

Codicil

Keep your Codicil with, but not attached to, your current Will, in a safe place:

I (name):

Of (address):

Declare this to be the first/second/third* Codicil to my last Will dated/...../.....

In addition to the provision of my said Will, I give to The Academy of Medical Sciences of 41 Portland Place, London W1B 1QH (Registered Charity Number 1070618):

(insert bequest details**)

.....

.....

to be applied by the Academy for its general charitable purposes. I direct that the receipt of the Treasurer or other proper Officer of the Academy for the time being shall be a full and sufficient discharge to my Executors/Trustees. In all other respects I confirm my said Will and any other Codicils thereto.

Signature:

Date:

Signed by the above named as a Codicil in the presence of us both present at the same time, who, at his/her request and in his/her presence and in the presence of each other, subscribed our names as witnesses:

Witness 1

Witness 2

Name:

Name:

Address:

Address:

Occupation:

Occupation:

Date:

Date:

Signed:

Signed:

*Please indicate what number this Codicil is.

**Please refer to the suggested wording on our website at www.acmedsci.ac.uk/legacy and add details of the type of gift you would like to make. Advice from your legal adviser should be sought when considering any gift arrangement.

Thank you very much for considering leaving a legacy to the Academy.

If you would like to receive any of this information by post, if you have any questions, or if would like to talk further about your wishes, please do not hesitate to contact the Academy on **020 3176 2152** or **treasurer@acmedsci.ac.uk**, or write to:

The Treasurer, Academy of Medical Sciences, 41 Portland Place, London W1B 1QH