

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



ITEM: 19.4
(ID # 10960)

MEETING DATE:
Tuesday, August 29, 2023

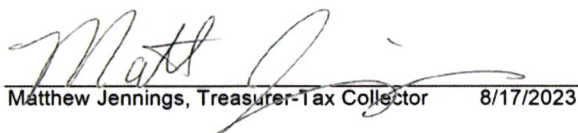
FROM : TREASURER-TAX COLLECTOR:

SUBJECT: TREASURER-TAX COLLECTOR: Public Hearing on the Recommendation for Distribution of Excess Proceeds for Tax Sale No. 212, Item 217. Last assessed to: Quail Valley Country Club, a limited partnership. District 3. [\$0]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Deny the claim from Cochran Investment Company, Inc., Assignee for Michelle Thomason, heir to the estate of Nancy J. Thomason for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 350241020-1;
2. Deny the claim from EPI Investment Group, LLC for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 350241020-1;
3. Authorize and direct the Treasurer-Tax Collector to transfer the unclaimed excess proceeds in the amount of \$3,613.50 to the County General Fund pursuant to Revenue and Taxation Code Section 4674, unless an appeal has been filed in Superior Court, pursuant to the California Revenue and Taxation Code Section 4675.

ACTION:Policy


Matthew Jennings, Treasurer-Tax Collector 8/17/2023

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Perez, seconded by Supervisor Gutierrez and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Spiegel, Perez, Washington, and Gutierrez
Nays: None
Absent: None
Date: August 29, 2023
xc: Tax Collector

Kimberly A. Rector
Clerk of the Board

By: 
Deputy

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 0	\$ 0	\$ 0	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS:			Budget Adjustment:	N/A
			For Fiscal Year:	23/24

C.E.O. RECOMMENDATION: Approve.

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 1, 2018 public auction sale. The deed conveying title to the purchasers at the auction was recorded June 26, 2018. 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 18, 2018, to parties of interest as defined in Section 4675 of said code. Parties of interest have been determined by an examination of Parties of Interest Reports, Assessor's and Recorder's records, as well as other, various research methods used to obtain current mailing addresses for these parties of interest.

Revenue and Taxation Code 4676 (b) states that the county shall make reasonable effort to obtain the name and last known mailing address of the parties of interest. Then, if the address of the party of interest cannot be obtained, the county shall publish notice of the right to claim excess proceeds in a newspaper of general circulation in the county as per Revenue and Taxation Code 4676 (c). The Treasurer-Tax Collector's Office has made it a policy to take the following actions to locate the rightful party of the excess proceeds.

1. Examined Parties of Interest Reports to notify all parties of interest attached to the parcel.
2. Researched all last assessee's through the County's Property Tax System for any additional addresses.
3. Used Accurant (people finder) to notify any new addresses that may be listed for our last assessees.
4. Advertised in newspapers for three consecutive weeks in The Desert Sun, Palo Verde Valley Times, and The Press Enterprise referring any parties of interest to file a claim for the excess proceeds.
5. Sent out a certified mailing within 90 days as required by Revenue and Taxation Code 4676 (b).

According to Revenue and Taxation Code 4675 (a) Any party of interest in the property may file with the county a claim for the excess proceeds, in proportion to his or her interest held with others of equal priority in the property at the time of the sale, at any time prior to the expiration

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

of the one year following the recordation of the Tax Collector's deed to the Purchaser, which was recorded on June 26, 2018.

