

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



ITEM: 19.7
(ID # 22054)

MEETING DATE:
Tuesday, September 26, 2023

FROM : TREASURER-TAX COLLECTOR:

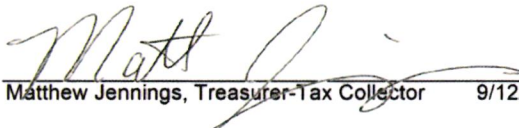
SUBJECT: TREASURER-TAX COLLECTOR: Public Hearing on the Recommendation for Distribution of Excess Proceeds for Tax Sale No. 215, Item 1407. Last assessed to: Micaela Fernandez. District 5. [\$34,831-Fund 65595 Excess Proceeds from Tax Sale]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Approve the claim from Global Discoveries, Ltd., Assignee for Carmen A. Gonzalez, heir to the Estate of Micaela Fernandez for payment of excess proceeds resulting from the Tax Collector's public auction tax sale associated with parcel 528121021;
2. Approve the claim from Global Discoveries, Ltd., Assignee for Federico Gonzalez, heir to the Estate of Micaela Fernandez for payment of excess proceeds resulting from the Tax Collector's public auction tax sale associated with parcel 528121021;

Continued on Page 2

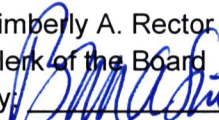
ACTION:Policy


Matthew Jennings, Treasurer-Tax Collector 9/12/2023

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes: Jeffries, Spiegel, Perez, Washington, Perez and Gutierrez
Nays: None
Absent: None
Date: September 26, 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**

RECOMMENDED MOTION: That the Board of Supervisors:

3. Approve the claim from Global Discoveries, Ltd., Assignee for Jessica Gonzalez, heir to the Estate of Micaela Fernandez for payment of excess proceeds resulting from the Tax Collector's public auction tax sale associated with parcel 528121021;
4. Approve the claim from Global Discoveries, Ltd., Assignee for Marebel Gonzalez, heir to the Estate of Micaela Fernandez for payment of excess proceeds resulting from the Tax Collector's public auction tax sale associated with parcel 528121021;
5. Approve the claim from Global Discoveries, Ltd., Assignee for Mayra Alejandra Romero, heir to the Estate of Micaela Fernandez for payment of excess proceeds resulting from the Tax Collector's public auction tax sale associated with parcel 528121021;
6. Authorize and direct the Auditor-Controller to issue a warrant to Global Discoveries, Ltd., Assignee for Carmen A. Gonzalez, heir to the Estate of Micaela Fernandez in the amount of \$6,966.22, to Global Discoveries, Ltd., Assignee for Federico Gonzalez, heir to the Estate of Micaela Fernandez in the amount of \$6,966.21, to Global Discoveries, Ltd., Assignee for Jessica Gonzalez, heir to the Estate of Micaela Fernandez in the amount of \$6,966.21, to Global Discoveries, Ltd., Assignee for Marebel Gonzalez, heir to the Estate of Micaela Fernandez in the amount of \$6,966.21 and to Global Discoveries, Ltd., Assignee for Mayra Alejandra Romero, heir to the Estate of Micaela Fernandez in the amount of \$6,966.21, 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.

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$34,831	\$ 0	\$34,831	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: Fund 65595 Excess Proceeds from Tax Sale.			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 5, 2020 public auction sale. The deed conveying title to the purchasers at the auction was recorded July 15, 2020. 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 24, 2020, 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.

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

1. Claim from Global Discoveries, Ltd Assignee for Carmen A. Gonzalez, heir to the Estate of Micaela Fernandez based on an Assignment of Right to Collect Excess Proceeds notarized July 15, 2021, a Quitclaim Deed recorded July 7, 2006 as Instrument No. 2006-0498579, an Affidavit for Collection of Personal Property California Probate Code Section 13100 notarized July 10, 2021, and a Certificate of Death for Micaela Fernandez.
2. Claim from Global Discoveries, Ltd., Assignee for Federico Gonzalez, heir to the Estate of Micaela Fernandez based on an Assignment of Right to Collect Excess Proceeds notarized June 26, 2023, a Quitclaim Deed recorded July 7, 2006 as Instrument No. 2006-0498579, an Affidavit for Collection of Personal Property California Probate Code Section 13100 notarized June 21, 2023, and a Certificate of Death for Micaela Fernandez.
3. Claim from Global Discoveries, Ltd., Assignee for Jessica Gonzalez, heir to the Estate of Micaela Fernandez based on an Assignment of Right to Collect Excess Proceeds notarized July 15, 2021, a Quitclaim Deed recorded July 7, 2006 as Instrument No. 2006-0498579, an Affidavit for Collection of Personal Property California Probate Code Section 13100 notarized July 07, 2021, and a Certificate of Death for Micaela Fernandez.
4. Claim from Global Discoveries, Ltd., Assignee for Marebel Gonzalez, heir to the Estate of Micaela Fernandez based on an Assignment of Right to Collect Excess Proceeds notarized July 15, 2021, a Quitclaim Deed recorded July 7, 2006 as Instrument No. 2006-0498579, an Affidavit for Collection of Personal Property California Probate Code Section 13100 notarized July 10, 2021, and a Certificate of Death for Micaela Fernandez.
5. Claim from Global Discoveries, Ltd., Assignee for Mayra Alejandra Romero, heir to the Estate of Micaela Fernandez based on an Assignment of Right to Collect Excess Proceeds notarized July 15, 2021, a Quitclaim Deed recorded July 7, 2006 as Instrument No. 2006-0498579, an Affidavit for Collection of Personal Property California Probate Code Section 13100 notarized July 10, 2021, and a Certificate of Death for Micaela Fernandez.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Global Discoveries, Ltd., Assignee for Carmen A. Gonzalez, heir to the Estate of Micaela Fernandez be awarded excess proceeds in the amount of \$6,966.22, Global Discoveries, Ltd., Assignee for Federico Gonzalez, heir to the Estate of Micaela Fernandez be awarded excess proceeds in the amount of \$6,966.21, Global Discoveries, Ltd., Assignee for Jessica Gonzalez, heir to the Estate of Micaela Fernandez be awarded excess proceeds in the amount of \$6,966.21, Global Discoveries, Ltd., Assignee for Marebel Gonzalez, heir to the Estate of Micaela Fernandez be awarded excess proceeds in the amount of \$6,966.21 and Global Discoveries, Ltd., Assignee for Mayra Alejandra Romero, heir to the Estate of Micaela Fernandez be awarded excess proceeds in the amount of \$6,966.21. Supporting documentation has been provided. The Tax Collector requests approval of the

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
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above recommended motion. Notice of this recommendation was sent to the claimants by certified mail.

Impact on Residents and Businesses

Excess proceeds will be released to the heirs to the last assessee of the property.

ATTACHMENTS (if any, in this order):

ATTACHMENT A. Claim GlobalC

ATTACHMENT B. Claim GlobalF

ATTACHMENT C. Claim GlobalJ

ATTACHMENT D. Claim GlobalMar

ATTACHMENT E. Claim GlobalMay


Cesar Bernal, PRINCIPAL MGMT ANALYST 9/14/2023


Kristine Bell-Valdez, Supervising Deputy County Counsel 8/10/2023

CLAIM SUMMARY

Date: July 14, 2021
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 528121021
Last Assessee: FERNANDEZ MICAELA
Sale Date: 4/30/2020
TC: TC215
Item Number: 1407
Deadline: 7/15/2021

RECEIVED
2021 JUL 15 AM 8:08
RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

Dear Treasurer/Tax Collector:

Claimant(s): Global Discoveries, Ltd.

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

- 1. Explanation of Events
2. Quitclaim Deed quitclaiming interest to Micaela Fernandez as document number: 2006-0498579, recorded on 7/07/2006 in Riverside County, CA.
3. Certified Death Certificate for Micaela Fernandez - Micaela's death certificate
a. Please Note: Micaela's death certificate lists that she was married at the time of her death to Federico Gonzalez. However, this is inaccurate. Micaela and Federica were officially divorced on January 12, 2005 and Micaela Fernandez never remarried.
b. Please Note: The 52333 Lois Ave. Cabazon, CA 92230 address listed on Micaela's death certificate is one and the same property as the above listed APN.
4. Judgment for Dissolution of Marriage between Micaela Gonzalez and Federico Gonzalez
a. Please Note: The 52333 Lois Ave. Cabazon, CA 92230 is awarded to Micaela Fernandez as her sole and separate property.
5. Probate Affidavit for the Estate of Micaela Fernandez
6. Certified Certificate of Live Birth for Mayra Alejandra Romero
7. Certified Certificate of Live Birth for Marebel Gonzalez
8. Certificate of Live Birth for Carmen Gonzalez
9. Certificate of Live Birth for Jessica Gonzalez
10. Certificate of Live Birth for Federico Gonzalez
11. Letters of Guardianship filed on 9/17/2014 in the Superior Court of California, County of Riverside appointing Carmen Gonzalez as Guardian of Federico D. Gonzalez (Minor)
12. Original Tax return referencing the 52333 Lois Ave. Cabazon, CA 92230 address which is one and the same property as the above referenced APN.
13. W2 Statement referencing the P.O. Box 807 Cabazon, CA 92230 address, which is one and the same address listed on the above-mentioned Quitclaim Deed.
14. Affidavits Declaring Identity signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.
15. Assignments of Rights to Collect Excess Proceeds signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.



16. Claim form(s) signed by Global Discoveries.
17. Photo ID for Assignor: Carmen Gonzalez
18. Photo ID for Assignor: Marebel Gonzalez
19. Photo ID for Assignor: Jessica Gonzalez
20. Photo ID for Assignor: Mayra Alejandra Romero.

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

- One warrant in the amount of \$ 34,831.06 or 100% of the claimant's share of the excess proceeds made payable to Global Discoveries Ltd. and mailed to P.O. Box 1748, Modesto, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.com.

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

Certified Tracking Number: 7020-3160-0000-7617-5065

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 528121021 Tax Sale Number TC215, Item 1407 sold at public auction on 4/30/2020. I understand that the total of excess proceeds available for refund is \$ 34,831.06+/-, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

(Signature of Party of Interest/Assignor) 7/10/21 (Date)

Carmen A. Gonzalez as heir to the Estate of Micaela Fernandez (Name Printed)
1485 Aspen Ln (Address)
Banning, CA, 92220 (City/State/Zip)
(951) 373-0807 (Area Code/Telephone Number)

Tax ID/SS#

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

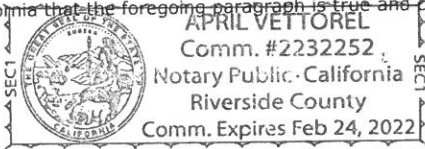
State of California
County of Riverside

On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared

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

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

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

Jed Byerly, Managing Member (Name Printed)

Tax ID/SS#

Global Discoveries Ltd. (Address)
P.O. Box 1748
Modesto, CA 95353-1748 (City/State/Zip)
Phone: (209) 593-3913

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

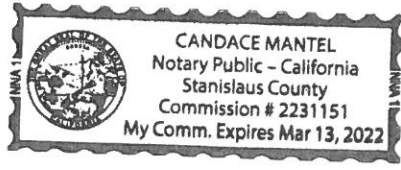
State of California
County of Stanislaus

On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared Jed Buerly

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

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

WITNESS my hand and official seal.
Signature of Notary Public (seal)
117-174 (3/85) (Ret-Perm)
GD# 39579-237762



CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 528121021
Tax Sale Number: TC215
Item Number: 1407
Date of Sale: 4/30/2020

The undersigned claimant, Global Discoveries, Ltd., claims \$34,831.06 +/- 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 14th day of July, 2021 at Modesto, California.

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

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California

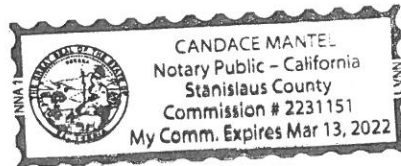
County of Stanislaus

On 7/15/21 before me, Candace Mantel, 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





RECORDING REQUESTED BY

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

NAME MICAELA FERNANDEZ
STREET ADDRESS P.O. BOX 807
CABAZON CA
CITY, STATE & ZIP CODE 92230
TITLE ORDER NO. _____ ESCROW NO. _____

M	S	U	PAGE	SIZE	DA	PCOR	NOCOR	SMF	MISC.
	1		1			✓			
					3				T
A	R	L			COPY	LONG	REFUND	NCHG	EXAM

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0
 computed on full value of property conveyed, or
 computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

C
TV

FEDERICO GONZALEZ ARENAS
(NAME OF GRANTOR(S))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to MICAELA FERNANDEZ
(NAME OF GRANTEE(S))

the following described real property in the ~~City~~ UNINCORPORATED AREA County of Riverside, State of CA:

PARCEL 1: Lot 175, CABAZON ESTATES, No. 2 AS PER PLAT RECORDED in BOOK 41 PAGES 63 and 64, RECORDS of said COUNTY;

PARCEL 2: The Easterly 4 feet of Lot 174 of CABAZON ESTATES No. 2, AS SHOWN BY MAP ON FILE in BOOK 41 PAGES 63 & 64 of MAPS, RIVERSIDE COUNTY RECORDS.

Assessor's parcel No. 528-121-021 & 528-121-046 OR 52233 LOIS AVE.

Executed on JULY 5, 2006, 2006 at CABAZON, CALIF.
(CITY AND STATE)

STATE OF CALIFORNIA

COUNTY OF Riverside

Federico Gonzalez ARENAS

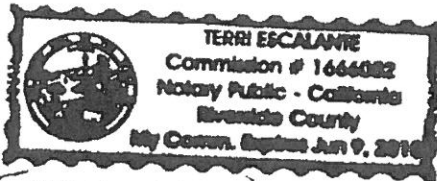
On JULY 5, 2006 before me, TERRI ESCALANTE, Notary Public

personally appeared Federico Gonzalez ARENAS 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]
(SIGNATURE OF NOTARY)

(SEAL)



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- INDIVIDUAL(S)
- CORPORATE OFFICER(S)
- PARTNER(S)
- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER:

SIGNER IS REPRESENTING:
(Name of Person(s) or Entity(ies))

MAIL TAX STATEMENTS TO: MICAELA FERNANDEZ
P.O. BOX 807, CABAZON, CA 92230

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.



STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

3052010091716

CERTIFICATE OF DEATH

3201033004859

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASERS, WHITEOUTS OR ALTERATIONS VS-1 (REV. 3/08)		LOCAL REGISTRATION NUMBER	
1 NAME OF DECEDENT—FIRST (Given) MICAELA		2 MIDDLE -		3 LAST (Family) FERNANDEZ	
AKA ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)					
4 DATE OF BIRTH mm/dd/yyyy 08/24/1962		5 AGE Yrs 47		6 SEX F	
8 BIRTH STATE/FOREIGN COUNTRY MEXICO		10 SOCIAL SECURITY NUMBER		12 MARITAL STATUS/RDOP (at Time of Death) MARRIED	
9 BIRTH STATE/FOREIGN COUNTRY MEXICO		11 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		7 DATE OF DEATH mm/dd/yyyy 05/09/2010	
13 EDUCATION - Highest Level/Degree (see worksheet on back) 09		14/15. WAS DECEDENT HISPANIC/LATINO/A/SPANISH? (If yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN <input type="checkbox"/> NO		16 DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) MEXICAN	
17 USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED LABORER			18 KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) RESTAURANT		19 YEARS IN OCCUPATION 1
20 DECEDENT'S RESIDENCE (Street and number, or location) 52233 LOIS AVE.					
21 CITY CABAZON		22 COUNTY/PROVINCE RIVERSIDE		23 ZIP CODE 92230	
24 YEARS IN COUNTY 13		25 STATE/FOREIGN COUNTRY CA			
26 INFORMANT'S NAME, RELATIONSHIP FEDERICO GONZALEZ, HUSBAND			27 INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 52233 LOIS AVE., CABAZON, CA 92230		
28 NAME OF SURVIVING SPOUSE/SRDP—FIRST FEDERICO		29 MIDDLE -		30 LAST (BIRTH NAME) GONZALEZ	
31 NAME OF FATHER/PARENT—FIRST JUAN		32 MIDDLE -		33 LAST FERNANDEZ	
34 BIRTH STATE MEXICO		35 NAME OF MOTHER/PARENT—FIRST ENEDINA		36 MIDDLE -	
37 LAST (BIRTH NAME) GARCIA		38 BIRTH STATE MEXICO			
39 DISPOSITION DATE mm/dd/yyyy 05/14/2010		40 PLACE OF FINAL DISPOSITION SUNRISE CEMETERY DISTRICT 2201 N. SAN BERNARDINO COURT, BANNING, CA 92220			
41 TYPE OF DISPOSITION BU		42 SIGNATURE OF EXAMINER		43 LICENSE NUMBER EMB8010	
44 NAME OF FUNERAL ESTABLISHMENT SAN BERNARDINO MISSION CHAPEL		45 LICENSE NUMBER / ID / SIGNATURE OF LOCAL REGISTRAR FD1854		47 DATE mm/dd/yyyy 05/12/2010	
101 PLACE OF DEATH CHERRY VALLEY HEALTHCARE		102 IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> EWING <input type="checkbox"/> OTHER		103 IF OTHER THAN HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
104 COUNTY RIVERSIDE		105 FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 5800 W WILSON ST		106 CITY BANNING	
107 CAUSE OF DEATH Immediate Cause (Final disease or condition resulting in death) (A) BRAIN METASTASIS (B) LIVER METASTASIS (C) STAGE IV BREAST CANCER		108 DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		109opsy PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
110 UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST		111 AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 SEIZURES, LEFT HEMISPHERIC MASS	
113 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NONE		114 CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		115 SIGNATURE AND TITLE OF CERTIFIER	
116 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE HECTOR LUIS SALEMI-CASTRO M.D. 598 NORTH F STREET, SAN BERNARDINO, CA 92410		117 LICENSE NUMBER A73975		118 DATE mm/dd/yyyy 05/12/2010	
119 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		120 INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121 INJURY DATE mm/dd/yyyy	
122 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		122 HOUR (24 Hours)			
124 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125 LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126 SIGNATURE OF CORONER / DEPUTY CORONER		127 DATE mm/dd/yyyy		128 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
STATE REGISTRAR					

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



035020385

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.

MAY 21 2021

DATE ISSUED

Peter Aldana
PETER ALDANA
ASSESSOR-COUNTY CLERK-RECORDER
RIVERSIDE COUNTY, CALIFORNIA

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



AN ALTERATION OR ERASURE voids this certificate

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. Micaela Fernandez died on 05/09/2010 in the County of Riverside, State of California.
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate.
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate.
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$166,250.00.
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):






The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$34,831.06 +/-, generated from Assessor's Parcel Number(s) 528121021, sold at the Riverside County, California, public auction of tax-defaulted property held on 4/30/2020.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:
 Federico D. Gonzalez, Carmen Gonzalez, Marebel Gonzalez, Mayra Romero & Jessica Gonzalez
7. The undersigned (please check which box(s) applies):
 - Is successor(s) of the decedent to the decedent's interest in the described property, or
 - Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;
8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

7/10/21
(DATE)
7/10/21
(DATE)
7/10/21
(DATE)
07/10/21
(DATE)
07/07/21
(DATE)

Carmen A. Gonzalez as Guardian of Federico Gonzalez
Printed Name
Carmen Gonzalez
Printed Name
Marebel Gonzalez
Printed Name
Mayra Romero
Printed Name
Jessica Gonzalez
Printed Name


signature

signature

signature

signature

signature

(Attach Additional Sheet if Necessary)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California)

County of Riverside)

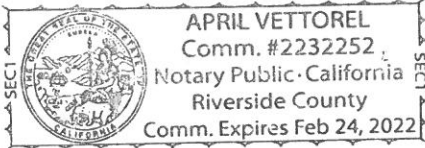
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Carmen Gonzalez, 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.

