

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

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

255A



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

**SUBMITTAL DATE:**  
**AUG 12 2015**

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

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

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

(continued on page two)

**BACKGROUND:**

**Summary**

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

(continued on page two)

*[Signature]*  
 Don Kent

Treasurer-Tax Collector

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost:	POLICY/CONSENT (per Exec. Office)
COST	\$ 30,526	\$ 0	\$ 30,526	\$ 0	Consent <input type="checkbox"/> Policy <input checked="" type="checkbox"/>
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0	

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

**C.E.O. RECOMMENDATION:**

APPROVE

BY: *[Signature]*  
 Samuel Wong

County Executive Office Signature

**MINUTES OF THE BOARD OF SUPERVISORS**

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

**Ayes:** Jeffries, Tavaglione, Benoit and Ashley  
**Nays:** None  
**Absent:** Washington  
**Date:** September 22, 2015  
**xc:** Treasurer

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

A-30  
 Positions Added  
 4/5 Vote  
 Change Order

Departmental Concurrence

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

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

**DATE:** AUG 12 2015

**PAGE:** Page 2 of 2

**RECOMMENDED MOTION:**

1. Authorize and direct the Auditor-Controller to issue a warrant to Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford in the amount of \$30,526.78, no sooner than ninety days from the date of this order, unless an appeal has been filed in Superior Court, pursuant to the California Revenue and Taxation Code Section 4675.

**BACKGROUND:**

**Summary (continued)**

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

1. Claim from Global Discoveries, Ltd., assignee for Kathleen Ford Casey fka Kathleen E. Ford based on an Assignment of Right to Collect Excess Proceeds dated June 11, 2013, a Grant Deed recorded August 21, 2000 as Instrument No. 2000-327677 and the death certificate of Hazel Mae Skinner.

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

**Impact on Citizens and Businesses**

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

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

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



**CLAIM SUMMARY**

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

Dear Treasurer/Tax Collector:

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

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

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

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

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

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

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

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



RECORDING REQUESTED BY )  
AND WHEN RECORDED MAIL TO: )

Hazel M. Skinner  
1351 Cabrillo Drive  
Hemet, CA 92543

MAIL TAX STATEMENTS TO:  
SAME AS ABOVE

DOC # 2000-327677

03/21/2000 08:00A Feb-8-00

Page 1 of 1

Recorded in Official Records  
County of Riverside

Gary L. Groat

Assessor, County Clerk & Recorder



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①  
M  
DS

APN: 443-378-013-1

### GRANT DEED

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

HAZEL M. SKINNER, a single woman

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

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

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

ASSESSOR'S PARCEL NUMBER 442-375-013-1

Dated: 1/21/00

*Hazel M. Skinner*  
HAZEL M. SKINNER

STATE OF CALIFORNIA )  
COUNTY OF RIVERSIDE ) ss

On January 21, 2000 before me, ANN E RAMSEY, a Notary Public, personally appeared HAZEL M. SKINNER, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) subscribed to the within instrument and acknowledged to me that she executed the same in his/her/their authorized capacity(ies), and that by her signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature Ann E Ramsey  
APN # 442-375-013-1



MNR-0000-0000  
8 21 00  
THIS MICROFILM COPYRIGHTED  
1987 BY SECURITY UNION TITLE  
INSURANCE COMPANY  
MICROGRAPHICS DIVISION  
RIVERSIDE

ASSIGNMENT OF RIGHT TO COLLECT EXCESS PROCEEDS

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

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

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

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

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

27140 Sesame Street  
(Address)

Hemet, CA 92544-8803  
(City/State/Zip)

STATE OF CALIFORNIA )  
COUNTY OF Riverside ) ss.

951 652-9215  
(Area Code/Telephone Number)

On June 11, 2013, before me, the undersigned, a Notary Public in and for said State, personally appeared Noelle Alevingston Kathleen Ford Casey who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

Noelle A Levngston  
(Signature of Notary)

(This area for official seal)

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

Jed Byerly  
(Signature of Assignee)

Jed Byerly, Chief Operating Officer  
(Name Printed)

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

Global Discoveries, Ltd.  
(Address)

STATE OF CALIFORNIA )  
COUNTY OF Stanislaus ) ss.

