

**CODICIL FOR A BEQUEST TO  
THE SOUTH AFRICAN  
NATIONAL COUNCIL FOR THE BLIND**

To make a codicil to the SANCB in your Will, simply complete this form and sign it in front of two witnesses, neither of whom stand to benefit from your Will or from this codicil. Once completed, this codicil should be kept together with your Will, though **not** pinned, stapled or clipped to it.

Thank you for your kindness. Your gift will help blind and partially-sighted people of all races to lead independent and fulfilling lives.

Please complete in block letters

By this first (or number) \_\_\_\_\_ Codicil to my Will dated \_\_\_\_\_

I (full name) \_\_\_\_\_

of (address) \_\_\_\_\_

\_\_\_\_\_

in addition to the provision of my said Will give to the South African National Council for the Blind the sum of R \_\_\_\_\_ or (description of item)

\_\_\_\_\_ or the whole/ \_\_\_\_% of my estate not otherwise disposed of in my said Will for the support of blind people and I direct that the receipt of the Treasurer for the time being or other duly authorised officer shall be a sufficient discharge to my executors/trustees. In all other respects I confirm my said Will.

Signed (in front of witnesses) \_\_\_\_\_

Date \_\_\_\_\_

**FOR YOUR WITNESSES TO COMPLETE**

Singed by the above in our joint presence and then by us in his/hers

1st Witness (Mr/Mrs/Miss/Ms) \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

2nd Witness (Mr/Mrs/Miss/Ms) \_\_\_\_\_

Address \_\_\_\_\_

Occupation \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_