I _____ (*full name*)

of _____
(*address*)

declare this to be the [1st/2nd/other] codicil to my Will dated _____(*date*)

1.1 I give £[ ] free of inheritance tax to HOPE COMMUNITY VILLAGE, registered charity number 1041185 care of 14 Stafford Avenue, Halifax HX3 0BH absolutely for its general charitable purposes and I declare that the receipt of the treasurer or other proper officer for the time being shall be a sufficient discharge to my executors.

1.2 If, at my death, the charity named in clause 1.1 (Original Charity) no longer exists or is being wound up, my Trustees must:

(a) if the Original Charity has merged, or is about to merge, with another charity (Recipient Charity) and the merger, when completed, is registered in the official register of mergers maintained by the Charity Commission, pay the Recipient Charity the amount specified in clause 1.1 as being payable to the Original Charity; or

(b) if clause 1.2(a) does not apply, pay the amount specified in clause 1.1 as being payable to the Original Charity to another charity that has objects similar to the Original Charity.

2. In all other aspects I confirm my said Will.

Signed by me on _____ (*date*)

Signed by _____ (*print name*))

in our presence and then by us in
his/hers) (*signature*)

Witness 1	**Witness 2**
Signature:	
Full name:	
Address:	
Occupation:	