# AFFIDAVIT OF ATTESTING WITNESS

**%COURT%**

**PROBATE**

**%REGISTRY%**

In the Goods of %DECEASED NAME% %DECEASED ADDRESS% deceased.

I, %APPLICANT NAME% aged 18 years and upwards of %APPLICANT ADDRESS% make Oath and say that

1. I am one of the Subscribing Witnesses to the last Will of the said %DECEASED NAME%, %DECEASED ADDRESS%, Deceased the said Will (being now hereunto annexed,) bearing date the %DATE OF WILL%.
2. I say that the %TESTATOR/TESTATRIX% executed the said Will on the day of the date thereof by signing %HIS/HER% name [affixing his mark to his name thereto, being illiterate or unable to write from physical debility,] at the foot or end thereof as the same now appears thereon, in the presence of me and of the other Subscribed Witness thereto: both of us being present at the same time and we immediately after such execution by the %TESTATOR/TESTATRIX%, attested and subscribed the said Will in the presence of the said %TESTATOR/TESTATRIX% and of each other.

**\*\*\*\*Always include this paragraph 2 on due execution\*\*\*\***

1. And I further say that before the said %TESTATOR/TESTATRIX% executed said Will in manner aforesaid, same was truly, audibly and distinctly read over to %HIM/HER% \*\*\*BY ME OR BY OTHER WITNESS IN MY PRESENCE\*\*\*\*\* and said %TESTATOR/TESTATRIX% appeared fully to understand the same, and was at the time of the execution thereof of sound mind, memory and understanding.
2. I say that the said will \*\*\* DESCRIBE WILL HERE \*\*\*\*\*

**SWORN** before me by

who is personally known to me (or who is identified to me by

who is personally known to me)

at in the County of

this day of

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Commissioner for Oaths/Practising Solicitor**

MDC/

**Note: the will should not be marked by the deponant or by the Commissioner/practicing Solicitor.**