Oregon Last Will and Testament

I,, of the	City of
	_, and State of Oregon, declare this to be my
Last Will and Testament and hereby revoke a	
PERSONAL REPRESENTATIVE. I nomin	ate
	financial institution) with address at
	personal representative to administer the
provisions of this will.	
If my first choice does not serve, I nomin	nate
	financial institution) with address at
to serve as perso	onal representative.
equally divided among my children who surv (specific distribution not valid without signat I leave the following specific real property to	
(name) (description of item) (sig	gnature)

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 not valid without signature.)
I leave the foll	owing specific items to t	he person(s) named:
(name)	(description of iter	m) (signature)
following cash stated. If I fail	gift(s) to the named character to sign this provision,	ANIZATIONS OR INSTITUTIONS. I make the aritable organizations or institutions in the amount no gift is made. If the charitable organization or ept 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," "E ature after clause "A" or fail to sign the approprial lace my initials in the ap	Property Disposition Clause by placing my initials B" or "C" signifying which clause I wish to adopt. I clause "B," or after each individual distribution in the distribution(s) or if I sign in more than one clause propriate box, this paragraph will be invalid and I erty will be distributed as if I did not make a will.
Property Dispo	osition Clauses. (select or	ne)
	•	property to my spouse, if living. If my spouse is not ren 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)	
	guardian I have named shall serve with bond. gnature)
	guardian I have named shall serve without bond. gnature)
Testat	tor Signature
	tator, on this day of, is instrument as my last will and that I sign it
, s	gn for me) as my free and voluntary act and that
I am 18 years of age or older or am a lega no constraint or undue influence.	lly 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		
	Testamentary Affi	idavit
duly sworn, do hereby declar instrument as my last will and me) as my free and voluntary	re to the undersigned d that I sign it willingly y act and that I am 18	day of, 20, being first authority that I sign and execute this (or willingly direct another to sign for years of age or older or am a legally constraint or undue influence.
Testator Signature		
duly sworn, do hereby declar and executed this instrument willingly directed another to hearing of the testator, signs	re to the undersigned t as (his)(her) last will a sign for (him)(her)), an t this will as witness to estator is 18 years of ag	, the witnesses, being first authority that the testator has signed and that (he)(she) signed it willingly (or d that each of us, in the presence and the testator's signing, and that to the ge or older or is a legally emancipated and influence.
Witness 1 Signature		tness 2 Signature



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