

County of El Dorado

360 FAIR LANE PLACERVILLE, CALIFORNIA 95667 (530) 621-5487

> BOB TOSCANO Assistant Auditor-Controller

JOE HARN, CPA Auditor-Controller

January 17, 2013

Larry R Upton Carolyn A Upton P O Box 92 Mt Aukum, CA 95656

Re: Notice of Public Hearing for Excess Proceeds Claim from the Sale of Tax Defaulted Property of November 04, 2011 APN: 046-132-35-100 Default No.: 090039 Excess Proc. Available: \$23.61

Please be advised that the Auditor-Controller will present to the Board of Supervisors only valid original claims for excess proceeds meeting the requirements of Revenue and Taxation (R&T) Code §4675 or other applicable authority. The Auditor-Controller will present all valid claims with a recommendation for distribution to a duly noticed Board of Supervisor's public hearing.

The Auditor-Controller will notify all claimants submitting valid claims of the scheduled public hearing at least 20 calendar days in advance. The notice will include the recommended distribution and copies of any other valid claims for the same property. Parties with valid claims are not required to attend the public hearing; however, you may do so if you wish. Any person(s) interested may attend the public hearing.

Following the determination of distribution for valid claims at the public hearing, the Auditor-Controller will notify valid claimants of the action taken by the Board of Supervisors. Pursuant to R&T Code §4675(b), any action or proceeding to review the decision of the Board of Supervisors must be commenced within 90 calendar days after the date of the Board of Supervisors decision. County warrants will be issued no sooner than 90 days after the date of the decision of the Board of Supervisors.

Please contact Sally Zutter, Accounting Division Manager, or Joy Shaw at the address above, or at 530/621-5470 with any questions.

NOTICE OF HEARING

The El Dorado County Board of Supervisors will hold a public hearing on February 12, 2013, beginning at 9:00 o'clock a.m., regarding the determination of distribution of the excess proceeds for APN 046-132-35-100 from the Sale of Tax Defaulted Property dated November 04, 2011. The hearing will be held at the Board of Supervisors chambers located in Building A, 330 Fair Lane, Placerville, California, 95667. All claims, proof, supporting documents, and relevant information, submitted by valid claimants meeting the requirements of R&T Code §4675, will be forwarded to the Board of Supervisors office prior to the public hearing.

Claimant(s) Names and Addresses:

Larry R Upton Carolyn A Upton P O Box 92 Mt Aukum, CA 95656

			Recommended
<u>Claimant</u>	<u>Claimant Type</u>	<u>\$ Claimed</u>	Distribution
Larry R & Carolyn A Upton	Person with Title of Record	23.61	23.61
Unclaimed	R&T Code §4674	-0-	-0-

Treasurer and Tax Collector E C. L. Raffety, C.P.A. E



360 Fair Lane, Placerville, Calif, 95667 Tax Collector (530) 621-5800

CLAIM FOR EXCESS PROCEEDS FROM THE SALE OF TAX DEFAULTED PROPERTY

El Dorado County Auditor-Controller Mail to: Property Tax Division - Attn: Excess Proceeds 360 Fair Lane Placerville CA 95667

Assessor Parcel Number: <u>046-132-35-100</u> Default Number: <u>0900 38</u>

Date of Tax Sale: <u>11-4 2011</u> Amount Claimed: **\$ ==== 23 .61**

I, the undersigned claimant, request an award from the excess proceeds resulting from the sale of the above-referenced property. I am filing this claim within one year of the recordation of the Tax Collector's Tax Deed to purchaser.

I claim my status as a party of interest pursuant to §4675 of the California Revenue and Taxation Code (R&T Code). I hereby state that I am a rightful claimant as (check one):

Lienholder of record prior to recording of tax deed to purchaser.

Assignee of a lienholder of record prior to recording of tax deed to purchaser.

Any person(s) with title of record to all or any portion of the property prior to the recordation of the tax deed to the purchaser.

If so, list ownership type (check one):

- Joint Tenancy
- Tenancy in Common
- □ Sole Owner
- Other (please list):

If so, list *percentage of ownership* for each claimant to this claim (attach additional list of names, as necessary):

Claimant 1 Name: Laur R Upton Percentage of Ownership: <u>50</u> % Claimant 2 Name: CavolynAupton Percentage of Ownership <u>50</u> %

Assignee of any person(s) with title of record to all or any portion of the property prior to the recordation of the tax deed to the purchaser.

If so, list *ownership type* (check one):

- Joint Tenancy
- Tenancy in Common
- Sole Owner
- Other (please list):

If so, list *percentage of ownership* for each claimant to this claim (attach additional list of names, as necessary):

Claimant 1 Name: LAWYR MISLOW Percentage of Ownership: 50 % Claimant 2 Name: Courdyn A up Fu Percentage of Ownership 50° %

I base my status and right to claim on the attached documentation (check all that apply). Please review El Dorado County Resolution 342-2003. (Enclose copies of supporting documentation):

Copy of claimant's trust deed or other evidence of lien or security interest. Included is information regarding:

• the original amount of the lien or interest

- the total amount of payments received reducing the original amount of the lien or interest
- the amount still due and payable as of the date of the sale of the tax-defaulted property by the Tax Collector (including a schedule of any calculations)
- any attempts to foreclose or collect on the loan

Deeds

- □ Wills and/or death certificate(s)
- Court order(s)
- Escrow documents
- Property tax bills mailed to claimant
- □ Canceled checks showing payment of taxes
- Other (please list):

If this claim is an assignment, additional items need to be submitted with this claim. All assignment documentation submitted must be originals. Please review R&T Code §4675 and El Dorado County Resolution 342-2003 for further details.

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

Executed this 7 day	of TAN	, 20 <u>13</u> at <u>1/10</u>	or ville CA
(day)	(month)	(year)	(city and state)
Signature of Claimant(s):	Lang Kupton	~ Caroly	n A-Upton
(If more than one claimant,	each must sign)	(Claimant signatu	re(s) must be notarized)
Print Name(s):	Larvy R 14	ohn, Chroli	
Daytime Phone Number:	303-1981 936	54 - 555	30 651 3814
Mailing Address:	PO. Box 9	2	
Mailing City, State, Zip:	MT Aybu	nc CA 95	656
Notary: Attach n SEE, -)	otary statement(\$) HACNED CALIFOR	NIA NOTARY FORM	Q.U.
TC13C.doc (05/2009)		/	JU Page 2 of 2