.

### ARTICLE TWO

2.1. Definition of Trust Estate: All property subject to this instrument from time to time is referred to as the "trust estate" and shall be held, administered, and distributed as provided in this instrument. The Trustee shall hold, administer, and distribute the property described in the Schedule of Trust Assets (which is attached hereto and made a part of this trust instrument), any other property that may be hereafter subject to this trust, and the income and proceeds attributable to all such property, in accordance with the provisions of this instrument.

2.2. Additions to Trust: From time to time, the Trustee may accept additions to this trust from any source. All such additions shall become part of the trust estate and shall be held, administered, and distributed in accordance with the terms of this instrument. That additional property shall become part of the trust estate on written acceptance of it by the Trustee. Any additions to the trust shall be made by designating in writing the property to be added. However, the titling of any account, deed, or similar asset in the name of the Trustee, as Trustee of this trust, or any alternate or successor Trustee acting under this instrument shall be deemed to be a transfer to this trust.

3.6. Exercise of rights and Powers of Trustor By Others: Any right or power that the Trustor could exercise personally under the terms of this instrument, including any power to amend, revoke, or terminate this trust, may be exercised for and in behalf of the Trustor by any attorney in fact who, at the time of the exercise, is duly appointed and acting for the Trustor under a valid and enforceable durable power of attorney executed by the Trustor under the Uniform Durable Power of Attorney Act, or any successor statute, or, if there is no such attorney in fact, by a duly appointed and acting conservator of the Trustor, after petition to the court in accordance with California Probate Code Section 2580, or any successor statute.

#### ARTICLE FOUR DISTRIBUTIONS DURING TRUSTOR'S LIFE

4.1. Payment of Income During Trustor's Life: So long as the Trustor is living, the Trustee shall pay to or apply for the benefit of the Trustor all of the net income of the trust, in monthly or other convenient installments (but no less often than annually) as the Trustor and the Trustee may agree on from time to time.

4.2. Distributions of Principal During Trustor's Lifetime: From time to time during the Trustor's Lifetime, the Trustee shall distribute to or apply for the benefit of the Trustor as much of the principal of the trust as the Trustee, in the Trustee's discretion, deems proper for the Trustor's comfort, welfare, and happiness. In exercising discretion, the Trustee shall give the consideration that the Trustee deems proper to all other income and resources then readily available to the Trustor for use for these purposes and that are then known to the Trustee.

All decisions of the Trustee regarding payments under this section, if any, are within the Trustee's sole discretion and shall be final and shall not be contestable as not valid or improper.

4.3. Distributions of Principal at Request of Trustor: During the Trustor's lifetime, the Trustee shall distribute to the Trustor such amounts from the principal of the trust up to the whole thereof, as the Trustor may from time to time request of the Trustee in writing.

4.4. Request in Behalf of the Trustor Unable to Do So Personally: If, at any time, the Trustor is unable personally to make a request of the Trustee to withdraw principal of the trust, the Trustor's right to make the request may be exercised for or in his behalf by an attorney in fact who, at the time of the exercise, is duly appointed and acting for the Trustor under a valid and enforceable durable power of attorney executed by the Trustor under the Uniform Durable Power of Attorney Act, or any successor statute. If there is no such attorney in fact, then the Trustee shall have the discretion to make any principal distribution to or for the benefit of the Trustor that the Trustor could have requested personally if he were able to do so. In making any principal distribution under this section (whether pursuant to a request by an attorney in fact or not), the Trustee shall pay as much of the principal as the Trustee, in the Trustee's discretion, deems necessary for the Trustor's health, education, support, and maintenance. The Trustee shall have discretion to determine when the Trustor is unable personally to request principal payments from the Trustee for purposes of this section.

## ARTICLE FIVE

### DISTRIBUTIONS AFTER TRUSTOR'S DEATH

5.1. Payment of Death Taxes, Debts, and Expenses on Statement From Personal Representative: After the Trustor's death, on receipt by the Trustee of a written statement from the personal representative of the Trustor's estate requesting that the Trustee pay death taxes, debts, and expenses (as defined in Article Seven), with respect to any property in the Trustor's estate, the Trustee shall pay, either directly or to the personal representative,

any amounts requested by the personal representative for those purposes, in the manner specified below. The Trustee may rely on the personal representative's statement and shall not be liable for any act or omission by the personal representative in protesting or failing to protest the legality, propriety, or amount of the death taxes, debts, or expenses. If there is no personal representative, the Trustee shall make the payments directly. Payments of debts and expenses shall be made by the Trustee from the trust estate. All death taxes payable by reason of the Trustor's death shall be prorated and apportioned in amounts to the persons interested in the Trustor's estate as provided in the California Probate Code.

