



# LINCS & NOTTS AIR AMBULANCE SAVING LIVES EVERYDAY

Registered Charity Number 1017501

**Please note the following important information:**

- Please ask your solicitor to check that your Codicil is compatible with your existing Will.
- The Codicil must be signed by two independent witnesses (one if you are in Scotland) who are not your executor or your executor's spouse, a beneficiary of your Will or Codicil, or a beneficiary's spouse. They must both be present when you sign the Codicil.
- The Codicil must be kept with the existing Will but not attached to it.

I [your name]

of [your address]

Postcode

declare this to be my first/second/third [delete as appropriate] Codicil to my Will

dated [insert date of Will]

In addition to any legacies given in my said Will

I give [please tick and complete below as appropriate]:

\_\_\_\_\_ % [insert percentage as appropriate] of my estate [a gift of the residue]

The sum of £ \_\_\_\_\_ [a cash gift]

The following specific item(s), namely \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[a gift of a/number of possession(s)]

to the Lincolnshire & Nottinghamshire Air Ambulance Charitable Trust [registered charity number 1017501] of LNAACT House, Bentley Drive, Bracebridge Heath, Lincoln, LN4 2QW for its general charitable purposes, and I declare that the receipt(s) of the duly authorised officer shall be a full and sufficient discharge.

**In all other respects I confirm my said Will and any other Codicils thereto.**

Signed [your signature]

Date

