

# CODICIL

THIS IS THE FIRST CODICIL to the last Will of me, [INSERT NAME OF TESTATOR], of \_\_\_\_\_, [insert address of testator], which Will is dated \_\_\_\_\_ [insert date].

I HEREBY amend my said Will by revising the following paragraphs:

1. [List the amendments to be made by way of the codicil. NOTE: extensive revisions should be made by making a new Will, and not be adding a codicil.]

#. In all other respects I hereby confirm my said Will.

IN WITNESS WHEREOF, I have signed this my \_\_\_\_\_ first and second Codicil to my last will, subscribed my \_\_\_\_\_ of \_\_\_\_\_

SIGNED by the said testator [TESTATOR], as a Codicil to the last Will, in the presence of us, both present at the same time, who at his/her request, in his/her presence and in the presence of each other, have hereunto subscribed our names as witnesses.

\_\_\_\_\_  
Signature of Testator

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
OCCUPATION

\_\_\_\_\_  
OCCUPATION

**SAMPLE PREVIEW**

TESTATOR'S NAME: [TESTATOR]  
DOCUMENT: Affidavit of witness to codicil to a will  
DEPONENT'S NAME: [DEPONENT]  
DATE OF AFFIDAVIT:  
EXHIBIT ATTACHED: A: Original codicil dated \_\_\_\_\_.

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THE DEPONENT SWEARS UNDER OATH OR AFFIRMS THAT THE INFORMATION IN THIS AFFIDAVIT IS WITHIN THE DEPONENT'S KNOWLEDGE AND IS TRUE. WHERE THE INFORMATION IS BASED ON ADVICE OR INFORMATION AND BELIEF, THIS IS STATED.

1. I am one of the subscribing witnesses to the First Codicil to the last Will of [TESTATOR].
2. The Codicil is dated \_\_\_\_\_ and is marked as Exhibit A to this affidavit.
3. When [TESTATOR] signed the Codicil, I believe he/ she
  - 3.1 was 18 years of age or more;
  - 3.2 understood that the document being signed was a Codicil to his/her Will;
  - 3.3 was competent to sign the Codicil.
4. [TESTATOR], myself and the other witness to the Codicil, \_\_\_\_\_, were all present together when the witnesses and [TESTATOR] signed the Codicil.
5. Before [TESTATOR] signed the Codicil he/she made the following changes to it:

SWORN OR AFFIRMED BEFORE A NOTARY PUBLIC AT \_\_\_\_\_, ALBERTA ON [date].

\_\_\_\_\_  
Deponent-

\_\_\_\_\_  
Notary's Name-