

SAMPLE ONLY – FOR GUIDANCE

Please follow this example for guidance on how the blank form of codicil should be completed. If you are in any doubt, please consult your solicitor.

I ***[ENTER YOUR FULL NAME AS IT APPEARS ON YOUR WILL]*** of ***[enter your full current address]*** declare this to be a Codicil to my Will which bears the date of ***[enter date of your Will]***

1. I give free of inheritance tax to **THE HELEN ARKELL DYSLEXIA CENTRE** of Arkell Lane, Frensham, Farnham, Surrey GU10 3BL (Registered Charity Number 1064646) **THE SUM OF *[enter amount of gift in words and figures e.g. FIVE HUNDRED POUNDS (£500.00)]***
2. In all other respects I confirm my Will.

Signed by me on ***enter date e.g. 21 July 2015***

SIGNED by the above named as a Codicil to)
his or her Will in our presence and then by us) ***Your usual signature here***
in his or hers:)

W Signature	W Signature
I Name	I Name
T Address	T Address
N	N
E	E
S	S
S Occupation	S Occupation

Directions for signing:

Enter the relevant information indicated in square brackets into a blank copy of the codicil form. *[For a blank copy click here]*

Enlist two witnesses who must be unrelated to you, at least 18, of sound mind, and not beneficiaries under your Will.

You and the witnesses should all gather together and remain together during the signing procedure.

You should enter the date where shown and then sign in your usual signature where shown.

Your witnesses should then each sign in the boxes below your signature, and add their name, address and occupation.

Your codicil should then be kept safely with your Will.

I of
.....
.....

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