

Codicil

This is the first codicil of (full name):

Occupation:

Address:

To my will dated this day of..... month..... year

I give, devise and bequeath (free of all charges and duty) to Miscarriage Support Auckland Inc.,

the sum of \$..... or

nominated property or..... % (proportion) of my residuary estate for the general purposes of the group or for the following purposes of the group namely

.....

I declare that the receipt of the President or Treasurer of Miscarriage Support Auckland Inc. shall be a full and sufficient discharge to my executor for the same and my executor shall not be bound to see the application thereof.

In all other respects I confirm my Will:

Dated this day ofmonth..... year

Signed by:

In our presence as witnesses and attested to by us in his/her presence:

1. Signed by:.....Occupation:.....

Address:

2. Signed by:Occupation:.....

Address: