



## The Fox Hospital

# Codicil Form

making a change to your will

*(includes a guide, an example, and a blank form)*



It's easy to add The Fox Hospital to your Will. You can do this by adding a codicil now – following the example given. A codicil is a written amendment to someone's Will, saving the need to re-write the whole document. It should be signed, dated and witnessed with the same legal formalities as a Will.

**How to complete your codicil form so that your codicil is valid, please follow these steps:**

**STEP 1**

Look at the example overleaf to help you complete your codicil form.

**STEP 2**

Sign each page in the presence of two witnesses\*, who should both sign the form as shown too. Your witnesses cannot be direct family members (including your spouse/civil partner) or those who stand to benefit from your Will or your codicil.

**STEP 3**

1. Keep your codicil safe, storing it with your current original Will (but do not staple or attach it in any way).
2. You may, if you wish, send or have the holder of your will send a photocopy of your completed codicil (not the original) to us at [gifts@thefoxhospital.org](mailto:gifts@thefoxhospital.org)

**We recommend that you seek the guidance of a solicitor when you make your Will or codicil, so that your intentions can be fully carried out.**

**Suggested Wording:**

**Pecuniary Gift or Pecuniary Legacy**

A pecuniary gift/legacy allows you to leave a **specific amount of money** to The Fox Hospital. You can leave a gift for general use or for specific items for example veterinary care, equipment, new enclosures. Example wording for this type of gift would be as follows:

*I give to The Fox Hospital (Registered Charity Number 1206417) the sum of (written in figures and words) £ \_\_\_\_\_ free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be applied to its general charitable purposes and I declare that the receipt of the Chief Executive or other proper officer shall be a full and sufficient discharge for the same.*

**Specific Gift**

A specific gift allows you to leave **property or other items** to be donated to charity. The wording for this type of gift would be as follows:

*I give to The Fox Hospital (Registered Charity Number 1206417) \_\_\_\_\_ (description of property/ specific items) free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be applied to its general charitable purposes and I declare that the receipt of the Chief Executive or other proper officer shall be a full and sufficient discharge for the same.*

**Residuary Gift or Residuary Legacy**

A residuary gift enables you to choose what **percentage of the remainder of your estate** is given to a specific charity. Residue is essentially what is left after any specific or pecuniary gifts have been made from the estate and all taxes paid. This can be anything, from cash to land to property. The wording for this type of gift would be as follows:

*I give to The Fox Hospital (Registered Charity Number 1206417) all (or \_\_\_\_\_ percentage share) of my residuary estate free of all taxes (and/or specifically named or described items, land or property), I express the wish as an absolute interest (without imposing any binding obligation) that such be applied to its general charitable purposes and I declare that the receipt of the Chief Executive or other proper officer shall be a full and sufficient discharge for the same.*

**A note on residuary gifts:**

This type of gift is a share of what remains in your estate after debts, legacies and administration expenses have been paid. They are very valuable to The Fox Hospital but can be more complex when it comes to tax, so you may wish to take advice first.

## Codicil Form (Example) - See blanks on next pages: making a change to your will

I: (insert your name) BARBARA BAMBOOZLE

of: (insert your address) 369 Example Street, Exampleshire, NT36 9FH

HEREBY DECLARE this to be the: (first / second) FIRST

Codicil to my Will which bears the date: (existing Will date) 08 JANUARY 2005

### New provision:

I give to The Fox Hospital, charity number 1206417, the sum of: (written in words and figures)

FIVE THOUSAND POUNDS (£ 5000)

free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be used for the general purposes of the Fox Hospital.

*date shown on  
your existing will*

### In all other respects I confirm my said Will IN WITNESS whereof I have set my hand to this:

(date) 3RD day of (month) APRIL in the year 2024

### SIGNED by the Testator / Testatrix (the bearer of this Will):

In the presence of us both present at the same time who at the Testator / Testatrix request in (his / her) HER presence and in the presence of each other have hereunto subscribed our names as witnesses.

