

**Will of \_\_\_\_\_**

**Part 1. Personal Information**

I, \_\_\_\_\_, a resident of the State of Florida, Broward, declare that this is my will. My Social Security number is \_\_\_\_\_.

**Part 2. Revocation of Previous Wills**

I revoke all wills and codicils that I have previously made.

**Part 3. Marital Status**

I am married to \_\_\_\_\_.

**Part 4. Children**

I have the following children now living: \_\_\_\_\_ and \_\_\_\_\_.

**Part 5. Disposition of Property**

A beneficiary must survive me for at least 45 days to receive property under this will. As used in this will, the phrase "survive me" means to be alive or in existence as an organization on the 45th day after my death.

If I leave property to be shared by two or more beneficiaries, and any of them does not survive me, I leave his or her share to the others equally unless this will provides otherwise.

My residuary estate is all property I own at my death that is subject to this will that does not pass under a general or specific bequest, including all failed or lapsed bequests.

I leave my residuary estate to \_\_\_\_\_, \_\_\_\_\_ and \_\_\_\_\_ in the following shares: \_\_\_\_\_ shall receive a \_\_\_\_ share. \_\_\_\_\_ shall receive a \_\_\_\_ share. \_\_\_\_\_ shall receive a \_\_\_\_ share.

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All personal and real property that I leave in this will shall pass subject to any encumbrances or liens placed on the property as security for the repayment of a loan or debt.

**Part 6. Personal Representative**

I name \_\_\_\_\_ to serve as my personal representative.

If \_\_\_\_\_ is unwilling or unable to serve as personal representative, I name \_\_\_\_\_ to serve as personal representative.

If \_\_\_\_\_ and \_\_\_\_\_ are both unwilling or unable to serve as personal representative, I name \_\_\_\_\_ to serve as personal representative.

No personal representative shall be required to post bond.

**Part 7. Personal Representative's Powers**

I direct my personal representative to take all actions legally permissible to have the probate of my will done as simply and as free of court supervision as possible under the laws of the state having jurisdiction over this will, including filing a petition in the appropriate court for the independent administration of my estate.

I grant to my personal representative the following powers, to be exercised as she deems to be in the best interests of my estate:

1. To retain property without liability for loss or depreciation.
2. To dispose of property by public or private sale, or exchange, or otherwise, and receive and administer the proceeds as a part of my estate.
3. To vote stock; to exercise any option or privilege to convert bonds, notes, stocks or other securities belonging to my estate into other bonds, notes, stocks or other securities; and to exercise all other rights and privileges of a person owning similar

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property.

4. To lease any real property in my estate.
5. To abandon, adjust, arbitrate, compromise, sue on or defend and otherwise deal with and settle claims in favor of or against my estate.
6. To continue or participate in any business which is a part of my estate, and to incorporate, dissolve or otherwise change the form of organization of the business.

These powers, authority and discretion are intended to be in addition to the powers, authority and discretion vested in her by operation of law by virtue of her office, and may be exercised as often as is deemed necessary or advisable, without application to or approval by any court.

**Part 8. Payment of Debts**

Except for liens and encumbrances placed on property as security for the repayment of a loan or debt, I direct that all debts and expenses owed by my estate be paid in the manner provided for by the laws of Florida.

**Part 9. Payment of Taxes**

I direct that all estate and inheritance taxes assessed against property in my estate or against my beneficiaries be paid in the manner provided for by the laws of Florida.

**Part 10. No-Contest Provision**

If any beneficiary under this will contests this will or any of its provisions, any share or interest in my estate given to the contesting beneficiary under this will is revoked and shall be disposed of as if that contesting beneficiary had not survived me.

**Part 11. Severability**

If a court invalidates any provision of this will, that shall not affect other provisions that can be given effect without the invalid provision.

Signature

I, \_\_\_\_\_, the testator, sign my name to this document, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_.

I declare that I sign and execute this document as my last will, that I sign it willingly and that I execute it as my free and voluntary act. I declare that I am of the age of majority or otherwise legally empowered to make a will, and under no constraint or undue influence.

Signature: \_\_\_\_\_

**Witnesses**

We, the witnesses, sign our names to this document, and declare that the testator willingly signed and executed this document as the testator's last will.

In the presence of the testator, and in the presence of each other, we sign this will as witnesses to the testator's signing.

To the best of our knowledge, the testator is of the age of majority or otherwise legally empowered to make a will, is of sound mind and is under no constraint or undue influence.

We declare under penalty of perjury that the foregoing is true and correct, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_.

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***First Witness***

Sign your name: \_\_\_\_\_

Print your name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

***Second Witness***

Sign your name: \_\_\_\_\_

Print your name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_