Affidavit of Decedent/Witness's Signature

I, the undersigned Affiant, be	ing over the age of 18 ye	ears, and after first being duly s	worn upon oath
states that, I was personally a	acquainted with the dec	cedent/witness,	
	_, during his/her lifetim	e and I am familiar with the dec	cedent/witness's
handwriting and signature: ar	nd it is my opinion, base	d upon a reasonable degree of	certainty, that the
signature of the decedent/wi	tness as signed on the d	ecedent's Last Will and Testam	ent is the true and
genuine signature of the dec	edent/witness		·
And further Affiant saith not.			
			_
	(Signature)		
			_
	(Print Name)		
			_
	(Address)		
			_
STATE OF			
COUNTY OF			
	was acknowledged befo	re me this day of	, 20
by		·	
My Commission Expires:			
	Notary Public		