

CODICIL TO MY EXISTING WILL

Simply complete and print this form, sign it in the presence of two witnesses and keep it with your existing Will.

Alternatively, you may prefer to visit your solicitor who can complete this document on your behalf.



I (full name)

of (address)

..... Postcode:

Declare this to be the (insert number of codicil i.e. 1st, 2nd etc.)

.....

Codicil to my Will dated

I give to: St. Gemma's Hospice 329 Harrogate Road Moortown Leeds, LS17 6QD
Registered Charity Number: 1015941

The sum of £.....

The following specific item(s), namely
.....

The whole residue of my estate (please tick if this is your chosen option)

The following proportions of the residue of my estate
.....

I direct that the receipt of the legacy officer or other responsible officer for the time being of St. Gemma's Hospice shall be good and sufficient discharge to my executor(s). In all other respects I confirm my said Will.

Signed:

Date (in words):

Signed by the above names in our joint presence and then by us in his/hers

1st Witness Name (signature):
.....

Address:

..... Postcode:

2nd Witness Name (signature):
.....

Address:

..... Postcode:

Important note: Once this form has been completed please keep it with, but do not attach it to, your existing Will.