

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



ITEM
9.1
(ID # 2056)

MEETING DATE:

Tuesday, January 24, 2017

FROM : TREASURER-TAX COLLECTOR:

SUBJECT: TREASURER-TAX COLLECTOR: Recommendation for Distribution of Excess Proceeds for Tax Sale No. 203, Item 97. Last assessed to: Fredi Muñoz, a single man as solo tenant. District 1 [\$9,170-Fund 65595 Excess Proceeds from Tax Sale].

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve the claim from Orange County Department of Child Support Services for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 319062005-6;
2. Deny the claim from Fredi Muñoz;
3. Authorize and direct the Auditor-Controller to issue a warrant to Orange County Department of Child Support Services in the amount of \$9,170.01, 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.


Don Kent, Treasurer-Tax Collector 12/19/2016

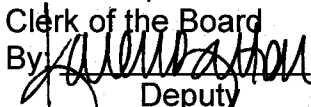
FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 9,170	\$ 0	\$ 9,170	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: Fund 65595 Excess Proceeds from Tax Sale.			Budget Adjustment: No	
			For Fiscal Year:	16/17

C.E.O. RECOMMENDATION:

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes: Jeffries, Washington and Ashley
Nays: None
Absent: Tavaglione
Date: January 24, 2017
xc: Treasurer

Kecia Harper-Ihem
Clerk of the Board
By: 
Deputy

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

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 May 5, 2015 public auction sale. The deed conveying title to the purchasers at the auction was recorded June 18, 2015. 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 22, 2015, 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.

The Treasurer-Tax Collector has received two claims for excess proceeds:

1. Claim from Orange County Department of Child Support Services based on a Notice of Support Judgment recorded August 12, 2014 as Instrument No. 2014-0304309.
2. Claim from Fredi Muñoz based on a Grant Deed recorded January 6, 2004 as Instrument No. 2004-0007115.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Orange County Department of Child Support Services be awarded excess proceeds in the amount of \$9,170.01. Since the amount claimed by Orange County Department of Child Support Services exceeds the amount of excess proceeds available, there are no funds available for consideration for the claim from Fredi Muñoz. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimants by certified mail.

Impact on Residents and Businesses

Excess proceeds are being released to a lien holder of the property.

ATTACHMENTS (if any, in this order):

ATTACHMENT A. Claim Orange County DCSS

ATTACHMENT B. Claim Muñoz

RECEIVED

2015 NOV 24 PM 4: 52

RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

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 203 Item 97 Assessment No 319062005-6

Assessee MUNOZ, FREDI

Situs 20585 WELLS ST PERRIS 92570

Date Sold May 5, 2015

Date Deed to Purchaser Recorded June 18 2015

Final Date to Submit Claim June 20 2016

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ 17,985.82 from the sale of the above mentioned real property I/We were the lienholder(s), property owner(s) [check in one box] at the time of the sale of the property as is evidenced by Riverside County Recorder's Document No 2014-0307309, recorded on 8/12/14. 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

Notice of Support Judgment recorded 8/12/14
Court order for child support filed 7/29/14
Case Balance History report reflecting balance owed as of 5/30/15

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 13th day of November, 2015 at Orange, CA
County State

[Signature]
Signature of Claimant

Signature of Claimant

Kathleen McDonald
Print Name

Print Name

1055 N Main St
Street Address

Street Address

Santa Ana, CA 92701
City, State, Zip

City, State, Zip

(714) 347-6437
Phone Number

Phone Number

INSTRUCTIONS FOR FILING CLAIM

(See Claim Form on Reverse Side)

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

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

(a) First, lienholders of record prior to the recordation of the tax deed to the purchaser in the order of their priority, and

(b) Then, any person with title of record to all or any portion of the property prior to the recordation of the tax deed to the purchaser

If you consider yourself to be a party of interest in the sale of tax-defaulted property as defined above, please fill out the reverse of this form stating how you have determined your status as a party of interest. If you need help in filling out the form, please contact our office by telephone at 951-955-3336, mail, or in person.

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

1 In case (a), attach a copy of your trust deed or other evidence of lien or security interest, along with a statement under penalty of perjury setting forth the original amount of the lien or interest, the total amount of payments received reducing the original amount of the lien or interest, and the amount still due and payable as of the date of the sale of the tax defaulted property by the Tax Collector

2 In case (b), attach copies of any other documents (e.g., deed, certified death certificate, will, court order, etc.) supporting your claim

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

MAIL COMPLETED FORMS TO

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

Attention: Excess Proceeds

County Administrative Center- 4th Floor
4080 Lemon Street, P O Box 12005
Riverside, CA 92502-2205
(951) 955-3900
(951) 955-3990 - Fax

E-mail itc@co.riverside.ca.us
www.countytreasurer.org



**COUNTY OF RIVERSIDE
TREASURER-TAX COLLECTOR**

Palm Desert Office
38-686 El Cerrito Road
Palm Desert, CA 92211

Temecula Office
40935 County Center Drive, Suite C
Temecula, CA 92591

July 22, 2015

ORANGE COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES

CASE# 12FL103538

P O BOX 22099

SANTA ANA, CA 92702-2099

Re EXCESS PROCEEDS FROM SALE OF TAX DEFAULTED PROPERTY

Assessment No 319062005-6 Item 97

Situs Address 20585 Wells St Perris 92570

Assessee Munoz, Fredi

Date Sold May 5, 2015

Date Deed to Purchaser Recorded June 18, 2015

Final Date to Submit Claim June 20, 2016

Dear Sir or Madame

The property referenced above was declared subject to the Tax Collector's power of sale for non-payment of taxes and later sold Parties of Interest, as defined in Section 4675 of the California Revenue and Taxation Code (e.g., the last assessee and any lienholders of record), have a right to file a claim for any excess proceeds that remain after the tax liens and the costs of the sale have been satisfied. Our records show that you may be a party of interest, and we are enclosing for your convenience a claim form and a return envelope. Please note that your claim must be filed within one year of the date the deed to the purchaser was recorded (shown above). By law, we cannot accept claims after one year from this recording date. Claims submitted will be evaluated by our legal counsel and awarded in accordance with state law. The submission of a claim merely initiates that review.