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

1. Claim from Cochran Investment Company, Inc., Assignee for Michelle Thomason, heir to the estate of Nancy J. Thomason based on an Assignment of Right to Collect Excess Proceeds notarized July 12, 2018, a Quitclaim Deed recorded June 10, 2004 as Instrument No. 2004-0445943, an Affidavit for Collection of Personal Property Under Probate Code 13101 notarized July 7, 2018, and a Certificate of Death for Nancy J. Thomason.
2. Claim from EPI Investment Group, LLC based on a Quitclaim Deed recorded May 19, 2010 as Instrument No. 2010-0231685 and a Quitclaim Deed recorded March 25, 2011 as Instrument No. 2011-0134107, both referencing APN 370200038-7.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that the claims from Cochran Investment Company, Inc., Assignee for Michelle Thomason, heir to the estate of Nancy J. Thomason and EPI Investment Group, LLC be denied since they did not hold title at the time of the sale and therefore were not a party of interest. Since there are no other claimants, the unclaimed excess proceeds in the amount of \$3,613.50 will be transferred to the County General Fund. 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 will be transferred to the County General Fund.

ATTACHMENTS (if any, in this order):

ATTACHMENT A. Claim Cochran

ATTACHMENT B. Claim EPI


Cesar Bernal, PRINCIPAL MGMT ANALYST 8/18/2023


Kristine Bell-Valdez, Supervising Deputy County Counsel 8/3/2023

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX-DEFAULTED PROPERTY
(SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS)

RECEIVED

To: Jon Christensen, Treasurer-Tax Collector

2018 AUG -7 AM 8:29

Re: Claim for Excess Proceeds

RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

TC 212 Item 217 Assessment No.: 350241020-1

Assessee: QUAIL VALLEY COUNTRY CLUB

Situs: 23790 CASSANDRA DR CANYON LAKE 92587

Date Sold: May 1, 2018

Date Deed to Purchaser Recorded: June 26, 2018

Final Date to Submit Claim: June 26, 2019

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ 4055 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. 2004-0445943; recorded on 6/10/2004. 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.

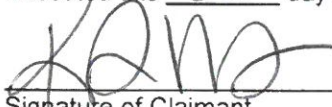
NOTE: YOUR CLAIM WILL NOT BE CONSIDERED UNLESS THE DOCUMENTATION IS ATTACHED.

Copy of ID, Assignment of Rights to Collect Excess Proceeds, Declaration Under Probate Code Section 13101,
Table of Heirship, Declaration of One and the Same, Copy of Death Certificate for Nancy Thomason, and Copy
of Death Certificate for Roy Thomason

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 30 day of JULY, 2018 at Tustin, CA
County, State



Signature of Claimant

Signature of Claimant
Cochran Investment Company, Inc.

Kelly A. Mills, Vice-President

Print Name

Print Name

161 Fashion Ln., Ste. 105

Street Address

Street Address

Tustin, CA 92780

City, State, Zip

City, State, Zip

714-731-1820

Phone Number

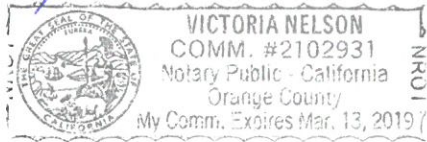
Phone Number

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

State of California
County of Orange

Subscribed and sworn to (or affirmed) before me on this 30th
day of July, 2018, by Victoria Nelson Notary Public
Kelly A. Mills

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



(Seal)

Signature *Victoria Nelson*

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 Cochran Investment Company, Inc 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 350241020-1 sold at public auction on May 1, 2018 I understand that the total of excess proceeds available for refund is \$ 4055 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.

Michelle Thomason
(Signature of Party of Interest/Assignor)

Michelle Thomason, Heir
(Name Printed)

437 Shamrock Dr.
(Address)

NEVADA
STATE OF CALIFORNIA)ss.
COUNTY OF CLARK

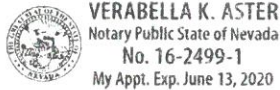
Henderson, NV 89002
(City/State/Zip)

702-712-6006
(Area Code/Telephone Number)

On July 7, 2018, before me, Verabella K. Aster, personally appeared Michelle Thomason, 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 NEVADA that the forgoing paragraph is true and correct.

WITNESS my hand and official seal.
Verabella K. Aster
(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.

