



**MAKING A  
DIFFERENCE  
FOR SERIOUSLY  
ILL CHILDREN**

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

# CODICIL

**Please keep this document in a safe place together with your will**

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 Camp Simcha, of Amélie House, 221 Golders Green Road, London NW11 9DQ, registered charity number 1180646, 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) 20\_\_\_\_\_

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 \_\_\_\_\_