The enclosed form is relatively simple and we must stress that most applicants will be able to fill it out without help. However, if you need help, please feel free to contact our office by mail, telephone or in person and we will help you without charge. You may telephone us at (951) 955-3336.

If you prefer to have an agent file your claim for you, or if you should decide to sell your claim (often referred to as "assignment") so that the purchaser of the claim may receive the funds, please advise us and we will send the proper form.

Please note also that the statutory procedures and the County's internal procedures dictate that most claims will not be processed until at least twenty (20) months following the date of recordation of the tax deed.

Sincerely,

DON KENT
TREASURER-TAX COLLECTOR

By Jennifer Pazicni
Deputy

DOC # 2014-0304309

08/12/2014 11:30A Fee:NC

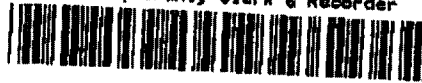
Page 1 of 2

Recorded in Official Records

County of Riverside

Larry W. Ward

Assessor, County Clerk & Recorder



RECORDING REQUESTED BY

ORANGE COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES

COUNTY CODE: 0605900



WHEN RECORDED MAIL TO

ORANGE COUNTY DEPARTMENT OF CHILD SUPPORT SERVICES

PO BOX 22099

SANTA ANA CA 92702-2099

DOCUMENT TITLE

NOTICE OF SUPPORT JUDGMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and address):
 Recording requested by and return to:
 STEVEN ELDRED, LEAD ATTORNEY
 ORANGE COUNTY
 DEPARTMENT OF CHILD SUPPORT SERVICES
 1055 N MAIN ST
 SANTA ANA CA 92701-3630

TELEPHONE NO.: (888) 901-3212 200000001137288

ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE
 STREET ADDRESS: 341 THE CITY DR 6
 MAILING ADDRESS: PO BOX 14199
 CITY AND ZIP CODE: ORANGE 92683-1509
 BRANCH NAME: LAMOREAUX JUSTICE CENTER

PETITIONER/PLAINTIFF: COUNTY OF ORANGE
 RESPONDENT/DEFENDANT: FREDI VALERIANO MUNOZ

FOR RECORDER'S USE ONLY

ABSTRACT OF SUPPORT JUDGMENT

CASE NUMBER:
12FL103638

1. The judgment creditor assignee of record applies for an abstract of a support judgment and represents the following:
- a. Judgment debtor's name and last known address
 FREDI VALERIANO MUNOZ
 1718 S MARINE ST
 SANTA ANA CA 92704-4037
- b. Driver's license no. and state: MUNOZF*351DP WASHINGTON Unknown
- c. Social security number: provide only last four digits Unknown
- d. Birth date: 03/17/1965 Unknown

FOR COURT USE ONLY

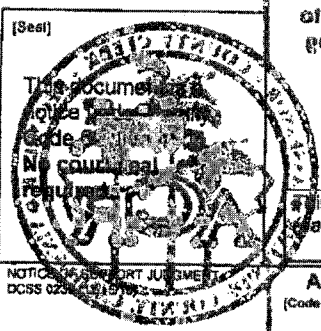
This document is a notice under Family Code Section 4508.
 Court stamp not required.
 Any electronic signature affixed below has been officially adopted by the requesting governmental agency.

Date: 07/30/2014

STEVEN ELDRED
 (TYPE OR PRINT NAME)

[Signature]
 (SIGNATURE OF APPLICANT OR ATTORNEY)

2. I CERTIFY that the judgment entered in this action contains an order for payment of spousal, family, or child support.
3. Judgment creditor (name): County of ORANGE
 Department of Child Support Services
 whose address appears on this form above the court's name.
4. The support is ordered to be paid to the following county officer (name and address):
 ORANGE
 PO BOX 989067
 WEST SACRAMENTO CA 95798-9067
5. Judgment debtor (full name as it appears in judgment):
 FREDI VALERIANO MUNOZ
6. a. A judgment was entered on (date): 01/10/2013
 b. Renewal was entered on (date):
 c. Renewal was entered on (date):
7. An execution lien is endorsed on the judgment as follows:
 a. Amount: \$
 b. In favor of (name and address):



8. A stay of enforcement has been ordered by the court. No stay of enforcement has been ordered by the court effective until (date):
 This is an installment judgment.

This abstract issued on (date): No date required under FC § 4606

ABSTRACT OF SUPPORT JUDGMENT
 (Code of Civil Procedure, §§ 674, 697.320, 708.190, Family Code § 4606)

This document is a notice under Family Code Section 4508.
 No signature required.

Case Audit Report - Simple

CSE Case Number: 200000001137298

Court Case Number: ALL

Debt Type: ALL

CSE Case Number: 200000001137298

Obligor Name: MUNOZ, FREDI VALERIANO

Court Case Number: 12FL103538

Obligee Name: VILLALVA, MARIELA

Managing County: ORANGE

Debt Type: CHILD SUPPORT

Combined Balances

MM-CCYY	Current Charges	Aud St	Payments to Principal	Payments to Interest	Ending Principal Balance	Monthly Interest	Ending Interest Balance	Total Balance
01-2013	688.00		0.00	0.00	4,128.00	29.22	29.22	4,157.22
02-2013	688.00		0.00	0.00	4,816.00	31.67	60.89	4,876.89
03-2013	688.00		0.00	0.00	5,504.00	40.90	101.79	5,605.79
04-2013	688.00		0.00	0.00	6,192.00	45.24	147.03	6,339.03
05-2013	688.00		0.00	0.00	6,880.00	52.59	199.62	7,078.62
06-2013	688.00		0.00	0.00	7,568.00	56.55	256.17	7,824.17
07-2013	688.00		0.00	0.00	8,256.00	64.28	320.45	8,576.45
08-2013	688.00		0.00	0.00	8,944.00	70.12	390.57	9,334.57
09-2013	688.00		0.00	0.00	9,632.00	73.51	464.08	10,096.08
10-2013	688.00		0.00	0.00	10,320.00	81.81	545.89	10,865.89
11-2013	430.00		0.00	0.00	10,750.00	84.82	630.71	11,380.71
12-2013	430.00		0.00	0.00	11,180.00	91.30	722.01	11,902.01
01-2014	430.00		0.00	0.00	11,610.00	94.95	816.96	12,426.96
02-2014	430.00		0.00	0.00	12,040.00	89.06	906.02	12,946.02
03-2014	430.00		0.00	0.00	12,470.00	102.26	1,008.28	13,478.28
04-2014	430.00		0.00	0.00	12,900.00	102.49	1,110.77	14,010.77
05-2014	430.00		0.00	0.00	13,330.00	108.56	1,220.33	14,550.33
06-2014	430.00		0.00	0.00	13,760.00	109.56	1,328.89	15,088.89