April Vettorel (seal)
Signature of Notary Public



CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of California)

County of Riverside)

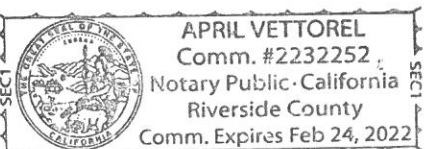
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Carmen Gonzalez, 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.

April Vettorel (seal)
Signature of Notary Public



CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

AFFIDAVIT

I, Carmen A. Gonzalez, do hereby declare:

1. I am over the age of 18 and a resident of Banning, 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. Micaela Fernandez is one and the same person listed on Quitclaim Deed as document number: 2006-0498579, recorded on 07/07/2006 in Riverside County, CA.
3. I, Carmen A. Gonzalez am a biological child of Micaela Fernandez.
4. Micaela Gonzalez's Certificate of Death lists that she was married when she died and references Federico Gonzalez as her husband and informant. That information is incorrect, Micaela & Federico have been legally divorced since 1/12/2005 and never re-married. Micaela Gonzalez died with no surviving spouse.
5. I, Carmen A. Gonzalez am one and the same person as Carmen Gonzalez.
6. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 528121021.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 7th day of July, 2021, in Riverside, CA.

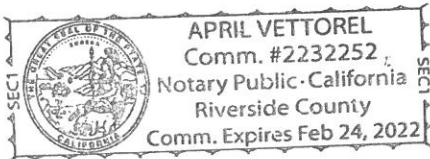
x [Signature]
Carmen A. Gonzalez as heir to the Estate of Micaela Fernandez

JURAT

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

State of California
County of Riverside

Subscribed and sworn to (or affirmed) before me on this 10th day of July, 2021, by
Date Month Year
Carmen Gonzalez
Name of Signer



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

Signature [Signature]
Signature of Notary Public

(Place Notary Seal Above)

CLAIM SUMMARY

Date: July 14, 2021
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 528121021
Last Assessee: FERNANDEZ MICAELA
Sale Date: 4/30/2020
TC: TC215
Item Number: 1407
Deadline: 7/15/2021

RECEIVED
2021 JUL 15 AM 8:08
RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

Dear Treasurer/Tax Collector:

Claimant(s): Global Discoveries, Ltd.

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

1. **Explanation of Events**
2. Quitclaim Deed quitclaiming interest to Micaela Fernandez as document number: 2006-0498579, recorded on 7/07/2006 in Riverside County, CA.
3. **Certified** Death Certificate for Micaela Fernandez – Micaela’s death certificate
 - a. **Please Note:** Micaela’s death certificate lists that she was married at the time of her death to Federico Gonzalez. However, this is inaccurate. Micaela and Federica were officially divorced on January 12, 2005 and Micaela Fernandez never remarried.
 - b. **Please Note:** The **52333 Lois Ave. Cabazon, CA 92230** address listed on Micaela’s death certificate is one and the same property as the above listed APN.
4. Judgment for Dissolution of Marriage between Micaela Gonzalez and Federico Gonzalez
 - a. **Please Note:** The **52333 Lois Ave. Cabazon, CA 92230** is awarded to Micaela Fernandez as her sole and separate property.
5. Probate Affidavit for the Estate of Micaela Fernandez
6. **Certified** Certificate of Live Birth for Mayra Alejandra Romero
7. **Certified** Certificate of Live Birth for Marebel Gonzalez
8. Certificate of Live Birth for Carmen Gonzalez
9. Certificate of Live Birth for Jessica Gonzalez
10. Certificate of Live Birth for Federico Gonzalez
11. Letters of Guardianship filed on 9/17/2014 in the Superior Court of California, County of Riverside appointing Carmen Gonzalez as Guardian of Federico D. Gonzalez (**Minor**)
12. Original Tax return referencing the **52333 Lois Ave. Cabazon, CA 92230** address which is one and the same property as the above referenced APN.
13. W2 Statement referencing the **P.O. Box 807 Cabazon, CA 92230** address, which is one and the same address listed on the above-mentioned Quitclaim Deed.
14. Affidavits Declaring Identity signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.
15. Assignments of Rights to Collect Excess Proceeds signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.



16. Claim form(s) signed by Global Discoveries.
17. Photo ID for Assignor: Carmen Gonzalez
18. Photo ID for Assignor: Marebel Gonzalez
19. Photo ID for Assignor: Jessica Gonzalez
20. Photo ID for Assignor: Mayra Alejandra Romero.

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

- One warrant in the amount of \$ 34,831.06 or 100% of the claimant's share of the excess proceeds made payable to Global Discoveries Ltd. and mailed to P.O. Box 1748, Modesto, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.com.

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

Certified Tracking Number: 7020-3160-0000-7617-5065

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 528121021 Tax Sale Number TC215, Item 1407 sold at public auction on 4/30/2020. I understand that the total of excess proceeds available for refund is \$ 34,831.06+/-, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

[Signature]
(Signature of Party of Interest/Assignor)

06/21/23
(Date)

Federico Gonzalez as heir to the Estate of Micaela Fernandez
(Name Printed)

Tax ID/SS#

1485 Aspen Ln
(Address)

Banning, CA, 92220
(City/State/Zip)

951-849-5004
(Area Code/Telephone Number)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California

County of Riverside

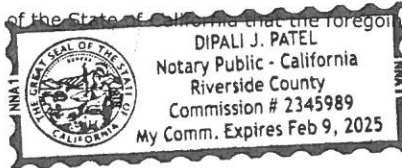
On 06-21-2023 before me, Dipali J. Patel, Notary Public, personally appeared Federico Gonzalez

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

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

WITNESS my hand and official seal.

[Signature]
Signature of Notary Public



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

[Signature]
(Signature of Assignee)

Jed Byerly, Managing Member of Global Discoveries Ltd.
(Name Printed)

Tax ID/SS#

P.O. Box 1748
(Address)

Modesto, CA 95353-1748
(City/State/Zip)

Phone: (209) 593-3913

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of CALIFORNIA

County of STANISLAUS

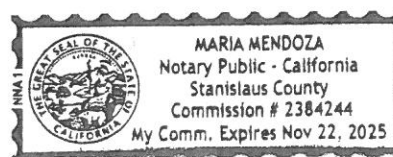
On 6/26/23 before me, Maria Mendoza, Notary Public, personally appeared Jed Byerly

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

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

WITNESS my hand and official seal.

[Signature]
Signature of Notary Public



CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 528121021
Tax Sale Number: TC215
Item Number: 1407
Date of Sale: 4/30/2020

The undersigned claimant, Global Discoveries, Ltd., claims \$34,831.06 +/- 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 14th day of July, 2021 at Modesto, California.

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

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of California

County of Stanislaus

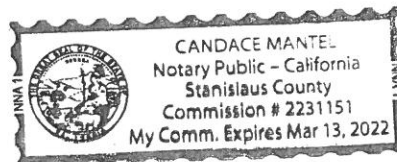
On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

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



RECORDING REQUESTED BY

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

NAME MICHAELA FERNANDEZ
STREET ADDRESS P.O. BOX 807
CITY, STATE & ZIP CODE CABAZON CA 92230
TITLE ORDER NO. ESCROW NO.



Table with columns: M, S, U, PAGE, SIZE, DA, PCOR, NOCOR, SMF, MISC. and rows for A, R, L, COPY, LONG, REFUND, NCHG, EXAM.

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$0
[] computed on full value of property conveyed, or
[] computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax Firm Name

FEDERICO GONZALEZ ARENAS

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to MICHAELA FERNANDEZ

the following described real property in the City of UNINCORPORATED, County of Riverside, State of CA:

PARCEL 1: Lot 175, CABAZON ESTATES, No. 2 AS PER PLAT recorded in Book 41 pages 63 and 64, RECORDS of said county;

PARCEL 2: The easterly 4 feet of Lot 174 of CABAZON ESTATES No. 2, as shown by MAP ON FILE in Book 41 pages 63 & 64 of MAPS, RIVERSIDE COUNTY RECORDS.

Assessor's parcel No. 528-121-021 & 528-121-046 or 52233 Lois AVE.

Executed on July 5, 2006, 2006 at CABAZON, CALIF.

STATE OF CALIFORNIA

COUNTY OF Riverside

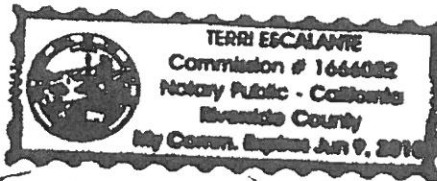
On July 5, 2006 before me, Terri Escalante, Notary Public

personally appeared Federico Gonzalez Arenas 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 of Notary

(SEAL)



MAIL TAX STATEMENTS TO: MICHAELA FERNANDEZ, P.O. BOX 807, CABAZON, CA 92230

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.



RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

[X] INDIVIDUAL(S)
[] CORPORATE OFFICER(S)

[] PARTNER(S) [] LIMITED
[] ATTORNEY IN FACT [] GENERAL

[] TRUSTEE(S)
[] GUARDIAN/CONSERVATOR
[] OTHER:

SIGNER IS REPRESENTING:
(Name of Person(s) or Entity(ies))

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE
 RIVERSIDE, CALIFORNIA

3052010091716

CERTIFICATE OF DEATH

3201033004859

STATE FILE NUMBER 3052010091716		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WHITEOUTS OR ALTERATIONS V-1 (REV. 3/03)		LOCAL REGISTRATION NUMBER 3201033004859	
1 NAME OF DECEDENT - FIRST (Given) MICAELA		2 MIDDLE -		3 LAST (Family) FERNANDEZ	
AKA ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)					
8 BIRTH STATE/FOREIGN COUNTRY MEXICO		10 SOCIAL SECURITY NUMBER		11 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
13 EDUCATION - Highest Level/Degree 09		14 U.S. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN		16 DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) MEXICAN	
17 USUAL OCCUPATION - Type of work for most of life DO NOT USE RETIRED LABORER		18 KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) RESTAURANT		18 YEARS IN OCCUPATION 1	
20 DECEDENT'S RESIDENCE (Street and number, or location) 52233 LOIS AVE.					
21 CITY CABAZON		22 COUNTY/PROVINCE RIVERSIDE		23 ZIP CODE 92230	
24 YEARS IN COUNTY 13		25 STATE/FOREIGN COUNTRY CA			
26 INFORMANT'S NAME, RELATIONSHIP FEDERICO GONZALEZ, HUSBAND		27 INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 52233 LOIS AVE., CABAZON, CA 92230			
28 NAME OF SURVIVING SPOUSE/SPOP - FIRST FEDERICO		29 MIDDLE -		30 LAST (BIRTH NAME) GONZALEZ	
31 NAME OF FATHER/PARENT - FIRST JUAN		32 MIDDLE -		33 LAST FERNANDEZ	
34 BIRTH STATE MEXICO		35 NAME OF MOTHER/PARENT - FIRST ENEDINA		36 MIDDLE -	
37 LAST (BIRTH NAME) GARCIA		38 BIRTH STATE MEXICO			
39 DISPOSITION DATE mm/dd/yyyy 05/14/2010		40 PLACE OF FINAL DISPOSITION SUNNIT CEMETERY DISTRICT 2201 N. SAN BERNARDINO COURT, BANNING, CA 92220			
41 TYPE OF DISPOSITION BU		42 SIGNATURE OF FUNERAL HOME		43 LICENSE NUMBER EMB8010	
44 NAME OF FUNERAL ESTABLISHMENT SAN BERNARDINO MISSION CHAPEL		45 LICENSE NUMBER OF FUNERAL HOME FD1854		47 DATE mm/dd/yyyy 05/12/2010	
101 PLACE OF DEATH CHERRY VALLEY HEALTHCARE RIVERSIDE		102 IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hosp <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Home <input type="checkbox"/> Other		103 IF OTHER THAN HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Home <input type="checkbox"/> Other	
104 COUNTY RIVERSIDE		104 CITY BANNING		104 ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 5800 W WILSON ST	
107 CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death) (A) BRAIN METASTASIS (B) LIVER METASTASIS (C) STAGE-IV BREAST CANCER		108 DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		109 BPOXY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 SEIZURES, LEFT HEMISPHERIC MASS		113 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NONE		114 IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
114 I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		115 SIGNATURE AND TITLE OF CERTIFIER HECTOR LUIS SALEMI-CASTRO M.D.		118 LICENSE NUMBER A73975	
116 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		117 DATE mm/dd/yyyy 05/08/2010		119 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE 598 NORTH F STREET, SAN BERNARDINO, CA 92410	
120 MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		121 INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		122 INJURY DATE mm/dd/yyyy	
123 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		124 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)			
125 LOCATION OF INJURY (Street and number, or location, and city, and zip)		126 SIGNATURE OF CORONER / DEPUTY CORONER			
127 DATE mm/dd/yyyy		128 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			
STATE REGISTRAR		A B C D E		FAX AUTH.#	
CENBUS TRACT		*010001001498126*			

NOT A VALID DOCUMENT TO ESTABLISH IDENTITY



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



035020385

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.

MAY 21 2021

DATE ISSUED

Peter Aldana
 PETER ALDANA
 ASSESSOR-COUNTY CLERK-RECORDER
 RIVERSIDE COUNTY, CALIFORNIA

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

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CARIVERS02

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. Micaela Fernandez died on 05/09/2010 in the County of Riverside, State of California.
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate.
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate.
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$166,250.00.
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$34,831.06 +/-, generated from Assessor's Parcel Number(s) 528121021, sold at the Riverside County, California, public auction of tax-defaulted property held on 4/30/2020.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:
Federico D. Gonzalez, Carmen Gonzalez, Marebel Gonzalez, Mayra Romero & Jessica Gonzalez
7. The undersigned (please check which box(s) applies):
 Is successor(s) of the decedent to the decedent's interest in the described property, or
 Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;
8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

06/21/23
(DATE)

(DATE)

(DATE)

(DATE)

(DATE)


Federico Gonzalez
Printed Name

Printed Name

Printed Name

Printed Name

Printed Name


signature

signature

signature

signature

signature

(Attach Additional Sheet if Necessary)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California

County of Riverside

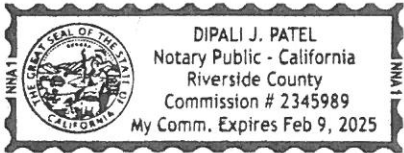
On 06.21.2023 before me, Dipali J. Patel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Federico Gonzalez, 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.

Dipali J. Patel (seal)
Signature of Notary Public



AFFIDAVIT

I, Federico Gonzalez, do hereby declare:

1. I am over the age of 18 and a resident of Banning, 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. Micaela Fernandez is one and the same person listed on Quitclaim Deed as document number: 2006-0498579, recorded on 07/07/2006 in Riverside County, CA.
3. I, Federico Gonzalez am a biological child of Micaela Fernandez.
4. I, Federico Gonzalez am one and the same person as Federico D. Gonzalez and Federico Daniel Gonzalez.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 528121021.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 21 day of JUNE, 2023, in Banning California

x [Signature]
Federico Gonzalez as heir to the Estate of Micaela Fernandez

JURAT

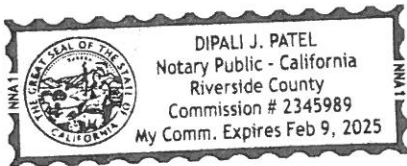
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State of California
County of Riverside

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

21 day of June, 2023, by
Date Month Year

Federico Gonzalez
Name of Signer



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

Signature [Signature]
Signature of Notary Public

(Place Notary Seal Above)

CLAIM SUMMARY

Date: July 14, 2021
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 528121021
Last Assessee: FERNANDEZ MICAELA
Sale Date: 4/30/2020
TC: TC215
Item Number: 1407
Deadline: 7/15/2021

RECEIVED
2021 JUL 15 AM 09:08
RIVERSIDE COUNTY
TREASURER-TAX COLLECTOR

Dear Treasurer/Tax Collector:

Claimant(s): Global Discoveries, Ltd.

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

1. **Explanation of Events**
2. Quitclaim Deed quitclaiming interest to Micaela Fernandez as document number: 2006-0498579, recorded on 7/07/2006 in Riverside County, CA.
3. **Certified** Death Certificate for Micaela Fernandez – Micaela’s death certificate
 - a. **Please Note:** Micaela’s death certificate lists that she was married at the time of her death to Federico Gonzalez. However, this is inaccurate. Micaela and Federica were officially divorced on January 12, 2005 and Micaela Fernandez never remarried.
 - b. **Please Note:** The **52333 Lois Ave. Cabazon, CA 92230** address listed on Micaela’s death certificate is one and the same property as the above listed APN.
4. Judgment for Dissolution of Marriage between Micaela Gonzalez and Federico Gonzalez
 - a. **Please Note:** The **52333 Lois Ave. Cabazon, CA 92230** is awarded to Micaela Fernandez as her sole and separate property.
5. Probate Affidavit for the Estate of Micaela Fernandez
6. **Certified** Certificate of Live Birth for Mayra Alejandra Romero
7. **Certified** Certificate of Live Birth for Marebel Gonzalez
8. Certificate of Live Birth for Carmen Gonzalez
9. Certificate of Live Birth for Jessica Gonzalez
10. Certificate of Live Birth for Federico Gonzalez
11. Letters of Guardianship filed on 9/17/2014 in the Superior Court of California, County of Riverside appointing Carmen Gonzalez as Guardian of Federico D. Gonzalez (**Minor**)
12. Original Tax return referencing the **52333 Lois Ave. Cabazon, CA 92230** address which is one and the same property as the above referenced APN.
13. W2 Statement referencing the **P.O. Box 807 Cabazon, CA 92230** address, which is one and the same address listed on the above-mentioned Quitclaim Deed.
14. Affidavits Declaring Identity signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.
15. Assignments of Rights to Collect Excess Proceeds signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.

16. Claim form(s) signed by Global Discoveries.
17. Photo ID for Assignor: Carmen Gonzalez
18. Photo ID for Assignor: Marebel Gonzalez
19. Photo ID for Assignor: Jessica Gonzalez
20. Photo ID for Assignor: Mayra Alejandra Romero.

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

- One warrant in the amount of \$ 34,831.06 or 100% of the claimant's share of the excess proceeds made payable to Global Discoveries Ltd. and mailed to P.O. Box 1748, Modesto, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.com.

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

Certified Tracking Number: 7020-3160-0000-7617-5065

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 528121021 Tax Sale Number TC215, Item 1407 sold at public auction on 4/30/2020. I understand that the total of excess proceeds available for refund is \$ 34,831.06+/-, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

(Signature of Party of Interest/Assignor) [Signature] (Date) 07/07/21

Jessica Gonzalez as heir to the Estate of Micaela Fernandez (Name Printed) 830 Village Dr. Apt 3306 (Address) San Marcos, CA, 92078 (City/State/Zip) 951-467-7172 (Area Code/Telephone Number)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

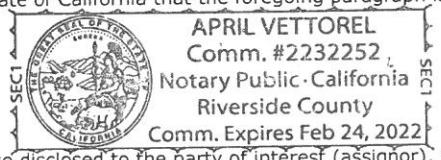
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California County of Riverside On July 7, 2021 before me, April Vettorel, Notary Public, personally appeared Jessica Gonzalez

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



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

[Signature] (Signature of Assignee) Jed Byerly, Managing Member (Name Printed)

Tax ID/SS# Global Discoveries Ltd. (Address) P.O. Box 1748 Modesto, CA 95353-1748 (City/State/Zip) Phone: (209) 593-3913

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

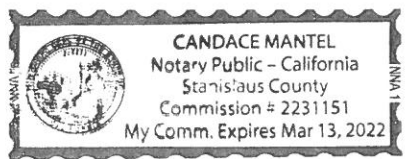
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State of California County of Stanislaus On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared Ted Byerly

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 117-174 (3/85) (Ret-Perm) GD#: 39579-379014



CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 528121021
Tax Sale Number: TC215
Item Number: 1407
Date of Sale: 4/30/2020

The undersigned claimant, Global Discoveries, Ltd., claims \$34,831.06 +/- 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 14th day of July, 2021 at Modesto, California.

