JO ANNA CANZONERI MCCORMICK

995 EAST GREEN STREET #324

PASADENA CALIFORNIA 91106

CELL 626 417 3861

EMAIL BLONDEBLUE@OUTLOOK.COM

AUGUST 20, 2013

RE: NOTICE OF CLAIM AND

 LETTER FOR REQUEST AND DEMAND FOR PAYMENT

DEAR GENTLEMEN:

THIS LETTER IS TO INFORM AND ADVISE OF MY (JO ANNA CANZONERI

MCCORMICK ) NOTICE OF CLAIM AND LETTER FOR REQUEST FOR PAYMENT FOR PAYMENT

ON PRODUCT

ERSONALLY FEEL THAT AFTER YOUR COMPANY RECEIVED MY

CONTRACT (CONFIDENTIAL AGREEMENT AND DESCRIPTION OF PRODUCT

FOR MY PRODUCT YOUR COMPANY RESEACHED, PRODUCED ,MANUFACTURE, MARKETED AND

 SOLD MY PRODUCT

I PERSONALL REQUEST AND DEMAND FOR PAYMENT OF MY PRODUCT

I PERSONALLY MAY HAVE TO TAKE FURTHER ACTION IF PAYMENT IF NOT PAID

PLEASE CONTACT ME AT MY EMAIL BLONDEBLUE@OUTLOOK.COM OR CELL PHONE

626 417 3861

THANKS

JO ANNA CANZONERI MCCORMICK

**JO ANNA CANZONERI MCCORMICK**

**995 EAST GREEN STREET #324**

**PASADENA, CALIFORNIA 91801**

**EMAIL  BLOBLUE101@HOTMAIL.COM**

**626 417 3861**

**AUGUST 20, 2013**

 **RE:  NOTICE OF CLAIM (CLAIM OF OWNERSHIP)

THIS LETTER IS TO ADVISE AND INFORM YOU OF MY NOTICE OF CLAIM**

**CLAIM OF OWNERSHIP),**

**I (JO ANNA CANZONERI MCCORMICK) PERSONALLY AM CLAIMING ROBBERY EMBEZZMENT THEFT**

**GRAND LACARY AND FRAUD**

**ENCLOSED AND ATTACHED IS THE NOTICE OF CLAIM

PLEASE CONTACT ME AS SOON AS POSSIBLE AT 626 417 3861

SINCERELY

JO ANNA CANZONERI MCCORMICK**

**NOTICE OF CLAIM (CLAIM OF OWNERSHIP)

NAME OF CLAIMANT     JO ANNA CANZONERI MCCORMICK
                                        JOHN DOES 1-1000
                                        JANE DOES 1-1000

MAILING ADDRESS   342 NORTH ATLANTIC BOULEVARD
                                   ALHAMBRA CALIFORNIA 91801

LIEN NAMES**

**JOHN DOES 1-1000
                          JANE DOES 1-1000

     NOTICE OF CLAIM INFORMATION

DATE OF INCIDENT:  UNKNOWN DATE

TIME OF INCIDENT    UNKNOWN DATE

LOCATION OF PROPERTIES   UNITED STATES OF AMERICA AND OTHER COUNTRYS

DESCRIBTION OF REAL ESTATE PROPERTIES (MAILING ADDRESSES) AND PERSONAL
PROPERTY:  UNITED STATES OF AMERICA AND OTHER COUNTRYS
 HEIR OWNER BENEFENICARY
REAL ESTATES PROPERTY (LAND) AND PERSONAL PROPERTY OR ITS ADDRESSES IS COMMONLY KNOWN**

