Florida Last Will and Testament

l,	, of the	City of	
	ment and hereby revoke a		
DEDCOMAL DEDD	ESENTATIVE. I nomina	ata	
	person or eligible		
	to serve as my		
provisions of this w	•	p	
If my first choice	does not serve, I nomin	ate	
(Insert name of	person or eligible	financial institution)	with address at
	to serve as perso	nal representative.	
equally divided amo	I give all my real property ong my children who survi	ve me; except as specific	
(specific distributio	n not valid without signat	ure.)	
I leave the following	g specific real property to	the person(s) named:	
(name)	(description of item) (sig	gnature)	
	<u> </u>		
			
	<u> </u>		

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



•	ally divided among my children w: (specific distribution not valid w	who survive me; except as specifically rithout signature.)
I leave the foll	lowing specific items to the person	(s) named:
(name)	(description of item) (signat	ure)
following cash stated. If I fail	n gift(s) to the named charitable or	ONS OR INSTITUTIONS. I make the ganizations or institutions in the amount made. If the charitable organization or t, then no gift is made.
(name)	(amount) (signatu	re)
in the box in f place my sign clause "C." If I t or if I fail to p	front of the letter "A," "B" or "C" s ature after clause "A" or clause "B fail to sign the appropriate distribu lace my initials in the appropriate	Disposition Clause by placing my initials ignifying which clause I wish to adopt. I " or after each individual distribution in tion(s) or if I sign in more than one clause box, this paragraph will be invalid and I distributed as if I did not make a will.
Property Dispo	osition Clauses. (select one)	
		o my spouse, if living. If my spouse is not ne descendants of any deceased child.
	(signature).	

Templates.Legal

in equal share is not living,	s 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)	_
		• • • •	t, 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

Templates.Legal

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
Templates.Legal	

State of Florida}		
City / County of, ss.		
Subscribed, sworn to and acknowledged before testator, and subscribed and sworn to before witnesses, thisth da	me by	and
WITNESS my hand and Notarial Seal, the	_th day of, 20_	
	NOTARY PUBLIC	
NOTARY PUBLIC in and for the State of Florida		
My commission expires		