

WILL OF [Full Name of Person Making the Will]

I, [Full Name of Person Making the Will], a resident of [City, State], hereby make this Will and revoke all prior Wills and Codicils.

1. PERSONAL INFORMATION:

a. I was born on [Date of Birth] in [Place of Birth]

Alternatives regarding Marriage:

b. I am married to [Name of Spouse], whom I will refer to as "my spouse". We were married on [Date of Marriage] in [Place of Marriage]. IF SEPARATED ADD We have been separated since [Date or Year of Separation, and if by court order or agreement, add pursuant to order of the name of court Court on date].

OR IF NEVER MARRIED

b. I am not married and I have never been married.

OR, IF PREVIOUSLY MARRIED

b. I am not currently married but I was previously married to [Name of Last Spouse in YEAR OF MARRIAGE] and the marriage ended by [STATE WHICH: Death, Divorce, or Annulment] in [Year].

c. I have _____ NUMBER OR WORD "NO" living children. IF YOU DO HAVE LIVING CHILDREN LIST NAMES AND BIRTH DATES OF ALL CHILDREN, NATURAL OR ADOPTED. IF ANY OF YOUR CHILDREN HAVE DIED AND THEY LEFT A CHILD GIVE THE NAME OF DECEASED CHILD AND THE AND NAME OF EACH OF HIS OR HER LIVING CHILDREN

d. In the event I am the sole surviving parent of minor children, then I appoint name of a person to serve as their Guardian. If s/he is unable or unwilling to serve, I appoint name of a different person as Alternate Guardian.

2. BENEFICIARIES: I give my property to the following persons:

All to my spouse.

or

One-half (or other percentage) to my spouse and the balance to name of a person or charity

or

One-third (or other percentage) to my spouse and the balance to my children, equally and their issue, per stirpes
(per stirpes means: if your child has pre-deceased you and that person has children, then those children receive the amount that was allotted to their parent, equally divided between them.)

or

All to my children, equally, and their issue, per stirpes.

or

To: list your beneficiaries and the percentages or amounts allocated to each.

If any beneficiary under this Will does not survive me by 30 days, then I shall be deemed to have survived such person.

3. PERSONAL REPRESENTATIVE OR EXECUTOR: I appoint name of a person as Executor of my Will, and if s/he is unable or unwilling to serve, then I name of a different person as alternate Executor. My Executor and alternate shall have all powers granted by applicable laws of my state to carry out all provisions of this Will, may use provisions and procedures for the simplified handling of estates, may hold in trust the share of any minor beneficiary until s/he reaches age 18, and shall not be required to post a bond.

I, _____ [Your Printed Name], hereby sign this Will at _____ [City and State] on this _____ day of _____, 20__

_____ [signature]

_____ [Your Typed Name]

WITNESSES

GET THREE PEOPLE, WHO ARE ALL THERE AT THE SAME TIME TO SEE YOU SIGN THE WILL, TO IMMEDIATELY SIGN THIS ATTESTATION. A WILL THAT IS NOT PROPERLY WITNESSED IS NOT VALID! **The witnesses cannot be named in the will.**

Each of us hereby states, under penalties of perjury, that on this _____ day of _____, 2__, at _____ [Name of City, State] we observed _____ [Full Name of Person Making the Will] who we know or who otherwise proved his/her identity to us, declare the above document to be his/her Will. S/he then asked us to serve as his/her witnesses and then signed the document in our presence. S/he appeared to be an adult, of sound mind and memory, and acting of his/her own free will, and not under any force or duress. We are now, immediately after s/he signed the Will, signing our names in his/her presence.

_____ [Signature of Witness #1]

_____ [Printed name of Witness #1]

_____ [Address of Witness #1]

_____ [Signature of Witness #2]

_____ [Printed name of Witness #2]

_____ [Address of Witness #2]

_____ [Signature of Witness #3]

_____ [Printed name of Witness #3]

_____ [Address of Witness #3]\

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