P.O. Box 1748  
Modesto, California 95353-1748  
(City/State/Zip)

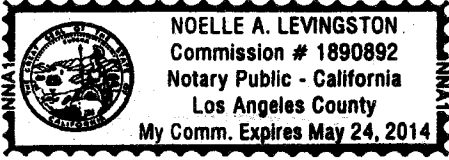
Phone: (209) 593-3913

On \_\_\_\_\_, before me, the undersigned, a Notary Public in and for said State, personally appeared \*\*\*Jed Byerly\*\*\* who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal

(Signature of Notary)

(This area for official seal)

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



**CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC**

State of California )

County of Stanislaus )

On 6-17-13 before me, Cindy M Shephard Notary Public, personally appeared  
(Date) (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/hers/their authorized capacity(ies), and that by his/hers/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

WITNESS my hand and official seal  
Cindy M Shephard (seal)



(Optional)

**Description of Attached Document**

Title or Type of Document: Assignment of Right to Collect

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

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052000 | 4 | 236

CERTIFICATE OF DEATH

320033007185

STATE FILE NUMBER: 3052000 | 4 | 236  
 LOCAL REGISTRATION NUMBER: 320033007185

1. NAME OF DECEDENT—FIRST (GIVEN): HAZEL  
 2. MIDDLE: MAE  
 3. LAST (FAMILY): SKINNER

4. DATE OF BIRTH: 12/17/1918  
 5. AGE YRS: 81  
 6. SEX: F  
 7. DATE OF DEATH: 08/15/2000  
 8. HOUR: 1400

9. STATE OF BIRTH: MT  
 10. SOCIAL SECURITY NO.: [REDACTED]  
 11. MILITARY SERVICE: [ ] YES [X] NO [ ] UNK  
 12. MARITAL STATUS: NEVER MARRIED  
 13. EDUCATION—YEARS COMPLETED: 13

14. RACE: WHITE  
 15. HISPANIC—SPECIFY: [ ] YES [X] NO  
 16. USUAL EMPLOYER: WOOLWORTHS

17. OCCUPATION: BOOKKEEPER  
 18. KIND OF BUSINESS: BOOKKEEPING  
 19. YEARS IN OCCUPATION: 50

20. RESIDENCE—(STREET AND NUMBER OR LOCATION): 1351 CABRILLO DRIVE  
 21. CITY: HEMET  
 22. COUNTY: RIVERSIDE  
 23. ZIP CODE: 92543  
 24. YRS IN COUNTY: 6  
 25. STATE OR FOREIGN COUNTRY: CA

26. NAME, RELATIONSHIP: KATHLEEN FORD / FRIEND  
 27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP): 1351 CABRILLO DRIVE HEMET, CA 92543

28. NAME OF SURVIVING SPOUSE—FIRST: [REDACTED]  
 29. MIDDLE: [REDACTED]  
 30. LAST (FAMILY NAME): [REDACTED]

31. NAME OF FATHER—FIRST: CAREY  
 32. MIDDLE: [REDACTED]  
 33. LAST (FAMILY NAME): SKINNER  
 34. BIRTH STATE: NY

35. NAME OF MOTHER—FIRST: LILLIE  
 36. MIDDLE: [REDACTED]  
 37. LAST (FAMILY NAME): TURNER  
 38. BIRTH STATE: ILL

39. DATE: 08/21/2000  
 40. PLACE OF FINAL REST: AT SEA (ON THE COAST OF SAN DIEGO COUNTY)

41. TYPE OF DISPOSITION: CR/SEA  
 42. NAME OF FUNERAL DIRECTOR: NEPTUNE SOCIETY RIVERSIDE  
 43. LICENSE NO.: [REDACTED]  
 44. SIGNATURE OF FUNERAL DIRECTOR: [REDACTED]  
 45. LICENSE NO.: [REDACTED]  
 46. SIGNATURE OF LOCAL REGISTRAR: [REDACTED]  
 47. DATE: 08/21/2000

