ARE YOU LOOKING TO LEAVE A GIFT TO THE FRIENDS OF ISRAEL GOSPEL MINISTRY IN A CODICIL?

Thank you for considering leaving a gift to our organization in your estate plan. Some donors choose to leave a gift in a codicil – a minor change or addition to an existing will. We're happy to provide some suggested language that can be used for this purpose, but keep in mind you'll have to have the codicil signed by one or more witnesses in order to be valid, according to the laws of your state.

Below, you'll find some sample codicil language to facilitate your gift to The Friends of Israel Gospel Ministry:

CODICIL TO THE WILL OF

[TESTATOR NAME]

I, [TESTATOR NAME], of [COUNTY] County, [STATE], do make and declare this to be the Codicil to my last will and testament, which was executed on the [DATE] day of [MONTH], [YEAR] (such last will and testament being hereinafter referred to as my "Will"), and I now republish and declare said Will, as amended by this Codicil, to be my Will.

ITEM I.

I add the following provision to my Will as [Article [ARTICLE NUMBER]/Paragraph [PARAGRAPH LETTER] of Article [ARTICLE NUMBER]]:



[e.g., \$[Amount] shall be distributed to The Friends of Israel Gospel Ministry, a nonprofit organization, EIN 23-1365331, with an address at PO Box 908, Bellmawr, NJ 08099, or its lawful successor, to be used in support of [Program/Purpose]; provided, however, that if the preceding instruction should become impossible or impractical to fulfill as determined by the Board of Directors (or equivalent governing body) of the beneficiary, the beneficiary may use this gift as determined by its Board of Directors (or equivalent governing body)]

RATIFICATION

In every other respect, I hereby ratify, confirm and republish my said Will.

IN WITNESS WHEREOF, I have signed this Codicil to my Will consisting of [NUMBER] pages, this page included on the [DATE] day of [MONTH], [YEAR].

[TESTATOR NAME], Testator

The foregoing instrument was signed by the Testator in our presence and declared by the Testator to be the Codicil to the Testator's Will, and we, the undersigned witnesses, sign our names hereunto as witnesses at the request and in the presence of the Testator, and in the presence of each other on the [DATE] day of [MONTH], [YEAR].

[FIRST WITNESS NAME]

[FIRST WITNESS ADDRESS]



SELF-PROVING AFFIDAVIT

STATE OF [STATE]
COUNTY OF [COUNTY]

I, [TESTATOR NAME], sign my name to this instrument this [DAY] day of [MONTH], [YEAR], and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as the Codicil to my Will and that I sign it willingly (or willingly direct another to sign for me), that I execute it as my free and voluntary act for the purposes therein expressed, and that I am 18 years of age or older, of sound mind, and under no constraint or undue influence.

[TESTATOR NAME], Testator

We, [FIRST WITNESS NAME] and [SECOND WITNESS NAME], sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the Testator signs and executes this instrument as the Codicil to their Will and that they sign it willingly (or willingly directs another to sign for them), and that each of us, in the presence and hearing of the Testator, hereby signs this Codicil as witness to the Testator's signing, and that to the best of our



	[FIRST WITNESS NAME]
	[FIRST WITNESS ADDRESS]
	[SECOND WITNESS NAME]
	[SECOND WITNESS ADDRESS]
STATE OF [STATE] COUNTY OF [COUNTY]	
COUNTY OF [COUNTY] SUBSCRIBED, sworn to and acknown MAME], and subscribed before me	e by the witnesses, [FIRST WITNESS NAME],
COUNTY OF [COUNTY] SUBSCRIBED, sworn to and acknown NAME], and subscribed before me	owledged before me by the Testator, [TESTATOR e by the witnesses, [FIRST WITNESS NAME], this [DATE] day of [MONTH], in the year [YEAR].
COUNTY OF [COUNTY] SUBSCRIBED, sworn to and acknown NAME], and subscribed before me	e by the witnesses, [FIRST WITNESS NAME],
COUNTY OF [COUNTY] SUBSCRIBED, sworn to and acknown NAME], and subscribed before me	e by the witnesses, [FIRST WITNESS NAME],



