

# Codicil Form

I \_\_\_\_\_ (full name)  
of \_\_\_\_\_ (full address)

DECLARE this to be a \_\_\_\_\_ (first, second & c.) Codicil to my Will dated  
the \_\_\_\_\_ (insert date of Will) and to my Codicil(s) dated \_\_\_\_\_  
(cross through if no other Codicils)

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

I give to the Mistress, Fellows and Scholars of Girton College, Cambridge (Registered  
Charity Number 1137541) [the residue of my estate] [ \_\_\_\_\_ % of the residue of my estate]  
[the sum of \_\_\_\_\_ free of tax for the [general purposes of the College]  
[for \_\_\_\_\_ ] and I declare that the receipt by the Bursar or other  
authorised Officer of the College shall be good and sufficient discharge to my Executors.  
IN ALL other respects I confirm the Will.

AS WITNESS my hand this \_\_\_\_\_ day of \_\_\_\_\_ (month) \_\_\_\_\_ (year)

SIGNED by the testator as a \_\_\_\_\_ (first, second &c.) Codicil to the Will in our presence:-  
\_\_\_\_\_ (signature of testator)

and then by us in his / her presence:-

## FIRST WITNESS

## SECOND WITNESS

\_\_\_\_\_  
(Signature of first witness)

\_\_\_\_\_  
(Signature of second witness)

\_\_\_\_\_  
(Name of first witness)

\_\_\_\_\_  
(Name of second witness)

\_\_\_\_\_  
(Address of first witness)

\_\_\_\_\_  
(Address of second witness)

\_\_\_\_\_  
(Occupation of first witness)

\_\_\_\_\_  
(Occupation of second witness)



Please note that your witnesses can not be beneficiaries or Executors of your Will, or be married or in a civil partnership to anyone who is a beneficiary of your Will. You must sign the Codicil in front of both witnesses who must both then sign the form in front of you and each other.