

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

.....  
 (TYPE OR PRINT NAME) ▶ \_\_\_\_\_  
 (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:

.....  
 (TYPE OR PRINT NAME) ▶ \_\_\_\_\_  
 (SIGNATURE OF ATTORNEY)