LAST WILL AND TESTAMENT OF

[Name of Testator]			
I,	[Name of Testator], a resident of,		
Virginia , being of sound and disposin married or having been lawfully marrian auxiliary of the armed forces of the and not being actuated by any duress,	ing mind and memory and over the age of eighteen (18) years or lawfully lied or a member of the armed forces of the United States or a member of the United States or a member of the maritime service of the United States, menace, fraud, mistake, or undue influence, do make, publish, and declared say revoking all Wills and Codicils previously made by me.		
I. MARRIAGE AND CHILDREN			
I am married to	, and all references in this Will to my		
[husband or wife	, and all references in this Will to my e] are references to [him or her]. I have the		
following children:			
Name:	Date of Birth:		
Name:	Date of Birth:		
Name:	Date of Birth:		
Name:	Date of Birth:		
II. EXECUTOR: I appoint	as Executor of this my Last Will and		
Testament and provide if this Executo	or is unable or unwilling to serve then I appoint		
	as alternate Executor. My Executor shall be authorized to carry my just debts, obligations and funeral expenses.		
	ll die as the sole parent of minor children, then I appoint as Guardian of said minor children. If this named Guardian is		
	point as alternate Guardian.		
shall die simultaneously with me or th or husband] and I died other than simu	F SPOUSE: In the event that my [wife or husband] here is no direct evidence to establish that my [wife ultaneously, I direct that I shall be deemed to have survived my		
provisions of my Will shall be constru	d], notwithstanding any provision of law to the contrary, and that the ned on such presumption.		
V. SIMULTANEOUS DEATH OF	BENEFICIARY : If any beneficiary of this Will, including any		
beneficiary of any trust established by	this Will, other than my [wife or husband], shall die		
within 30 days of my death or prior to	the distribution of my estate, I hereby declare that I shall be deemed to		
have survived such person.			

VI. BEQUESTS:

below:	described
Name:	
Address:	
Relationship:	
Property:	
Name:	
Address:	
Relationship:	
Property:	
Noma	
Name:	
Address:	
Relationship:	
Property:	
Name:	
Address:	
Relationship:	
Property:	
Troperty.	
If a named beneficiary to this Will predeceases me, the bequest to such person shall lapse, and pass under the other provisions of this Will. If I do not possess or own any property listed above my death, the bequest of that property shall lapse.	
VII. ALL REMAINING PROPERTY; RESIDUARY CLAUSE: I give, devise, and beque residue, and remainder of my estate, of whatever kind and character, and wherever located, to	
[wife or husband], provided that my [wife or husband]	
I make no provision for my children knowing that as their parent my	wife or husbandl
I make no provision for my children, knowing that, as their parent, my [vill continue to be mindful of their needs and requirements. If my [wife	or husbandl does
not survive me, then I give, devise, and bequeath all of the rest, residue, and remainder of my e	estate of
whatever kind and character, and wherever located, to my children per share, but if any child p	
then his or her share will pass, per share, to his or her lineal descendants, natural or adopted, if	
me; but if there are none, then his or her share will lapse and pass equally as part of the shares	

VIII. ADDITIONAL POWERS OF THE EXECUTOR: My Executor shall have the following additional powers with respect to my estate, to be exercised from time to time at my Executor's discretion without further license or order of any court. IX. WAIVER OF BOND, INVENTORY, ACCOUNTING, REPORTING AND APPROVAL: My Executor and alternate Executor shall serve without any bond, and I hereby waive the necessity of preparing or filing any inventory, accounting, appraisal, reporting, approvals or final appraisement of my estate. I direct that no expert appraisal be made of my estate unless required by law. **X. OPTIONAL PROVISIONS**: I have placed my initials next to the provisions below that I adopt as part of this Will. Any unmarked provision is not adopted by me and is not a part of this Will. If any beneficiary to this Will is indebted to me at the time of my death, and the beneficiary evidences this debt by a valid Promissory Note payable to me, then such person's portion of my estate shall be diminished by the amount of such debt. Any and all debts of my estate shall first be paid from my residuary estate. Any debts on any real property bequeathed in this Will shall be assumed by the person to receive such real property and not paid by my Executor. _____ I direct that my remains be cremated and that the ashes be disposed of according to the wishes of my Executor. I direct that my remains be cremated and that the ashes be disposed of in the following manner: I desire to be buried in the ______ cemetery in _____ County, Virginia. XI. CONSTRUCTION: The term "testator" as used in this Will is deemed to include me as Testator or Testatrix. The pronouns used in this Will shall include, where appropriate, either gender or both, singular and plural.

named children; but if none of my named children survives me or leaves a lineal descendant who survives me,

then according to the order of intestate succession in the Commonwealth of Virginia.

XII. SEVERABILITY AND SURVIVAL: If any part of this Will is declared invalid, illegal, or inoperative for any reason, it is my intent that the remaining parts shall be effective and fully operative, and that any Court

so interpreting this Will and any provision in it construe in favor of survival.

IN WITNESS WHEREOF, I,	[Name o	f Testator], hereby set
my hand to this last Will, on each page of whic	h I have placed my initials, on this	day of
, 20 at		
	, Commonwe	alth of Virginia.
	501	
	* *	
	_ [Address of Testator, Line 2]	
	WITNESSES	
The foregoing instrument, consisting of	pages, including this page, was signed	in our presence by
or her] to be [his or her] l	_ [name of Testator] and declared by	[him
	esence of each other, have subscribed our i	
witnesses. We declare that we are of sound mi		
knowledge the testator is of the age of majority		
sound mind and under no undue influence or co		clare these statements
are true and correct on this day of		
	, Commonwe	alth of Virginia.
	[Signature of Witness #1]	
	_ [Printed or typed name of Witness #1]	
	_ [Address of Witness #1, Line 1]	
	[A 11] C W/A #1 I ! O1	
	_ [Address of witness #1, Line 2]	
	_ [Signature of Witness #2]	
	[Printed or typed name of Witness #2]	
	[Address of Witness #2, Line 1]	
	_ [Address of Witness #2, Line 1] _ [Address of Witness #2, Line 2]	
	_ [Address of witness #2, Line 2]	
	_[Signature of Witness #3]	
	_ [Printed or typed name of Witness #3]	
	_ [Address of Witness #3, Line 1]	
	_ [Address of Witness #3, Line 2]	