

## CODICIL – Canada

PLEASE ATTACH THE COMPLETED CODICIL TO YOUR EXISTING WILL. WE SUGGEST YOU CONSULT YOUR SOLICITOR WHEN MAKING ANY CHANGES TO YOUR WILL.

Codicil of FULL NAME \_\_\_\_\_

This Codicil is dated DAY \_\_\_\_\_ of MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

and is made by me of ADDRESS \_\_\_\_\_

\_\_\_\_\_  
I confirm my Will dated \_\_\_\_/\_\_\_\_/\_\_\_\_ in all respects, in addition to any legacies given in my said Will I give to **The International Nepal Fellowship** [PO BOX 1230, Kathmandu, Nepal; North American office: director@na.inf.org] :

\_\_\_\_\_  
SIGNATURE OF WILL MAKER: \_\_\_\_\_

Signed by the Will Maker of this Codicil in our presence, and in the presence of each other.

WITNESS 1 SIGNATURE \_\_\_\_\_

NAME, ADDRESS, OCCUPATION  
\_\_\_\_\_  
\_\_\_\_\_

WITNESS 2 SIGNATURE \_\_\_\_\_

NAME, ADDRESS, OCCUPATION  
\_\_\_\_\_  
\_\_\_\_\_