

## In the name of Allah, the Most Beneficent, the Most Merciful

## LAST WILL AND TESTAMENT

I, _	(Full Name) presently residing at
	, City of, County of
	being in sound mind and memory, do hereby revoke any and all former
	ills and codicils made by me, and do make, ordain, publish, and declare this my last Will and stament.
	this time of the execution of this Will, my immediate family consists of:(Spouse) and my children,
Na	imes and Date of Birth of my children (if any):
1.	
2.	
3.	
My 1. 2. 3.	y other Heirs are (if any):
I.	ARTICLE I: FUNERAL AND BURIAL ARRANGEMENTS
	I ordain that no autopsy, organ donors, or embalming be done on my body unless required by law that without unjustified delay my body be washed, wrapped with cloth free of any ornaments and other articles, prayed for, then buried, which all should be done by Muslims in complete accordance with Islamic belief.
	I hereby nominate and appoint presently
	residing to atCity ofCountry of
	to execute these and other necessary provisions for my Islamic funeral and
	burial. In the event he/she above shall be unwilling or unable to execute,
pei	1. In the event of legal difficulties in the execution of this Article, I direct the above-named rson(s) to seek counsel from the local Mosque (Masjid).

my death, or on my body.

3. I ordain that no pictures, crescents and stars, decorations, crosses, flags, any symbols, Islamic or otherwise, or music be involved at any stage of the process of conducting my burial or ever be placed at the site of my grave.

2. I ordain that absolutely no non-Islamic religious service or observance shall be conducted upon

- 4. I ordain that my body shall not be transported over any unreasonable distance from locality of my death, particularly when such transportation would necessitate embalming, unless when long distance transportation is required to reach the nearest Muslim cemetery, or any other cemetery selected by my Muslim family.
  - 5. I ordain that my body shall be buried according to the Islamic traditions.

If the Executor/ nominated above is not available at the time of my death, the following persons are to be contacted:

	ily Funeral Home 50 Mohawk Rd. Clermont, FL 34715 etor: Dextor@Clermontfuneralhome.com or	(352)989-5871
T.	the testator and I,	the witnesses
respectively, whose name undersigned notary public will, that (s)he signed and	s are signed to the attached instrument, having that the testator, in the presence of witnesses that each of the witnesses, in the presence of will and testament as witnesses.	ng been sworn, declared to the es, signed the instrument as his last
Testator: (Signature)	Name	
I declare under penalty or	perjury under the laws of the State of	
individual's identity was p 2) That the individual sign	o signed or acknowledged this Last Will is poroven to me by convincing evidence, ned or acknowledged this Last Will in my prears to be of sound mind and under no dures	resence, and
WITNESSES:		
Witness 1:		
Name:		
Address:		
Signature:		
Witness 2		
Name:		
Address:		
Signature:		
On the day of	2024 before me	personally appeared:
1) 2) 3)		

whose names are subscribed to the with same in their authorized capacities and instrument. WITNESS my hand and off	nin instrument and that by their signa	acknowledged to me	that they executed the
I, I have taken an oath, administered by t swearing that the statements in this doc will; that I sign it willingly or willingly for the purposes expressed in this will; no constraint or undue influence.	rument are true. I direct another to	declare to that officer to sign for me; that I executed a sign for me;	that this document is my cute it as my voluntary act
I,names to this document and have taken	and		_, the witnesses, sign our
appear on this document, to swear that a document as the testator executes the document to sign for him or her, and executely; each of us, in the testator's present best of our knowledge, the testator is 18 undue influence.  STATE OF	all of the followin ocument as his or cutes it as his or he ce, signs this will 8 years of age or o	g statements are true: her will, signs it willing or voluntary act for the as witness to the testat	the individual signing this igly or willingly directs purposes expressed in this or's signing; and, to the
COUNTY OF	)		
Before me personally appeared □personally known to me, OR (Check one that applies)	I		, who is
□has shown me his/her and being duly sworn swears that he/sh the statements contained therein are true	e has read the forg	for identification, going, and that	
SWORN TO AND SUBSCRIBED before	ore me this	day of	, 2024.
NOTARY PUBLIC			
****For further legal guidance/advise	on an expanded w	ill or nominations and	annointments regarding

\*\*\*\*For further legal guidance/advise on an expanded will or nominations and appointments regarding distribution of your estate or property contact your local mosque or local attorney.