LAST WILL AND TESTAMENT OF

	BE IT KNOWN that I,		, a resident of
		, County o	of , in the State of
and T	estament expressly revoking	_	nind, do make and declare this to be my Last Will s and Codicils at any time made.
I.	PERSONAL REPRES	SENTATIVE:	
this Po	I appoint , as Persona ersonal Representative is un	_	of of this my Last Will and Testament and provide if to serve then I appoint
	1	of	,
provis Person	ions of this Will and pay m	ny just debts, obliga be required to pos	Representative shall be authorized to carry out all ations and funeral expenses. I further provide my t surety bond in this or any other jurisdiction, and e unless required by law.
II.	GUARDIAN:		
	In the event I shall die a	_	of minor children, then I appoint ardian of said minor children. If this named
	lian is unable or unwilling t ernate Guardian.	to serve, then I app	point
III.	BEQUESTS:		
follow		ent of all my just of	debts, my property be bequeathed in the manner
			Testator's Initials
		Page	of .

Execute and attest before a notary.

Caution: Louisiana residents should consult an attorney before preparing a will.

	Testator's Initials	
Page	of nis product is intended for informational use only and product was not prepared by a person licensed to pra-	

(year), to this my Last Will and Testament. **Testator Signature** IV. WITNESSED: The testator has signed this will at the end and on each other separate page, and has declared or signified in our presence that it is his/her last will and testament, and in the presence of the testator and each other we have hereunto subscribed our names this day of (year). Witness Signature Address Witness Signature Address Witness Signature Address **ACKNOWLEDGMENT** State of County of _____, and ____ the testator and the witnesses, respectively, whose names are signed to the attached and foregoing instrument, were sworn and declared to the undersigned that the testator signed the instrument as his/her Last Will and Testament and that each of the witnesses, in the presence of the testator and each other, signed the will as witnesses. Testator: _____ Witness: Witness: On before me, appeared personally known to me (or 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. WITNESS my hand and official seal. Known Produced ID Affiant Type of ID___ (Seal) Page _

IN WITNESS WHEREOF, I have hereunto set my hand this

day of