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



ITEM: 19.16 (ID # 23193)

MEETING DATE:

Tuesday, November 28, 2023

FROM: TREASURER-TAX COLLECTOR:

SUBJECT: TREASURER-TAX COLLECTOR: Public Hearing on the Recommendation for Distribution of Excess Proceeds for Tax Sale No. 217, Item 4059. Last assessed to: Mary Ruth Townsend, an unmarried woman. District 1. [\$25,675-Fund 65595 Excess Proceeds from Tax Sale]

RECOMMENDED MOTION: That the Board of Supervisors:

- Approve the claim from Global Discoveries, Ltd., Assignee for Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend, last assessee for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 322230008;
- Authorize and direct the Auditor-Controller to issue a warrant to Global Discoveries, Ltd., Assignee for Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend in the amount of \$25,675.61, 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;
- Authorize and direct the Treasurer-Tax Collector to transfer the unclaimed excess proceeds in the amount of \$51,351.20 to the County General Fund pursuant to Revenue and Taxation Code Section 4674.

ACTION:Policy

MINUTES OF THE BOARD OF SUPERVISORS

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

Ayes:

Jeffries, Spiegel, Washington and Perez and Gutierrez

Nays: Absent: None

None

Date:

November 28, 2023

XC:

Tax Collector

19.16

Kimberly A. Rector

Clerk of the Board

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| FINANCIAL DATA | Current Fiscal Year: | Next Fiscal Year: | Total Cost: | Ongoing Cost |
|------------------|-------------------------|-------------------|-------------|--------------|
| COST | \$ 25,675 | \$0 | \$ 25,675 | \$ 0 |
| NET COUNTY COST | \$ 0 | \$ 0 | \$0 | \$ 0 |
| SOURCE OF FUNDS: | Fund 65595 Excess Proc | Budget Adjust | ment: N/A | |
| COUNCE OF FOREO. | Tulia 05555 Excess Froc | For Fiscal Year | r: 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 18, 2021 public auction sale. The deed conveying title to the purchasers at the auction was recorded July 28, 2021. Further, as required by Section 4676 of the California Revenue and Taxation Code, notice of the right to claim excess proceeds was given on August 4, 2021 to parties of interest as defined in Section 4675 of said code. Parties of interest have been determined by an examination of Parties of Interest Reports, Assessor's and Recorder's records, as well as other, various research methods used to obtain current mailing addresses for these parties of interest.

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

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

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

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of the one year following the recordation of the Tax Collector's Deed to the Purchaser, which was recorded on July 28, 2021.

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

6. Claim from Global Discoveries, Ltd., Assignee for Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend based on an Assignment of Right to Collect Excess Proceeds notarized August 10, 2021, a Quitclaim Deed recorded January 4, 1995 as Instrument No. 1995-1713, an Affidavit for Collection of Personal Property notarized July 23, 2021, and a Certificate of Death for Mary Ruth Townsend.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Global Discoveries, Ltd., Assignee for Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend be awarded excess proceeds in the amount of \$25,675.61. Since there are no other claimants, the unclaimed excess proceeds in the amount of \$51,351.20 will be transferred to the County General Fund. Supporting documentation has been provided. The Tax Collector requests approval of the above recommended motion. Notice of this recommendation was sent to the claimant by certified mail.

Impact on Residents and Businesses

Excess proceeds will be released to an heir to the estate of the last assessee and transferred to the County General Fund.

ATTACHMENTS (if any, in this order):

ATTACHMENT A. Claim Global

Sesar Bernal

n Gettis, Deputy County Counsel 10/27/2



Ph: 209-593-3900 or 800-370-0372 | Fx: 209-549-9299 | Info@gd-ltd.com

1120 13th Street, Suite A | Modesto, CA 95354

ITI

CLAIM SUMMARY

Date:

August 10, 2021

To:

Riverside County Treasurer and Tax Collector

Assessors Parcel Number:

322230008

Last Assessee:

TOWNSEND MARY RUTH

Sale Date:

5/13/2021

TC: Item Number:

4059

Dear Treasurer/Tax Collector:

1. 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 releasing interest to Mary Ruth Townsend, an unmarried woman as Document Number: 1995-1713, Recorded on 01/04/1995 in Riverside County, CA.
- 3. Certified Certificate of Death for Mary Ruth Townsend
- 4. Probate Affidavit for the Estate of Mary Ruth Townsend signed by Michael Allen Townsend
- 5. Certificate of Birth for Michael Allen Townsend
 - a. Mary Ruth Sanchez is listed as "Mother", Sanchez is Mary's maiden last name
- 6. Affidavit signed by Michael Allen Townsend declaring under penalty of perjury his identity.
- 7. Assignment of Rights To Collect Excess Proceeds signed by Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend
- 8. Claim form(s) signed by Global Discoveries, Ltd.
- 9. Photo ID for Assignor: Michael Allen Townsend

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

• One warrant in the amount of \$25,961.34 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).

