

**SAMPLE CODICIL STATEMENTS**

A codicil is an easy way to update your will. We are pleased to provide some samples of bequest statements that your attorney may use in drafting a codicil for your will. Any statements should also be reviewed by your own attorney to be sure it is right for you and accurately reflects your intention.

**FIRST C O D I C I L TO LAST WILL AND TESTAMENT OF**

\_\_\_\_\_

I do hereby refer to Article \_\_\_\_\_, Paragraph \_\_\_\_\_. I replace Article \_\_\_\_\_, Paragraph \_\_\_\_\_ with the following:

I, \_\_\_\_\_, of \_\_\_\_\_, Washington, being of lawful age and of sound and disposing mind and memory and not acting under duress, menace, fraud or undue influence of any person whomsoever, do make, publish and declare this to be a First Codicil to my Last Will and Testament dated \_\_\_\_\_.

**Option #1: Specific Bequest, Percentage.**

Specific Bequest. As soon as practicable following my death, my Person Representative shall distribute a sum equal to \_\_\_ percent (\_\_\_%) of my estate outright to Highline Medical Center Foundation, Burien, Washington, or its successor, for the purpose of \_\_\_\_\_.

**Option #2: Specific Bequest – Specific Dollar Amount**

Specific Bequest. As soon as practicable following my death, my personal Representative shall distribute the sum of \_\_\_\_\_ Dollars (\$\_\_\_\_\_) outright to Highline Medical Center Foundation, Burien, Washington, or its successor, for the purpose of \_\_\_\_\_.

**Option #3: Residuary Estate.**

Residuary Estate. I give, devise and bequeath all the rest, residue and remainder of my property and estate, both real and personal, of whatever kind and wherever located, that I own or to which I shall be in any manner entitled at the time of my death (collectively referred to as my "residuary estate"), outright to Highline Medical Center Foundation, Burien, Washington, or its successor, for the purpose of \_\_\_\_\_.

I do in all other respects hereby ratify, confirm and approve said Last Will and Testament, which was signed on \_\_\_\_\_, \_\_\_\_\_.

Executed on this date: \_\_\_\_\_ at \_\_\_\_\_, Washington.

\_\_\_\_\_  
Name

*Sample Codicil continued...*

The foregoing instrument was signed, published and declared by \_\_\_\_\_, the above-named Testator/Testatrix, to be the Testator's/Testatrix's First Codicil to Last Will and Testament in our presence, all being present at the same time, and we, at the Testator's/Testatrix's request and in the Testator's/Testatrix's presence and in the presence of each other, have subscribed our names as witnesses on the date above written.

Witness, \_\_\_\_\_ Witness,  
\_\_\_\_\_  
residing at \_\_\_\_\_ residing at \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DECLARATION OF WITNESSES**

THE UNDERSIGNED witnesses hereby declare:

1. That we are the attesting witnesses on the attached First Codicil to Last Will and Testament of \_\_\_\_\_, dated \_\_\_\_\_ and that we severally attested to said Codicil and subscribed the same at the request of and in the presence of said Testator or Testatrix, and in the presence of each other.
2. That said Testator or Testatrix, at the time of execution of said Codicil, was of lawful age and of sound mind and memory and that he or she voluntarily and as of his or her own free will signed said Codicil and declared the same to be his or her FIRST CODICIL TO LAST WILL AND TESTAMENT, in our presence.
3. That this Declaration is made at the request of said Testator or Testatrix. This Declaration is made under penalty of perjury under the laws of the State of Washington.

DATED: \_\_\_\_\_ at \_\_\_\_\_, King County, Washington.  
WITNESS, \_\_\_\_\_  
WITNESS, \_\_\_\_\_