[Signature]
(Signature of Assignee)

Kelly A. Mills, Vice-President
(Name Printed)

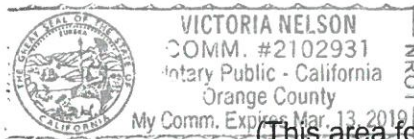
161 Fashion Ln., Ste. 105
(Address)

STATE OF CALIFORNIA)ss.
COUNTY OF Orange

Tustin, CA 92780
(City/State/Zip)

On July 12, 2018, before me, the undersigned, a Notary Public in and for said State, personally appeared Kelly A. Mills, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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



(This area for official seal)



RECORDING REQUESTED BY

WHEN RECORDED MAIL TO

Name: Nancy J. Thumason
Street Address: 437 Shamrock Dr.
City & State: Henderson NV. 89015

M	S	U	PAGE	SIZE	DA	PCOR	NOCOR	SMF	MISC
						✓			
A	R	L				COPY	LONG	REFUND	NCHG EXAM

TRA-100

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ None

COMPUTED ON FULL VALUE OF PROPERTY CONVEYED.

OR COMPUTED ON FULL VALUE LESS LIENS AND ENCUMBRANCES REMAINING AT TIME OF SALE.

Paul J. Samaduroff
Signature of Declarant or Agent determining tax. Full Name

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged

PAUL J. SAMADUROFF and MARY SAMADUROFF, husband and wife,



do hereby

REMISE, RELEASE AND FOREVER QUITCLAIM to NANCY J. THUMASON, a married woman,

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

Lot 46, in Block D of Lake Elsinore Lodge Tract, in the county of Riverside, state of California, as per map recorded in Book 12 Page 27 of Maps, in the office of the county recorder of said county.

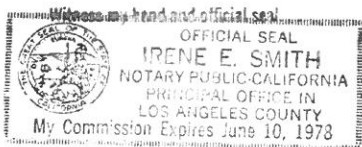
Dated: December 8, 1975

Paul J. Samaduroff
Paul J. Samaduroff
Mary Samaduroff
Mary Samaduroff

State of California, }
County of Los Angeles } ss

On December 8, 1975, before me, the undersigned, a Notary Public in and for said State, personally appeared Paul J. Samaduroff and Mary Samaduroff

known to me to be the person^s whose name^s are subscribed to the within Instrument and acknowledged that they executed the same.



(Seal) Irene E. Smith
Notary Public in and for said State.

Title Order No. _____ Escrow or Loan No. _____

MAIL TAX
STATEMENTS TO _____
NAME ADDRESS ZIP

Declaration Under Probate Code Section 13101

The undersigned, each for himself or herself and not for the others, declare:

- 1. That Nancy Thomason [Name of Decedent], hereinafter "Decedent" died in the City of Las Vegas, County of Clark, State of Nevada on June 1, 2018.
- 2. At least 40 days have elapsed since the death of Decedent, as shown in a certified copy of the Decedent's death certificate attached to this declaration.
- 3. Either of the following, as appropriate:

- No proceeding is now being or has been conducted in California for administration of the decedent's estate.
- The decedent's personal representative has consented in writing to the payment, transfer, or delivery to the affiant or declarant of the property described in the affidavit or declaration.
- The proceeding has been conducted for the administration of the decedent's estate.

- 4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed one hundred fifty thousand dollars (\$150,000).
- 5. An Inventory and Appraisal of the real property in the decedent's estate is attached, or There is no real property in the estate.
- 6. A description of the property that is to be paid, transferred or delivered to the undersigned under the provisions of the California Probate Code Section 13100:

Excess proceeds from Riverside County Tax Sale on May 1, 2018 for APN # 350241020-1

