

# Codicil Form

**Please keep this with (but not stapled or clipped to) your Will.**

If you have any questions about writing a codicil or updating your Will, you should seek advice from a qualified professional, such as a solicitor.

**Please note**, South Bucks Hospice cannot give you any advice regarding your Will or any codicils added to it.

Insert your full name, full address and postcode.

  
  
  
  
  
  
  
  
  
  
  

Insert the date of your Will.

  
  
  
  
  
  
  
  
  
  
  

Insert here the share of your estate or the amount of money using both words and figures e.g. One Thousand Pounds (£1,000) or the description of the item you wish to leave to South Bucks Hospice.

  
  
  
  
  
  
  
  
  
  
  

Sign and date your codicil in the presence of two independent witnesses.

  
  
  
  
  
  
  
  
  
  
  

Your witnesses must be over 18 and of sound mind. They must be present, must sign the Codicil together and must not benefit from the Will or Codicil or be a spouse or civil partner.

I (name) .....

Of (address) .....

..... Postcode .....

Declare this is my first/second/third\* (\*delete as appropriate) codicil to my last Will, which is dated .....

I give to South Bucks Hospice (registered charity number 1128881) of Kingswood Park, High Wycombe, Bucks, HP13 6GR

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to be applied for its general charitable purpose.

In all other respects I confirm my said Will and any existing codicils.

Signed..... Date .....

**Witnesses should fill in this section**

Signed by the above names in our joint presence and then by us in his/hers/theirs and in each others.

Witness 1	Witness 2
Full Name .....	Full Name .....
Address .....	Address .....
.....	.....
.....	.....
Postcode .....	Postcode .....
Date .....	Date .....
Signature .....	Signature .....

Thank you for your generosity in remembering South Bucks Hospice in your Will.