Arkansas Last Will and Testament

l,	, of	the City of			
County of		, and Sta	ate of Arkansa	as, declare this	to be
my Last Will and Te	estament and hereby	revoke all of m	ny prior wills a	nd codicils.	
PERSONAL REPR	ESENTATIVE. I no	ominate			
(Insert name of	person or eligi	ible financial	institution)	with addres	s at
	to serve as	s my personal	representativ	e to administe	er the
provisions of this w	īll.				
-	does not serve, I n				
	person or eligi			with addres	s at
	to serve as p	personal repres	sentative.		
equally divided amo	l give all my real propong ong my children who n not valid without si	survive me; exc	•		
I leave the following	g specific real proper	ty to the perso	on(s) named:		
(name)	(description of item	n) (signature)			
					

PERSONAL AND HOUSEHOLD ITEMS. I give all my furniture, furnishings, household items, personal automobiles and personal items to my spouse, if living; otherwise they



•	•	children who survive me; except as specifically ot valid without signature.)
I leave the foll	owing specific items to th	ne person(s) named:
(name)	(description of iten	n) (signature)
following cash stated. If I fail	gift(s) to the named cha to sign this provision, r	ANIZATIONS OR INSTITUTIONS. I make the ritable organizations or institutions in the amount no gift is made. If the charitable organization or ot the gift, then no gift is made.
(name)	(amount)	(signature)
		·
in the box in f place my signa clause "C." If I t or if I fail to p	ront of the letter "A," "B ature after clause "A" or fail to sign the appropriat lace my initials in the ap	Property Disposition Clause by placing my initials or "C" signifying which clause I wish to adopt. I clause "B," or after each individual distribution in edistribution(s) or if I sign in more than one clause propriate box, this paragraph will be invalid and I ty will be distributed as if I did not make a will.
Property Dispo	osition Clauses. (select or	e)
	•	property to my spouse, if living. If my spouse is not en and the descendants of any deceased child.
	(signature).	

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in equal share is not living,	es to my children and	the descendants of ar distributed in equal s	o my spouse and the remainder ny deceased child. If my spouse hares to my children and the
	(signature).		
	C. I leave the followir	ng stated amounts to th	ne persons named:
(name)	(amount)	(signature)	_
(name)	(amount)	(signature)	
(name)	(amount)	(signature)	_
(name)	(amount)	(signature)	
(name)	(amount)	(signature)	
			, for any reason, does not pass be distributed as follows:

GUARDIAN. If a guardian is needed for any child of mine, then I nominate the first guardian named below to serve as guardian of that child. If the person does not serve, then the others shall serve in the order I list them. My nomination of a guardian is not valid without my signature.

FIRST GUARDIAN	·
	(signature)
SECOND GUARDIAN	·
	(signature)
THIRD GUARDIAN	·
	(signature)
BOND (Select only 1)	
(a) My personal representative and any(Your signals)	guardian I have named shall serve with bond. gnature)
(b) My personal representative and any g(Your sign	juardian I have named shall serve without bond. gnature)
Testat	or Signature
	tator, on this day of,
, 3	is instrument as my last will and that I sign it In for me) as my free and voluntary act and that
	ly emancipated minor, of sound mind and under



Signature
Printed name
Witnesses
STATEMENT OF WITNESSES (You must have two witnesses.)
a. On the date written below the maker of this Will declared to us that this instrument was the maker's Will and requested us to act as witnesses to it;
b. We understand this is the maker's Will;
c. The maker signed this Will in our presence, all of us being present at the same time;
d. We now, at the maker's request, and in the maker's presence, sign below as witnesses;
e. We believe the maker is of sound mind and memory;
f. We believe that this Will was not procured by duress, menace, fraud or undue influence;
g. The maker is age 18 or older; and
h. Each of us is now age 18 or older, is a competent witness, and resides at the address set forth after his or her name
Each of us declares that the person who signed above willingly signed this Will in our presence or willingly directed another to sign it for him or her or that he or she acknowledged that the signature on this Will is his or hers or that he or she acknowledged that this Will is his or her will and we sign below as witnesses to that signing.
Signature
Printed name

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Address	
Signature	
Printed name	
Address	
Τε	estamentary Affidavit
duly sworn, do hereby declare to instrument as my last will and that me) as my free and voluntary act	stator, on this day of, 20, being first the undersigned authority that I sign and execute this I sign it willingly (or willingly direct another to sign fo and that I am 18 years of age or older or am a legally d and under no constraint or undue influence.
Testator Signature	
duly sworn, do hereby declare to the and executed this instrument as (howillingly directed another to sign for hearing of the testator, signs this ways and the statement of the	the undersigned authority that the testator has signed his)(her) last will and that (he)(she) signed it willingly (or for (him)(her)), and that each of us, in the presence and will as witness to the testator's signing, and that to the r is 18 years of age or older or is a legally emancipated no constraint or undue influence.
Witness 1 Signature	Witness 2 Signature
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State of Arkansas}	
City / County of, ss.	
Subscribed, sworn to and acknowledged before me testator, and subscribed and sworn to before me witnesses, thisth day of	by and
WITNESS my hand and Notarial Seal, theth o	day of, 20
	NOTARY PUBLIC
NOTARY PUBLIC in and for the State of Arkansas	
My commission expires	