State of California - Health and Human Services Agency
Financial

Case Audit Report - Simple

CSE Case Number: 20000001137298
 Court Case Number: ALL
 Debt Type: ALL
 CSE Case Number: 20000001137298
 Obligor Name: MUNOZ, FREDI VALERIANO
 Court Case Number: 12FL103558
 Obligee Name: VILLALVA, MARIELA
 Managing County: ORANGE

Debt Type: CHILD SUPPORT

Combined Balances

MM-CCYY	Current Charges	Aff ST	Payments to Principal	Payments to Interest	Ending Principal Balance	Monthly Interest	Ending Interest Balance	Total Balance
07-2014	225.00		0.00	0.00	13,985.00	116.87	1,446.76	15,431.76
08-2014	225.00		(225.00)	0.00	13,985.00	116.78	1,565.54	15,550.54
09-2014	225.00		(225.00)	0.00	13,985.00	114.85	1,680.49	15,665.49
10-2014	225.00		(225.00)	0.00	13,985.00	118.78	1,799.27	15,784.27
11-2014	225.00		0.00	0.00	14,210.00	114.95	1,914.22	16,124.22
12-2014	225.00		0.00	0.00	14,435.00	120.89	2,034.91	16,469.91
01-2015	225.00		0.00	0.00	14,660.00	122.80	2,157.51	16,817.51
02-2015	225.00		0.00	0.00	14,885.00	112.46	2,269.97	17,154.97
03-2015	225.00		0.00	0.00	15,110.00	125.42	2,398.39	17,508.39
04-2015	225.00		0.00	0.00	15,335.00	124.19	2,520.58	17,855.58
05-2015	225.00		(225.00)	0.00	15,335.00	130.24	2,650.82	17,985.82
06-2015	225.00		(225.00)	0.00	15,335.00	126.04	2,776.86	18,111.86
07-2015	225.00		(215.00)	0.00	15,345.00	0.00	2,776.86	18,121.86
Totals	\$13,245.00		(\$1,340.00)	\$0.00		\$2,776.86		

Financial

Case Audit Report - Simple

CSE Case Number: 20000001137298

Court Case Number: ALL

Debt Type: ALL

Balance Summary

CSE Case Number: 20000001137298

Court Case Number: 12FL103538

Managing County: ORANGE

Obligor Name: MUNOZ, FREDI VALERIANO

Obligee Name: VILLALVA, MARELA

Total Current Charges \$13,245.00

Total Interest Charges \$2,776.86

Total Arrears/Adjustment (Principal) \$3,440.00

Total Arrears/Adjustment (Interest) \$0.00

Total Amount Paid (\$1,340.00)

Balance \$18,121.86

Total Principal Due \$15,345.00

Total Interest Due \$2,776.86

Balance Due \$18,121.86

05

lpm

FL-692

SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE STREET ADDRESS: 341 THE CITY DR S MAILING ADDRESS: PO BOX 14189 CITY AND ZIP CODE: ORANGE 92663-1569 BRANCH NAME: LAMOREAUX JUSTICE CENTER		FOR COURT USE ONLY FILED SUPERIOR COURT OF CALIFORNIA COUNTY OF ORANGE LAMOREAUX JUSTICE CENTER JUL 29 2014 ALAN [Signature] Jc. of the Court BY: <u>D. FREEZE</u> , DEPUTY
200000001137298 PETITIONER/PLAINTIFF: COUNTY OF ORANGE RESPONDENT/DEFENDANT: FREDI VALERIANO MUNOZ OTHER PARENT: MARIELA VILLALBA		
<input checked="" type="checkbox"/> MINUTES AND <input checked="" type="checkbox"/> ORDER <input type="checkbox"/> JUDGMENT <input type="checkbox"/> RECOMMENDED ORDER		CASE NUMBER: 12FL103536

This form may be used for preparation of court minutes and/or as an alternative to form FL-615, FL-625, FL-630, FL-665, or FL-687. If this form is prepared as both court minutes and an alternative to one of these forms, then the parties do not need to prepare any additional form of order.

1. This matter proceeded as follows: Uncontested By stipulation Contested
- a. Date: 07/29/2014 Time: 1:30 PM Department: L51
- b. Judicial officer (name): PAULA J COLEMAN Judge pro Tempore Commissioner
 Court reporter (name): NONE
 Court clerk (name): D. FREEZE Bailiff (name): ERIC DACIERNO
- c. Interpreter(s) present (name): SILVIA GONZALEZ
 for (name): FREDI VALERIANO MUNOZ AND MARIELA VILLALBA (specify language): SPANISH
- d. Petitioner present Attorney present (name): KRISTIN CHAVEZ
- e. Respondent present Attorney present (name):
- f. Other parent present Attorney present (name):
- g. Attorney for local child support agency (name): KRISTIN CHAVEZ
- h. The parent ordered to pay support for purposes of this order is the petitioner respondent other parent.
- i. Other (specify): PARTIES WERE SWORN AND TESTIFIED
 RELATED CASE: 11V002405

