

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



ITEM: 21.6  
(ID # 24520)

**MEETING DATE:**  
Tuesday, January 28, 2025

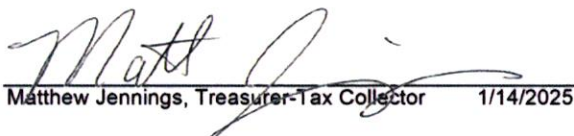
**FROM :** TREASURER-TAX COLLECTOR

**SUBJECT:** TREASURER-TAX COLLECTOR: Public Hearing on the Recommendation for Distribution of Excess Proceeds for Tax Sale No. 218, Item 581. Last assessed to: Patricia Babcock. District 4. [\$121,445-Fund 65595 Excess Proceeds from Tax Sale]

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

1. Approve the claim from Thami Clinton, Agent for Isabel Babcock, heir to the Estate of Patricia Babcock, last assessee, for payment of excess proceeds resulting from the Tax Collector's public auction sale associated with parcel 663222010; and
2. Authorize and direct the Auditor-Controller to issue a warrant to Thami Clinton, Agent for Isabel Babcock, heir to the Estate of Patricia Babcock in the amount of \$121,445.15 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.

**ACTION:**Policy

  
Matthew Jennings, Treasurer-Tax Collector 1/14/2025

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**MINUTES OF THE BOARD OF SUPERVISORS**

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

Ayes: Medina, Spiegel, Washington, Perez and Gutierrez  
Nays: None  
Absent: None  
Date: January 28, 2025  
xc: Tax Collector

Kimberly A. Rector  
Clerk of the Board

By:   
Deputy

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

FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$ 121,445	\$ 0	\$ 121,445	\$ 0
NET COUNTY COST	\$ 0	\$ 0	\$ 0	\$ 0
SOURCE OF FUNDS: Fund 65595 Excess Proceeds from Tax Sale.			Budget Adjustment:	NO
			For Fiscal Year:	24/25

**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 April 26, 2022 public auction sale. The deed conveying title to the purchasers at the auction was recorded July 7, 2022. 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 19, 2022 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.

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

1. Claim from Thami Clinton, Agent for Isabel Babcock, heir to the Estate of Patricia Babcock based on an Authorization for Agent to Collect Excess Proceeds notarized June 26, 2023, a Spousal Property Order recorded January 10, 2008 as Instrument No. 2008-0013920, an Affidavit to Comply with California Probate Code 13100-13115 notarized June 26, 2023, and a Certificate of Death for Patricia Ann Babcock.

Pursuant to Section 4675 of the California Revenue and Taxation Code, it is the recommendation of this office that Thami Clinton, Agent for Isabel Babcock, heir to the Estate of Patricia Babcock be awarded excess proceeds in the amount of \$121,445.15. 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 of the property.

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

**ATTACHMENT A. Claim Clinton**

  
Cesar Bernal, PRINCIPAL MGMT ANALYST 1/14/2025

  
Aaron Gettis, Chief of Deputy County Counsel 6/10/2024



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

To: Matthew Jennings, Treasurer-Tax Collector

Re: Claim for Excess Proceeds

TC 218 ITEM 581 Parcel Identification Number: 663222010

Assessee: BABCOCK, PATRICIA

Situs: 13825 UNITED RD DESERT HOT SPRINGS CA 92240

Date Sold: April 26, 2022

Date Deed to Purchaser Recorded: July 7, 2022

Final Date to Submit Claim: July 7, 2023

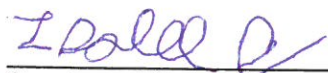
I/We, pursuant to Revenue and Taxation Code Section 4675, hereby claim excess proceeds in the amount of \$ \_\_\_\_\_ from the sale of the above mentioned real property. I/We were the ☐ lienholder(s), ☐ property owner(s) [check in one box] at the time of the sale of the property as is evidenced by Riverside County Recorder's Document No. \_\_\_\_\_; recorded on \_\_\_\_\_. A copy of this document is attached hereto. I/We are the rightful claimants by virtue of the attached assignment of interest. I/We have listed below and attached hereto each item of documentation supporting the claim submitted.

