## **Sample Codicil**

I give, devise, and bequeath \$ to Jackson Blvd #1073, Chicago, Illinois 60607,	o the Muscular Dystrophy Association, 1016 W
Jackson Biva # 1073, Officago, fillifols 60007,	, for its charitable uses and purposes.
In all other respects I ratify and confirm all of dated on the day of	the provisions of my said last Will and Testament, 20
	declare this instrument to be a Codicil to my last persons witnessing said Codicil at my request this
residing at (name)	
Witnesses	
residing at (name)	
residing at	

The codicil, to be valid, must be signed in the presence of witnesses, and the original placed with your other valuable papers. A copy can go to your lawyer and a copy to the Muscular Dystrophy Association.