101. PLACE OF DEATH: HEMET VALLEY MEDICAL CTR  
 102. IF HOSPITAL, SPECIFY ONE: [ ] INPATIENT [ ] OUTPATIENT [ ] RES. CARE [ ] OTHER  
 103. FACILITY OTHER THAN HOSPITAL: [ ] NURSING HOME [ ] RES. CARE [ ] OTHER  
 104. COUNTY: RIVERSIDE

105. STREET ADDRESS (STREET AND NUMBER OR LOCATION): 1117 EAST DENVER AVENUE  
 106. CITY: HEMET

107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)  
 IMMEDIATE CAUSE: (A) CARDIOPULMONARY ARREST  
 DUE TO: (B) AURICULAR FIBRILLATION  
 DUE TO: (C) CONGESTIVE HEART FAILURE  
 DUE TO: (D) [ ]

108. DEATH REPORTED TO CORONER: [ ] YES [X] NO  
 109. BIOPSY PERFORMED: [ ] YES [X] NO  
 110. AUTOPSY PERFORMED: [ ] YES [X] NO  
 111. USED IN DETERMINING CAUSE: [ ] YES [ ] NO

112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107: SEVERE RENAL FAILURE, PERIPHERAL VASCULAR DISEASE  
 113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE: PACE MAKER PLACEMENT 08/11/2000

114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE DECEDENT LAST BEEN ALIVE: 05/18/1999  
 115. SIGNATURE AND TITLE OF CERTIFIER: [REDACTED]  
 116. LICENSE NO.: A062197  
 117. DATE: 8/17/00

118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP: HEDIA ASHRAF MD., 2390 EAST FLORIDA AVE., HEMET, CA 92544  
 119. MANNER OF DEATH: [ ] NATURAL [ ] SUICIDE [ ] HOMICIDE [ ] ACCIDENT [ ] PENDING INVESTIGATION [ ] COULD NOT BE DETERMINED

120. INJURY AT WORK: [ ] YES [ ] NO  
 121. INJURY DATE: M/M/B/C C/Y: [ ]  
 122. HOUR: [ ]  
 123. PLACE OF INJURY: [ ]  
 124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY): [ ]

125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP): [ ]  
 126. SIGNATURE OF CORONER OR DEPUTY CORONER: [ ]  
 127. DATE: M/M/B/C C/Y: [ ]  
 128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER: [ ]

STATE REGISTRAR: A 1 B X C 2 D E F G H  
 PAY AUTH. #: 852036  
 CENSUS TRACT: [ ]