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

If the property is held in Joint Tenancy, the tax sale process has severed this Joint Tenancy, and all Joint Tenants will have to sign the claim unless the claimant submits proof that he or she is entitled to the full amount of the claim, the claimant may only receive his or her respective portion of the claim.

I/We affirm under penalty of perjury that the foregoing is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ at \_\_\_\_\_ County, State



Signature of Claimant

Isabel Babcock

Print Name

66670 1st Street APT A

Street Address

Desert Hot Springs, CA, 92240

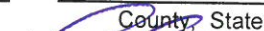
City, State, Zip

323-670-6164

Phone Number

isabelbabcock97@gmail.com

Email Address



Signature of Claimant

Thomi Clinton

Print Name

16431 Avenida Ramada

Street Address

DHS, Ca. 92240

City, State, Zip

760-218-4326

Phone Number

Thomi@trans.health

Email Address

RECEIVED  
2024 APR -9 AM 7:19  
RIVERSIDE COUNTY  
TREAS-TAX COLLECTOR  
(See original for  
Timely postmark)

**AUTHORIZATION FOR AGENT TO COLLECT EXCESS PROCEEDS**

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

As a party of interest (defined in Section 4675 of the California Revenue and Taxation Code), I, the undersigned, do hereby make THAMI CLINTON my agent to apply for and collect the excess proceeds which you are holding and to which I am entitled from the sale of assessment number 663221010 sold at public auction on April 26, 2022. I understand that I AM NOT SELLING MY RIGHT TO THE REFUND, but merely naming an agent for collection purposes for my convenience.

I also understand that the total of excess proceeds available for refund is \$ 121,443.15 and that I have a right to file a claim for this refund on my own, without the help of an agent. For valuable consideration received my agent is appointed to act on my behalf.

Isabel R  
(Signature of Party of Interest)

Isabel Babcock  
(Name Printed)

66670 1st Street #A  
(Address)

STATE OF CALIFORNIA )ss.  
COUNTY OF Riverside

Desert Hot Springs, CA, 92240  
(City/State/Zip)

323-670-6164  
(Area Code/Telephone Number)

On June 26, 2023, before me, Michael W. McFarland, Notary Public, personally appeared Isabel Babcock, 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 forgoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]  
(Signature of Notary)



I, the undersigned, certify under penalty of perjury that I have disclosed to the party of interest, pursuant to Section 4675 of the California Revenue and Taxation Code, the full amount of excess proceeds available and ADVISED HIM OF HIS RIGHT TO FILE A CLAIM ON HIS OWN, WITHOUT THE HELP OF AN AGENT.

THAMI CLINTON  
(Signature of Agent)

THAMI CLINTON  
(Name Printed)

3405 FARRELL DRIVE #208A  
(Address)

STATE OF CALIFORNIA )ss.  
COUNTY OF Riverside

PALM SPRINGS, CA 92262  
(City/State/Zip)

On June 26, 2023, before me, the undersigned, a Notary Public in and for said State, personally appeared Thami Clinton, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

[Signature]  
(Signature of Notary)





## 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 Riverside

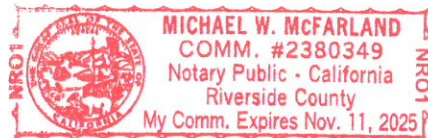
On June 26, 2023 before me, Michael W. McFarland, Notary Public  
(insert name and title of the officer)

personally appeared Fabel Babcock and Thami Clinton,  
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] (Seal)



DE-226

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  
After recording return to:

WILLIAM N. COSGROVE (SBN 107147)  
COSGROVE & COSGROVE, ATTORNEYS AT LAW  
45-120 San Pablo, Suite 2A  
Palm Desert, California 92260  
TELEPHONE NO.: 760-340-6665  
FAX NO. (Optional): 760-779-9487

E-MAIL ADDRESS (Optional):

