Codicil Form

If you already have a Will	, you can make a simple change to it to keep on helping children through
KidsCan Charitable Trust.	
Simply complete this Cod	dicil form, have it witnessed as shown, and send it to your Lawyer or Solicitor.
As always with Wills, it is	good to keep your family informed about your wishes.
Ι	full name) give and bequeath
Please choose one of the	following:
% of my e	state
The sum of \$	
% of the r	esidue of my estate
Property or assets as folk	ows:
_	uties, to KidsCan Charitable Trust , 7 Beatrice Tinsley Crescent , Albany , Auckland oses and declare that the receipt of an officer of KidsCan Charitable Trust
Incorporation shall be ful	l and sufficient discharge to my Executor for all moneys paid under this gift
and my trustees shall not	be bound to see the application of this gift.
(Signed by me in the pres	ence of two witnesses)
My Signature:	Occupation:

Full Name:
Address:
Witness signature:Occupation:
Full name:
Address:
Witness signature:Occupation:
Full name:
Address:
Date:/
Thank you for continuing your commitment to care for Kiwi Kids supported by KidsCan Charitable Trust
KidsCan Charitable Trust, 7 Beatrice Tinsley Crescent, Albany , Auckland 0632
09-478 1523
www.kidscan.org.nz
Charity registration number CC10386