

LAST WILL AND TESTAMENT

I,

, being of sound mind and legal age, declare this to be my Last Will and Testament.

ARTICLE I – IDENTIFICATION

I am a resident of the State of Washington. I am married to _____, and have the following children: _____.

ARTICLE II – APPOINTMENT OF EXECUTOR

I hereby nominate, constitute, and appoint _____ as Executor of this Will. If the named Executor is unable or unwilling to serve, I appoint _____ as alternate Executor.

ARTICLE III – PAYMENT OF DEBTS AND EXPENSES

I direct my Executor to pay all my just debts, funeral expenses, and expenses of administering my estate as soon after my death as practicable.

ARTICLE IV – DISPOSITION OF PROPERTY

I give, devise, and bequeath my estate as follows: 1. To my spouse, _____, I give: _____. 2. To my children, listed above, I give: _____. 3. To the following individuals or organizations, I give: _____. 4. Residue and remainder of my estate, I give to: _____.

ARTICLE V – GUARDIANSHIP

If at my death I have any minor children, I nominate _____ as Guardian of the person and estate of such minor children.

ARTICLE VI – TAXES

All estate, inheritance, and succession taxes payable by reason of my death shall be paid by my Executor out of my residuary estate without apportionment.

ARTICLE VII – OMISSION

If I have failed to provide for any of my heirs or devisees named or unnamed herein, such omission is intentional.

ARTICLE VIII – SIMULTANEOUS DEATH

If my spouse and I die simultaneously or under circumstances making it difficult to determine who died first, I direct that my spouse shall be deemed to have predeceased me.

ARTICLE IX – GOVERNING LAW

This Will is executed in, and shall be governed by and construed under the laws of the State of Washington.

ARTICLE X – SEVERABILITY

If any provision of this Will is declared invalid or unenforceable, the remaining provisions shall remain in full force and effect.

ARTICLE XI – NO CONTEST CLAUSE

If any beneficiary contests 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 shall become part of the residue of my estate.

TESTATOR'S SIGNATURE

WITNESS #1 SIGNATURE

WITNESS #2 SIGNATURE

Signature: _____ Signature: _____ Signature: _____

Print Name: _____ Print Name: _____ Print Name: _____

Date: _____ Date: _____ Date: _____

ensure this document meets individual needs and circumstances.

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