ATTORNEY FOR (Name): Patricia Babcock

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE  
STREET ADDRESS: 82675 Highway 111  
MAILING ADDRESS: 46-200 Oasis Street  
CITY AND ZIP CODE: Indio, California 92201  
BRANCH NAME: Indio

ESTATE OF (Name): MARVIN BABCOCK aka MARVIN EMERSON BABCOCK

DECEDENT

☒ SPOUSAL ☐ DOMESTIC PARTNER ☐ PROPERTY ORDER

1. Date of hearing: 1/3/08  
Dept.: 1B

Time: 8:45 A.M.  
Room:

## THE COURT FINDS

2. All notices required by law have been given.  
3. Decedent died on (date): 10/19/05  
a. ☒ a resident of the California county named above.  
b. ☐ a nonresident of California and left an estate in the county named above.  
c. ☒ intestate. ☐ testate.  
4. Decedent's ☒ surviving spouse ☐ surviving registered domestic partner  
is (name): Patricia Babcock

## THE COURT FURTHER FINDS AND ORDERS

5. a. ☒ The property described in Attachment 5a is property passing to the surviving spouse or surviving registered domestic partner named in item 4, and no administration of it is necessary.  
b. ☐ See Attachment 5b for further order(s) respecting transfer of the property to the surviving spouse or surviving registered domestic partner named in item 4.  
6. ☐ To protect the interests of the creditors of (business name):  
an unincorporated trade or business, a list of all its known creditors and the amount owed each is on file.  
a. ☐ Within (specify): days from this date, the surviving spouse or surviving registered domestic partner named in item 4 shall file an undertaking in the amount of \$  
b. ☐ See Attachment 6b for further order(s) protecting the interests of creditors of the business.  
7. a. ☒ The property described in Attachment 7a is property that belonged to the surviving spouse or surviving registered domestic partner under Family Code section 297.5 and Probate Code sections 100 and 101, and the surviving spouse's or surviving domestic partner's ownership upon decedent's death is confirmed.  
b. ☐ See Attachment 7b for further order(s) respecting transfer of the property to the surviving spouse or surviving domestic partner.  
8. ☐ All property described in the Spousal or Domestic Partner Property Petition that is not determined to be property passing to the surviving spouse or surviving registered domestic partner under Probate Code section 13500, or confirmed as belonging to the surviving spouse or surviving registered domestic partner under Probate Code sections 100 and 101, shall be subject to administration in the estate of decedent. ☐ All of such property is described in Attachment 8.  
9. ☐ Other (specify):

☐ Continued in Attachment 9.

10. Number of pages attached: 2

Date:

Signature follows last attachment  
JUDICIAL OFFICER

☒ SIGNATURE FOLLOWS LAST ATTACHMENT

Page 1 of 1

Form Approved for Mandatory Use  
Judicial Council of California  
DE-226 (Rev. January 1, 2005)

**SPOUSAL OR DOMESTIC PARTNER PROPERTY ORDER**  
(Probate—Decedent's Estates)

Legal  
Solutions  
& Plus

Family Code, § 297.5;  
Probate Code, § 13656

DOC # 2008-0013920  
01/10/2008 08:00A Fee: 16.00  
Page 1 of 4  
Recorded in Official Records  
County of Riverside  
Larry W. Ward  
Assessor, County Clerk & Recorder



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CASE NUMBER:

INP 021554

FOR COURT USE ONLY

FILED  
SUPERIOR COURT OF CALIFORNIA  
COUNTY OF RIVERSIDE

JAN 03 2008

MOM

Estate of Marvin Babcock aka Marvin Emerson Babcock

Attachment 5a

1. The decedent's undivided one-half community property interest in and to all that real property located at 13825 United Road, Desert Hot Springs, Riverside County, California, also known as Assessor's Parcel Nos. 663-222-010 and 663-222-011, and more legally described as follows:

Lots 154 and 155 of Sunny Sands Estates, Unit #3, as shown by Map on file in Book 30, pages 11, 12, 13, Riverside County Records.

