

## Codicil Form

I, \_\_\_\_\_, give and bequeath to The Multiple Sclerosis Society of Auckland and the North Shore Inc. (MS Auckland - CC 10863) for their work in supporting people with Multiple Sclerosis in the Auckland Region:

The sum of \$ \_\_\_\_\_

\_\_\_\_\_

free of all death and estate duties and I declare that the official receipt of MS Auckland shall be a full and sufficient discharge to my Executors.

(Signed by me in the presence of two witnesses)

MY SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FULL LEGAL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FULL LEGAL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FULL LEGAL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_