

# Codicil Form

## To add to an existing Will

I (INSERT FULL NAME) .....

OF (INSERT ADDRESS) .....

DECLARE THIS TO BE A CODICIL TO MY WILL DATED (INSERT DATE IN WORDS) .....

WHICH IS LODGED WITH (INSERT ADDRESS OF SOLICITOR/BANK/OTHER) .....

In addition to any legacies given in my said Will, I give Loughborough University, Loughborough, Leicestershire  
LE11 3TU (Exempt Charity)

A ..... % share of my residuary estate to be used for general purpose or for the purpose of .....

OR The sum of (in figures and words) £ .....

(Please complete as appropriate and cross out the option above not required)

I declare that the receipt of the Registrar and Secretary or other authorised officer of Loughborough University shall  
be good and sufficient discharge to my Executors.

SIGNED BY THE ABOVE NAMED .....

DATE .....

Witnessed by the following persons who have signed their names in the presence of each other and the  
person named above.

NAME .....

OCCUPATION .....

ADDRESS .....

SIGNED ..... DATE .....

NAME .....

OCCUPATION .....

ADDRESS .....

SIGNED ..... DATE .....