

LAST WILL AND TESTAMENT OF [FULL NAME]

I, _____, a resident of the State of Louisiana, declare this to be my Last Will

ARTICLE I - DECLARATION

I am of sound mind and legal age to make this Will. I declare that I am not under duress, menace, fraud, or undue influence. This Will reflects my personal wishes and is made voluntarily.

ARTICLE II - FAMILY INFORMATION

I am married to _____

I have the following children:

ARTICLE III - APPOINTMENT OF EXECUTOR

I appoint _____

to serve as Executor of this Will. If this Executor is unable or unwilling to serve, then I appoint _____

ARTICLE IV - PAYMENT OF DEBTS AND EXPENSES

I direct my Executor to pay all my just debts, funeral expenses, and administration costs as soon as practicable after my death.

ARTICLE V - DISPOSITION OF PROPERTY

I give, devise, and bequeath my property as follows:

To	Relationship	Item or Amount

All the residue of my estate, real and personal, wherever situated, I give, devise, and bequeath to _____

ARTICLE VI - GUARDIANSHIP

If at my death any of my children are minors, I appoint _____

as guardian of the person and estate of such minor children.

ARTICLE VII - TAXES

I direct that all estate, inheritance, transfer, and succession taxes payable by reason of my death be paid from my residuary estate without apportionment.

ARTICLE VIII - BOND WAIVER

I direct that no bond or other security shall be required of any Executor or Trustee appointed in this Will.

ARTICLE IX - MISCELLANEOUS

If any provision of this Will is held invalid or unenforceable, the remaining provisions shall remain effective. This Will shall be governed by the laws of the State of Louisiana. I hereby nominate the undersigned witnesses to attest to this Will.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this ____ day of _____, 20__.

TESTATOR'S SIGNATURE

WITNESS #1 SIGNATURE

WITNESS #2 SIGNATURE

Signature: _____ Signature: _____ Signature: _____

Print Name: _____ Print Name: _____ Print Name: _____

Address: _____ Address: _____ Address: _____

Phone: _____ Phone: _____ Phone: _____

ACKNOWLEDGEMENT OF WITNESSES

We, the undersigned, hereby certify that the Testator signed or acknowledged this Will in our presence, that we signed as witnesses in the presence of the Testator and each other, and that the Testator appeared to be of sound mind and under no undue influence.

WITNESS #1 SIGNATURE

WITNESS #2 SIGNATURE

Signature: _____

Signature: _____

Print Name: _____

Print Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

NOTARY ACKNOWLEDGEMENT

State of Louisiana Parish of _____ On this ____ day of _____, 20__, before me, the undersigned Notary Public, personally appeared [Full Name], known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

Notary Signature:

Notary Printed Name:

My commission expires:

Seal:

Commission No.:

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