BBB.

ACCREDITED
BUSINESS

Certified Tracking Number: 7020-3160-0000-7617-5126

ASSIGNMENT OF RIGHT TO COLLECT EXCESS PROCEEDS o 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 locumentation 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. ny 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 ___322230008_Tax Sale Number 7 C 217 , Item 4059 sold at public auction on _5/13/2021 . I understand that the total of excess proceeds vailable for refund is \$ 77,884.00+/-__, and that I AM GIVING UP MY RIGHT TO FILE A CLAIM FOR THEM. FOR VAULABLE 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. Michael Allen Townsend as heir to the Estate of Mary Ruth Townsend (Signature of nath of Tate (Date) (Name Printed) ax ID/SS# 25493 Van Leuven Street #B (Address) Loma Linda, CA, 92354-2392 (City/State/Zip) 951-204-5265 (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 County of before me, , personally appeared (Date) (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 band and official 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 ARM SED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN WITHOUT ASSIGNING THAT RIGHT. Jed Byerly, Managing Member of Global Discoveries, Ltd (Signature of Assignee) (Name Printed) ax ID/SS# _ P.O. Box 1748 (Address) Modesto, CA 95353-1748 (City/State/Zip) Phone: _(209) 593-3913 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 County of before me. (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

Maus Weller

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



CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 San Bernardino | } |
| On 7 23 21 before me, _ | Darla Stern, Notary Public |
| name(s) is/are subscribed to the within he/she/they executed the same in his/h | (Here insert name and title of the officer) factory evidence to be the person(s) whose instrument and acknowledged to me that her/their authorized capacity(ies), and that by hent the person(s), or the entity upon behalf of the instrument. |
| | under the laws of the State of California that |
| WITNESS my hand and official seal. Notary Public Signature | DARLA STERN Commission No. 2286875 NOTARY PUBLIC-CALIFORNIA SAN BERNARDINO COUNTY My Comm. Expires APRIL 28, 2023 Detary Public Seal) |
| ADDITIONAL OPTIONAL INFORMATI | INSTRUCTIONS FOR COMPLETING THIS FORM |
| DESCRIPTION OF THE ATTACHED DOCUMENT Assignment of Right to (Title or description of attached document) Collect Excess Proceeds (Title or description of attached document continued) Number of Pages Document Date | This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law. State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. |
| CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other | Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a |
| | corporate officer, indicate the title (i.e. CEO, CEO, Secretary) |

• Securely attach this document to the signed document with a staple.

www.NotaryClasses.com 800-873-9865

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

| To: Jon Christensen, Treasurer-Tax Colle | ctor | |
|---|---|---|
| Re: Claim for Excess Proceedsf | | TRE R |
| TC Item 4059 Parcel Identification Numb | per: 322230008 | SEP SEP |
| Assessee: TOWNSEND MARY RUTH | | AXE -7 III |
| Situs: PERRIS CA 92570 (VACANT) | | |
| Date Sold: 5/13/2021 Date Deed to Purchaser Recorded: 7/28/2/ Final Date to Submit Claim: 7/28/22 | | LECTOR |
| I/We, pursuant to Revenue and Taxation Code S \$25,961.34 from the sale of the above-mentione Property Owner(s) [check in one box] a Recorder's Document No. 1995-1713 record are the rightful claimants by virtue of the attached a item of documentation supporting the claim submitted. | d real property. I/We were the () lienholder(s), it the time of the sale of the property as is evidended on 000411995. A copy of this document assignment of interest. I/We have listed below an | nced by Riverside County |
| NOTE: YOUR CLAIM WILL NOT BE CONSIDER | RED UNLESS THE DOCUMENTATION IS ATTA | ACHED. |
| | | |
| Please Refer to Claim Summary | and Supporting Documents Enclosed | |
| If the property is held in Joint Tenancy, the tax sale to sign the claim unless the claimant submits proof only receive his or her respective portion of the clai I/We affirm under penalty of perjury that the foreg | that he or she is entitled to the full amount of the m. | I Joint Tenants will have claim, the claimant may |
| | _, 207 at MODESTO, Co | 7 |
| M | County, State | |
| Signature of Claimant Tax ID # | Signature of Claimant | |
| Jed Byerly, Managing Member of Global Discoveries, Ltd. | | |
| Print Name | Print Name | |
| 1120 13th St. Suite A | | |
| Street Address | Street Address | |
| Modesto, CA 95354 City, State, Zip | City, State, Zip | |
| (209) 593-3913 | , | |
| Phone Number | Phone Number | |

