## **ARIZONA SELF-PROVING AFFIDAVIT**

l,	, the testator, sign my name to this instru	ment this day of
willingly, or willingly di voluntary act for the p	,, and being first duly sworn, do dec that I sign and execute this instrument as nated another to sign for me, that I execute it urposes expressed in that document and the and mind and under no constraint or undue in	as my free and at I am eighteen years
Testator's Signature	·	
this instrument being the testator signs and willingly, or willingly di presence and hearing and that to the best of	first duly sworn and do declare to the under executes this instrument as his/her will and rects another to sign for him/her, and that er of the testator, signs this will as witness to four knowledge the testator is eighteen year no constraint or undue influence.	signed authority that I that he/she signs it each of us, in the the testator's signing
Witness's Signature		
Witness's Signature		
	NOTARY ACKNOWLEDGMENT	
The State of County of		
testator, and subscrib	and acknowledged before me byed and sworn to before me by , witnesses, this day of	and
Notary Signature		
Official Capacity of (	Officer	(Seal

