

Codicil

Please keep this document in a safe place together with your Will

Please ensure that you sign this form in the presence of two independent witnesses.

The following people **cannot** witness your codicil:

- Your executor
- Your executor's spouse
- A beneficiary of your Will
- A beneficiary's spouse

**Children with
Cancer UK**

Helping children and young
people with cancer to ring the bell



I (full name)

of (full address)

Postcode

declare this to be the (1st/2nd/3rd/other)

codicil to my Will dated and made (date)

I give, free of inheritance tax, the sum of £

to Children with Cancer UK, of 51 Great Ormond Street,
London WC1N 3JQ registered charity number 298405,
absolutely for its general charitable purposes and I declare
that the receipt of the treasurer or other proper officer
for the time being shall be a sufficient discharge to my
executors.

In all other respects I confirm my said Will.

In witness whereof I have hereunto set my hand this
(day) of (month) (year)

This is my 1st/2nd/3rd/other codicil to the Will:

Testator's signature:

Signed in the presence of:

First Witness

Signature

Full name

Address

Occupation

Second Witness

Signature

Full name

Address

Occupation