

LAST WILL AND TESTAMENT OF NAME OF TESTATOR

I. INTRODUCTION

I, Testator's Name, also known as Nickname, Alias, Maiden Name, etc., domiciled and residing in County of Residence County, Montana, declare this to be my Will, revoking all prior Wills and codicils.

II. FAMILY INFORMATION

I am married to Spouse's Name. All references of "my spouse" are to him or her. I have Number of children children, namely, Names of children. All references to "my children" refer to the Number of children children named in this paragraph and any other children hereafter born to or adopted by me and my spouse.

III. DEBT CLAUSE

I direct that all of my legally enforceable debts, funeral expenses and expenses in connection with the administration of my estate be paid as soon as practicable after my death.

IV. PRE-RESIDUARY GIFTS

A. Tangible Personal Property List

If my spouse survives me, I give him or her all of my tangible personal property.

If my spouse fails to survive me, I might leave a written statement or list disposing of items of tangible personal property. If I do and if my written statement or list is found and identified by the personal representative no later than 30 days after my death, then the statement or list is to be given effect to the extent authorized by law. Any tangible personal property not effectively disposed of by such a statement or list shall be distributed to my surviving children (and not to their descendants) as they may agree. If my

surviving children fail to reach agreement within 90 days after the probate of this Will, such tangible personal property shall be divided among my surviving children as my personal representative determines appropriate, in shares of substantially equal value.

If any child of mine is a minor at the time of such division, my personal representative may distribute the child's share to the child or for the child's use to the child's guardian or to any person with whom the child is residing, without further responsibility, and the distributee's receipt shall be a sufficient discharge to my personal representative.

V. RESIDUARY CLAUSE

If my spouse survives me, I give him or her the residue of my estate. If he or she fails to survive me, I give the residue of my estate to my descendants who survive me by representation.

VI. METHODS OF DISTRIBUTION TO CERTAIN BENEFICIARIES

If under this will any property is distributable to a minor or to a person under twenty-one (21) years of age, my personal representative, in my personal representative's absolute discretion, may distribute such property in any manner permitted by law and additionally in any one or more of the following ways:

(A) If the person is a minor, directly to the minor or on behalf of the minor for the minor's exclusive benefit;

(B) If the person is a minor, to a guardian or conservator for the minor; or

(C) If the person is under twenty-one (21) years of age, to any person (including my personal representative) selected as a custodian by my personal representative under the applicable Uniform Transfers to Minors Act of any State.

VII. APPOINTMENT OF PERSONAL REPRESENTATIVE

I appoint my spouse as personal representative of my estate. In the event my spouse shall die, be adjudicated incompetent, or resign, I hereby

name as successor personal representative to fill such vacancy or any vacancy that may thereafter occur, the first in the order named who is then willing and able to serve:

- (A) Alternate Personal Representative
- (B) Alternate Personal Representative
- (C) Alternate Personal Representative

VIII. POWERS OF PERSONAL REPRESENTATIVE

In addition to the powers given to my personal representative by law effective at death, my personal representative shall have all powers authorized by the Montana Uniform Probate Code, as that Code exists on the date of this Will.

IX. NOMINATION OF GUARDIAN

In the event of my death and any of my children are under age 18, then I nominate the following as Guardian(s) for such children:

Name of Nominee for Guardian
Nominee's Address
Line 2: City and State
Nominee's Phone Number

Name of Nominee for Guardian
Nominee's Address
Line 2: City and State
Nominee's Phone Number

X. MONTANA LAW

This instrument shall be construed under the laws of the State of Montana.

Testator Initials

Witness Initials

XI. REPRESENTATION

The persons who take under this will as "descendants by right of representation" shall take in accordance with the rules of §72-2-116 MCA as that section exists on this date of this Will.

XII. CAPTIONS

The captions set forth in this Will at the beginning of various provisions are for convenience of reference only, and shall not be deemed to define or limit the provisions of this Will, or to affect in any way its construction or application.

XIII. CONCLUSION AND ATTESTATION

I, Testator’s name, the testator sign my name to this instrument this Day day of Month, Year and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my Will and that I sign it willingly (or willingly direct another to sign for me), that I execute it as my free and voluntary act for the purposes therein expressed, that I am 18 years of age or older, of sound mind, and under no constraint or undue influence.

Testator’s Name

We, witnesses, sign our names to this instrument, consisting of Total Number of Pages pages, being first duly sworn, do hereby declare to the undersigned authority that the testator signs and executes this instrument as the testator's Last Will and that the testator signs it willingly (or willingly directs another to sign for the testator), that each of us, in the presence and hearing of the testator, hereby signs the Will as a witness to the testator's signing, and that to the best of our knowledge the testator is 18 years of age or older, of sound mind, and under no constraint or undue influence.

Witness
Residing at:

Witness
Residing at:

Testator Initials

Witness Initials

STATE OF MONTANA

County of County where documents are being notarized

Signed and sworn to before me by Testator's name, the testator, this Day
day of Month, Year.

(Notarial Seal)

Notary Signature

Testator Initials

Witness Initials