EXCEPTING THEREFROM 50% of all rights to minerals, oil, and gas, as reserved in Deed by Sunny Sands Estates, Inc., recorded April 17, 1957, in Book 2073, page 536, Official Records of Riverside County. The said rights are limited to the minerals, oil and gas which lie more than 100' below surface of land. Sunny Sands Estates, Inc., agrees not to enter the surface of the land for exploitation purposes without consent of majority of owners.

2. The decedent's undivided one-half community property interest in and to all that real property located in the County of San Bernardino, California, also known as Assessor's Parcel No. 628-191-02, and more legally described as follows:

The east one-half of the northwest one-quarter of the northeast one-quarter of the southwest one-quarter of Section 22, Township 1 North, Range 8 East, San Bernardino Base and Meridian, according to Official Records of said County.

3. The decedent's undivided one-half community property interest in and to all that real property located in the County of San Bernardino, California, also known as Assessor's Parcel No. 628-191-08, and more legally described as follows:

The east one-half of the southwest one-quarter of the northeast one-quarter of the southwest one-quarter of Section 22, Township 1 North, Range 11 East, San Bernardino Base and Meridian, according to Official Records of said County.

SPOUSAL PROPERTY ORDER  
Attachment 5a

Estate of Marvin Babcock aka Marvin Emerson Babcock

Attachment 7a

1. The surviving spouse's undivided one-half community property interest in and to all that real property located at 13825 United Road, Desert Hot Springs, Riverside County, California, also known as Assessor's Parcel Nos. 663-222-010 and 663-222-011, and more legally described as follows:

Lots 154 and 155 of Sunny Sands Estates, Unit #3, as shown by Map on file in Book 30, pages 11, 12, 13, Riverside County Records.

EXCEPTING THEREFROM 50% of all rights to minerals, oil, and gas, as reserved in Deed by Sunny Sands Estates, Inc., recorded April 17, 1957, in Book 2073, page 536, Official Records of Riverside County. The said rights are limited to the minerals, oil and gas which lie more than 100' below surface of land. Sunny Sands Estates, Inc., agrees not to enter the surface of the land for exploitation purposes without consent of majority of owners.

2. The surviving spouse's undivided one-half community property interest in and to all that real property located in the County of San Bernardino, California, also known as Assessor's Parcel No. 628-191-02, and more legally described as follows:

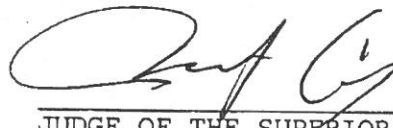
The east one-half of the northwest one-quarter of the northeast one-quarter of the southwest one-quarter of Section 22, Township 1 North, Range 8 East, San Bernardino Base and Meridian, according to Official Records of said County.

3. The surviving spouse's undivided one-half community property interest in and to all that real property located in the County of San Bernardino, California, also known as Assessor's Parcel No. 628-191-08, and more legally described as follows:

The east one-half of the southwest one-quarter of the northeast one-quarter of the southwest one-quarter of Section 22, Township 1 North, Range 11 East, San Bernardino Base and Meridian, according to Official Records of said County.

IT IS SO ORDERED:

Dated January 3, 2008



JUDGE OF THE SUPERIOR COURT

SPOUSAL PROPERTY ORDER  
Attachment 7a



This must be in red to be a  
"CERTIFIED COPY"

Each document to which this certificate is attached  
is certified to be a full, true and correct copy of the  
original on file and of record in my office.

