

Rescue, Rehabilitation & Rehoming Centre

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CODICIL TO LAST WILL & TESTAMENT

Name in full:			
Identity number	:		
	Day Rescue, Rehabilitation & Rel Rehabilitation & Rehoming Centi		uccessor) for the general purposes of The
	and I declare that the receipt of Rehoming Centre (or its succes		e time being of the The 9th Day Rescue , narge to my executors.
I subscribe this (Codicil to my will & testament on	n thisday of	20
Signature of Tes			
•	of us, both present at the same to other, have hereinto set our na		quest, and in his/her presence, and in the
1 st WITNESS		2 nd WITNESS	
Full Name:		Full Name:	
Address:		Address:	
Signature:		Signature:	
Date		Date:	