INFORMATIONAL DOCUMENT  
NOT A LEGAL DOCUMENT  
NOT ESTABLISHED



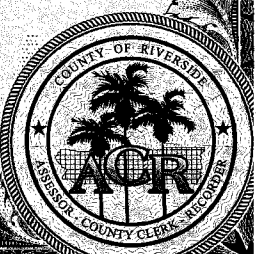
CERTIFIED COPY OF VITAL RECORDS  
STATE OF CALIFORNIA, COUNTY OF RIVERSIDE

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

DATE ISSUED: MAY 30 2005

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



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

LICENSE AND CERTIFICATE OF MARRIAGE

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

420103006667

LOCAL REGISTRATION NUMBER

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
<input type="checkbox"/> Groom <input checked="" type="checkbox"/> Bride FIRST PERSON DATA	1A. FIRST NAME <b>KATHLEEN</b>	1B. MIDDLE <b>ELLEN</b>	1D. LAST NAME AT BIRTH (IF DIFFERENT THAN 1C) <b>BROWN</b>
	1C. CURRENT LAST <b>FORD</b>	2. DATE OF BIRTH (MM/DD/CCYY) <b>04/14/1943</b>	3. STATE/COUNTRY OF BIRTH <b>CA</b>
	4. PREV. MARRIAGES/SRDP <b>03</b>	5A. LAST MARRIAGE/SRDP ENDED BY: <input checked="" type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SRDP <input type="checkbox"/> OTH	5B. DATE ENDED (MM/DD/CCYY) <b>10/01/1991</b>
	6. ADDRESS <b>27140 SESAME ST</b>	7. CITY <b>HEMET</b>	8. STATE/COUNTRY <b>CA</b>
9. ZIP CODE <b>92544</b>	10A. FULL BIRTH NAME OF FATHER/PARENT <b>HENRY JOHN BROWN</b>	10B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY) <b>INJ</b>	11A. FULL BIRTH NAME OF MOTHER/PARENT <b>ARLINE MAE RENGIER</b>
11B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY) <b>INJ</b>	12A. FIRST NAME <b>EDWARD</b>	12B. MIDDLE <b>LEMOYNE</b>	12D. LAST NAME AT BIRTH (IF DIFFERENT THAN 12C) <b>CASEY</b>
<input type="checkbox"/> Groom <input checked="" type="checkbox"/> Bride SECOND PERSON DATA	13. DATE OF BIRTH (MM/DD/CCYY) <b>06/05/1936</b>	14. STATE/COUNTRY OF BIRTH <b>AR</b>	15. # PREV. MARRIAGES/SRDP <b>01</b>
	16. ADDRESS <b>27140 SESAME ST</b>	16. CITY <b>HEMET</b>	16. STATE/COUNTRY <b>CA</b>
	17. ZIP CODE <b>92544</b>	18A. LAST MARRIAGE/SRDP ENDED BY: <input checked="" type="checkbox"/> DEATH <input type="checkbox"/> DISSO <input type="checkbox"/> ANNULMENT <input type="checkbox"/> TERM SRDP <input type="checkbox"/> OTH	18B. DATE ENDED (MM/DD/CCYY) <b>03/25/2007</b>
	21A. FULL BIRTH NAME OF FATHER/PARENT <b>ALFRED LOIS CASEY</b>	21B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY) <b>AR</b>	22A. FULL BIRTH NAME OF MOTHER/PARENT <b>LILLIAN HELEN RITTER</b>
22B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY) <b>KS</b>	19. WE, THE UNDERSIGNED, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT WE ARE UNMARRIED AND THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF. WE FURTHER DECLARE THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR TO THE ISSUANCE OF A LICENSE IS KNOWN TO US. WE ACKNOWLEDGE RECEIPT OF THE INFORMATION REQUIRED BY FAMILY CODE SECTION 308 AND HEREBY APPLY FOR A LICENSE AND CERTIFICATE OF MARRIAGE.		
23. SIGNATURE OF PERSON LISTED IN FIELDS 1A-1D <i>Kathleen Ellen Ford</i>		24. SIGNATURE OF PERSON LISTED IN FIELDS 12A-12D <i>Edward Lemoyne Casey</i>	
LICENSE TO MARRY	1. THE UNDERSIGNED DO HEREBY CERTIFY THAT THE ABOVE-NAMED PARTIES TO BE MARRIED HAVE PERSONALLY APPEARED BEFORE ME, OR THE PERSON PERFORMING THE CEREMONY HAS PERSONALLY APPEARED BEFORE ME, AND RESPECTIVE AND AFFIDAVIT SIGNED BY THE PARTIES TO BE MARRIED DECLARING THAT ONE OR BOTH OF THE PARTIES ARE PHYSICALLY UNABLE TO APPEAR AND EXPLAINING THE REASONS THEREFOR IN ACCORDANCE WITH FAMILY CODE SECTION 308. THE PARTIES PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSONS CLAIMED, HAVE DECLARED THAT THEY MEET ALL OF THE REQUIREMENTS OF THE LAW, AND HAVE PAID THE FEE PRESCRIBED BY LAW. AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF CALIFORNIA TO SOLEMNIZE THE MARRIAGE OF THE ABOVE-NAMED PERSONS. REQUIRED CONSENTS AND AFFIDAVITS FOR THE ISSUANCE OF THIS LICENSE ARE ON FILE.		
	25A. ISSUE DATE (MM/DD/CCYY) <b>08/11/2010</b>	25B. EXPIRES AFTER (MM/DD/CCYY) <b>11/08/2010</b>	25C. NAME OF COUNTY CLERK <b>LARRY W. WARD</b>
	25D. SIGNATURE OF CLERK OR DEPUTY CLERK BY: <i>Larry W. Ward</i>	25E. MARRIAGE LICENSE NUMBER <b>R-41033004561</b>	25F. COUNTY OF ISSUE <b>RIVERSIDE</b>
