CODICIL TO THE LAST WILL AND TESTAMENT

OF

_____
(Print Full Name)

I, _____ *(Print Full Name)*, a Resident of _____ County, _____, do make and publish this CODICIL, to my LAST WILL AND TESTAMENT (WILL) executed on _____ (*Month/Day/Year)*, and declare that said WILL, is amended by this CODICIL to be my LAST WILL AND TESTAMENT.

In addition to all of the other bequests contained in my WILL, I hereby give the sum of $_____ or _____ percent of my probate estate to Gulf Coast Senior Services, Inc. a/k/a Gulf Coast Dementia Services.

In the presence of two witnesses, I hereunto sign my name, on this _____ day of _____, 20__.

_____
Testator

_____ _____
Witness Witness

(Print Names and Addresses of Witnesses Below)

STATE OF _____)
) NOTARY/VERIFICATION
COUNTY OF _____)

I, _____, a Notary Public in and for said County, in said State, hereby certify that the Testator, _____, and the Witnesses, _____, _____, whose names are signed to the foregoing document, and who are known to me, acknowledged before me this day, that, being informed of the contents of said document, they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this _____ day of _____, 20____.

_____
Notary Public

My Commission Expires: _____/_____/_____