

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):	TELEPHONE AND FAX NOS.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
ESTATE OF (Name):	DECEDENT	
PROOF OF SUBSCRIBING WITNESS		CASE NUMBER:

1. I am one of the attesting witnesses to the instrument of which Attachment 1 is a photographic copy. I have examined Attachment 1 and my signature is on it.
 - a. The name of the decedent was signed in the presence of the attesting witnesses present at the same time by
 - (1) the decedent personally.
 - (2) another person in the decedent's presence and by the decedent's direction.
 - b. The decedent acknowledged in the presence of the attesting witnesses present at the same time that the decedent's name was signed by
 - (1) the decedent personally.
 - (2) another person in the decedent's presence and by the decedent's direction.
 - c. The decedent acknowledged in the presence of the attesting witnesses present at the same time that the instrument signed was decedent's
 - (1) will.
 - (2) codicil.
2. When I signed the instrument, I understood that it was decedent's will codicil.
3. I have no knowledge of any facts indicating that the instrument, or any part of it, was procured by duress, menace, fraud, or undue influence.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:



(SIGNATURE OF WITNESS)

.....
(ADDRESS)

ATTORNEY'S CERTIFICATION

(Check local court rules for requirements for certifying copies of wills and codicils)

I am an active member of The State Bar of California. I declare under penalty of perjury under the laws of the State of California that Attachment 1 is a photographic copy of every page of the will codicil presented for probate.

Date:



(SIGNATURE OF ATTORNEY)