

Declaration of Appointment of Guardian for My Children in the Event of My Death or Incapacity

I, S2 Test, make this Declaration to appoint the guardian for my children, listed as follows, in the event of my death or incapacity:

I designate the following persons in the order listed as guardian of the person of my children:

If any guardian or alternate guardian dies, does not qualify, or resigns, the next named alternate guardian becomes guardian of my children.

Signed: _____, 20 ____.

I, S2 Test, sign my name to this instrument consisting of 1 page(s) on _____, 20 ____ and do declare that I sign and execute this instrument as my Declaration of Appointment of Guardian for My Children in the Event of My Death or Incapacity, that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed, and that I am eighteen years of age or older, of sound mind, and under no constraint or undue influence.

S2 Test

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