

## A Codicil to Your Will

If you already have a Will, you can make a simple addition to benefit Cystic Fibrosis New Zealand. Please complete this Codicil document and send to your lawyer or solicitor.

I \_\_\_\_\_ give and bequeath \_\_\_\_\_ %  
of my estate (or) the residue of my estate (or) \_\_\_\_\_ % of the residue of my estate (or)  
the sum of \$\_\_\_\_\_ (or) property or assets as follows:

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free of all charges and duties, to Cystic Fibrosis Association of New Zealand, Suite 2, 79  
Grafton Road, Grafton, Auckland to be used where most needed.

I declare that the receipt of the Chief Executive or other Officer of Cystic Fibrosis Association  
of New Zealand shall be sufficient discharge for my trustees in respect of such payment.

(Signed by me in the presence of two witnesses)

MY SIGNATURE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FULL NAME

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ADDRESS

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WITNESS SIGNATURE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FULL NAME

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ADDRESS

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WITNESS SIGNATURE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FULL NAME

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ADDRESS

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

**Thank you for making this special commitment to Cystic Fibrosis New Zealand's work.**

Cystic Fibrosis New Zealand, PO Box 110 067, Grafton, Auckland 1148  
Registered Charity # CC10274