2. This is a recommended order/judgment based on the objection of (specify name):
3. a. This matter is taken off calendar.
 b. This entire matter is denied with without prejudice.
 c. This matter is continued at the request of the local child support agency petitioner respondent
 other parent to:
 Date: Time: Department:
 (Specify issues):
 Petitioner Respondent Other parent is ordered to appear at that date and time.
 d. The court takes the following matters under submission (specify):
4. Order of examination
 The petitioner respondent other (specify): was sworn and examined.
 Examination was held outside of court.
5. Referrals
 a. The parties are referred to family court services or mediation.
 b. Petitioner Respondent Other parent is referred to the family law facilitator.
 c. Other (specify):

THE COURT FINDS

6. Respondent Petitioner Other parent was was not served regarding this matter.
 7. Respondent Petitioner Other parent admits denies parentage.
 8. The parents of the children named below in item 14a are (specify names):



PETITIONER/PLAINTIFF: COUNTY OF ORANGE RESPONDENT/DEFENDANT: FREDI VALERIANO MUNOZ OTHER PARENT: MARIELA VILLALBA	CASE NUMBER: 12FL103538
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9. Respondent Petitioner Other parent has read, understands, and has signed the *Advisement and Waiver of Rights for Stipulation (Governmental)* (form FL-694). He or she gives up those rights and freely agrees that a judgment may be entered in accordance with these findings.

10. a. Guideline support amount: \$225.00

- b. This order is is not based on the guideline.
- c. The attached *Guideline Findings Attachment (Governmental)* (form FL-693) is incorporated into these findings.
- d. A printout, which shows the calculation of child support payable, is attached and must become the court's findings.
- e. The child support agreed to by the parents is below above the statewide child support guideline. The amount of support that would have been ordered under the guideline formula is \$ _____ per month. The parties have been fully informed of their rights concerning child support. Neither party is acting out of duress or coercion. Neither party is receiving public assistance, and no application for public assistance is pending. The needs of the children will be adequately met by this agreed-upon amount of child support. The order is in the best interest of the children. If the order is below the guideline, no change of circumstance will be required for the court to modify this order. If the order is above the guideline, a change of circumstance will be required for the court to modify this order.
- f. The low-income adjustment applies.
 The low-income adjustment does not apply because (specify reasons):

11. Arrearages from (specify date): _____ through (specify date): _____
are \$ _____ including interest interest not computed and not waived.

THE COURT ORDERS

12. All orders previously made in this action must remain in full force and effect except as specifically modified below.

- 13. Genetic testing must be coordinated by the local child support agency.
 - a. Respondent Petitioner Mother of the children
 Other (specify): _____
and the minor children must each submit to genetic testing as directed by the local child support agency.
 - b. The parent ordered to pay support must reimburse the local child support agency for genetic testing costs of \$ _____
- 14. a. The parent ordered to pay support is the parent of the children listed below and must pay current child support for them.

The court finds that there is sufficient evidence that the parent ordered to pay support is the parent of the children listed below and therefore there is sufficient evidence to enter a support order.

Name of child	Date of birth	Monthly basic support amount
XOCHILTZ MUNOZ	10/15/1995	EMANCIPATED
FREDDY MUNOZ	10/28/2002	225.00

- Additional children are listed on an attached page.
- b. The parent ordered to pay support must pay additional support monthly for actual child-care costs:
 - (specify amount): \$ _____ one-half (specify percent): _____ percent of said costs.
 - Payments must be made to the State Disbursement Unit other party child-care provider.
- c. The parent ordered to pay support must pay reasonable uninsured health-care costs for the children:
 - (specify amount): \$ _____ one-half (specify percent): _____ percent of said costs.
 - Payments must be made to the State Disbursement Unit other party health-care provider.
- d. The parent ordered to pay support must pay additional support monthly for the following (specify):
 - (specify amount): \$ _____ one-half (specify percent): _____
 - Payments must be made to the State Disbursement Unit other party.
- e. Other (specify): _____

NOTICE: Any party required to pay child support must pay interest on overdue amounts at the legal rate, which is currently 10 percent per year.

PETITIONER/PLAINTIFF: COUNTY OF ORANGE RESPONDENT/DEFENDANT: FREDI VALERIANO MUNOZ OTHER PARENT: MARIELA VILLALBA	CASE NUMBER: 12FL103538
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14. f. For a total of \$225.00 payable on the FIRST day of each month beginning (date): JULY 01, 2014
- g. The low-income adjustment applies.
 The low-income adjustment does not apply because (specify reasons):
- h. Any support ordered will continue until further order of court, unless terminated by operation of law.
- i. As provided in Family Code section 4007.5, the obligation of the person ordered to pay support will be temporarily suspended for any period after the first 90 consecutive days in which the person ordered to pay support is incarcerated or involuntarily institutionalized, unless that person has the ability to pay support during that time or has committed certain crimes. Immediately after the person ordered to pay support is released from incarceration or involuntary institutionalization, the support order will restart in the same amount as it was before it was temporarily suspended.
15. The parent ordered to pay support The parent receiving support must (1) provide and maintain health insurance coverage for the children if available at no or reasonable cost and keep the local child support agency informed of the availability of the coverage (the cost is presumed to be reasonable if it does not exceed 5% of gross income to add a child); (2) if health insurance is not available, provide coverage when it becomes available; (3) within 20 days of the local child support agency's request, complete and return a health insurance form; (4) provide to the local child support agency all information and forms necessary to obtain health-care services for the children; (5) present any claim to secure payment or reimbursement to the other parent or caretaker who incurs costs for health-care services for the children; and (6) assign any rights to reimbursement to the other parent or caretaker who incurs costs for health-care services for the children. The parent ordered to provide health insurance must seek continuation of coverage for the child after the child attains the age when the child is no longer considered eligible for coverage as a dependent under the insurance contract, if the child is incapable of self-sustaining employment because of a physically or mentally disabling injury, illness, or condition and is chiefly dependent upon the parent providing health insurance for support and maintenance.
16. The parent ordered to pay support may claim the children for tax purposes as long as all child support payments are current as of the last day of the year for which the exemptions are claimed.
17. Petitioner Respondent Other parent must pay to petitioner respondent other parent as spousal support family support \$ per month, beginning (date): payable on the day of each month.
18. The parent ordered to pay support must pay child support for the following past periods and in the following amounts:
- | Name of child | Period of support | Amount |
|----------------|-------------------|--------|
| XOCHILTZ MUNOZ | | |
| FREDDY MUNOZ | | |
- a. Other (specify):
- b. For a total of \$ payable \$ on the day of each month beginning (date):
- c. Interest accrues on the entire principal balance owing and not on each installment as it becomes due.
19. The parent ordered to pay support owes support arrears as follows, as of (date):
- a. Child support: \$ Spousal support: \$ Family support: \$ Other: \$
- b. Interest is not computed and is not waived.
- c. Payable: \$ on the day of each month beginning (date):
- d. Interest accrues on the entire principal balance owing and not on each installment as it becomes due.
20. No provision of this judgment can operate to limit any right to collect all sums owing in this matter as otherwise provided by law.
21. All payments, unless specified in items 14b, c, and d above, must be made to the State Disbursement Unit at the address listed below (specify address): CALIFORNIA STATE DISBURSEMENT UNIT
PO BOX 989087
WEST SACRAMENTO CA 95798-9087

