

AFFIDAVIT OF WITNESS PURSUANT TO G.L. c. 190B, §§ 2-502, 3-405	Docket No. _____	Commonwealth of Massachusetts The Trial Court Probate and Family Court
Estate of: <div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> _____ _____ _____ </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> First Name Middle Name Last Name </div> Date of Death: _____	<div style="text-align: right; padding-right: 10px;"> Division </div>	

I, _____ M.I. _____

First Name
M.I.
Last Name

being duly sworn, do depose and declare that in the presence of

First Name
M.I.
Last Name

witnessed the above named Decedent either willingly sign an instrument(s) dated _____^(date)
or willingly direct another person to sign said instrument(s) in his or her conscious presence, or acknowledged said instrument(s) as and for Decedent's last Will and Testament or codicil(s) and to the best of my knowledge, the Decedent was 18 years of age or older, of sound mind, and under no constraint or undue influence.

SIGNED UNDER THE PENALTIES OF PERJURY

I certify under the penalties of perjury that the foregoing statements are true to the best of my knowledge and belief.

Date _____

Signature of Witness

**Do not write below this line
for Court use only**

Subscribed and sworn to this date _____
(date)

Justice-Assistant-Judicial Case Manager-Assistant Register-Magistrate
of the Probate and Family Court