	25G. RETURN COMPLETED MARRIAGE LICENSE TO (INCLUDE ADDRESS) <b>P.O. BOX 751 RIVERSIDE, CA 92502</b>		
WITNESSES (ONE REQUIRED, NO MORE THAN TWO ALLOWED)	26A. SIGNATURE OF WITNESS <i>Jennifer M.M. Swanger</i>	26B. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY) <b>Jennifer M.M. Swanger</b>	
	26C. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE <b>1351 Cabrillo Dr. Hemet CA 92543</b>	26D. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY) <i>Janet C. Flores</i>	
	26E. SIGNATURE OF WITNESS <i>Janet C. Flores</i>	26F. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY) <b>Janet C. Flores</b>	
26G. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE <b>10026 Orange St. Alta Loma CA 91737</b>			
CERTIFICATION OF PERSON SOLEMNIZING MARRIAGE	1. THE UNDERSIGNED, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA, THAT THE ABOVE-NAMED PARTIES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF CALIFORNIA. NOTE: THE MARRIAGE CEREMONY MUST TAKE PLACE IN THE STATE OF CALIFORNIA.		
	28A. DATE OF MARRIAGE (MM/DD/CCYY) <b>09-08-2010</b>	28B. CITY/TOWN OR MARRIAGE <b>HEMET</b>	28C. COUNTY OF MARRIAGE <b>RIVERSIDE</b>
	29A. SIGNATURE OF PERSON SOLEMNIZING MARRIAGE <i>Marda-Ruth F. Roberts</i>	29B. RELIGIOUS DENOMINATION (IF CLERGY) <b>LUTHERAN - ELCA</b>	
	29C. NAME OR PERSON SOLEMNIZING MARRIAGE (TYPE OR PRINT CLEARLY) <b>MARDA-RUTH F. ROBERTS</b>	29D. OFFICIAL TITLE <b>PASTOR</b>	
29E. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE <b>27340 Big Springs Ranch Rd. Hemet, CA 92544</b>			
NEW NAMES (IF ANY)	NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 1A-1D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE REVERSE FOR INFORMATION)		
	30A. FIRST - MUST BE SAME AS 1A <b>KATHLEEN</b>	30B. MIDDLE <b>FORD</b>	30C. LAST <b>CASEY</b>
	NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 12A-12D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE REVERSE FOR INFORMATION)		
31A. FIRST - MUST BE SAME AS 12A <b>---</b>	31B. MIDDLE <b>---</b>	31C. LAST <b>---</b>	
LOCAL REGISTRAR <b>LARRY W. WARD</b>	32B. SIGNATURE OF CLERK OR DEPUTY CLERK BY: <i>Larry W. Ward</i>	32C. DATE ACCEPTED FOR REGISTRATION <b>SEP 29 2010</b>	

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

V6-117 (01/01/2010)



034078466

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

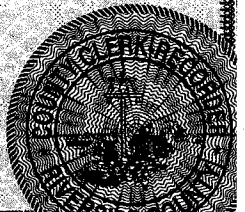
This is a true and exact reproduction of the document officially registered and placed on file in the office of the County of Riverside, County Clerk-Recorder.

OCT 25 2010

DATE ISSUED

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

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





DECLARATION  
OF ONE AND THE SAME PERSON

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

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

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

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

JURAT

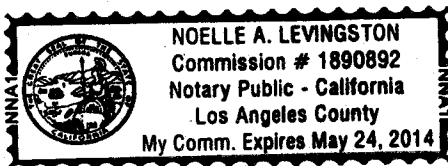
State of California

County of Riverside

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

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

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



Signature Noelle A Livingston  
Signature of Notary Public

(Place Notary Seal Above)

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

To: Riverside County Treasurer and Tax Collector

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

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

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

Please refer to Claim Summary and attached Documents

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

Executed this 25<sup>th</sup> day of JUNE, 2013 at Modesto, California.

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

**CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC**

State of California )

County of Stanislaus )

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

me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies); and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

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

