



St Hugh's College, Oxford

**Codicil Form**

If you have already made a will you can make a simple addition to include St Hugh's College by completing the instructions below and taking this form along to your solicitor. We recommend that you also send a copy to St Hugh's College so that we may acknowledge your generosity.

I ..... (Name)

of ..... (Address)

.....

DECLARE this to be a ..... (*first/second as appropriate*) codicil to my last will, dated the.....day of .....19...../20.....("my will").

My will shall be construed and take effect as if it contained the following clause:

I give free of Inheritance Tax to:

St Hugh's College, St Margaret's Road, Oxford) OX2 6LE  
(Registered Charity No. 1139717)

a) ..... per cent ( ....%) (*percentage in words and figures*) of my residuary estate for the general purposes (*or other stated purpose*) of the said Charity.

b) The sum of.....pounds (£.....) (*sum in words and figures*) for the general purposes (*or other stated purpose*) of the charity.

The receipt of the Bursar or other officer for the time being St Hugh's College shall be sufficient discharge to my Executors.

IN ALL other respects I confirm my will.....  
(*and codicil dated*) (*date of codicil*)

IN WITNESS whereof I have hereunto set my hand on this ..... (*day*) of..... (*month*) of 20... (*year*).

Development Office  
St Hugh's College, St Margaret's Road, Oxford, OX2 6LE  
[development.office@st-hughs.ox.ac.uk](mailto:development.office@st-hughs.ox.ac.uk)  
+44 (0)1865 274958  
[www.st-hughs.ox.ac.uk](http://www.st-hughs.ox.ac.uk)  
Registered Charity 1139717



St Hugh's College, Oxford

SIGNED by the said.....  
(Full Name)

.....  
(Signature of testator)

.....

As and for a .....(first/second. etc. Please remove invalid number) codicil to his/her will in our presence

And by us jointly attested and subscribed in his/her presence.

**FIRST WITNESS**

Signature of Witness .....

Full Name:.....

Address.....

.....

Occupation.....

**SECOND WITNESS**

Signature of Witness .....

Full Name:.....

Address.....

.....

Occupation.....