**SELF PROVING AFFIDAVIT**

STATE OF ILLINOIS )

) ss.

COUNTY OF {{ county }} )

We, the undersigned, being the {{ willstatusc }} and the witnesses, respectively, whose names are signed to the foregoing instrument, and being first duly sworn, do hereby declare to the undersigned authority that {{ client.name }}, the {{ willstatusc }}, in the presence of the witnesses, signed this instrument as the {{ willstatusc }}’s Last Will and Testament and that the {{ willstatusc }} signed willingly, and that each of the witnesses, in the presence of {{ client.name }}, and in the presence of each other, signed the Last Will and Testament as a witness, and that to the best of their knowledge, at the time the {{ willstatusc }} signed the Last Will and Testament, the {{ willstatusc }} was of legal age, of sound mind and memory and not acting under duress, coercion, or constraint of any kind.

{{ client.name }}, {{ willstatusc }}

|  |  |
| --- | --- |
| Witness        Witness Address | Witness        Witness Address |

Signed and sworn to before me by {{ client.name }}, the {{ willstatusc }}, and each of the above witnesses on \_\_\_\_\_\_\_\_\_\_ \_\_\_, 20\_\_\_.

Notary Public

My commission expires: \_\_\_/\_\_\_/20\_\_\_