

OATH OF NON-SUBSCRIBING WITNESS(ES)

REGISTER OF WILLS

Estate of _____, Deceased

_____ and _____,
(each) being duly qualified according to law, depose(s) and say(s) that she / he / they was / were well-acquainted with _____ and am/are familiar with the handwriting and signature of the decedent, and that the signature of _____ to the foregoing instrument purporting to be the Last Will and Testament/Codicil of _____ is in his/her own proper handwriting.

(Signature)

(Street Address)

(City, State, Zip)

(Signature)

(Street Address)

(City, State, Zip)

Executed in Register's Office

Sworn to or affirmed and subscribed before me this _____ day of _____, _____.

Deputy for Register of Wills

Executed out of Register's Office

Commonwealth of Pennsylvania)
) SS:
County of _____)
Sworn to or affirmed and subscribed before me this _____ day of _____, _____.

Notary Public

My Commission Expires: _____
(Signature and Seal of Notary or other official qualified to administer oaths. Show date of expiration of Notary's Commission.)