5.2. Trustee's Power to Defer Division or Distribution: Whenever the Trustee is directed to divide any part of the Trust estate or distribute trust assets on the death of the Trustor, the Trustee may, in the Trustee's discretion, defer actual division or distribution for such reasonable period of time as is needed to effectively identify, take possession of, value, divide, and distribute the assets of the trust. During this time of deferral, the Trustee may manage the trust assets through a single administrative trust. The ability of the Trustee to delay division or distribution shall not affect the vesting of interests, which shall be as of the date of death.

5.3. Disposition of Remaining Trust Estate: On the Trustor's death and after the provisions of paragraphs 5.1 and 5.2 have been complied with, the Trustee shall distribute the remaining trust estate, including any additions made to it by reason of the Trustor's death, such as from the Trustor's estate or policies of insurance on the Trustor's life as follows:

- (a) The entire Trust Estate shall distributed as follows:

(See Schedule on page 6)



THE JOSIE SMITH REVOCABLE TRUST

- (a) 40% to: DAVID THOMPSON
- (b) 30% to: RODERICK DAVIS
- (c) 30% to: ANTHONY THOMPSON

ARTICLE SIX

TRUSTEE

6.1. Trustor's Power to Designate Successor Trustees: At any time, the Trustor may designate any suitable person or entity to act as a successor Trustee or Co-Trustee if the Trustee or any Co-Trustee dies, becomes incapacitated, or is otherwise unable or unwilling to continue to act as Trustee or Co-Trustee. Any designation under this section shall be made by a signed writing delivered to the person or entity designated as successor Trustee or Co-Trustee. If more than one designation is made under this section, only the most recent designation shall be valid.

6.2. Successor Trustees. If the office of Trustee becomes vacant, by reason of death, incapacity, or any other reason, and no successor Trustee or Co-Trustees have been designated under any other provision of this trust instrument, the following, in the order of priority indicated, shall be Trustee:

First,           DAVID THOMPSON

Second,         RODERICK DAVIS

If all those named above are unwilling or unable to serve as successor Trustee, a new Trustee or Co-Trustees shall be appointed by the court.

6.3. Definition of Trustee: Reference in this instrument to "the Trustee" shall be deemed a reference to whoever is serving as Trustee or Co-Trustees, and shall include alternate or successor Trustees or Co-Trustees, unless the context requires otherwise.

6.4. Removal and Replacement of Trustee by Trustor. The Trustor shall have the power, at any time and for any reason, with or without cause, to remove any Trustee acting under this instrument, and notwithstanding any other provision of this instrument, designate another Trustee to replace the removed Trustee. Removal shall be effected by giving a written notice of removal to the Trustee to be removed and to the designated successor. The removal shall become effective on the delivery to the Trustor of a written acceptance of the trust by the successor Trustee, and the Trustor shall promptly notify the Trustee being removed of the receipt of that acceptance.

6.5. Waiver of Bond: No bond or undertaking shall be required of any individual who serves as a Trustee under this instrument.

6.6. Compensation of Individual Trustees: Each individual who is a Trustee under this instrument shall be entitled to reasonable compensation for services rendered, payable without court order, upon the request of the Trustee in accordance with these provisions.

6.7. Procedure for Resignation: Any Trustee may resign at any time, without giving a reason for the resignation, by giving written notice, at least 30 days before the time the resignation is to take effect, to the Trustor, if living, to any other Trustee then acting, to any persons authorized to designate a successor Trustee, to all trust beneficiaries known to the Trustee (or, in the case of a minor beneficiary, to the parent or guardian of that beneficiary) and to the successor Trustee. A resignation shall be effective on written acceptance of the trust by the successor Trustee.