**CLAIMANTS PERSONALLY AM CLAIMING FULL OWNERSHIP OF THE ABOVE**

**MENTIONED ESTATES ON THE PERSONAL PROPERTY AND REAL ESTATE PROPERTY**

**CLAIMANTS PERSONALLY ARE CLAIMING ROBBERY EMBEZZMENT THEFT**

**GRAND LACARY AND FRAUD**

**CLAIMANTS HAVE MADE DEMAND FOR PAYMENT OF THIS LIABILITY, BIT IT REMAINS UNPAID THEREFORE CLAIMANTS HAVE CLAIMING OWNERSHIP OWNER HEIR AND BENEFICIARY TO ALL PERSONAL PROPERTIES AND REAL ESTATE PROPERTY SUCH AS BANK ACCOUNTS PROPERTY OIL STOCK MUTUAL BONDS SECURITIES BONDS SAVING ACCOUNTS CHECKING ACCOUNTS CD ATM CARDS PATENTS COPYRIGHTS TRADEMARKS AND ANY AND ALL OTHER ITEMS THAT BELONG TO THE ESTATES

I PERSONALLY AM CLAIMING A LIEN IN FACOR ON ALL PROPERTIES PERSONAL PROPERTIES AND REAL ESTATE PROPERTIES ON ANY AND ALL OF THE PROPERTIES IN THE UNITED STATES OF AMERICA AND OTHER COUNTRYS

DESCRIBE THE INDEBTEDMESS OBLIGATIONS INJURY DAMAGE OR LOSS INCURRERED AS A RESULT OF THE INCIDENT  OWNERSHIP OWNER HEIR AND BENEFICIARY TO ANY AND ALL OF THE ESTATES LISTED ABOVE

STATE THE CIRCUMSTANCES THAT GAVE RISE TO THIS CLAIM (STATE THE FACTS THAT SUPPORT YOUR CLAIM AND WHY YOU BELIEVE THE COURT OR ANOTHER JUDICIAL BRANCH ENTITY IS REPONSIBLE FOR THE ALLEGED DAMAGES MONETARY LOSES AND INJURIES

IF KNOWN PROVIDE THE NAME OF THE OFFICIAL OR EMPLOYEE WHO ALLEGEDLY CAUSED THE IMJURY DAMAGE AND OR LOSS (IF THERE IS MORE THAN ONE OFFICIAL OR EMPLOYEE NAME EACH)  IF YOU NEED MORE SPACE, PLEASE ATTACH ADDITIONAL SHEETS OF PAPER

                              PAGE TWO

IF THE TOTAL AMOUNT OF YOUR CLAIM:  SPECIFIED AMOUNT UNKNOWN AT THIS TIME

AMOUNT OF DAMAGES AS OF THIS DATE  SPECIFIED AMOUNT UNKNOWN AT THIS TIME

ESTIMATED AMOUNT OF FUTURE DAMAGES  SPECIFIED AMOUNT UNKNOWN AT THIS TIME

TOTAL AMOUNT CLAIMED FOR LOSES INJURIES AND DAMAGES  SPECIFIED AMOUNT UNKNOWN AT THIS TIME CLAIMANTS IS CLAIMING TOTAL AMOUNT OF INJURIES ARE PUNITIVE DAMADES COMPENSATORY DAMAGES AND EXEMPLARY DAMAGES  SPECIFIED AMOUNT UNKNOWN AT THIS TIME

IF THE AMOUNT OF YOUR CLAIM IS MORE THAN $10,000.00 INDICATE WHETHER YOUR CLAIM WOULD BE A LIMITED + CIVIL CASE OR AN UNLIMITED CIVIL CAS (CHECK OUT)
SPECIFIED AMOUNT UNKNOWN AT THIS TIME

STATE HOW THE AMOUNT OF YOUR CLAIM WAS COMPUTED (INCLUDE COPIES OF SUPPORTING DOCUMENTATION SUCH AS FORECLOSURE STATEMENTS BILLING STATEMENT INVOICES RECEIPTS AND ESTIMATES

LIST THE NAMES ADDRESS AND TELEPHONE NUMBERS OF ALL WITNESSES TO THE INCIDENTS

PROVIDE ANY ADDITIONAL INFORMATION THAT MIGHT BE HELPFUL IN CONSIDERING THIS CLAIM

DATED SIGNED    AUGUST 20, 2013

CLAIMANT NAME   JO ANNA CANZONERI MCCORMICK**