

LAST WILL AND TESTAMENT OF

I, _____, a resident of the State of Arizona, declare

ARTICLE I – DECLARATION

I declare that I am of legal age to make this Will and am of sound mind and memory. I am unmarried/married (circle one) and have the following children (if any):

_____.

ARTICLE II – APPOINTMENT OF PERSONAL REPRESENTATIVE

I appoint _____ (name) as Personal Representative of this Will. If this person is unable or unwilling to serve, then I appoint _____ (alternate).

ARTICLE III – PAYMENT OF DEBTS AND EXPENSES

I direct that all my just debts, funeral expenses, and expenses of administering my estate be first paid from my estate.

ARTICLE IV – DISPOSITION OF PROPERTY

I give, devise, and bequeath my estate as follows:

A) Specific Bequests:

1. To _____, I bequeath: _____
2. To _____, I bequeath: _____
3. To _____, I bequeath: _____

B) Residuary Estate:

I give all the rest, residue, and remainder of my estate, real and personal, to _____ (name), to be theirs absolutely and forever. If this beneficiary does not survive me, I give the residue to _____.

ARTICLE V – GUARDIANSHIP

If I am the parent or legal guardian of minor children at the time of my death, I appoint _____ (name) as guardian of the person and estate of such minor children. If this person is unable or unwilling to serve, then I appoint _____ (alternate).

ARTICLE VI – NO CONTEST CLAUSE

If any beneficiary under this Will contests or attacks this Will or any of its provisions, any share or interest in my estate

given to that person under this Will shall be forfeited and become part of the residue of my estate.

ARTICLE VII – GOVERNING LAW

This Will shall be governed by and construed in accordance with the laws of the State of Arizona.

ARTICLE VIII – SIGNATURE AND WITNESSES

IN WITNESS WHEREOF, I have hereunto subscribed my name, this ____ day of _____, _____.

Testator's Signature

Witnesses:

1. Name: _____
Address: _____
Signature: _____

2. Name: _____
Address: _____
Signature: _____

3. Name: _____
Address: _____
Signature: _____

NOTARY ACKNOWLEDGEMENT

State of Arizona
County of _____

Subscribed, sworn to, and acknowledged before me by _____, the Testator,
this ____ day of _____, _____.

Notary Public
My commission expires: _____

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