6.8. General Powers of Trustee: To carry out the purposes of the trust created under this instrument and subject to any limitations stated elsewhere in this instrument, the Trustee shall have all of the following powers, in addition to all of the powers now or hereafter conferred on Trustees by law:

- (a) With or without court authorization, sell (for cash or on deferred payments, and with or without security), convey, exchange, partition, and divide trust property; grant options for the sale or exchange of trust property for any purpose, whether the contract is to be performed or the option is to be exercised within or beyond the term of the trust; and lease trust property for any purpose, for terms within or extending beyond the expiration of the trust, regardless of whether the leased property is commercial or residential and regardless of the number of units leased.
- (b) Engage in any transactions with the personal representative of the estate of the Trustor that are in the best interest of any trusts created in this instrument.
- (c) Manage, control, improve, and maintain all real and personal trust property.
- (d) Subdivide or develop land; make or obtain the vacation of plats and adjust boundaries, or adjust differences in valuation on exchange or partition by giving or receiving consideration, and dedicate land or easements to public use with or without consideration.
- (e) Make ordinary or extraordinary repairs or alteration in buildings or other trust property, demolish any improvements, remove existing party walls or building, and erect new party walls or buildings, as the Trustee deems advisable.

(f) Employ and discharge agents and employees, including but not limited to attorneys, accountants, investment and other advisers, custodians of assets, property managers, real estate agents and brokers, and appraisers, to advise and assist the Trustee in the management of any trusts created under this trust instrument, and compensate them from the trust property.

(g) With respect to securities held in trust, exercise all the rights, powers and privileges of an owner, including, but not limited to, the power to vote, give proxies, and pay assessments and other sums deemed by the Trustee necessary for the protection of the trust property; participate in voting trusts, pooling agreements, foreclosures, reorganizations, consolidations, mergers, and liquidations, and, in connection therewith, deposit securities with and transfer title to any protective or other committee under such terms as the Trustee deems advisable; exercise or sell stock subscription or conversion rights; and accept and retain as investments of the trust any securities or other property received through the exercise of any of the foregoing powers.

(h) Hold securities or other trust property in the Trustee's own name or in the name of a nominee, with or without disclosure of the trust, or in unregistered form, so that title may pass by delivery.

(i) Deposit securities in a securities depository that is either licensed or exempt from licensing.

(j) Borrow money for any trust purpose from any person or entity, including one acting as Trustee hereunder, on such terms and conditions as the Trustee deems advisable, and obligate the trust for repayment; encumber any trust property by mortgage, deed of trust, pledge, or otherwise, whether for terms within or extending beyond the term of the trust, as the Trustee deems advisable, to secure repayment of any such loan; replace, renew, and extend any such loan or encumbrance; and pay loans or other obligations of the trust deemed advisable by the Trustee.

(k) Procure and carry, at the expense of the trust, insurance in such forms and in such amounts as the Trustee deems advisable to protect the trust property against damage or loss, and to protect the Trustee against liability with respect to third persons.

(l) Enforce any obligation owing to the trust, including any obligation secured by a deed of trust, mortgage, or pledge held as trust property, and purchase any property subject to a security instrument held as trust property at any sale under the instrument.

(m) Extend the time for payment of any note or other obligation held as an asset of, and owing to, the trust, including accrued or future interest, and extend the time for repayment beyond the term of the trust.

(n) Pay or contest any claim against the trust; release or prosecute any claim in favor of the trust; or, in lieu of payment, contest, release, or prosecute, adjust, compromise, or settle any such claim, in whole or in part, and with or without consideration.

(o) At trust expense, prosecute or defend actions, claims, or proceedings of whatever kind for the protection of the trust property and of the Trustee in the performance of the Trustee's duties, and employ and compensate attorneys, advisers, and other agents as the Trustee deems advisable.

6.9. Power to Retain Trust Property: The Trustee shall have the power to retain property received into the trust at its inception or later added to the trust, as long as the Trustee considers that retention in the best interests of the trust or in furtherance of the goals of the Trustor in creating the trust, as determined from this trust instrument, but subject to the standards of the prudent investor rule as set forth in the California Uniform Prudent Investor Act, as amended from time to time.

6.10. Trustee's Power to Invest Property: Subject to the standards of the prudent investor rule as stated in the California Uniform Prudent Investor Act, as amended from time to time, the Trustee shall have the power to invest and manage the trust assets as a prudent investor would by considering the purposes, terms, distribution requirements, and other circumstances of the trust.

6.11. Power Over Unproductive Property: The Trustee shall have the power to retain or acquire unproductive or underproductive property.