PETITIONER/PLAINTIFF: COUNTY OF ORANGE RESPONDENT/DEFENDANT: FREDI VALERIANO MUNOZ OTHER PARENT: MARIELA VILLALBA	CASE NUMBER: 12FL103538
---	----------------------------

22. An earnings assignment order is issued.
23. In the event that there is a contract between a party receiving support and a private child support collector, the party ordered to pay support must pay the fee charged by the private child support collector. This fee must not exceed 33 1/3 percent of the total amount if past due support nor may it exceed 50 percent of any fee charged by the private child support collector. The money judgment created by this provision is in favor of the private child support collector and the party receiving support, jointly.
24. If "The parent ordered to pay support" box is checked in item 15, a health insurance coverage assignment must issue.
25. Job search. (Specify name(s)): _____ must seek employment for at least (specify number): _____ jobs per week and report those job applications and results to the court and the local child support agency at the continuance date. These job applications are to be made in person, not by phone, fax, or e-mail.
26. For purposes of the licensing issue only, the parent ordered to pay support is found to be in compliance with the support order in this action. The local child support agency must issue a release of license(s).
27. Notwithstanding any noncompliance issues with the support order in this action, the court finds that the needs of the party ordered to pay support warrant a conditional release. The local child support agency must issue a release of license(s). Such release is effective only as long as the parent ordered to pay support complies with all payment terms of this order.
28. A warrant of attachment/bench warrant issues for (specify name): _____
 a. Bail is set in the amount of \$ _____
 b. Service is stayed until (date): _____
29. The court retains jurisdiction to make orders retroactive to (date): _____
30. The court reserves jurisdiction over all issues the issues of (specify): _____
31. The parents must notify the local child support agency in writing within 10 days of any change in residence or employment.
32. The Notice of Rights and Responsibilities (Health-Care Costs and Reimbursement Procedures) and Information Sheet on Changing a Child Support Order (form FL-192) are attached and incorporated.
33. The following person (the "other parent") is added as a party to this action (name): _____
34. The court further orders (specify): _____

The Parties were advised by the Court prior to the hearing that the matter is being heard by a Commissioner who shall act as temporary judge unless any party objects. No objection was stated.

Upon emancipation of each minor child(ren), child support for that minor child to become an additional payment on arrears.

Approved as conforming to court order. Date: _____ (SIGNATURE OF ATTORNEY FOR THE PARENT ORDERED TO PAY SUPPORT) _____ (SIGNATURE OF ATTORNEY FOR LOCAL CHILD SUPPORT AGENCY)
--

Date: JUL 29 2014
 Paula J. Coleman

 JUDICIAL OFFICER

Number of pages attached: _____

Signature follows last attachment.

NOTICE OF RIGHTS AND RESPONSIBILITIES
Health-Care Costs and Reimbursement Procedures

IF YOU HAVE A CHILD SUPPORT ORDER THAT INCLUDES A PROVISION FOR THE REIMBURSEMENT OF A PORTION OF THE CHILD'S OR CHILDREN'S HEALTH-CARE COSTS AND THOSE COSTS ARE NOT PAID BY INSURANCE, THE LAW SAYS:

1. Notice. You must give the other parent an itemized statement of the charges that have been billed for any health-care costs not paid by insurance. You must give this statement to the other parent within a reasonable time, but no more than 30 days after those costs were given to you.

2. Proof of full payment. If you have already paid all of the uninsured costs, you must (1) give the other parent proof that you paid them and (2) ask for reimbursement for the other parent's court-ordered share of those costs.

3. Proof of partial payment. If you have paid only your share of the uninsured costs, you must (1) give the other parent proof that you paid your share, (2) ask that the other parent pay his or her share of the costs directly to the health-care provider, and (3) give the other parent the information necessary for that parent to be able to pay the bill.

4. Payment by notified parent. If you receive notice from a parent that an uninsured health-care cost has been incurred, you must pay your share of that cost within the time the court orders; or if the court has not specified a period of time, you must make payment (1) within 30 days from the time you were given notice of the amount due, (2) according to any payment schedule set by the health-care provider, (3) according to a schedule agreed to in writing by you and the other parent, or (4) according to a schedule adopted by the court.

5. Disputed charges. If you dispute a charge, you may file a motion in court to resolve the dispute, but only if you pay that charge before filing your motion.

If you claim that the other party has failed to reimburse you for a payment, or the other party has failed to make a payment to the provider after proper notice has been given, you may file a motion in court to resolve the dispute. The court will presume that if uninsured costs have been paid, those costs were reasonable. The court may award attorney fees and costs against a party who has been unreasonable.

6. Court-ordered insurance coverage. If a parent provides health-care insurance as ordered by the court, that insurance must be used at all times to the extent that it is available for health-care costs.

a. Burden to prove. The party claiming that the coverage is inadequate to meet the child's needs has the burden of proving that to the court.

b. Cost of additional coverage. If a parent purchases health-care insurance in addition to that ordered by the court, that parent must pay all the costs of the additional coverage. In addition, if a parent uses alternative coverage that costs more than the coverage provided by court order, that parent must pay the difference.

