

Codicil Form

I (Full Name)

OF (Full Address)

.....

.....

Declare this to be a.....(first/second as appropriate) Codicil to my last Will dated the.....(insert date of will) and to my codicil(s) dated.....(cross through if no other codicils) (together "**my Will**").

MY WILL shall be construed and take effect as if it contained the following clause:

I give free of inheritance tax to: British Deaf Association 356 Holloway Road, London N7 6PA

- a) per cent (.....%) (percentage in words and figures) of my residuary estate for the general purposes of the said charity.

- b) The sum of.....pounds (£.....) (sum in words and figures) for the general purposes of the said charity.

The receipt of the secretary or other officer for the time being of the said charity shall be sufficient discharge to my executors.

IN ALL other respects I confirm my Will

In WITNESS whereof I have hereunto set my hand on this..... day of.....20.....

Signed by the said.....(Name)

.....(Signature of Testator)

As and for a.....(first/second etc) codicil to his/her Will
in our presence.

And by us jointly attested and subscribed in his her/presence.

FIRST WITNESS

Name.....

Address.....

.....

.....

Occupation.....

SECOND WITNESS

Name.....

Address.....

.....

.....

Occupation.....

Please note that your witnesses cannot be beneficiaries in your Will or be married to anyone who is a beneficiary of your Will. You must sign the Will in front of both witnesses who must both then sign the form in front of your and each other. Your witnesses should then fill in their name, address and occupation as above.