

Sample Codicil Form

This is a codicil of me (name) of(address). I declare this to be a first/second/other (*delete as appropriate*) codicil to my will dated(day)(month)..... (year) (“the will”).

1. The will shall be construed and take effect as if it contained the following clause:

“I give to the Peace Hospice Care, Peace Drive, Watford, Hertfordshire, WD17 3PH, registered charity number 1002878, the sum of £..... /.....(*description of item*)/..... % share of my estate (*delete as appropriate*) for their general purposes and I direct that the receipt of an authorised officer of Peace Hospice Care shall be a full and sufficient discharge to my personal representative(s)”.

2. In all other respects I confirm the will.

IN WITNESS whereof I have hereunto set my hand this day of(day)(month) (year).

SIGNED by(*your name*) as a first/second/other (*delete as appropriate*) Codicil to the Will dated(date).

(Signature)

in our joint presence and then by us in his/hers.

FIRST WITNESS

(*Signature of witness here*)

Name

Address

Occupation

SECOND WITNESS

(*Signature of witness here*)

Name

Address

Occupation

(This must be signed and witnessed in the same way as your original will. Please speak with your solicitor about index linking a pecuniary gift to preserve its value. The completed Codicil should be kept with your will)