

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ WIL \_\_\_\_\_  
(Link to: \_\_\_\_\_)

Estate of \_\_\_\_\_

\_\_\_\_\_  
Deceased

**AFFIDAVIT OF WITNESS**

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_  
personally appeared and answered the following questions:

	<b>YES</b>	<b>NO</b>
1) Were you one of the witnesses who signed the attached written document which is dated _____ and is said to be the (last will and testament) (codicil) of _____ of the District of Columbia who is now deceased?		
2) Did the testator sign the document while in your presence?		
3) Did the testator say the document was his/her (will) (codicil)?		
4) Did the testator seem to be of sound mind and aware of what he/she was doing at the time he/she signed the document?		
5) Did the testator ask you to sign the document as a witness?		
6) When you signed the document as a witness, were the testator and all of the witnesses who signed the document present?		
7) Were you present when each of the other witnesses signed the document?		
8) Did the testator ask the other people who signed the document to do so as the will was presented?		
9) Was the testator present when each of the witnesses signed the document?		

10) Do you know of any will or codicil of _____ , testator other than the attached document?	<b>YES</b>	<b>NO</b>
11) What is your date of birth? _____		

**REMARKS:**

I do solemnly declare and affirm under penalty of law that the contents of the foregoing document are true and correct to the best of my knowledge, information, and belief.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_