

RHODE ISLAND SELF-PROVING AFFIDAVIT

State of _____ }

County of _____ }

I / We, _____, whose names are signed to the foregoing instrument, being first duly sworn, do hereby declare to the undersigned authority that the Settlor(s) signed and executed the instrument as his/her _____ [Name of Document] and that he/she signed willingly, and that he/she executed it as his/her free and voluntary act for the purposes therein expressed, and that each of the individuals, in the presence of the Settlor(s) was at the time eighteen (18) or more years of age, of sound mind and under no constraint or undue influence.

Individual's Signature _____ Date _____

Witness Signature _____ Date _____

Witness Signature _____ Date _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

NOTARY ACKNOWLEDGMENT

On this ____ of _____, 20____, personally appeared the above-named _____ and acknowledged the foregoing to be (his/her) free act and deed, before me.

Subscribed and sworn to before me on the day and date first above written,

My Commission Expires: _____

Notary Public

Print _____

(Seal)

