

Codicil Form

Should you wish to make an amendment to your Will and include a gift to Wakefield Hospice, you can fill in this form and send it to your solicitor who will not charge you for appending it to your existing Will.

CODICIL TO MY EXISTING WILL

I (full name)

of (address)

(Postcode)

DECLARE this to be the (insert number of Codicil i.e. 1st, 2nd, 3rd etc) codicil to my Will dated

I give to:

Wakefield Hospice
Aberford Road
Wakefield
WF1 4TS

Registered Charity Number 518392

The sum of £_____

The following specific item(s),
namely_____

The following percentage (%) of the residue of my estate_____

(without the deduction of inheritance tax)

I direct that the receipt of the Treasurer or other proper officer of Wakefield Hospice for the time being shall be full and sufficient discharge of the said legacy. In all other respects I confirm my said Will and any other codicils thereto.

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

(Two witnesses are needed in England and Wales and Northern Ireland; only one is needed in Scotland. Please note that the witnesses cannot also be beneficiaries of the Will).