6.12. Power to Operate Business: The Trustee shall have the power to hold and operate any business or enterprise that is or becomes trust property, on such terms and for such a time as the Trustee, in the Trustee's discretion, deems advisable; to purchase, acquire, invest in, or otherwise participate in, any business or other enterprise on behalf of the trust; or to sell, dissolve, liquidate, or terminate any such business. The Trustee shall also have the power

to incorporate, reorganize, or otherwise change the form of a business or enterprise that is part of the trust, through merger or consolidation of two or more enterprises or otherwise, and to participate in that business or enterprise as a sole proprietor, as a general or limited partner, as a shareholder, or in any other capacity. Any operation, sale, purchase, acquisition, investment in, or dissolution or liquidation of a business interest, in good faith, shall be at the risk of the trust, and without liability on the part of the Trustee for any resulting losses. The Trustee shall also have the power to contribute capital or loan money to the business or enterprise on such terms and conditions as the Trustee deems advisable.

6.13. Power to Combine Trust Assets: Each trust created under this instrument shall constitute a separate trust and be administered accordingly; however, the assets of all of the trusts may be combined for bookkeeping purposes and held for the trust beneficiaries without physical division into separate trusts until time of distribution.

6.14. Early Termination of Trusts: The Trustee shall have the power, in the Trustee's discretion, to terminate any trust created under this trust instrument whenever the fair market value for the trust falls below ten thousand dollars (\$10,000) or becomes so small in relation to the costs of administration as to make continuing administration uneconomical or unfeasible. On termination, the Trustee shall distribute the principal and any accrued or undistributed net income to the income beneficiaries in proportion to their shares of the income. If no fixed amount of income is payable to specific beneficiaries, the Trustee shall distribute the principal and any accrued or undistributed net income in equal shares to those beneficiaries who would then be entitled to income payments from the trust.

6.15. Division or Distribution in Cash or Kind: In order to satisfy a pecuniary gift or to distribute or divide trust assets into shares or partial shares, the Trustee may distribute or divide those assets in kind, or divide undivided interest in those assets, or sell all or any part

of those assets and distribute or divide the property in cash, in kind, or partly in cash and/or partly in kind. Property distributed to satisfy a pecuniary gift under this instrument shall be valued at its fair market value at the time of distribution.

6.16. Payments to Legally Incapacitated Persons: If at any time any trust beneficiary is a minor, or it appears to the Trustee that any trust beneficiary is incapacitated, incompetent, or for any other reason not able to receive payments or make intelligent or responsible use of the payments, then the Trustee, in lieu of making direct payments to the trust beneficiary, may make payments to the trust beneficiary, may make payments to the beneficiary's conservator or guardian; to the beneficiary's custodian under the Uniform Gifts to Minors Act or Uniform Transfers to Minors Act of any state; to one or more suitable persons as the Trustee deems proper, such as a relative of or a person residing with the beneficiary, to be used for the beneficiary's benefit; to any other person, firm, or agency for services rendered or to be rendered for the beneficiary's assistance or benefit; or to accounts in the beneficiary's name with financial institutions. All payment(s) for any of the foregoing shall constitute an authorized disbursement by the Trustee, in accordance with the provisions of this subsection.

6.17. Trustee's Liability: No Trustee shall be liable to any interested party for acts or omissions of that Trustee, except those resulting from that Trustee's willful misconduct or gross negligence. This standard shall also apply regarding a Trustee's liability for the acts or omissions of any Co-Trustee, predecessor Trustee, or agent employed by the Trustee.

6.18. Written Notice to Trustee: Until the Trustee receives written notice of any death or other event on which the right to payments from any trust may depend, the Trustee shall incur no liability for disbursements made in good faith to persons whose interests may have been affected by that event.

6.19. Waiver of Duty to Account: Notwithstanding any provision of law to the contrary, at no time shall the Trustee be required to render accounts to any person.

6.20. Co-Trustee May Delegate Acts to Other Co-Trustee: Any Co-Trustee may, from time to time, delegate to the other Co-Trustee routine acts of trust administration and may establish bank or other accounts for the trust that will honor the signature of one or of either Co-Trustee.

## ARTICLE SEVEN

### CONCLUDING PROVISIONS

7.1. No-Contest Clause: If any beneficiary under this instrument, singularly or in combination with any other person or persons, directly or indirectly contests this instrument, any amendment to this instrument, or the will of the Trustor in whole or in part, or opposes, objects to, or seeks to invalidate any of the provisions of this instrument or the will of the Trustor, or seeks to succeed to any part of the estate of the Trustor other than in the manner specified in this instrument or in the will of the Trustor, then the right of that person to take any interest given to him or her by this instrument or any amendment to this instrument shall be void, and any gift or other interest in the trust property to which the beneficiary would otherwise have been entitled shall pass as if he/she had predeceased the Trustor without issue.

