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How to Complete Your Georgia Simple Will

Last Will and Testament with Self-Proving Affidavit (O.C.G.A. §§ 53-4-20, 53-4-24)

INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR WILL.

About this form. This fill-in will is for people with **straightforward wishes**: naming an executor, leaving specific gifts, leaving the rest of your estate to family or others, and naming a guardian for minor children. Georgia requires a will to be signed in front of **two witnesses**. Adding the notarized self-proving affidavit lets the Probate Court accept the will without calling the witnesses later. If you have a blended family, a business, significant assets or a child with special needs, talk to an attorney.

1. **Family and executor (Articles 1–2)**
   List your spouse and children and name an executor and an alternate.
2. **Gifts (Articles 4–5)**
   List any specific gifts, then say who receives the rest of your estate and what happens if a beneficiary dies before you.
3. **Guardian (Article 6 — optional)**
   Name a guardian and a conservator for minor children.
4. **Sign before two witnesses**
   Sign with both witnesses present; each witness then signs. Witnesses should be adults who receive nothing under the will.
5. **Self-proving affidavit before a notary**
   You and both witnesses then swear to the affidavit before the notary. Bring current photo IDs. **Need witnesses? Our notary can bring qualified witnesses for an additional fee.**

Signing requirements: Signed by the testator in the presence of two witnesses (O.C.G.A. § 53-4-20); self-proving affidavit sworn before a notary (O.C.G.A. § 53-4-24).

After It's Signed

- Keep the original in a safe, accessible place (not a safe deposit box only you can open) and tell your executor where it is. You may also deposit it with your county Probate Court.
- Review your will after marriage, divorce, a birth or a move. Georgia law can change parts of a will after divorce or marriage.

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Have questions about your Will? To consult with an attorney, contact **Gavrilov & Brooks Law Firm** at **(916) 504-0529** or **www.gavrilovlaw.com**.

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LAST WILL AND TESTAMENT

State of Georgia

I,

Full legal name of testator

a resident of

City and county of residence, Georgia

being of sound mind and at least 14 years of age, declare this to be my Last Will and Testament. I revoke all wills and codicils I made before this one.

ARTICLE 1 — FAMILY

Name of spouse (write “none” if not married)

Names and dates of birth of my children (write “none” if none)

References to “my children” include the children named above and any child born to or adopted by me after I sign this will.

ARTICLE 2 — EXECUTOR

I appoint as executor of my estate:

Name of executor

If that person is unable or unwilling to serve, I appoint:

Name of alternate executor

My executor may serve without bond and without making inventory, returns or reports to the Probate Court, to the extent permitted by Georgia law. My executor shall have all of the powers contained in O.C.G.A. §§ 53-12-261 and 53-12-263, which are incorporated by reference, including the power to sell any property, real or personal, without court order.

ARTICLE 3 — DEBTS AND EXPENSES

I direct my executor to pay my legally enforceable debts, the expenses of my last illness and funeral, and the costs of administering my estate.

ARTICLE 4 — SPECIFIC GIFTS (OPTIONAL)

I give the following items or amounts to the persons named, if they survive me (describe each item and the beneficiary):

ARTICLE 5 — REST OF MY ESTATE

I give all the rest of my property, real and personal, wherever located (my “residuary estate”), to:

Testator’s initials: _____

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Name(s) of beneficiary(ies) and share each receives

If a beneficiary named in this Article does not survive me, that beneficiary's share shall pass (check one):

- to that beneficiary's descendants who survive me, per stirpes, and if none, to the other beneficiaries named in this Article in equal shares.
- to the other beneficiaries named in this Article in equal shares.
- to the following alternate beneficiary: _____.

ARTICLE 6 — GUARDIAN AND CONSERVATOR FOR MINOR CHILDREN (OPTIONAL)

If my spouse does not survive me or is unable to act, I nominate as testamentary guardian of the person of each of my minor children:

Name of guardian | Alternate guardian

and as testamentary conservator of the property of each minor child:

Name of conservator | Alternate conservator

ARTICLE 7 — GENERAL PROVISIONS

A beneficiary who does not survive me by 30 days shall be treated as having died before me. This will is governed by the laws of the State of Georgia. Headings are for convenience only.

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SIGNATURE OF TESTATOR

I sign my name to this will on _____, 20____, and declare that I sign it willingly as my free and voluntary act, that I am 14 years of age or older, of sound mind, and under no constraint or undue influence.

X _____ _____

Signature of testator | Date

Printed name of testator

ATTESTATION OF WITNESSES

The testator signed this will, or acknowledged signing it, in our presence, and we, at the testator's request and in the testator's presence, have signed our names below as attesting witnesses. Each of us is at least 14 years of age.

X _____ _____

Signature of first witness | Date

Printed name | Address

X _____ _____

Signature of second witness | Date

Printed name | Address

Witnesses should be adults who receive nothing under this will (O.C.G.A. § 53-4-23).

Testator's initials: _____

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SELF-PROVING AFFIDAVIT (O.C.G.A. § 53-4-24) — RECOMMENDED

STATE OF GEORGIA

COUNTY OF

Before me, the undersigned authority, on this date personally appeared _____, _____, and _____, known to me to be the testator and the witnesses, respectively, whose names are signed to the attached or foregoing instrument and, all of these persons being by me first duly sworn, the testator declared to me and to the witnesses in my presence that the instrument is the testator's will and that the testator has willingly signed or directed another to sign the instrument for the testator, and that the testator executed the instrument as the testator's free and voluntary act for the purposes therein expressed; and each of the witnesses stated to me, in the presence and hearing of the testator, that he or she signed the will as witness in the presence of the testator and at the testator's request, and that the testator was 14 years of age or older and of sound mind, and that each of the witnesses was then at least 14 years of age.

X _____

Testator

X _____

Witness

X _____

Witness

Sworn to and subscribed before me by _____, the testator, and sworn to and subscribed before me by _____ and _____, witnesses, this _____ day of _____, 20____.

_____ (Seal)

Signature of notary public

_____

Printed name of notary public

Notary Public, _____ County, Georgia

My commission expires: _____

Notary seal

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