VIRGINIA SELF-PROVING AFFIDAVIT

STATE OF VIRGINIA

COUNTY/CITY OF _____

Before me, the undersigned authority, on this day personally appeared

______, and ______, known to me to be the testator and the witnesses, respectively, whose names are signed to the attached or foregoing instrument and, all of these persons being by me first duly sworn, _______, the testator, declared to me and to the witnesses in my presence that said instrument is his last will and testament and that he had willingly signed or directed another to sign the same for him, and executed it in the presence of said witnesses as his free and voluntary act for the purposes therein expressed; that said witnesses stated before me that the foregoing will was executed and acknowledged by the testator as his last will and testament in the presence of said witnesses who, in his presence and at his request, and in the presence of each other, did subscribe their names thereto as attesting witnesses on the day of the date of said will, and that the testator, at the time of the execution of said will, was over the age of eighteen years and of sound and disposing mind and memory.

Testator's Signature _____

Witness's Signature _____

Print Name _____

Witness's Signature _____

Print Name _____

NOTARY ACKNOWLEDGMENT

Subscribed, sworn to and acknowledged before me b	y, the
Testator and subscribed and sworn to before me by _	, and
, this day of	, 20
, this day of	, 20

Notary Signature _____

Print Name

e

Official Capacity of Officer

(Seal)