

STATE OF _____)
)SS. AFFIDAVIT TO ACCOMPANY INDIAN WILL
 COUNTY OF _____)

I, _____ being first duly sworn, on oath depose and say:
 (Testator Name)

That I am an enrolled member of the _____ Tribe of the State of _____; that on the ____ day of _____, 20__, I requested _____ to prepare a Will for me; that the attached Will was prepared for me and I requested _____ and _____

(Witness Name) (Witness Name)

to act as witnesses thereto; that the said witnesses hear me publish and declare the same to be my last Will and Testament; that I signed said Will in the presence of both witnesses and they signed the same as witnesses in my presence and in the presence of each other; and that said Will was read and explained to me (or read by me), after being prepared and before I signed it; and it clearly and accurately expresses my wishes; and I further state that no person has influenced me to make the disposition of any part of my property in any other manner than I myself of my own free will desire and wish to dispose of it.

 Signature of Testator
 Tribal ID No. _____

We, _____ and _____
 Witness Name Witness Name

each being duly sworn, on oath depose and state; That on the ____ day of _____, 20__, _____ a member of the _____ Tribe

Testator's Name

of the State of _____ published and declared the attached instrument to be his/her last Will and Testament, signed the same in the presence of both of us and requested both of us to sign the same as witnesses; that we, in compliance with his/her request, signed the same as witnesses in his/her presence and in the presence of each other; that said testator/testatrix was not acting under duress, menace, fraud or undue influence of any person, so far as we could ascertain and in our opinion was mentally capable of disposing of all his/her estate by Will; and that neither of us is named as a beneficiary in said Will and or in any wise interested in the distribution of the estate of said testator/testatrix.

 Signature of Witness #1

 Signature of Witness #2

Subscribed and Sworn to before me this ____ day of _____, 20__, by

_____ Testator/testatrix, and by

 attesting witness

 attesting witness

 Title Commission Expires: _____