Superior Court of California  
County of Riverside

I. McElvea, Executive Officer

By

DEPUTY

Dated:

11/3/2008



Certification must be in red to be a  
"CERTIFIED COPY"



## STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

## COUNTY OF RIVERSIDE

RIVERSIDE, CALIFORNIA

## CERTIFICATE OF DEATH

3201233000946

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (Given) <b>PATRICIA</b>		3. LAST (Family) <b>BABCOCK</b>	
2. MIDDLE <b>ANN</b>		4. DATE OF BIRTH mm/dd/yyyy <b>04/16/1937</b>	
5. AGE Yrs. <b>74</b>		6. SEX <b>F</b>	
7. BIRTH STATE/FOREIGN COUNTRY <b>CANADA</b>		8. HOURS (24 hours) <b>0444</b>	
9. EDUCATION—Highest Level/Degree (see worksheet on back) <b>BACHELOR</b>		10. MARITAL STATUS/SROP (at Time of Death) <b>WIDOWED</b>	
11. WAS DECEDENT HISPANIC/LATINO/SPANISH? (If yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		12. DECEDENT'S RACE—Up to 3 races may be listed (see worksheet on back) <b>CAUCASIAN</b>	
13. USUAL OCCUPATION—Type of work for most of life. DO NOT USE RETIRED <b>REGISTERED NURSE</b>		14. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>HOSPITAL</b>	
15. YEARS IN OCCUPATION <b>50</b>		16. DECEDENT'S RESIDENCE (Street and number, or location) <b>13825 UNITED ROAD</b>	
17. CITY <b>DESERT HOT SPRINGS</b>		18. COUNTY/PROVINCE <b>RIVERSIDE</b>	
19. ZIP CODE <b>92240</b>		20. STATE/FOREIGN COUNTRY <b>CALIFORNIA</b>	
21. INFORMANT'S NAME, RELATIONSHIP <b>SUSAN MERRITT, DAUGHTER</b>		22. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>13825 UNITED ROAD, DESERT HOT SPRINGS, CA 92240</b>	
23. NAME OF SURVIVING SPOUSE/SROP—FIRST <b>-</b>		24. MIDDLE <b>-</b>	
25. LAST (BIRTH NAME) <b>-</b>		26. BIRTH STATE <b>CANADA</b>	
27. NAME OF FATHER/PARENT—FIRST <b>LORNE</b>		28. MIDDLE <b>ERNEST</b>	
29. LAST <b>LOWRY</b>		30. BIRTH STATE <b>CANADA</b>	
31. NAME OF MOTHER/PARENT—FIRST <b>GLADYS</b>		32. MIDDLE <b>HELEN</b>	
33. LAST (BIRTH NAME) <b>HARRISON</b>		34. BIRTH STATE <b>CANADA</b>	
35. DISPOSITION DATE mm/dd/yyyy <b>01/31/2012</b>		36. PLACE OF FINAL DISPOSITION <b>RESIDENCE OF SUSAN MERRITT 13825 UNITED ROAD, DESERT HOT SPRINGS, CA 92240</b>	
37. TYPE OF DISPOSITION <b>CR/RES</b>		38. SIGNATURE OF EMBALMER <b>NOT EMBALMED</b>	
39. LICENSE NUMBER <b>-</b>		40. NAME OF FUNERAL ESTABLISHMENT <b>ROSE MORTUARY &amp; CREMATORY</b>	
41. SIGNATURE OF LOCAL REGISTRAR <b>CAMERON KAISER, MD</b>		42. DATE mm/dd/yyyy <b>01/30/2012</b>	
43. PLACE OF DEATH <b>DESERT REGIONAL MEDICAL CENTER</b>		44. IF HOSPITAL, SPECIFY ONE <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA <input type="checkbox"/> Hospice <input type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
45. COUNTY <b>RIVERSIDE</b>		46. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>1150 NORTH INDIAN CANYON DRIVE</b>	
47. CITY <b>PALM SPRINGS</b>		48. TIME INTERVAL BETWEEN ORDER AND DEATH <b>2 DAYS</b>	
49. CAUSE OF DEATH Enter the chain of events—Diseases, injuries, or complications—that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. <b>(A) RESPIRATORY FAILURE</b> <b>(B) END STAGE CHRONIC OBSTRUCTIVE PULMONARY DISEASE</b>		50. DEATH REPORTED TO CORONER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
51. IMMEDIATE CAUSE (Final disease or condition resulting in death) <b>(C) END STAGE CHRONIC OBSTRUCTIVE PULMONARY DISEASE</b>		52. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
53. UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST <b>(D) ATRIAL FIBRILLATION</b>		54. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
55. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>ATRIAL FIBRILLATION</b>		56. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
57. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.) <b>NO</b>		58. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
59. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: <b>01/09/2012</b> Decedent Last Seen Alive: <b>01/23/2012</b>		60. SIGNATURE AND TITLE OF CERTIFIER <b>ELBER S. CAMACHO, M.D.</b>	
61. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>ELBER S. CAMACHO, M.D. 1180 NORTH INDIAN CANYON DRIVE, PALM SPRINGS, CA 92262</b>		62. DATE mm/dd/yyyy <b>01/30/2012</b>	
63. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH: <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Investigation <input type="checkbox"/> Could not be determined <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		64. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
65. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) <b>-</b>		66. INJURY DATE mm/dd/yyyy <b>-</b>	
67. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury) <b>-</b>		68. HOUR (24 hours) <b>-</b>	
69. LOCATION OF INJURY (Street and number, or location, and city, and zip) <b>-</b>		69. SIGNATURE OF CORONER / DEPUTY CORONER <b>-</b>	
70. DATE mm/dd/yyyy <b>-</b>		71. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER <b>-</b>	
72. STATE REGISTRAR <b>A</b>		73. CENSUS TRACT <b>-</b>	

