



## END OF LIFE WISHES

To my family, my physicians, my lawyer, and all others to whom it may concern:

If the time comes when I can no longer take part in decisions for my own future, let this statement stand as an expression of my wishes and directions, while I am still of sound mind. If at such time the situation should arise in which there is no reasonable expectation of my recovery from extreme physical or mental disability, I direct that I be allowed to die and not to be kept alive by medications, artificial means or heroic measures. I do however ask that medications be mercifully administered to me to alleviate suffering even though this may shorten my remaining life.

I also wish to make clear that if possible I wish to be an organ donor at this time. I hereby consent to the use of my body or part of it to be used after my death for therapeutic purposes pursuant to S. 4(1) of the Trillium Gift of Life Network Act R.S.O. 1990, Chapter H.20. I do not want my family or anyone else to interfere with this decision, and leave to physicians the determination of whether my physical condition is such that healthy organs can be harvested from me and given to someone in need. This statement is made after careful consideration and is in accordance with my strong convictions and beliefs. I want the wishes and directions here expressed carried out to the extent permitted by law. In so far as they are not legally enforceable, I hope that those to whom this Will is addressed will regard themselves as morally bound by these provisions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

Date \_\_\_\_\_