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

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California

County of Stanislaus

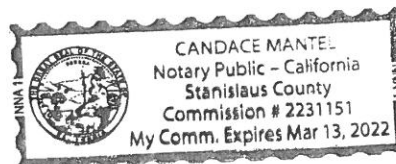
On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

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



RECORDING REQUESTED BY

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

NAME MICAELA FERNANDEZ
STREET ADDRESS P.O. BOX 807
CITY, STATE & ZIP CODE CABAZON CA 92230
TITLE ORDER NO. _____ ESCROW NO. _____



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A	R	L			COPY	LONG	REFUND	NCHG	EXAM

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0
 computed on full value of property conveyed, or
 computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

C
TV

FEDERICO GONZALEZ ARENAS
(NAME OF GRANTOR(S))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to MICAELA FERNANDEZ

the following described real property in the ~~CITY~~ UNINCORPORATED Area, County of Riverside, State of CA:

PARCEL 1: Lot 175, CABAZON ESTATES, No. 2 AS PER PLAT recorded in Book 41 pages 63 and 64, Records of said county;

PARCEL 2: The Easterly 4 feet of Lot 174 of CABAZON ESTATES No. 2, as shown by MAP ON FILE in Book 41 pages 63 & 64 of MAPS, Riverside County Records.

Assessor's parcel No. 528-121-021 & 528-121-044 OR 52233 LOIS AVE.

Executed on JULY 5, 2006, 2006 at CABAZON, CALIF.
(CITY AND STATE)

STATE OF CALIFORNIA

COUNTY OF Riverside

Federico Gonzalez ARENAS

On JULY 5, 2006 before me, TERRI ESCALANTE, Notary Public

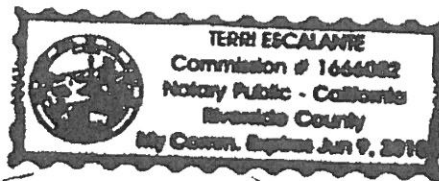
personally appeared Federico Gonzalez ARENAS personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), 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.

RIGHT THUMBPRINT (Optional)



WITNESS my hand and official seal.

[Signature]
(SIGNATURE OF NOTARY)



CAPACITY CLAIMED BY SIGNER(S)

- INDIVIDUAL(S)
- CORPORATE OFFICER(S)
- PARTNER(S)
- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER:

MAIL TAX STATEMENTS TO: MICAELA FERNANDEZ
P.O. BOX 807, CABAZON, CA 92230

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.



STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE
 RIVERSIDE, CALIFORNIA

3052010091716

CERTIFICATE OF DEATH

3201033004859

STATE FILE NUMBER 3052010091716		LOCAL REGISTRATION NUMBER 3201033004859	
1 NAME OF DECEDENT - FIRST (Given) MICAELA		2 MIDDLE -	
3 LAST (Family) FERNANDEZ		4 DATE OF BIRTH mm/dd/yyyy 08/24/1962	
AKA ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		5 AGE Yrs 47	
6 BIRTH STATE/FOREIGN COUNTRY MEXICO		7 DATE OF DEATH mm/dd/yyyy 05/09/2010	
8 SOCIAL SECURITY NUMBER		9 SEX F	
10 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		11 MARRIAGE STATUS (ICD-9) at Time of Death MARRIED	
12 EDUCATION - Highest Level/Degree (see worksheet on back) 09		13 DATE OF DEATH HOUR (24 Hours) 1200	
14/15. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN		16 DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) MEXICAN	
17 USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED LABORER		18 KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) RESTAURANT	
19 YEARS IN OCCUPATION 1		20 DECEDENT'S RESIDENCE (Street and number, or location) 52233 LOIS AVE.	
21 CITY CABAZON		22 COUNTY/PROVINCE RIVERSIDE	
23 ZIP CODE 92230		24 YEARS IN COUNTY 13	
25 STATE/FOREIGN COUNTRY CA		26 INFORMANT'S NAME, RELATIONSHIP FEDERICO GONZALEZ, HUSBAND	
27 INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 52233 LOIS AVE., CABAZON, CA 92230		28 NAME OF SURVIVING SPOUSE/SPOD - FIRST FEDERICO	
29 MIDDLE -		30 LAST (BIRTH NAME) GONZALEZ	
31 NAME OF FATHER/PARENT - FIRST JUAN		32 MIDDLE -	
33 NAME OF MOTHER/PARENT - FIRST ENEDINA		34 MIDDLE -	
35 LAST (BIRTH NAME) FERNANDEZ		36 BIRTH STATE MEXICO	
37 LAST (BIRTH NAME) GARCIA		38 BIRTH STATE MEXICO	
39 DISPOSITION DATE mm/dd/yyyy 05/14/2010		40 PLACE OF FINAL DISPOSITION SUNRISE CEMETERY DISTRICT 2201 N. SAN BERNARDINO COURT, BANNING, CA 92220	
41 TYPE OF DISPOSITION BU		42 SIGNATURE OF FUNERAL MGR	
43 LICENSE NUMBER EMB8010		44 NAME OF FUNERAL ESTABLISHMENT SAN BERNARDINO MISSION CHAPEL	
45 LICENSE NUMBER / EXPIRES mm/dd/yyyy ED1854		46 DATE mm/dd/yyyy 05/12/2010	
101 PLACE OF DEATH CHERRY VALLEY HEALTHCARE		102 IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> Hosp <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Home <input type="checkbox"/> Other	
103 COUNTY RIVERSIDE		104 CITY BANNING	
105 FACILITY ADDRESS OR LOCATION (Street and number, or location) 5800 W WILSON ST		106 IF OTHER THAN HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Home <input type="checkbox"/> Other	
107 CAUSE OF DEATH (A) BRAIN METASTASIS (B) LIVER METASTASIS (C) STAGE-IV BREAST CANCER		108 DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
109 IMMEDIATE CAUSE (Final disease or condition resulting in death) BRAIN METASTASIS		110 DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
111 UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST STAGE-IV BREAST CANCER		112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 SEIZURES, LEFT HEMISPHERIC MASS	
113 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date) NONE		114 I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED 04/30/2010 05/08/2010	
115 SIGNATURE AND TITLE OF CERTIFIER HECTOR LUIS SALEMI-CASTRO M.D.		116 LICENSE NUMBER A73975	
117 DATE mm/dd/yyyy 05/12/2010		118 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE 598 NORTH F STREET, SAN BERNARDINO, CA 92410	
119 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED Natural		120 INJURED AT WORK? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
121 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		122 INJURY DATE mm/dd/yyyy	
123 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		124 LOCATION OF INJURY (Street and number, or location, and city, and zip)	
125 SIGNATURE OF CORONER / DEPUTY CORONER		126 DATE mm/dd/yyyy	
127 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER		128 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	



CERTIFIED COPY OF VITAL RECORD
 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.

MAY 21 2021

DATE ISSUED



Peter Aldana
 PETER ALDANA
 ASSESSOR-COUNTY CLERK-RECORDER
 RIVERSIDE COUNTY, CALIFORNIA

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

CARIVERSOR

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. Micaela Fernandez died on 05/09/2010 in the County of Riverside, State of California.
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate.
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate.
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$166,250.00.
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):






The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$34,831.06 +-, generated from Assessor's Parcel Number(s) 528121021, sold at the Riverside County, California, public auction of tax-defaulted property held on 4/30/2020.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:
 Federico D. Gonzalez, Carmen Gonzalez, Marebel Gonzalez, Mayra Romero & Jessica Gonzalez
7. The undersigned (please check which box(s) applies):
 - Is successor(s) of the decedent to the decedent's interest in the described property, or
 - Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;
8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

7/10/21
(DATE)
7/10/21
(DATE)
7/10/21
(DATE)
07/10/21
(DATE)
07/07/21
(DATE)

Carmen A. Gonzalez as Guardian of Federico Gonzalez
Printed Name
Carmen Gonzalez
Printed Name
Marebel Gonzalez
Printed Name
Mayra Romero
Printed Name
Jessica Gonzalez
Printed Name


signature

signature

signature

signature

signature

(Attach Additional Sheet if Necessary)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of California

County of Riverside

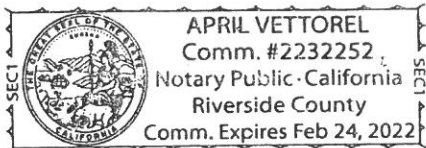
On July 7, 2021 before me, April Vettorel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Jessica Gonzalez, 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.

April Vettorel (seal)
Signature of Notary Public



AFFIDAVIT

I, Jessica Gonzalez as heir to the Estate of Micaela Fernandez, do hereby declare:

1. I am over the age of 18 and a resident of San Marcos, 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. Micaela Fernandez is one and the same person listed on Quitclaim Deed as document number: 2006-0498579, recorded on 07/07/2006 in Riverside County, CA.
3. I, Jessica Gonzalez am a biological child of Micaela Fernandez.
4. Micaela Gonzalez's Certificate of Death lists that she was married when she died and references Federico Gonzalez as her husband and informant. That information is incorrect, Micaela & Federico have been legally divorced since 1/12/2005 and never re-married. Micaela Gonzalez died with no surviving spouse.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 528121021.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 7th day of July, 2021, in Temecula, CA.