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.

JUN 19 2023

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.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CARIVERS02



# AFFIDAVIT

to comply with California Probate Code §§ 13100-13115

1. The undersigned hereby declare(s):
2. Patricia Babcock [We] make this declaration to induce [holder of property] to transfer to [me/us] the described property pursuant to California Probate Code §§ 13100-13115.
3. Patricia Babcock [Name of decedent] died at Desert Regional Medical Center, while a resident of the City of Desert Hot Springs, County of Riverside, California, on or about, 02/24 2018, leaving [a/no] will.
4. At least 40 days have elapsed since the death of the decedent, as shown in a certified copy of the decedent's death certificate attached to this affidavit or declaration.
5. No proceeding is now being or has been conducted in California for administration of the decedent's estate.
6. The current gross fair market value of the decedent's real and personal property in California, excluding the property described in California Probate Code § 13050 does not exceed one hundred
7. fifty thousand dollars (\$150,000) and includes the following: [Describe the property to be transferred with sufficient detail to be identifiable.]

13825 United Road, Desert Hot Springs CA 92240  
is the address of the property

8. The affiant or declarant is the successor of the decedent [as defined in California Probate Code § 13006] to the decedent's interest in the described property.
9. No other person has a superior right to the interest of the decedent in the described property.
10. [My/Our] name(s), address(es), relationship(s) to the decedent and age(s) are as follows: [List]

Isabel Babcock, 66670 1st Street A Desert Hot Springs  
CA 92240, granddaughter, 26

11. The affiant or declarant requests that the described property be paid, delivered, or transferred to the affiant or declarant.
12. Patricia Babcock [We jointly and severally] agree to hold [property holder] free and harmless and indemnify [him/her] against all liability, claims, demands, loss, damages, costs and expense whatsoever that [he/she/it] may incur because of the transfer, payment, or delivery to [me/us] of the property.
13. The affiant or declarant affirms or declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: 6/22/23

Signature: Isabel

Dated: \_\_\_\_\_

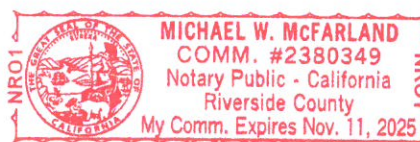
Signature: \_\_\_\_\_

Subscribed and sworn to me before this 26<sup>th</sup> day of June, 20 23

[Signature]  
Notary Public in and for said County and State

My Commission expires on: 2025.11.11

**Please see attached**



AFFIDAVIT

To comply with California Probate Code §§ 13100-13115



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 26<sup>th</sup> day of June, 2023,  
by Frederick Babcock, proved to  
me on the basis of satisfactory evidence to be the persons who appeared before me.



(Seal)

Signature [Signature]