- 7. CHECK ONE OF THE FOLLOWING and, if applicable, FILL IN THE BLANK:
 - The declarant(s) is/are the successor(s) of the Decedent (as defined in Section 13006 of the California Probate Code) to the Decedent's interest in the described property
Excess proceeds from Riverside County Tax Sale on May 1, 2018 for APN # 350241020-1
 - The declarant(s) is/are authorized under Section 13051 of the California Probate Code to Act on behalf of the successor of the Decedent (as defined in Section 13006 of the California Probate Code) with respect to the Decedent's interest in the described property

The name(s) of the successor(s) of the Decedent is/are: _____

- 8. No other person has a superior right to the interest of the Decedent in the described property.
- 9. The declarants request that the described property be paid, delivered to
Cochran Investment Company, Inc. – Client Trust Account
161 Fashion Ln., Ste. 105
Tustin, CA 92780
(714) 731 – 1820
- 10. I declare under penalty of perjury, under the laws of the State of California, that all statements contained in this form and any accompanying documents are true and correct, with full knowledge that all statements are subject to investigation and that any false or dishonest statement may be grounds for denial of the claim submitted.

Michelle Thomason
Signature

Michelle Thomason
Name [Print or Type]

Signature

Name [Print or Type]

Signature

Name [Print or Type]

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY
PUBLIC

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

State of ~~California~~ NEVADA ss.
County of CLARK

On 7-7-18, before me, **Verabella K. Aster** personally appeared Michelle Thomason, who provided 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) is acted, executed the instrument.

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

WITNESS my hand and official seal.

Verabella K. Aster
(Signature of Notary)



VERABELLA K. ASTER
Notary Public State of Nevada
No. 16-2499-1
My Appt. Exp. June 13, 2020

(This area is for official Seal)

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4024259

CERTIFICATE OF DEATH

2018011503

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME (FIRST MIDDLE LAST SUFFIX) Nancy J THOMASON		2. DATE OF DEATH (Mo/Day/Year) June 01, 2018		3a. COUNTY OF DEATH Clark	
3b. CITY, TOWN, OR LOCATION OF DEATH Las Vegas		3c. HOSPITAL OR OTHER INSTITUTION -Name (If not either, give street or location) (Specify) Southern Hills Hospital Medical Center		3d. SEX Female	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 83	
9a. STATE OF BIRTH (If not US/CA, name country) California		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 12	
11. MARITAL STATUS (Specify) Widowed		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage)		8. DATE OF BIRTH (Mo/Day/Yr) November 10, 1934	
13. SOCIAL SECURITY NUMBER		14a. US JAL OCCUPATION (Give Kind of Work Done During Most of Year) Homemaker		14b. KIND OF BUSINESS OR INDUSTRY Home	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Clark		15c. CITY, TOWN OR LOCATION Las Vegas	
15d. STREET AND NUMBER 437 Shamrock Drive		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		Ever in US Armed Forces? No	
16. FATHER/PARENT - NAME (First Middle Last Suffix) Paul SAMADORE			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Mary LASCATOU		
18a. INFORMANT- NAME (Type or Print) Michelle Marie THOMASON		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 437 Shamrock Drive Las Vegas, Nevada 89002			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME La Paloma Funeral Services		19c. LOCATION City or Town State Las Vegas Nevada 89122	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) MITCHELL AMOS		20b. FUNERAL DIRECTOR LICENSE NUMBER		20c. NAME AND ADDRESS OF FACILITY La Paloma Funeral Services 5450 Stephanie Street, Suite #110 Las Vegas NV 89122	
20d. SIGNATURE AUTHENTICATED					
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) SIGNATURE AUTHENTICATED IAN A CRAVEN MD			22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) June 14, 2018		21c. HOUR OF DEATH 08:58		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)				22c. HOUR OF DEATH	
				22d. PRONOUNCED DEAD (Mo/Day/Yr)	
				22e. PRONOUNCED DEAD AT (Hour)	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Ian A Craven MD 2380 W Horizon Ridge Pkwy Henderson, NV 89052				23b. LICENSE NUMBER	
24a. REGISTRAR (Signature) SUSAN ZANNIS		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) June 15, 2018		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input type="checkbox"/>	
24d. SIGNATURE AUTHENTICATED					
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I				Interval between onset and death	
(a) Cardiopulmonary Arrest					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(b) Unknown Etiology					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(c)					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(d)					
PART II. OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I.				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes					
28a. ACC. SUSPECT, HOW, UNDER OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY	
				28d. DESCRIBE HOW INJURY OCCURRED	
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