SCO 8-21 (1-99)

RECORDING REQUESTED BY INVESTORS TITLE COMPANY

WHEN RECORDED MAIL TO: Northern Trust Bank of California 355 South Grand Ave., Suite 2700 Los Angeles, Ca 90071 Attn: Evelyn Fierro MAIL TAX STATEMENT TO: Mary Ruth Townsend

Mary Ruth Townsend
1675 Baseline

San Bernardino, Ca 92411
_____SPACE ABOVE THIS LINE FOR RECORDER'S USE

RECEIVED FOR RECORD AT 8:00 O'CLOCK

JAN 4 - 1895

30

APN: 323-230-008-2

THE UNDERSIGNED DECLARES THAT THE DOCUMENTARY TRANSFER TAX IS \$ 0

...Computed on the consideration or value of property conveyed -OR...Computed on the consideration or value less liens or encumbrances remaining at time of sale; OR ...Zero because: This is a transfer back to the Trustor of a revocable trust and is exempt from transfer tax per RTC Code Section 62 (d).

QUITCLAIM DEED

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, NORTHERN TRUST BANK OF CALIFORNIA N.A., Successor to Pioncer Title Insurance and Trust Company Trust S-1053

does hereby REMISE, RELEASE AND FOREVER QUITCLAIM to MARY RUTH TOWNSEND, an unmarried woman

the real property in the City of County of Riverside

, State of California, described as

Parcel 3, per Record of Survey on file in Book 30, Pages 55 and 56 of Records of Survey. Being a portion of Section 23, Township 4 South, Range 4 West, San Bernardino Base and Meridian.

The undersigned executes this Quitclaim Deed as such Trustee and not individually, and is not to be held liable in its individual capacity in any way by reason of this Quitclaim Deed. Any recourse under and by virtue of this Quitclaim Deed shall be against the trust estate only.

Dated: September 27, 1994

This document filed for record by investors Title Company as an accompdation only. It has not been examined as to its execution or as to its effect upon the title.

NORTHERN TRUST BANK OF CALIFORNIA N.A.

By: M. Mendelson

Its: Vice President

111 -11-

David Young

s: Second Wice President

1005

| ALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT | No 590 |
|---|---|
| State of County of Lastragues On Suptimber 27,1994 before me, Terri L. Howaed No. Name intercording a statisfactor of the within instrument of the same in his/her/their capacity(ies), and that by his signature(s) on the instrument the or the entity upon behalf of person(s) acted, executed the within Epires NOV 11, 1997 Sount process of the same in his/her/their capacity(ies), and that by his signature(s) on the instrument the or the entity upon behalf of person(s) acted, executed the within instrument that the same in his/her/their capacity(ies), and that by his signature(s) on the instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the within instrument the or the entity upon behalf of person(s) acted, executed the source. | tory evidence me(s) is/are nent and ac- ney executed authorized his/her/their ne person(s), which the instrument. |
| Though the data below is not required by law, it may prove valuable to persons relying on the document fraudulent reattachment of this form. | and could prevent |
| CAPACITY CLAIMED BY SIGNER DESCRIPTION OF ATTACHED INDIVIDUAL CORPORATE OFFICER VICE President Second Vice President TITLE OR TYPE OF DOCK PARTNER(S) LIMITED GENERAL ATTORNEY-IN-FACT ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER: DATE OF DOCUMEN | JMENT SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS |
| SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(SES) NORTHUM Trust Bank SIGNER(S) OTHER THAN NAM | ED ABOVE |

AFFIDAVIT FOR COLLECTION OF PERSONAL PROPERTY

The undersigned state(s) as follows:

- 1. Mary Ruth Townsend died on 05/28/2015 in the County of San Bernardino, 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 \$77,884.00 +-, generated from Assessor's Parcel Number(s) 322230008, sold at the Riverside County, California, public auction of tax-defaulted property held on 5/13/2021.