7.2. Definitions of Death Taxes, Debris, and Expenses: As used in this instrument, the following definitions apply:

(a) The term "death taxes" shall mean all inheritance, estate, succession, and other similar taxes that are payable by any person on account of that person's interest in the estate of the Trustor or by reason of the Trustor's death, including penalties and interest, but excluding the following: (i) any additional tax that may be assessed under Internal Revenue Code Section 2032A; and (ii) any federal or state tax imposed on any generation-skipping transfer, as that term is defined in the federal tax laws, unless that generation-skipping transfer tax is payable directly out of the assets of a trust created by this instrument.



7.3. Definition of Incapacity: For purposes of this instrument, a person shall be deemed "Incapacitated" if and for so long as a court of competent jurisdiction has made a finding to that effect, or a guardian or conservator of that person's estate or person duly appointed by a court of competent jurisdiction is serving, or upon certification by two physicians (licensed to practice under the laws of the state where the person is domiciled at the time of the certification) that the person is unable properly to care for himself or herself or for his or her property. The latter certification shall be made by each physician in a written declaration under penalty of perjury (in an affidavit or declaration signed by the physician).

7.4. Definition of Education: As used in this instrument, the term "education" refers to the following:

- (a) Education at public or private elementary, junior high, middle, or high schools, including boarding schools;
- (b) Undergraduate, and postgraduate study in any field, whether or not of a professional character, in colleges, universities, or other institutions of higher learning;
- (c) Specialized formal or informal training in music, the stage, the handicrafts, or the arts, whether for private instruction or otherwise; and
- (d) Formal or informal vocational or technical training, whether through programs or institutions devoted solely to vocational or technical training, or otherwise.

7.5. Captions: The captions appearing in this instrument are for convenience of reference only, and shall be disregarded in determining the meaning and effect of the provisions of this instrument.

7.6. Severability Clause: If any provision of this instrument is invalid, that provision shall be disregarded, and the remainder of this instrument shall be construed as if the invalid provision had not been included.

7.7. California Law to Apply: All questions concerning the validity, interpretation, and administration of this instrument, including any trusts created under this instrument, shall be governed by the laws of the State of California, regardless of the domicile of any Trustee or beneficiary.

## ARTICLE EIGHT

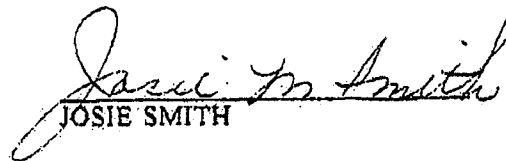
### SIGNATURE AND EXECUTION

8.1. Execution: I certify that I have read the foregoing declaration of trust and that it correctly states the terms and conditions under which the trust estate is to be held, administered, and distributed. As Trustee of the trust created by this declaration of trust, I approve this declaration of trust in all particulars, and agree to be bound by its terms and conditions. As Trustor of the trust created by this declaration of trust, I approve this declaration of trust in all particulars, and agree to be bound by its terms and conditions.

8.2. Schedule of Trust Assets: The following Schedule lists all of the real property and/or personal property which is hereby transferred into this Trust and includes my signature.

Executed on July 14, 2003 at Los Angeles, California

TRUSTOR-TRUSTEE

  
JOSIE SMITH

JOSIE SMITH REVOCABLE TRUST

STATE OF CALIFORNIA

COUNTY OF LOS ANGELES

On 7-10, 2003, before me, Anne Shores notary public, personally appeared JOSIE SMITH personally known to me or proved to me on the basis of satisfactory evidence to be the person~~s~~, whose name~~s~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in ~~his/her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~s~~ on the instrument the person~~s~~, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



  
Notary's Signature



THE JOSIE SMITH REVOCABLE TRUST

Schedule of Assets

Real Property

11419 Stanford Avenue  
Los Angeles, CA 90059

Land in Lake Elsinore, CA:

Parcel Number 375301015-3

Parcel Number 375301003-2

Parcel Number 374093011-0

Accounts

Bank of America

Acct. No. \_\_\_\_\_

California Bear Federal Credit Union

Acct. No. \_\_\_\_\_

Morgan Stanley

Acct. No. \_\_\_\_\_

Insurance

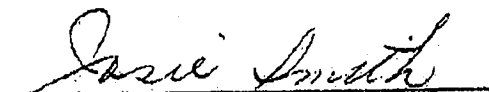
Anthem Life Insurance

No. \_\_\_\_\_

American General

No. \_\_\_\_\_

Dated: 7-16-2003

  
JOSIE SMITH

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