LOCAL REGISTRAR

VRS-Rev-20120523s

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS, STATE OF NEVADA." This copy was issued by the Southern Nevada Health District from State certified documents authorized by the State Board of Health pursuant to NRS 440.175.

DATE ISSUED:

JUN 19 2018

Registrar of Vital Statistics

By: *[Signature]*

This Copy not valid unless prepared on engraved border displaying date, seal and signature of Registrar.

SOUTHERN NEVADA HEALTH DISTRICT • P.O. Box 3902 • Las Vegas, NV 89122 • 702-739-1010 • Tax ID # 88-015173

[ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE]



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

RECEIVED
2018 JUL 26 PM 4:47
RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

To: Jon Christensen, Treasurer-Tax Collector

Re: Claim for Excess Proceeds

TC 212 Item 217 Assessment Number: 350241020-1

Assessee: QUAIL VALLEY COUNTRY CLUB

Situs: 23790 CASSANDRA DR CANYON LAKE 92587

Date Sold: May 1, 2018

Date Deed to Purchaser Recorded: June 26, 2018

Final Date to Submit Claim: June 26, 2019

I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ 7500 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. 10-0231685; recorded on 5/19/2010. 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.

Quitclaim deed & grant deed showing ownership

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 23rd day of July, 2018 at Los Angeles
County, State

Signature of Claimant

Signature of Claimant

Justin Monemour, EPI Inc. graphic

Print Name

1605 W. Olympic Blvd

Print Name

#9021 C.A., CA 90015

Street Address

310 765 7447

City, State, Zip

Justin.monem@gmail.com

Phone Number

Email Address

Email Address

RECORDING REQUESTED BY

Grantee

WHEN RECORDED MAIL TO

Name EPI Investment Group, LLC

Address 1605 W. Olympic Blvd Suite 9021 City & State Los Angeles, CA 90015

ESCROW NO.

TITLE ORDER NO.



S	R	U	PAGE	SIZE	DA	MISC	LONG	RFD	COPY
1			2						5
M	A	L	465	426	PCOR	NCOR	SMF	NCHG	EXAM
DITTO					T:	CTY	UNI	05	

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

0803

QUITCLAIM DEED

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$ no transfer value / gift

Parcel No. 370-200-038

23

C 051

computed on the full value of property conveyed, or

computed on the full value less the value of liens and encumbrances remaining thereon at the time of sale.

Unincorporated area: City of Lake Elsinore

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Ray Adasha and Neissani Nejatolla

hereby REMISE(S), RELEASE(S), AND FOREVER QUITCLAIM(S) to EPI Investment Group, LLC

the following described real property in the City of Lake Elsinore

County of Riverside, State of California: see attached exhibit A for legal description

Date 4-6-10

Signature of Ray Adasha

Signature of Neissani Nejatolla

Ray Adasha AKA Rahmatulla Adasha Neissani Nejatolla

State of California County of Los Angeles

On 4/6/2010 before me, Barbara A. Kaplan a Notary Public in and for

said County and State, personally appeared Neissani Nejatolla & Ray Adasha 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: Barbara A. Kaplan

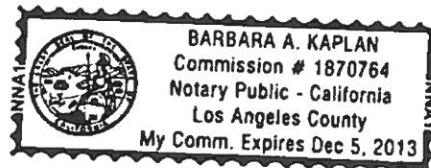


Exhibit A

THAT PORTION OF LOT 46 IN BLOCK "D" OF ELSINORE, AS SHOWN BY MAP ON FILE IN BOOK 6, PAGE 296 OF MAPS, RECORDED OF SAN DIEGO COUNTY, CALIFORNIA, DESCRIBED AS FOLLOWS:

