

I (name) _____ of (address) _____
 _____ Declare this to be a _____ (1st/2nd/ or appropriate number)
 Codicil to my last will, dated the _____ day of _____ of the year _____ ('my will')

My will shall be construed and take effect as if it contained the following clause:

I give, free of inheritance tax to:

The **Royal Medical Benevolent Fund**, 24 Kings Road, Wimbledon, London SW19 8QN
 A charity registered with the charity commission for England and Wales No. 207275.
 A company limited by guarantee registered in England No. 00139113.

A) the sum of _____ pounds (£ _____)

or

B) _____ per cent (_____ %) of my residuary estate

for the general purposes of the charity.

The receipt of the Treasurer or other Officer of the said charity shall be sufficient discharge to my Executors.

In ALL other respects I confirm my said will (and codicil dated _____)

IN WITNESS whereof I have hereunto set my hand on this _____ day of _____ / 20 _____

Signed by the said _____ (Name) _____ (Signature of Testator)

Signed by the said _____ as a codicil to his/her will dated _____

in our joint presence and then by us in his/hers.

First Witness

Name _____ Signature _____

Address _____

Occupation _____

Second Witness

Name _____ Signature _____

Address _____

Occupation _____

Please send your completed codicil to your legal representative or solicitor