7. Preferred health providers. If the court-ordered coverage designates a preferred health-care provider, that provider must be used at all times consistent with the terms of the health insurance policy. When any party uses a health-care provider other than the preferred provider, any health-care costs that would have been paid by the preferred health provider if that provider had been used must be the sole responsibility of the party incurring those costs.

INFORMATION SHEET ON CHANGING A CHILD SUPPORT ORDER

General Information

The court has just made a child support order in your case. This order will remain the same unless a party to the action requests that the support be changed (modified). An order for child support can be modified only by filing a motion to change child support and serving each party involved in your case. If both parents and the local child support agency (if it is involved) agree on a new child support amount, you can complete, have all parties sign, and file with the court a *Stipulation to Establish or Modify Child Support and Order* (form FL-350) or *Stipulation and Order (Governmental)* (form FL-825).

When a Child Support Order May Be Modified

The court takes several things into account when ordering the payment of child support. First, the number of children is considered. Next, the net incomes of both parents are determined, along with the percentage of time each parent has physical custody of the children. The court considers both parties' tax filing status and may consider hardships, such as a child of another relationship. An existing order for child support may be modified when the net income of one of the parents changes significantly, the parenting schedule changes significantly, or a new child is born.

Examples

- You have been ordered to pay \$500 per month in child support. You lose your job. You will continue to owe \$500 per month, plus 10 percent interest on any unpaid support, unless you file a motion to modify your child support to a lower amount and the court orders a reduction.
- You are currently receiving \$300 per month in child support from the other parent, whose net income has just increased substantially. You will continue to receive \$300 per month unless you file a motion to modify your child support to a higher amount and the court orders an increase.
- You are paying child support based upon having physical custody of your children 30 percent of the time. After several months it turns out that you actually have physical custody of the children 50 percent of the time. You may file a motion to modify child support to a lower amount.

How to Change a Child Support Order

To change a child support order, you must file papers with the court. *Remember:* You must follow the order you have now.

What forms do I need?

If you are asking to change a child support order open with the local child support agency, you must fill out one of these forms:

- FL-680, *Notice of Motion (Governmental)* or FL-683 *Order to Show Cause (Governmental)* and
- FL-684, *Request for Order and Supporting Declaration (Governmental)*

If you are asking to change a child support order that is not open with the local child support agency, you must fill out one of these forms:

- FL-301, *Notice of Motion* or FL-300, *Order to Show Cause* and
- FL-310, *Application for Order and Supporting Declaration* or
- FL-390, *Notice of Motion and Motion for Simplified Modification of Order for Child, Spousal, or Family Support*

You must also fill out one of these forms:

- FL-150, *Income and Expense Declaration* or FL-155, *Financial Statement (Simplified)*

What if I am not sure which forms to fill out?

Talk to the family law facilitator at your court.

After you fill out the forms, file them with the court clerk and ask for a hearing date. Write the hearing date on the form.

The clerk will ask you to pay a filing fee. If you cannot afford the fee, fill out these forms, too:

- Form FW-001, *Application for Waiver of Court Fees and Costs*
- Form FW-003, *Order on Application for Waiver of Court Fees and Costs*

You must serve the other parent. If the local child support agency is involved, serve it too.

This means someone 18 or over — not you — must serve the other parent copies of your filed court forms at least **16 court days** before the hearing. Add **5 calendar days** if you serve by mail within California (see Code of Civil Procedure section 1005 for other situations).

Court days are weekdays when the court is open for business (Monday through Friday except court holidays). **Calendar days** include all days of the month, including weekends and holidays. To determine court and calendar days, go to www.courtinfo.ca.gov/selfhelp/courtcalendars/.

The server must also serve blank copies of these forms:

- FL-320, *Responsive Declaration to Order to Show Cause or Notice of Motion* and FL-150, *Income and Expense Declaration*, or
- FL-155, *Financial Statement (Simplified)*

Then the server fills out and signs a *Proof of Service* (form FL-330 or FL-335). Take this form to the clerk and file it.

Go to your hearing and ask the judge to change the support. Bring your tax returns from the last two years and your last two months' pay stubs. The judge will look at your information, listen to both parents, and make an order. After the hearing, fill out:

- FL-340, *Findings and Order After Hearing* and
- FL-342, *Child Support Information and Order Attachment*

Need help?

Contact the family law facilitator in your county or call your county's bar association and ask for an experienced family lawyer.

Aviso Sobre Derechos y Responsabilidades
Procedimientos relativos a costos de salud y devolución de dichos costos

Si usted tiene una orden de manutención de menores que disponga la devolución de costos incurridos por servicios de salud para menores y costos no cubiertos por el seguro médico, la ley dice lo siguiente:

