# SELF-PROVING AFFIDAVIT

On the date written below, *(testator’s name)* declared to us that the foregoing instrument, consisting of *(number of pages)* pages, including the page signed by us as witnesses, was *(his/her)* Will and requested us to act as witnesses to it. *(testator’s name)* thereupon signed this Will in our presence, all of us being present at the same time. We then, at *(his/her)* request, in *(his/her)* presence and in the presence of each other, subscribed our names as witnesses.

We understand that this instrument is the Will of *(testator’s name)*. *(He/She)* appeared to us to be over eighteen (18) years of age and of sound mind. We have no knowledge of any facts indicating that this Will or any part of it was procured by duress, menace, fraud, or undue influence.

Executed on

*(date)*, at

*(city)*,

*(state*). We declare under penalty of perjury under the laws of the State of *(state*) that the foregoing is true and correct.

Residing at

Residing at

# NOTARY ACKNOWLEDGMENT

|  |  |  |
| --- | --- | --- |
| State of | ) |  |
|  | ) | ss. |
| County of | ) |  |

On before me, , (insert name and title of the officer) personally appeared , who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of

that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

Signature (Seal)

My Commission Expires:

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