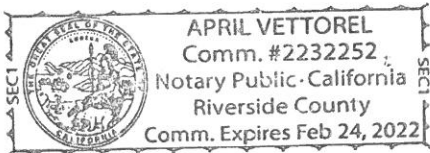
x *Jessica Gonzalez*
Jessica Gonzalez as heir to the Estate of Micaela Fernandez

JURAT

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State of California
County of Riverside

Subscribed and sworn to (or affirmed) before me on this
7th day of July, 2021, by
Date Month Year
Jessica Gonzalez
Name of Signer



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

Signature *April Vettorel*
Signature of Notary Public

(Place Notary Seal Above)

CLAIM SUMMARY

Date: July 14, 2021
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 528121021
Last Assessee: FERNANDEZ MICAELA
Sale Date: 4/30/2020
TC: TC215
Item Number: 1407
Deadline: 7/15/2021

RECEIVED
2021 JUL 15 AM 8:03
RIVERSIDE COUNTY
TREAS-TAX COLLECTOR

Dear Treasurer/Tax Collector:

Claimant(s): Global Discoveries, Ltd.

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

- 1. Explanation of Events
2. Quitclaim Deed quitclaiming interest to Micaela Fernandez as document number: 2006-0498579, recorded on 7/07/2006 in Riverside County, CA.
3. Certified Death Certificate for Micaela Fernandez - Micaela's death certificate
a. Please Note: Micaela's death certificate lists that she was married at the time of her death to Federico Gonzalez. However, this is inaccurate. Micaela and Federica were officially divorced on January 12, 2005 and Micaela Fernandez never remarried.
b. Please Note: The 52333 Lois Ave. Cabazon, CA 92230 address listed on Micaela's death certificate is one and the same property as the above listed APN.
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a. Please Note: The 52333 Lois Ave. Cabazon, CA 92230 is awarded to Micaela Fernandez as her sole and separate property.
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12. Original Tax return referencing the 52333 Lois Ave. Cabazon, CA 92230 address which is one and the same property as the above referenced APN.
13. W2 Statement referencing the P.O. Box 807 Cabazon, CA 92230 address, which is one and the same address listed on the above-mentioned Quitclaim Deed.
14. Affidavits Declaring Identity signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.
15. Assignments of Rights to Collect Excess Proceeds signed by Carmen Gonzalez, Marebel Gonzalez, Carmen Gonzalez as Guardian for Federico Gonzalez, Jessica Gonzalez, and Mayra Alejandra Romero.



16. Claim form(s) signed by Global Discoveries.
17. Photo ID for Assignor: Carmen Gonzalez
18. Photo ID for Assignor: Marebel Gonzalez
19. Photo ID for Assignor: Jessica Gonzalez
20. Photo ID for Assignor: Mayra Alejandra Romero.

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

- One warrant in the amount of \$ 34,831.06 or 100% of the claimant's share of the excess proceeds made payable to Global Discoveries Ltd. and mailed to P.O. Box 1748, Modesto, CA 95353-1748.

Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.com.

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

Certified Tracking Number: 7020-3160-0000-7617-5065

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 528121021 Tax Sale Number TC215, Item 1407 sold at public auction on 4/30/2020. I understand that the total of excess proceeds available for refund is \$ 34,831.06+/-, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

Signature of Party of Interest/Assignor: [Signature] (Date) 7-10-21
Marebel Gonzalez as heir to the Estate of Micaela Fernandez (Name Printed)
1485 Aspen Lane (Address)
Banning, CA, 92220 (City/State/Zip)
951-499-8082 (Area Code/Telephone Number)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

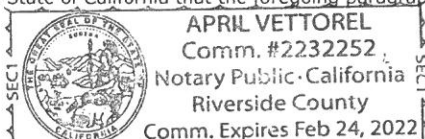
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Riverside
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared Marebel Gonzalez, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

WITNESS my hand and official seal.

Signature of Notary Public (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 of Assignee: [Signature]
Jed Byerly, Managing Member (Name Printed)
Global Discoveries Ltd. (Address)
P.O. Box 1748 Modesto, CA 95353-1748 (City/State/Zip)
Phone: (209) 593-3913

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

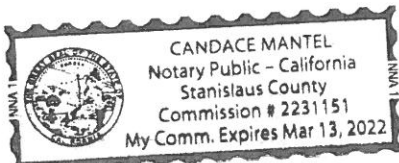
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State of California
County of Stanislaus
On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared Jed Byerly, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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WITNESS my hand and official seal.

Signature of Notary Public (seal)
117-174 (3/85) (Ret-Perm)



GD#: 39579-379156

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 528121021
Tax Sale Number: TC215
Item Number: 1407
Date of Sale: 4/30/2020

The undersigned claimant, Global Discoveries, Ltd., claims \$34,831.06 +/- 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 14th day of July, 2021 at Modesto, California.

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

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California
County of Stanislaus

On 7/15/21 before me, Candace Mantel, 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



RECORDING REQUESTED BY

DOC # 2006-0498579

07/07/2006 08:00A Fee:7.00

Page 1 of 1

Recorded in Official Records
County of Riverside

Larry W. Ward
Assessor, County Clerk & Recorder



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

NAME MICHAELA FERNANDEZ
STREET ADDRESS P.O. BOX 807
CITY, STATE & ZIP CODE CABAZON CA 92230
TITLE ORDER NO. _____ ESCROW NO. _____

M	S	U	PAGE	SIZE	DA	PCOR	NOCOR	SMF	MISC
	1		1			✓			
					3				T
A	R	L			COPY	LONG	REFUND	NCHG	EXAM

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0
 computed on full value of property conveyed, or
 computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

C
TV

FEDERICO GONZALEZ ARENAS
(NAME OF GRANTOR(S))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to MICHAELA FERNANDEZ
(NAME OF GRANTEE(S))

the following described real property in the ~~CITY OF~~ UNINCORPORATED Area, County of Riverside, State of CA:

PARCEL 1: Lot 175, CABAZON ESTATES, No. 2 AS PER PLAT recorded in Book 41 pages 63 and 64, Records of said county;

PARCEL 2: The easterly 4 feet of Lot 174 of CABAZON ESTATES No. 2, as shown by map on file in Book 41 pages 63 & 64 of maps, Riverside County Records.

Assessor's parcel No. 528-121-021 & 528-121-046 or 52233 Lois Ave.

Executed on July 5, 2006, 2006 at CABAZON, CALIF.
(CITY AND STATE)

STATE OF CALIFORNIA

COUNTY OF Riverside

Federico Gonzalez ARENAS

On July 5, 2006 before me, TERRI ESCALANTE, Notary Public

personally appeared Federico Gonzalez ARENAS 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.

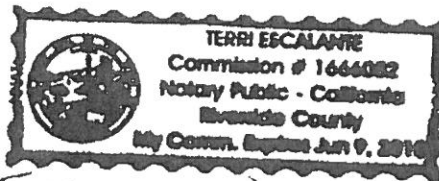
RIGHT THUMBPRINT (Optional)



WITNESS my hand and official seal.

[Signature]
(SIGNATURE OF NOTARY)

(SEAL)



CAPACITY CLAIMED BY SIGNER(S)

- INDIVIDUAL(S)
- CORPORATE OFFICER(S)
- PARTNER(S)
- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER:

MAIL TAX STATEMENTS TO: MICHAELA FERNANDEZ
P.O. BOX 807, CABAZON, CA 92230

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no intended use or purpose.



SIGNER IS REPRESENTING:
(Name of Person(s) or Entity(ies))

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF RIVERSIDE
 RIVERSIDE, CALIFORNIA

3052010091716 STATE FILE NUMBER		CERTIFICATE OF DEATH <small>STATE OF CALIFORNIA USE BLACK INK ONLY / NO SIGNATURE, WHITEOUTS OR ALTERATIONS VS-1 (MAY 2008)</small>		3201033004859 LOCAL REGISTRATION NUMBER	
1 NAME OF DECEASED - FIRST (Given) MICAELA		2. MIDDLE -		3 LAST (Family) FERNANDEZ	
AKA ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)					
8 BIRTH STATE/FOREIGN COUNTRY MEXICO		10 SOCIAL SECURITY NUMBER		4 DATE OF BIRTH mm/dd/yyyy 08/24/1962	
11 EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		12 MARITAL STATUS/SROP (at Time of Death) MARRIED		5 AGE Yrs 47	
13 EDUCATION - Highest Level/Degree 09		14/15. WAS DECEASED HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input checked="" type="checkbox"/> YES MEXICAN		7 DATE OF DEATH mm/dd/yyyy 05/09/2010	
17 USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED LABORER		18 KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) RESTAURANT		6 SEX F	
19 DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back)		16 DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back) MEXICAN		8 HOUR (24 Hours) 1200	
20 DECEASED'S RESIDENCE (Street and number, or location) 52233 LOIS AVE.					
21 CITY CABAZON		22 COUNTY/PROVINCE RIVERSIDE		23 ZIP CODE 92230	
24 YEARS IN COUNTY 13		25 STATE/FOREIGN COUNTRY CA		10 YEARS IN OCCUPATION 1	
26 INFORMANT'S NAME, RELATIONSHIP FEDERICO GONZALEZ, HUSBAND			27 INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 52233 LOIS AVE., CABAZON, CA 92230		
28 NAME OF SURVIVING SPOUSE/SROP - FIRST FEDERICO		29 MIDDLE -		30 LAST (BIRTH NAME) GONZALEZ	
31 NAME OF FATHER/PARENT - FIRST JUAN		32 MIDDLE -		33 LAST FERNANDEZ	
34 BIRTH STATE MEXICO		35 NAME OF MOTHER/PARENT - FIRST ENEDINA		36 MIDDLE -	
37 LAST (BIRTH NAME) GARCIA		38 BIRTH STATE MEXICO		39 DISPOSITION DATE mm/dd/yyyy 05/14/2010	
40 PLACE OF FINAL DISPOSITION SUNMONT CEMETERY DISTRICT		41 TYPE OF DISPOSITION BU		43 LICENSE NUMBER EMB8010	
44 NAME OF FUNERAL ESTABLISHMENT SAN BERNARDINO MISSION CHAPEL		45 LICENSE NUMBER (Valid only for funeral registrars) FD1854		47 DATE mm/dd/yyyy 05/12/2010	
101 PLACE OF DEATH CHERRY VALLEY HEALTHCARE		102 HOSPITAL SPECIFY ONE <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		103 DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
104 COUNTY RIVERSIDE		105 CITY BANNING		106 BIOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
107 CAUSE OF DEATH BRAIN METASTASIS		108 ANTHROPY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		109 USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IMMEDIATE CAUSE (Final disease or condition resulting in death) STAGE IV BREAST CANCER		110 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATING IN THE UNDERLYING CAUSE GIVEN IN 107 SEIZURES, LEFT HEMISPHERIC MASS		111 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 110? (If yes, list type of operation and date) NONE	
112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATING IN THE UNDERLYING CAUSE GIVEN IN 107 SEIZURES, LEFT HEMISPHERIC MASS		113 SIGNATURE AND TITLE OF CERTIFIER HECTOR LUIS SALEMI-CASTRO M.D.		114 I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
115 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE 598 NORTH F STREET, SAN BERNARDINO, CA 92410		116 LICENSE NUMBER A73975		117 DATE mm/dd/yyyy 05/12/2010	
118 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE HECTOR LUIS SALEMI-CASTRO M.D.		119 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED <input type="checkbox"/> Natural <input type="checkbox"/> Accidents <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Investigation <input type="checkbox"/> Could not be determined		120 INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
121 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		122 INJURY DATE mm/dd/yyyy		123 HOUR (24 Hours)	
124 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125 LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126 SIGNATURE OF CORONER / DEPUTY CORONER				127 DATE mm/dd/yyyy	
128 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER				129	
STATE REGISTRAR		A B C D E		FAX AUTH.#	
130		131		132	



