



Delta Gamma Foundation

Sample Codicil Language

FIRST CODICIL TO LAST WILL AND TESTAMENT
OF
TYPE YOUR FULL NAME HERE

I, full name, residing in _____ county, state, declare this to be a First (*or Second, etc.*) Codicil to my Last Will and Testament dated month day, year.

1. ITEM 1 (*Or whichever item is appropriate for your Will*) of my Will shall be amended by renumbering current ITEM 1 as ITEM 1A and by adding the following language as ITEM 1B:

“ITEM 1B. I give to the Delta Gamma Foundation, 3250 Riverside Drive, P.O. Box 21397, Columbus, OH 43221-0397, the sum of written in words, (then \$ numbers) (*or a percentage, etc.*) to use as part of its unrestricted funds.” (*Or you may restrict your gift.*)

2. All of the remaining provisions of my Will shall remain in full force and effect.

IN WITNESS WHEREOF, I have hereunto set my hand at city, state this _____ day of month, year.

Type your full name under the line

The forgoing instrument was signed, acknowledged, published and declared by full name, as and for a First (*or Second, etc.*) Codicil to her Last Will and Testament, in our presence, and we thereupon at her request, and in her presence, and in the presence of each other, hereunto subscribed our names as witnesses on the date hereinabove written.

_____ residing at _____
Type full name of witness

_____ residing at _____
Type full name of witness



Delta Gamma Foundation

State of _____

County of _____

On the _____ day of _____ in the year _____, before me, the undersigned notary public, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her capacity, and that by her signature on the instrument, the individual executed the instrument.

Notary Public

*This information is not intended as legal or tax advice.
For such advice, please consult an attorney or tax advisor.*