

**Codicil**

**Please keep this form with (but not stapled 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.

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| **This is my first/second/third\* codicil to my last will** (\*delete as appropriate) | | |
| which is dated ………………………………… of me (name) …………………………………………………………………..  Address ……………………………………………………………………………………………………………………………………..  ……………………………………………………………………………….. Postcode ……………………………………………….. | | **<** Insert the date of your will and your full name. Insert your full address and postcode. |
| In addition to legacies given by me in my said will I give to **The Surrey and Hampshire Canal Society Limited**, No. 1296593, Island House, Moor Road, Chesham, Bucks, HP5 1WA (Registered charity number 273085) to be applied to the general charitable purposes of the said charity  …………………………………………………………………………………………………………………………………………………..  ………………………………………………………………………………………………………………………………………………….  I direct that the receipt of the Treasurer for the time being, or any other duly authorised officer shall be sufficient discharge for my executors. If before my death, or even after my death but before my executors have given effect to the gift, the Surrey and Hampshire Canal Society Limited has changed its name or amalgamated with any other body, or transferred all its assets to any other body then my executors shall give effect to the gift as if it were a gift to the body in its changed name or to the body that results from the amalgamation or to the body to which the assets have been transferred. | | **<** Insert here the share of your estate or the amount of money using both words and figures – for example, one thousand pounds (£1,000) – or the description of the item you wish to leave to the Society. |
| In all other respect I confirm my said will and any existing codicils thereto.  **Signed ………………………………………………………………… Date ……………………………………**  Signed by the above testator in our joint presence and then by us in his/hers | | **<** Sign and date here in the presence of two independent adult witnesses. |
| **Witness 1**  Name …………………………………………………………….  Address …………………………………………………………  ………………………………………………………………………  ………………………………………………………………………  Occupation ...……………………………………………...  Date ……………………………………………………………  Signed …………………………………………………………. | **Witness 2**  Name …………………………………………………………….  Address …………………………………………………………  ………………………………………………………………………  ……………………………………………………………………..  Occupation .…………………………………………………  Date .…………………………………………………………..  Signed …………………………………………………………. | **< Your witnesses**  - must complete fully and be both present and sign and date here at the same time in your presence.  - They must be over 18 and must not be beneficiaries in your will or their spouse or civil partner.  - Neither witness should be an Officer of the Surrey & Hampshire Canal Society Limited |