**CODICIL TO LAST WILL AND TESTAMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a resident of the County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby declare this to be the **CODICIL** to my Last Will and Testament, which is dated (*date of original Last Will and Testament*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I do hereby make, publish and declare this as a (first) **CODICIL** to my aforementioned Last Will and Testament to be annexed to, taken and allowed as part thereof, and do hereby amend my Last Will and Testament as follows:

*[List all specific changes or additions to the original will. Be sure to reference each section number of the will and the specific language that it will be affecting. This is where you could include a bequest (percentage, specific (dollar amount etc.), residual) to support the mission of The Unitarian Universalist Fellowship of the Emerald Coast, such as the following:*

*I GIVE AND BEQUEATH the sum of $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to The Unitarian Universalist Fellowship of the Emerald Coast (UUFEC), 1295 N Bayshore Dr, Valparaiso, FL 32580, to be used for the following purposes:*

*Amount Initial*

*$\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ ( ) For The UUFEC Endowment Fund.*

*$\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ ( ) For the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fund.*

*$\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ ( ) For Religious Exploration.*

*$\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ ( ) At the discretion of the UUFEC.*

In testimony whereof, I, (*Name*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, TESTATOR, being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as a (first) CODICIL to my said Last Will and Testament dated (*date of original Last Will and Testament*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and otherwise hereby confirm and republish my said Last Will and Testament in all respects other than those as listed herein. I hereby attest that I sign this instrument willingly as my free and voluntary act, and that I am eighteen years of age or older, of sound mind, and under no constraint, coercion or undue influence.

I subscribe my name to this (first) **CODICIL** this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_, at (*full address where signed*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the presence of (*full name of first witness to codicil*)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and (*full name of second witness to codicil*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, attesting witnesses, who subscribe their names here in my presence and in the presence of each other.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (printed name)

TESTATOR

On the date last above written, (*Testator name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*, known by us to be the person whose signature appears at the end of this (first) CODICIL, declared to us, (*full name of first witness to codicil*) *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*, and (*full name of second witness to codicil*) *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*, the undersigned witnesses, and both witnesses being eighteen years of age or older, of sound mind, and under no constraint, coercion or undue influence, that the foregoing instrument, consisting of (*number of pages to codicil*) *\_\_\_\_\_* page(s) was the CODICIL to the Last Will and Testament of (*Testator name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*, dated (*date original Will signed*)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; who then signed the (first) CODICIL in our presence, and now in the presence of each other, we sign our names as witnesses.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (printed name)

**First Witness**

Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (printed name)

**Second Witness**

Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary

Personally known \_\_\_\_\_\_\_\_ OR Produced identification\_\_\_\_\_\_\_\_

Type of identification produced\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_