6. The successor(s) of the decedent, as defined in California Probate Code Section 13006, is/are:

Michael Allen Townsend, Brian Townsend, Yolanda Townsend

- 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.

| 7/23/2/ (DATE) | Michael Allen Townsend Printed Name | signature lichard Allen lownson |
|---|-------------------------------------|---------------------------------|
| (DATE) | Brian Townsend Printed Name | signature |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Yolanda Townsend | - Britain |
| (DATE) | Printed Name | signature |
| (DATE) | Printed Name | signature |
| (DATE) | Printed Name | 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.

County of San Bernardino

On 123 2 before me, Darla Stern Notary Rubic, personally appeared

(Date) (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 of Notary Public

DARLA STERN

Page 2 of 2

Commission No. 2286875

NOTARY PUBLIC-CALIFORNIA
SAN BERNARDINO COUNTY
My Comm. Expires APRIL 28, 2023

CERTIFICATION OF VITAL RECORD

COUNTY OF SAN BERNARDINO

| | 3052015108599 | | | °:°CE | RTIFICATE | OF D | EATH": | | | 3 | 20153600 | 5627 | | |
|--------------------------------------|--|--|---|---|--|-------------------------|----------------|-------------------------|--|-------------------|--|-----------|--------------------------------|---------------|
| | STATE FILE NUMBER | | 10 | USEBLACK | STATE OF CAL IK ONLY NO ERASVIRES VS-116/NEV | WHITEOUS 3/(16) | S OR ALTERATIO | NS . | | LO | CAL REGISTRATION | NUMBE | Я | |
| * | . NAME OF DECEDENT- FIRST (Given) 2. MIDDLE RUTH | | | | | | | TOW | NSEND | | | | | |
| NAL DATA | AKA. ALSO KNOWN AS - Include full AKA (FI | IRST, MIDDLE, LA | ST) | | | | OF BIRTH m | m/dd/ccyy | 5. AGE Yrs. 82 | IF UNDE Months | R ONE YEAR IF | UNDER 24 | HOURS Minutes | 6. SEX |
| 'S PERSO | 9. BIRTH STATE/FOREIGN COUNTRY KS | 10. SOCIAL SEC | | | YES X NO | UNK | WIDO | WED | | 05/ | 28/2015 | | 8. HOUR 145 | (21 Hours) |
| DECEDENT'S PERSONAL | 13. EQUICATION - Highest LeveNDogreo 14/15. WAS DECEDENT HISPANICIATINO(A)SPANISH? (if yes, see worksheet on back) 16. DECEDENT'S RACE - Up to 3 races may be some southeast on back) SOME COLLEGE X YES MEXICAN AMERICAN NO MEXICAN AMERICAN 17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED 18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, road construction, road construction, road construction). | | | | | | | | 1 | | | YEARS IN | OCCUPATIO | |
| | OFFICE MANAGER PUBLISHING | | | | | | | | | | 25 | | | |
| USUAL RESIDENCE | 20. DECEDENT'S RESIDENCE (Street and number, or location) 1875 BARTON RD | | | | | | | | | | / | | | |
| | | | | | | | | | C | STATE/FOREIGN | | | | |
| MANT | 26. INFORMANT'S NAME, RELATIONSHIP BRIAN TOWNSEND, SC | | | Carlo | 670 N 92401 | . ARF | S. Trail | A 1 3 5 | | B, S | AN BERNA | ARDII | NO, C | A |
| AND | 28. NAME OF SURVIVING SPOUSE/SRDP*-F | FIRST | 29. M | IDDLE (| A NATIONAL PROPERTY OF THE PARTY OF THE PART | | 30. LAST | (BIRTH N | AME) | 20 W 3 M | and the same | | | |
| SPOUSE/SRDP AND ARENT INFORMATION | 31. NAME OF FATHER/PARENT-FIRST | | 32. M | IDDLE | 1 | 1% | 33, LAST | CHE | 7 | | | | 34. BIRTH | |
| SPOUS | 35. NAME OF MOTHER/PARENT-FIRST GUADALUPE | The same of the sa | 36. M | IDDLE - | North Control | 0 1. | | (BIRTH N | AND THE PARTY OF THE PARTY. | ×, | 1 | - 1 | 38. BIRTH | |
| TOR | 39. DISPOSITION DATE mm/dd/ccyy 40. 06/05/2015 57 | PLACE OF FINAL | DISPOSITION | MT VIE | W CEMETI | ERY RDIN | AU | | I NI | S. Seller | | | | |