CERTIFIED COPY OF VITAL RECORD
 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.

MAY 21 2021

DATE ISSUED

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



Peter Aldera
 PETER ALDERA
 ASSESSOR-COUNTY CLERK-RECORDER
 RIVERSIDE COUNTY, CALIFORNIA



CARTIVERS02

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. Micaela Fernandez died on 05/09/2010 in the County of Riverside, State of California.
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate.
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate.
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$166,250.00.
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$34,831.06 +-, generated from Assessor's Parcel Number(s) 528121021, sold at the Riverside County, California, public auction of tax-defaulted property held on 4/30/2020.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:
 Federico D. Gonzalez, Carmen Gonzalez, Marebel Gonzalez, Mayra Romero & Jessica Gonzalez
7. The undersigned (please check which box(s) applies):
 Is successor(s) of the decedent to the decedent's interest in the described property, or
 Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;
8. No other person has a superior right to the interest of the decedent in the described property;
9. The undersigned request that the described property be paid, delivered or transferred to the undersigned.

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

7/10/21
 (DATE)
7/10/21
 (DATE)
7/10/21
 (DATE)
07/10/21
 (DATE)
07/07/21
 (DATE)

Carmen A. Gonzalez as Guardian of Federico Gonzalez
 Printed Name
Carmen Gonzalez
 Printed Name
Marebel Gonzalez
 Printed Name
Mayra Romero
 Printed Name
Jessica Gonzalez
 Printed Name

[Signature]
 signature
[Signature]
 signature
[Signature]
 signature
[Signature]
 signature
[Signature]
 signature

(Attach Additional Sheet if Necessary)

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

State of California)

County of Riverside)

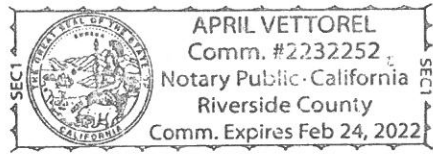
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Marebel Gonzalez, 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.

April Vettorel (seal)
Signature of Notary Public



AFFIDAVIT

I, Marebel Gonzalez as heir to the Estate of Micaela Fernandez, do hereby declare:

1. I am over the age of 18 and a resident of Banning, 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. Micaela Fernandez is one and the same person listed on Quitclaim Deed as document number: 2006-0498579, recorded on 07/07/2006 in Riverside County, CA.
3. I, Marebel Gonzalez am a biological child of Micaela Fernandez.
4. Micaela Gonzalez's Certificate of Death lists that she was married when she died and references Federico Gonzalez as her husband and informant. That information is incorrect, Micaela & Federico have been legally divorced since 1/12/2005 and never re-married. Micaela Gonzalez died with no surviving spouse.
5. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 528121021.

x 
Marebel Gonzalez as heir to the Estate of Micaela Fernandez

JURAT

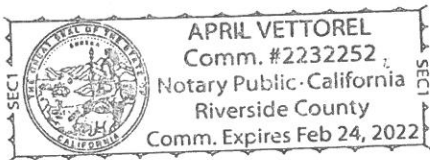
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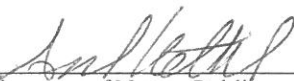
State of California
County of Riverside

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

10th day of July, 2021, by
Date Month Year
Marebel Gonzalez
Name of Signer

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



Signature 
Signature of Notary Public

(Place Notary Seal Above)

CLAIM SUMMARY

Date: July 14, 2021
To: Riverside County Treasurer and Tax Collector
Assessors Parcel Number: 528121021
Last Assessee: FERNANDEZ MICAELA
Sale Date: 4/30/2020
TC: TC215
Item Number: 1407
Deadline: 7/15/2021

RECEIVED
2021 JUL 15 AM 8:03
RIVERSIDE COUNTY
TREAS - TAX COLLECTOR

Dear Treasurer/Tax Collector:

Claimant(s): Global Discoveries, Ltd.

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b. Please Note: The 52333 Lois Ave. Cabazon, CA 92230 address listed on Micaela's death certificate is one and the same property as the above listed APN.
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Please address questions regarding the attached claim(s) to Jed Byerly, Managing Member, at (209) 593-3913, or e-mail to jed@gd-ltd.com.

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

Certified Tracking Number: 7020-3160-0000-7617-5065

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 528121021 Tax Sale Number TC215, Item 1407 sold at public auction on 4/30/2020. I understand that the total of excess proceeds available for refund is \$ 34,831.06+/-, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAUABLE CONSIDERATION RECEIVED I HAVE SOLD THIS RIGHT OF COLLECTION (assignment) TO THE ASSIGNEE. I certify under penalty of perjury that I have disclosed to the assignee all facts of which I am aware relating to the value of this right I am assigning.

Signature of Party of Interest/Assignor: [Signature] (Date) 07/10/21
Mayra Alejandra Romero as heir to the Estate of Micaela Fernandez (Name Printed)
1485 Aspen Lane (Address)
Banning, CA, 92220 (City/State/Zip)
951-373-6807 (Area Code/Telephone Number)

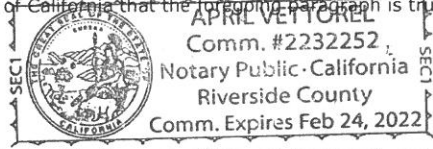
CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California
County of Riverside
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared Mayra Alejandra Romero, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

WITNESS my hand and official seal.
Signature of Notary Public [Signature] (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 of Assignee [Signature]
Jed Byerly, Managing Member (Name Printed)

Tax ID/SS#
Global Discoveries Ltd. (Address)
P.O. Box 1748 Modesto, CA 95353-1748 (City/State/Zip)
Phone: (209) 593-3913

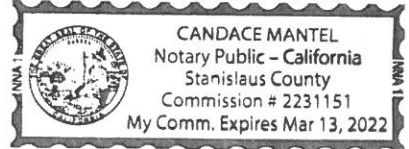
CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of California
County of Stanislaus
On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared Jed Byerly, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

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



GD#: 39579-379157

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

To: Riverside County Treasurer and Tax Collector

Assessor's Parcel No: 528121021
Tax Sale Number: TC215
Item Number: 1407
Date of Sale: 4/30/2020

The undersigned claimant, Global Discoveries, Ltd., claims \$34,831.06 +/- 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 14TH day of July, 2021 at Modesto, California.

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

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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

State of California

County of Stanislaus

On 7/15/21 before me, Candace Mantel, Notary Public, personally appeared
(Date) Jed Byerly (here insert name and title of the officer)

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



RECORDING REQUESTED BY

DOC # 2006-0498579

07/07/2006 08:00A Fee:7.00

Page 1 of 1

Recorded in Official Records
County of Riverside

Larry W. Ward
Assessor, County Clerk & Recorder



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

NAME MICAELA FERNANDEZ
STREET ADDRESS P.O. BOX 807
CITY, STATE & ZIP CODE CABAZON CA 92230
TITLE ORDER NO. _____ ESCROW NO. _____

M	S	U	PAGE	SIZE	DA	PCOR	NOCOR	SMF	MISC
	1		1						
					3				T
A	R	L			COPY	LONG	REFUND	NCHG	EXAM

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ 0
 computed on full value of property conveyed, or
 computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

10
C
TV

FEDERICO GONZALEZ ARENAS
(NAME OF GRANTOR(S))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to MICAELA FERNANDEZ
(NAME OF GRANTEE(S))

the following described real property in the ~~City of~~ UNINCORPORATED Area, County of Riverside, State of CA:

PARCEL 1: Lot 175, CABAZON Estates, No. 2 AS PER PLAT recorded in Book 41 pages 63 and 64, Records of said County;

PARCEL 2: The Easterly 4 feet of Lot 174 of Cabazon Estates No. 2, as shown by map on file in Book 41 pages 63 & 64 of Maps, Riverside County Records.

Assessor's parcel No. 528-121-021 & 528-121-046 or 52233 Lois Ave.