THE SOUTHWESTERLY 65 FEET OF THE NORTHEASTERLY 458 FEET OF THE NORTHWESTERLY 141 FEET, OF THE SOUTHEASTERLY 423 FEET OF SAID LOT 46; THE SIDELINES THEREOF BEING PARALLEL TO THE SOUTHEASTERLY LINE OF SAID LOT; THE SOUTHWESTERLY LINE BEING PARALLEL WITH GRAND AVENUE; SAID 141 FEET AND SAID 423 FEET BEING MEASURED ALONG THE SOUTHWESTERLY LINE OF GRAND AVENUE, AND SAID NORTHEASTERLY 458 FEET BEING MEASURED FROM THE SOUTHWESTERLY LINE OF GRAND AVENUE, 80 FEET WIDE.

RECORDING REQUESTED BY

Grantee

WHEN RECORDED MAIL TO

Name EPI Investment Group, LLC

Address 1605 W. Olympic Blvd

Suite 9021
City & State Los Angeles, CA 90015

ESCROW NO.

TITLE ORDER NO. 370908

DOC # 2011-0134107

03/25/2011 04:43P Fee:21.00

Page 1 of 3

Recorded in Official Records

County of Riverside

Larry W. Ward

Assessor, County Clerk & Recorder



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QUITCLAIM DEED

0803

21

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$ no transfer value / gift

No consideration

Parcel No. 370-200-038

computed on the full value of property conveyed, or

computed on the full value less the value of liens and encumbrances remaining thereon at the time of sale.

Unincorporated area: City of Lake Elsinore



FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,

Jaklin Adasha and Lida Neissani, spouses of Ray Adasha and N. Neissani

hereby REMISE(S), RELEASE(S), AND FOREVER QUITCLAIM(S) to
EPI Investment Group, LLC

the following described real property in the City of Lake Elsinore

County of Riverside, State of California:

see attached exhibit A for legal description

Date 2-14-11

J. Adasha Jaklin Adasha

Lida Neissani Lida Neissani

State of California
County of Los Angeles

On 2-14-11 before me, Jasley Salguero a Notary Public in and for

said County and State, personally appeared Jaklin Savahery Adasha
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: Jasley Salguero



State of California)
County of Los Angeles)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

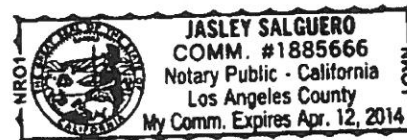
On 3-1-11 before me, Jasley Salguero, Notary
(here insert name and title of the officer)

personally appeared Lida Neissani

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 Jasley Salguero

(Seal)

OPTIONAL INFORMATION

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document

titled/for the purpose of Quit Claim

Lake Elsinore

containing 2 pages, and dated 2-14-11

The signer(s) capacity or authority is/are as:

- Individual(s)
- Attorney-in-Fact
- Corporate Officer(s) _____
Title(s)

- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: _____

representing: _____
Name(s) of Person(s) or Entity(ies) Signer is Representing

Additional Information

Method of Signer Identification

Proved to me on the basis of satisfactory evidence:
 form(s) of identification credible witness(es)

Notarial event is detailed in notary journal on:

Page # _____ Entry # _____

Notary contact: _____

Other

Additional Signer(s) Signer(s) Thumbprint(s)

Exhibit A

THAT PORTION OF LOT 46 IN BLOCK "D" OF ELSINORE, AS SHOWN BY MAP ON FILE IN BOOK 6, PAGE 296 OF MAPS, RECORDED OF SAN DIEGO COUNTY, CALIFORNIA, DESCRIBED AS FOLLOWS:
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