

STATE OF SOUTH CAROLINA)
)
) FIRST CODICIL
COUNTY OF _____)

I, _____, a resident of the County of _____, State of South Carolina, hereby make and publish this First Codicil to my will dated _____, as follows:

(1) I hereby amend my said will by adding a new paragraph at the end thereof to read as follows:

() I give, devise and bequeath the sum of \$_____ to BUNCOMBE STREET UNITED METHODIST CHURCH ENDOWMENT FUND, INC., Greenville, South Carolina, or its successor, for its general purposes.

[OPTION] () I give, devise and bequeath _____ % of my residuary estate to BUNCOMBE STREET UNITED METHODIST CHURCH ENDOWMENT FUND, INC., Greenville, South Carolina, or its successor, for its general purposes.

(2) Ratification. As amended by this First Codicil, I hereby confirm, ratify and republish my said will dated _____.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this _____ day of _____, 20_____.

Signature

SIGNED, SEALED, PUBLISHED and DECLARED by the above named Testator, _____, as and for the First Codicil to his Last Will and Testament dated _____, in the sight and presence of us, who, at his request, and in his sight and presence, and in the sight and presence of each other, have hereunto signed our names as attesting witnesses.

_____ of _____

_____ of _____

I, _____, the Testator, sign my name to this instrument this _____ day of _____, 20____, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as the First Codicil to my last will, that I sign it willingly, that I execute it as my free and voluntary act for the purposes therein expressed, and that I am eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

Signature

We, _____ and _____, the witnesses, sign our names to this instrument, and at least one of us, being first duly sworn, does hereby declare, generally and to the undersigned authority that the Testator signs and executes this instrument as the First Codicil to his last will and that he signs it willingly, and that each of us, in the presence and hearing of the Testator, hereby signs this First Codicil as witness to the Testator's signing, and that to the best of our knowledge the Testator is eighteen (18) years of age or older, of sound mind, and under no constraint or undue influence.

Witness

Witness

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)

Subscribed, sworn to, and acknowledged before me by _____, the Testator, and subscribed and sworn to before me by _____, witness, this _____ day of _____, 20____.

Notary Public for South Carolina
My Commission Expires: _____