Executed on July 5, 2006, 2006 at CABAZON, Calif.
(CITY AND STATE)

STATE OF CALIFORNIA

COUNTY OF Riverside

Federico Gonzalez Arenas

On July 5, 2006 before me, TERRI ESCALANTE, Notary Public

RIGHT THUMBPRINT (Optional)



personally appeared Federico Gonzalez Arenas 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]
(SIGNATURE OF NOTARY)

(SEAL)



MAIL TAX STATEMENTS TO: MICAELA FERNANDEZ
P.O. BOX 807, CABAZON, CA 92230

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no intended use or purpose.

WOLCOTTS FORM 790 QUITCLAIM DEED ©1994 WOLCOTTS FORMS, INC. Rev. 3-94b (price class 3A)



7 67775 39790 1

CAPACITY CLAIMED BY SIGNER(S)

- INDIVIDUAL(S)
- CORPORATE OFFICER(S)
- PARTNER(S)
- ATTORNEY IN FACT
- TRUSTEE(S)
- GUARDIAN/CONSERVATOR
- OTHER:

SIGNER IS REPRESENTING:
(Name of Person(s) or Entity(ies))

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD
COUNTY OF RIVERSIDE
 RIVERSIDE, CALIFORNIA

3052010091716

CERTIFICATE OF DEATH

3201033004859

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WRITINGS OR ALTERATIONS OF ANY KIND		LOCAL REGISTRATION NUMBER	
1 NAME OF DECEDENT - FIRST (Given)		2 MIDDLE		3 LAST (Surname)	
MICAELA				FERNANDEZ	
AKA ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)					
4 DATE OF BIRTH mm/dd/yyyy		5 AGE Yrs		6 SEX	
08/24/1962		47		F	
7 BIRTH STATE/FOREIGN COUNTRY		8 SOCIAL SECURITY NUMBER		11 EVER IN U.S. ARMED FORCES?	
MEXICO				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
12 MARITAL STATUS/SDOP in Year of Death		13 DATE OF DEATH mm/dd/yyyy		14 HOUR (of Hours)	
MARRIED		05/09/2010		1200	
15 EDUCATION - Highest Level/Degree (See instructions on back)		16/17 WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see instruction on back)		18 DECEDENT'S RACE - Up to 3 races may be listed (see instruction on back)	
09		<input checked="" type="checkbox"/> YES MEXICAN		<input type="checkbox"/> NO MEXICAN	
19 USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		20 KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)		21 YEARS IN OCCUPATION	
LABORER		RESTAURANT		1	
22 DECEDENT'S RESIDENCE (Street and number, or location)					
52233 LOIS AVE.					
23 CITY		24 COUNTY/PROVINCE		25 STATE/FOREIGN COUNTRY	
CABAZON		RIVERSIDE		CA	
26 INFORMANT'S NAME, RELATIONSHIP		27 INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, etc., or town, state and zip)			
FEDERICO GONZALEZ, HUSBAND		52233 LOIS AVE., CABAZON, CA 92230			
28 NAME OF SURVIVING SPOUSE/SDOP - FIRST		29 MIDDLE		30 LAST (BIRTH NAME)	
FEDERICO				GONZALEZ	
31 NAME OF FATHER/PARENT - FIRST		32 MIDDLE		33 LAST	
JUAN				FERNANDEZ	
34 BIRTH STATE		35 NAME OF MOTHER/PARENT - FIRST			
MEXICO		ENEDINA			
36 MIDDLE		37 LAST (BIRTH NAME)		38 BIRTH STATE	
		GARCIA		MEXICO	
39 DISPOSITION DATE mm/dd/yyyy		40 PLACE OF FINAL DISPOSITION (STREET AND NUMBER, CITY, STATE AND ZIP)			
05/14/2010		2201 N. SAN GORGONIO COURT, BANNING, CA 92220			
41 TYPE OF DISPOSITION		42 LICENSE NUMBER			
BU		EMBB010			
43 NAME OF FUNERAL ESTABLISHMENT		44 LICENSE NUMBER (If none, provide the funeral registrar)		45 DATE mm/dd/yyyy	
SAN BERNARDINO MISSION CHAPEL		FD1854		05/12/2010	
46 PLACE OF DEATH		47 IF OTHER THAN HOSPITAL, SPECIFY ONE		48 DEATH REPORTED TO CORONER?	
CHERRY VALLEY HEALTHCARE		<input checked="" type="checkbox"/> Nursing Home <input type="checkbox"/> Home <input type="checkbox"/> Other		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
104 COUNTY		105 CITY		106 DEATH REPORTED TO CORONER?	
RIVERSIDE		BANNING		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
107 CAUSE OF DEATH		108 ICD-10 CODE		109 ICD-10 CODE	
W BRAIN METASTASIS		MTHS.		MTHS.	
LIVER METASTASIS					
STAGE IV BREAST CANCER					
110 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107					
SEIZURES, LEFT HEMISPHERIC MASS					
111 WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 110? (If yes, list type of operation and date)					
NONE					
114 I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		115 SIGNATURE AND TITLE OF CERTIFIER		116 LICENSE NUMBER	
04/30/2010		05/08/2010		A73975	
117 TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		118 LICENSE NUMBER			
598 NORTH F STREET, SAN BERNARDINO, CA 92410		HECTOR LUIS SALEMI-CASTRO M.D.			
119 I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		120 INCURRED AT WORK?		121 INJURY DATE mm/dd/yyyy	
<input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK			
122 PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		123 HOUR (of Hours)		124 INJURY DATE mm/dd/yyyy	
125 DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
126 LOCATION OF INJURY (Street and number, or location, and city, and zip)					
127 SIGNATURE OF CORONER / DEPUTY CORONER					
128 DATE mm/dd/yyyy		129 TYPE NAME, TITLE OF CORONER / DEPUTY CORONER			

NOT A VALID DOCUMENT TO ESTABLISH IDENTITY

CERTIFIED COPY OF VITAL RECORD
 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.

MAY 21 2021

DATE ISSUED _____

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



035020385

Peter Aldana
 PETER ALDANA
 ASSESSOR-COUNTY CLERK-RECORDER
 RIVERSIDE COUNTY, CALIFORNIA



CARIVERS02

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

1. Micaela Fernandez died on 05/09/2010 in the County of Riverside, State of California.
2. At least 40 days have elapsed since the death of the decedent, as shown by the attached certified copy of the decedent's death certificate.
3. No proceeding is now being or has been conducted in the State of California for administration of the decedent's estate.
4. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in section 13050 of the California Probate Code, does not exceed \$166,250.00.
5. The following property is to be paid, transferred or delivered to the undersigned under the provisions of California Probate Code Section 13100 (please describe the property in below space):

The excess proceeds [as defined in *California Revenue and Taxation Code*, Section 4675, et seq] in the approximate amount of approximately \$34,831.06 +-, generated from Assessor's Parcel Number(s) 528121021, sold at the Riverside County, California, public auction of tax-defaulted property held on 4/30/2020.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:
 Federico D. Gonzalez, Carmen Gonzalez, Marebel Gonzalez, Mayra Romero & Jessica Gonzalez

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



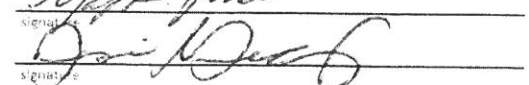
- Is successor(s) of the decedent to the decedent's interest in the described property, or
 Is authorized under California Probate Code Section 13051 to act on behalf of the successor(s) of the decedent with respect to the decedent's interest in the described property;

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

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

7/10/21
(DATE)
7/10/21
(DATE)
7/10/21
(DATE)
07/10/21
(DATE)
07/07/21
(DATE)

Carmen A. Gonzalez as Guardian of Federico Gonzalez
Printed Name
Carmen Gonzalez
Printed Name
Marebel Gonzalez
Printed Name
Mayra Romero
Printed Name
Jessica Gonzalez
Printed Name


Signature

Signature

Signature

(Attach Additional Sheet if Necessary)

CERTIFICATE OF ACKNOWLEDGEMENT OF NOTARY PUBLIC

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State of California

County of Riverside

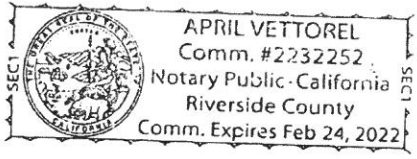
On July 10, 2021 before me, April Vettorel, Notary Public, personally appeared
(Date) (here insert name and title of the officer)

Mayra Romero 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.

April Vettorel (seal)
Signature of Notary Public



AFFIDAVIT

I, Mayra Alejandra Romero as heir to the Estate of Micaela Fernandez, do hereby declare:

1. I am over the age of 18 and a resident of Banning, 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. Micaela Fernandez is one and the same person listed on Quitclaim Deed as document number: 2006-0498579, recorded on 07/07/2006 in Riverside County, CA.
3. I, Mayra Alejandra Romero am a biological child of Micaela Fernandez.
4. Micaela Gonzalez's Certificate of Death lists that she was married when she died and references Federico Gonzalez as her husband and informant. That information is incorrect, Micaela & Federico have been legally divorced since 1/12/2005 and never re-married. Micaela Gonzalez died with no surviving spouse.
5. I, Mayra Alejandra Romero am one and the same person as Mayra Romero and Mayra A. Romero.
6. I assigned the excess proceeds to Global Discoveries, Ltd., for Riverside County Assessors Parcel Number 528121021.

I declare under penalty of perjury that the foregoing is true and correct. Executed this 7th day of July, 2021, in Riverside, CA.

X *Mayra Romero*
Mayra Alejandra Romero as heir to the Estate of Micaela Fernandez

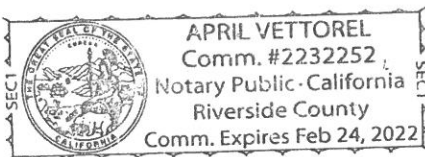
JURAT

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State of California
County of Riverside

Subscribed and sworn to (or affirmed) before me on this 10th day of July, 2021, by
Date Month Year
Mayra Alejandra Romero
Name of Signer

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



Signature *April Vettorel*
Signature of Notary Public

(Place Notary Seal Above)