| FUNERAL DIRECTOR/ LOCAL REGISTRAR | 41. TYPE OF DISPOSITION(S) | 1 | Special Specia Special Specia Specia Specia Specia Specia Specia Specia Specia Specia | | GNATURE OF EMBAL | Xe. | 1 | | | \$ \$ \$ \ | | 43. LIC | ENSE NUN | IBER |
| FUNERA | 44. NAME OF FUNERAL ESTABLISHMENT HARRISON-ROSS MOR | RTUARY | | 45, £K | CENSE NUMBER 4 | 6. SIGNAT | URE OF LOC | AL REGIST | PAR | , 8 Y | r# | 1 | 03/20 | |
| P T | 101. PLACE OF DEATH KINDRED HOSPITAL R. | ANCHO | 900 | 10 m | all the second of | 102 | FHOSPITAL | SPECIFY I | | OTHER Hospice | HAN HOSPITAL, S Nursing Home/LTC | | ONE Decedent's Horne | Other |
| PLACE OF DEATH | | 05, FACILITY ADD 0841 WH | | | FOUND (Street and | number, o | r location) | | | | RANCHO CUCAMONGA | | | |
| | IMMEDIATE CAUSE (A) SEPTIC S (Final disease or condition resulting | ardiac arrest, resoir | a discosus, ir itory anest, or v | njuros, or compl entricular forillat | cations toat directly ion without showing th | caused de e eticlogy | ath DO NOT o | onter to min REVIATE | o byants such | | Time interval Setween Onset and Death (AT) DAYS | X | REPORTED (ES 04170 | TO CORONER? |
| _ | in death) Sequentially, list conditions, if any, | ENCEPH | ALOPA | THY | | | | | A 1 | 3 3 E | (BT) 109. BIOPSY PERFO | | | RMFD? |
| CAUSE OF DEATH | leading to cause on Line A. Enter UNDERLYING CAUSE (disease or injury that leather the events (D) ASPIRATI | | | No. | RY FAILUI | RE | | | 7 | | MTHS | | OPSY PERI ES IN DETERMIN | X NO |
| - | injury mate initiating the elements. (D) ASPIRATION PNEUMONIA insulting in dealth) LAST 112_OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERSHING CAUSE GIVEN IN 107 | | | | | | | | MTHS VFS | | | NO | | |
| | NO 1.83.4 | | | | | | | | | | | | | |
| | 113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) NONE | | | | | | | | 113A IF FEMALE, PREGNANT IN LAST YEAR? YES X NO UNK | | | | | |
| CATION | 114. I CERTIFY THAT TO THE BEST OF MY KNOWLED AT THE HOUR, DATE, AND PLACE STATED FROM THE Decedent Altended Since Deceded | GE DEATH OCCURR CAUSES STATED. ant Last Seen Alive | > | | TILE OF CERTIFIER | | | | UB | | 5. LICENSE NUMBI 20A13378 | 06 | /02/20 | |
| £ 문 | (A) mm/dd/ccyy (B) mm 05/18/2015 05/28/3 | /dd/ccyy 2015 | 9089 | E. BAS | PHYSICIAN'S NAME, ELINE RD., | #100 | ADDRESS, ZI | P CODE E | BENJAMI | N LO NGA, | UIS HELLE CA 91730 | ER, D | .0. | |
| | 119. I CERTIFY THAT IN MY OPINION DEATH OCCUR MANNER OF DEATH NISTURE AC | RRED AT THE HOUR, | | July 7 5 | ending | Could not b | ю П | YES | | NK 12 | 1. INJURY DATE in | m/dd/ccyy | 122, HOU | JR (24 Hours) |
| ONLY | 123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) | | | | | | | | | | | | | |
| R'S USE | 124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in Injury) | | | | | | | | | | | | | |
| CORONER'S USE ONLY | 125. LOCATION OF INJURY (Street and numb | 125. LOCATION OF INJURY (Street and number, or location, and city, and ¿p) | | | | | | | | | | | | |
| 1 | 126, SIGNATURE OF CORONER / DEPUTY C | ORONER | | | 127. DATE mm/s | dd/ccyy | 128. TYP | E NAME, 1 | TTLE OF CORON | ER / DEPI | JTY CORONER | | | |
| STAT | | C | D | E | | | | | | FA | X AUTH.# | | CENSU | JS TRACT |
| HEGIST | CEDTIFIED | | | 88 | 3 8 8 8 8 | *0100 | 001002952 | 584° | 1000 | | | | | |

STATE OF CALIFORNIA, COUNTY OF SAN BERNARDINO

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