

Please ensure that you sign Friends of the this form in the presence or two independent witnesses. Cromford Canal The following people cannot witness your codicil:

- Your executor
- Your executor's spouse
- A beneficiary of your will
- A beneficiary's spouse

Codicil Please keep this document in a safe place together with your will and send a copy to your solicitor.

I (full name)	Testator's signature:
of (full address)	Signed in the presence of:
	First Witness:
	Signature
Post Code declare	Full Name
this to be the (1st/2nd/3rd/other)codicil	Address
to my will dated and made (date)	
I give, free of inheritance tax, the sum of	
£ (sum in figures)	Post code
(sum in words)	Occupation
to the Friends of the Cromford Canal, 12	
Holymoor Road, Holymoorside, Chesterfield,	
Derbyshire, \$42 7DX, charity number 1164608,	Second Witness:
absolutely for its general charitable purposes	
and I declare that the receipt of the Friends of	Signature
the Cromford Canal Treasurer or other proper	Full Name
officer for the time being shall be a sufficient	Full Name
discharge to my executors.	Address
In all other respects I confirm my said will. In	
witness whereof I have hereunto set my hand	
this(day)	
	Post code
of(month) 20	Occupation