1. **Aviso.** Se debe dar al otro padre una factura detallada relacionando los costos cobrados por servicios de salud que no estén cubiertos por seguro médico. Esta factura se le debe dar al otro padre con antelación razonable y no más tarde de 30 días después de haber recibido dichos cobros de pago.
 2. **Comprobante de pago total.** Si usted ya pagó todos los costos de salud correspondientes a individuos no asegurados, deberá: (1) proporcionar al otro padre el comprobante de haber pagado y (2) pedirle al otro padre que le pague la porción de los costos que al otro padre le corresponda, según la orden del tribunal.
 3. **Comprobante de pago parcial.** Si sólo pagó su porción de los costos no cubiertos por el seguro, debe: (1) darle al otro padre un comprobante indicando que ya pagó dicha porción, (2) pedir al otro padre que pague directamente al proveedor de servicios médicos la parte de los costos que al otro padre le corresponda y (3) darle al otro padre la información necesaria para que pague la factura.
 4. **Pago que le corresponde al padre notificado.** Si usted recibe notificación del otro padre indicando costos incurridos por servicios de salud para individuos sin seguro, deberá pagar la porción que le corresponde a usted dentro del plazo ordenado por el tribunal, o si el tribunal no especifica un plazo, usted deberá pagar dichos costos, ya sea, (1) a más tardar en 30 días, desde la fecha en que recibió la notificación sobre los costos por pagar, (2) según un horario de pagos fijado por el proveedor de servicios de salud, (3) según un horario acordado por escrito, entre usted y el otro padre o (4) según el horario adoptado por el tribunal.
 5. **Cuando se disputan los costos.** Si usted disputa un costo, puede presentar al tribunal una moción (o pedimento) para resolver la disputa. Sólo podrá hacer esto, si paga el costo antes de presentar la moción. Si su reclamo consiste en que la otra parte no le ha pagado a usted por un costo, o que no le ha pagado al proveedor de servicios de salud después de la notificación apropiada, usted puede presentar una moción ante el tribunal para resolver la disputa.
- El tribunal asumirá que si los costos ya se han pagado, dichos costos han sido razonables. Si una persona se comporta de una manera que no sea razonable, el tribunal puede imponerle que pague honorarios de abogado.
6. **Cobertura de seguro por orden de tribunal.** Si un padre tiene seguro de salud por orden del tribunal, ese seguro se usará todo el tiempo, siempre que esté disponible para cubrir los costos de servicios de salud.
 - a. **Responsabilidad de comprobar.** La responsabilidad de comprobar ante el tribunal que la cobertura de servicios de salud es inadecuada para los menores recae sobre la parte que reclama que es inadecuada.
 - b. **Costos de cobertura adicional.** Si uno de los padres compra un seguro de salud adicional al que haya sido ordenado por el tribunal, tal padre deberá pagar todo el costo de la cobertura adicional. Y si uno de los padres usa una manera alterna para cubrir gastos médicos que cuestan más que la cobertura dispuesta por el tribunal, dicho padre tendrá que pagar la diferencia.
 7. **Proveedor preferido para servicios de salud.** Si la orden del tribunal especifica un proveedor preferido para servicios de salud, dicho proveedor deberá usarse siempre, según los términos de la póliza del seguro de salud. Si una de las partes decide usar un proveedor que no sea el preferido e incurre costos que podrían haber sido cubiertos por el proveedor preferido si se hubieran utilizado sus servicios, dicha parte asumirá la responsabilidad de cubrir los costos incurridos.

Información sobre cómo cambiar una orden judicial sobre manutención de menores

Información general

El tribunal acaba de dar una orden judicial sobre manutención de menores en esta causa. Esta orden permanecerá en efecto, a menos que alguna de las partes de la causa pida que se modifique. Sólo se puede modificar una orden de manutención de menores si se presenta ante el tribunal una moción (o pedimento) de modificación de manutención y si se da una copia de dicha moción a las partes interesadas en la causa. Si ambos padres llegan a un común acuerdo sobre una suma y si la agencia local que vigila la manutención de menores también acepta el acuerdo (si dicha agencia participa), se puede llenar y hacer que cada una de las partes firme una *Estipulación para Establecer o Modificar una Orden de Manutención de Menores* (formulario FL-350) o llenar y hacer que cada una de las partes firme una *Estipulación y Orden (Documento gubernamental)* (formulario FL-625).

¿Cuándo se puede modificar una orden de manutención de menores?

El juez toma varios factores en consideración cuando emite una orden judicial sobre el pago de manutención de menores. Primero, considera, el número de hijos. Luego, determina los ingresos de ambos padres y el porcentaje del tiempo que cada padre asume la custodia física de los hijos. El tribunal estudia el estado tributario (pago de impuestos) de ambas partes y puede tener en cuenta factores de dificultad económica, tales como la existencia de hijos de otra relación. Se puede modificar la orden manutención de menores si ocurre un cambio considerable en los ingresos netos de uno de los padres, un cambio considerable en el tiempo que los menores pasan con cada uno de los padres, o cuando nace un nuevo hijo.

Ejemplos:

- Si a usted se le ha ordenado pagar \$500 mensuales por manutención de menores y luego pierde su empleo, continuará debiendo \$500 mensuales. Además usted deberá el 10% de intereses de la suma de manutención adeudada, a menos que presente una moción pidiendo que se modifique y se reduzca la suma de manutención y que el tribunal ordene dicha reducción
- Si usted está recibiendo \$300 mensuales por manutención de menores provenientes del otro padre y los ingresos de ese padre aumentan considerablemente, usted continuará recibiendo \$300 mensuales, a menos que usted presente una moción para modificar la orden y que el tribunal ordene el aumento de la suma de manutención de menores.
- Si paga manutención de menores basándose en que pasa un 30% de tiempo asumiendo la custodia parcial de sus hijos y después de varios meses, resulta que en efecto pasa el 50% del tiempo a cargo de la custodia física de sus hijos, en dado caso, podrá presentar una moción pidiendo que se reduzca la suma de manutención.

Cómo modificar una orden existente de manutención de hijos menores

Para modificar una orden de manutención de hijos menores usted debe presentar documentos ante el tribunal. Recuerde: Usted tiene la obligación de cumplir la orden judicial existente.

¿Qué formularios necesita?

Si está pidiendo que el tribunal modifique una orden de manutención cuyo caso esté abierto en la agencia local que vigila la manutención de menores, deberá llenar los siguientes formularios:

- FL-680 Aviso de Petición (Gubernamental) o FL-683 Orden de motivos justificativos (Gubernamental) y
- FL-684 Solicitud de orden y declaración de respaldo

Si está pidiendo que el tribunal modifique una orden de manutención cuyo caso no está abierto en la agencia local que vigila la manutención de menores, deberá llenar los siguientes formularios:

- FL-301 Aviso de petición o FL-300 Orden de motivos justificativos y
- FL-310 Solicitud para una orden y declaración de respaldo (Derecho de familia - Paternidad uniforme) o
- FL-390 Aviso de petición y petición simplificada de modificación de orden de manutención de hijos menores, de cónyuge o de familia

También deberá llenar uno de los siguientes formularios:

- FL-150 Declaración de ingresos y gastos o FL-155 Declaración sobre finanzas (Simplificada)

¿Qué puedo hacer si no sé qué formulario llenar?

Hable con el asesor legal del tribunal de familia.

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 203 Item 97 Assessment No.: 319062005-6

Assessee: MUNOZ, FREDI

Situs: 20585 WELLS ST PERRIS 92570

Date Sold: May 5, 2015

Date Deed to Purchaser Recorded: June 18, 2015

Final Date to Submit Claim: June 20, 2016

RECEIVED

2016 APR 12 PM 3:34

RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ 9,170.11 from the sale of the above mentioned real property. I/We were the lienholder(s), property owner(s) [check in one box] at the time of the sale of the property as is evidenced by Riverside County Recorder's Document No. 2004-0007115 recorded on 01/06/2004. 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.

copy of the grant deed attached ->

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 4 day of 09, 2016 at Orange Ca.
County, State

Fredi Muñoz
Signature of Claimant

Signature of Claimant

Fredi Muñoz
Print Name

Print Name

1718 S Marine St
Street Address

Street Address

Santa Ana Ca. 92704
City, State, Zip

City, State, Zip

714-824-2333
Phone Number

Phone Number

County Administrative Center- 4th Floor
4080 Lemon Street, P.O. Box 12005
Riverside, CA 92502-2205
(951) 955-3900
(951) 955-3990 - Fax



Palm Desert Office
38-686 El Cerrito Road
Palm Desert, CA 92211

E-mail: ttc@co.riverside.ca.us
www.countytreasurer.org

**COUNTY OF RIVERSIDE
TREASURER-TAX COLLECTOR**

Temecula Office
40935 County Center Drive, Suite C
Temecula, CA 92591

July 22, 2015

FREDI MUÑOZ
20585 WELLS ST
MEAD VALLEY, CA 92570

Re: EXCESS PROCEEDS FROM SALE OF TAX DEFAULTED PROPERTY

Assessment No.: 319062005-6 Item: 97
Situs Address: 20585 Wells St Perris 92570
Assessee: Munoz, Fredi
Date Sold: May 5, 2015
Date Deed to Purchaser Recorded: June 18, 2015
Final Date to Submit Claim: June 20, 2016

Dear Sir or Madame:

The property referenced above was declared subject to the Tax Collector's power of sale for non-payment of taxes and later sold. Parties of Interest, as defined in Section 4675 of the California Revenue and Taxation Code (e.g., the last assessee and any lienholders of record), have a right to file a claim for any excess proceeds that remain after the tax liens and the costs of the sale have been satisfied. Our records show that you may be a party of interest, and we are enclosing for your convenience a claim form and a return envelope. Please note that your claim must be filed within one year of the date the deed to the purchaser was recorded (shown above). By law, we cannot accept claims after one year from this recording date. Claims submitted will be evaluated by our legal counsel and awarded in accordance with state law. The submission of a claim merely initiates that review.

The enclosed form is relatively simple and we must stress that most applicants will be able to fill it out without help. However, if you need help, please feel free to contact our office by mail, telephone or in person and we will help you without charge. You may telephone us at (951) 955-3336.

If you prefer to have an agent file your claim for you, or if you should decide to sell your claim (often referred to as "assignment") so that the purchaser of the claim may receive the funds, please advise us and we will send the proper form.

Please note also that the statutory procedures and the County's internal procedures dictate that most claims will not be processed until at least twenty (20) months following the date of recordation of the tax deed.

Sincerely,

DON KENT
TREASURER-TAX COLLECTOR

By Jennifer Pazicni
Deputy



RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS:
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO

FREDI MUÑOZ
1718 S. MARINE ST.
SANTA ANA, CA 92704

Order No.:

Escrow No:

A.P.N.: 319-062-005

DT 8-80 TR 098

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GRANT DEED

THE UNDERSIGNED GRANTOR(S) DECLARE(S)

DOCUMENTARY TRANSFER TAX IS \$ _____ CITY TAX \$ _____

computed on full value of property conveyed, or

computed on full value less value of liens or encumbrances remaining at time of sale.

unincorporated area city of _____ AND

FOR A VALUABLE CONSIDERATION receipt of which is hereby acknowledged,
HUMBERTO HERNANDEZ AND ANGELICA C. HERNANDEZ, HUSBAND AND WIFE AS
JOINT TENANTS.
hereby GRANT(S) to FREDI MUÑOZ A SINGLE MAN AS SOLO TENANT.

the following described real property in the _____ AREA
County of RIVERSIDE, State of California:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF
PROPERTY ADDRESS: 319-062-005

Dated:

HUMBERTO HERNANDEZ

HUMBERTO HERNANDEZ

Angelica Hernandez
ANGELICA C. HERNANDEZ

STATE OF CALIFORNIA
COUNTY OF Orange)SS.

On October 17, 2003 before me, Lucia Gomez (Insert name) Notary Public,

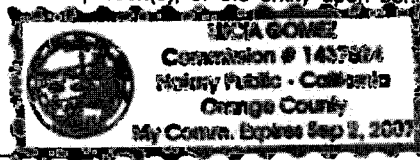
personally appeared Humberto Hernandez Alamillo and Angelica Carranza Hernandez

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(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature

Lucia Gomez



(This area for official notarial seal)

EXHIBIT "A"
(LEGAL DESCRIPTION)

LOT 109, OF UPTON ACRES NO. 10, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA, AS SHOWN ON A MAP RECORDED IN BOOK 16, PAGE 8, INCLUSIVE OF MAPS, IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

EXCEPT THEREFROM ALL MINERALS OIL, GAS AND OTHER HYDROCARBONS SUBSTANCES LYING BELOW A DEPTH OF 500 FEET BELOW THE SURFACE OF SAID LAND, WITHOUT THE RIGHT OF SURFACE ENTRY ABOVE A DEPTH OF 500 FEET FROM THE SURFACE AS RESERVED IN DEEDS OF RECORD



2004-0007115
01/06/2004 09:00A
2 of 2