Codicil Form

If you already	ave a Will, you can make a simple change to it to keep on helping children through
KidsCan Charit	ble Trust.
Simply comple	te this Codicil form, have it witnessed as shown, and send it to your Lawyer or Solicitor.
As always with	Wills, it is good to keep your family informed about your wishes.
I	full name) give and bequeath
Please choose	one of the following:
	% of my estate
The sum of \$ _	
	% of the residue of my estate
Property or ass	ets as follows:
	ges and duties, to KidsCan Charitable Trust , 7 Beatrice Tinsley Crescent , Albany , Auckland eral purposes and declare that the receipt of an officer of KidsCan Charitable Trust
Incorporation	hall be full and sufficient discharge to my Executor for all moneys paid under this gift
and my trustee	s shall not be bound to see the application of this gift.
(Signed by me	n the presence of two witnesses)
My Signature:	Occupation:

Full Name:		
Address:		
Witness signature:Occupation:_		
Full name:		
Address:		
Witness signature:Occupation:_		
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- "		
Full name:	·····	
Address:		
Date:/		
Thank you for continuing your commitment to care for Kiwi Kids su	upported by KidsCan Charitable Trust	
KidsCan Charitable Trust, 7 Beatrice Tinsley Crescent, Albany , Auckland 0632		
09-478 1523		
www.kidscan.org.nz		
Charity registration number CC10386		
Charity registration number octudes		