(Signature of Testator / Testatrix): B Bamboozle

*The person named  
above whom this will  
belongs to*

### Witnessed by:

Signature: (witness 1)

Name: (witness 1)

Occupation: (witness 1)

A. Witness

A. WITNESS

Address: (witness 1)

123 Witness Street, Anytown, Countyshire, PO51 ODE, U.K.

Signature: (witness 2)

Name: (witness 2)

Occupation: (witness 2)

A. N. Other

A. N. OTHER

Address: (witness 2)

456 Witness Road, Anytown, Countyshire, PO51 ODE, U.K.



## Codicil Form (Pecuniary Gift): making a change to your will

I: (insert your name) \_\_\_\_\_

of: (insert your address) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HEREBY DECLARE this to be the: (first / second) \_\_\_\_\_

Codicil to my Will which bears the date: (your existing Will date) \_\_\_\_\_

### New provision:

I give to The Fox Hospital, charity number 1206417, the sum of: (written in words and figures)

\_\_\_\_\_

free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be used for the general purposes of the Fox Hospital.

### In all other respects I confirm my said Will IN WITNESS whereof I have set my hand to this:

(date) \_\_\_\_\_ day of (month) \_\_\_\_\_ in the year \_\_\_\_\_

### SIGNED by the Testator / Testatrix (i.e. the bearer of this Will):

In the presence of us both present at the same time who at the Testator / Testatrix request in (his / her) \_\_\_\_\_ presence and in the presence of each other have hereunto subscribed our names as witnesses.

(Signature of Testator / Testatrix): \_\_\_\_\_

### Witnessed by:

Signature: (witness 1)

Name: (witness 1)

Occupation: (witness 1)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address: (witness 1)

\_\_\_\_\_

Signature: (witness 2)

Name: (witness 2)

Occupation: (witness 2)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address: (witness 2)

\_\_\_\_\_



# Codicil Form (Specific Gift): making a change to your will

I: (insert your name) \_\_\_\_\_

of: (insert your address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HEREBY DECLARE this to be the: (first / second) \_\_\_\_\_

Codicil to my Will which bears the date: (your existing Will date) \_\_\_\_\_

## New provision:

I give to The Fox Hospital, charity number 1206417, the following property and/or specific item(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be used for the general purposes of the Fox Hospital.

## In all other respects I confirm my said Will IN WITNESS whereof I have set my hand to this:

(date) \_\_\_\_\_ day of (month) \_\_\_\_\_ in the year \_\_\_\_\_

## SIGNED by the Testator / Testatrix (i.e. the bearer of this Will):

In the presence of us both present at the same time who at the Testator / Testatrix request in (his / her) \_\_\_\_\_ presence and in the presence of each other have hereunto subscribed our names as witnesses.

(Signature of Testator / Testatrix): \_\_\_\_\_

## Witnessed by:

Signature: (witness 1)	Name: (witness 1)	Occupation: (witness 1)
_____	_____	_____

Address: (witness 1)  
\_\_\_\_\_

Signature: (witness 2)	Name: (witness 2)	Occupation: (witness 2)
_____	_____	_____

Address: (witness 2)  
\_\_\_\_\_



# Codicil Form (Residuary Gift): making a change to your will

I: (insert your name) \_\_\_\_\_

of: (insert your address) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HEREBY DECLARE this to be the: (first / second) \_\_\_\_\_

Codicil to my Will which bears the date: (your existing Will date) \_\_\_\_\_

### New provision:

I give to The Fox Hospital, charity number 1206417, all (or \_\_\_\_\_ percentage share) of my residuary estate (and/or specifically named or described items, land or property below).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

free of all taxes, I express the wish as an absolute interest (without imposing any binding obligation) that such be used for the general purposes of the Fox Hospital.

### In all other respects I confirm my said Will IN WITNESS whereof I have set my hand to this:

(date) \_\_\_\_\_ day of (month) \_\_\_\_\_ in the year \_\_\_\_\_

### SIGNED by the Testator / Testatrix (i.e. the bearer of this Will):

In the presence of us both present at the same time who at the Testator / Testatrix request in (his / her) \_\_\_\_\_ presence and in the presence of each other have hereunto subscribed our names as witnesses.

(Signature of Testator / Testatrix): \_\_\_\_\_

### Witnessed by:

Signature: (witness 1)	Name: (witness 1)	Occupation: (witness 1)
_____	_____	_____

Address: (witness 1)  
\_\_\_\_\_

Signature: (witness 2)	Name: (witness 2)	Occupation: (witness 2)
_____	_____	_____

Address: (witness 2)  
\_\_\_\_\_