

WILL REGISTRATION FORM

(R. S. 9:2446-2447)

File this original Will Registration Form and the filing fee of \$10.00 with the Secretary of State, P. O. Box 94125, Baton Rouge, LA 70804-9125. If a certified copy is requested from this office, there is an additional fee of \$20.00 (per R.S. 49:222(A)). **DO NOT ENCLOSE A COPY OR THE ACTUAL WILL.** After the Will Registration Form is filed in this office, no further information will be released until a valid death certificate or other satisfactory evidence of the testator's death is provided to the Secretary of State, along with a fee of \$10.00.

Name of Testator: _____

Address of Testator: _____

Social Security Number of Testator: _____
(or other identifying number)

Date of Birth of Testator: _____

Place of Birth of Testator: _____

Intended Place of Deposit or Safekeeping of the Instrument **-OR-** Name and Address of the Attorney or Other Person having information regarding the Place of Deposit or Safekeeping of the Instrument:

Filed By: _____

Address: _____

Prepared and Furnished by: R. Kyle Ardoin, Secretary of State