



Ottawa Regional  
**Cancer  
Foundation**

**Fondation  
du cancer**  
de la région d'Ottawa

## Adding a Codicil to an Existing Will

Thank you for considering a future gift to the Ottawa Regional Cancer Foundation. Your gift will make a difference for those facing cancer in our community.

If you already have a will in place you can still add the Cancer Foundation to your will by adding a codicil.

In order for a codicil to be valid, it must meet three requirements.

- The codicil must be made in writing;
- The codicil must be made by a legally competent adult (i.e. the testator / testatrix must be 18 years or older and mentally capable of making a codicil);
- Finally, the testator/testatrix must sign the codicil in the presence of two witnesses who are both present during the signing.

Although you are not required to use a lawyer to set up your codicil, we do advise you to seek legal advice before completing a codicil.

**Please do not write on or amend your current will, as it could become invalid.**

When deciding the purpose of your gift, please consider that specific programs change over time so being broader in your intentions will allow for ease in administering your estate. For examples of bequest wording please download or request our [Planned Giving Booklet](#).

After you have completed your codicil, we encourage you to let us know that you have included a gift in your estate plans so we can thank you for your thoughtful future gift.

If you have questions or would like to confidentially discuss your gift, please contact:

**Catherine Boivin**

Manager, Donor Experience  
Telephone: 613-247-3527 ext. 246  
E-mail: [cboivin@ottawacancer.ca](mailto:cboivin@ottawacancer.ca)

## Codicil To An Existing Will

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

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal code: \_\_\_\_\_

Declare this to be a \_\_\_\_\_ (first/second) codicil to my will dated \_\_\_\_/\_\_\_\_/\_\_\_\_.

In addition to any other legacies given in my said will, I give to the **Ottawa Regional Cancer Foundation**,  
1500 Alta Vista Road, Ottawa, ON K1G 3Y9, Charitable registration number 89831 1170 RR 0001,

\_\_\_\_\_ (i.e. a share of \_\_\_ of my estate and/or the sum of \$\_\_\_\_ )

to be used as the Board of Directors of the Ottawa Regional Cancer Foundation may determine **or** for  
the purpose of \_\_\_\_\_.\*

In all other respects I confirm my said Will and all other codicils thereto.

\* please complete as required and cross out what does not apply

Signed \_\_\_\_\_ Date \_\_\_\_\_

I verify that the above named signed in our presence and was witnessed by us in the presence of  
him/her and each other.

Witnessed by:

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date: \_\_\_\_\_

Witnessed by:

Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date: \_\_\_\_\_