## Codicil

If you would like to include The Food Sharing Project in your existing Will, please complete this Codicil form
and send it to your solicitor.
I, (full name)
of(full address)
publish and declare this to be the (first, second, etc) Codicil to my Last Will and Testament
dated the (day) of (month), (year).
In addition to any legacies given in my Will, I give to The Food Sharing Project, 37 Rigney Street, Unit 4,
Kingston, Ontario, K7K 6Z3 (Charitable Registration #118933522RR0001): % share of my estate;
☐ the sum of: \$;
☐ specific property: (please use space below to provide a description)
To be used for:
the highest priorities as determined by the Board of The Food Sharing Project;
☐ the purpose of: (please use space below to provide a description)
In the event that circumstances make the specific use of this gift no longer practical or desirable, the Board of
Directors of The Food Sharing Project in their absolute and sole discretion, is hereby authorized to make changes

in its use consonant with the spirit and general intent of the gift.

SIGNED by the testator,			(your full name), as a Codicil to his/her/	
their last Will, in the	e presence of us, bo	th present at the same time, who a	t his/her/their request in his/her/their	
presence and in the	e presence of each o	ther have hereunto subscribed our	names as witnesses.	
Dated the	(day) of	(month),	(year).	
Witness Signature		Witness Signature		
Witness Name		Witness Name		
Witness Address				
	n			

Thank you for completing and returning to The Food Sharing Project at info@foodsharingproject.org.

## For more information, please contact:

The Food Sharing Project 613.530.3514 | info@foodsharingproject.org 37 Rigney Street, Unit 4 Kingston, ON K7K 6Z3



Providing healthy food to students