

LIVING WILL AND DIRECTIVE TO MY PHYSICIANS

I, Jerry Miller
Residing at :
786 Pine Avenue
Dallas , County of , Las Collinas
State of Texas

have been diagnosed with Pulmonary Cancer , i have also been informed about the evolution of this condition by the following physicians:

Name of MD (1) :Dr Peter Blackmore
Address of MD (1) :8976 5th Avenue
Dallas ,State of Texas
Phone of MD (1) 212-434-5423

and ,
Name of MD (2) :
Address of MD (2) :
,State of
Phone of MD (2)

both physicians, examined me and did the proper tests and investigations and both concluded that i was suffering from an incurable and terminal condition caused by disease, illness, accident or injury.

I therefore hereby declare:

1. Being of sound mind, i do hereby willfully and voluntarily make known my desire that my life not be prolonged by the use of "heroic measures" or by the application of life-sustaining procedures which would only serve to delay the moment of my death.

2. I direct that such measures be withheld or withdrawn and that i be permitted to die naturally.

3. In the event of my inability to give directions regarding the application of life-sustaining procedures or the use of "heroic measures", it is my intention that this directive shall be honored by my family and physicians as my final expression of my right to refuse medical and surgical treatment, and my acceptance of the consequences of such refusal.

4. I am mentally, emotionally and legally competent to make this directive and i fully understand its import.

5. I RESERVE THE RIGHT TO REVOKE THIS DIRECTIVE AT ANY TIME.

6. THIS DIRECTIVE SHALL REMAIN IN FORCE UNTIL REVOKED OR UNTIL THE 10th of May 2026 ,WHEN IT WILLL AUTOMATICALLY BE REVOKED .

In Witness Whereof, I do hereby sign and seal this instrument,

Date :10th of May 2006

.....
Jerry Miller

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Witness (1) Jim Stewart ,address 7865 4th Avenue, Dallas, Texas

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Witness (2) Henry White ,address 876 5th Avenue, Waco, Texas

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Witness (3) Mary Gray ,address 7812 3rd Avenue, Houston, Texas

On the 10th of May 2006 , Jerry Miller declared to us, the witnesses , that this instrument, consisting of these few pages including the page signed by us as witnesses, was a LIVING WILL AND DIRECTIVE TO MY PHYSICIANS and requested us to act as witnesses to it. Jerry Miller thereupon signed this LIVING WILL AND DIRECTIVE TO MY PHYSICIANS in our presence, all of us being present at the same time. We now, at his/her request, in Jerry Miller,s presence and in the presence of each other, subscribe our names as witnesses. Each states that Jerry Miller is not a minor and appear to be of sound mind and that we have no knowledge or any facts indicating that the foregoing instrument, or any part of it, was procured by duress, menace, fraud or undue influence. We, each for himself or herself, declare that each of us is at least the age of majority, and that each of us is, and the others appear to be of sound mind. We, each for himself or herself, declare under penalty of perjury that the foregoing is true and correct and that this attestation and this declaration are executed on the 10th of May 2006

Jerry Miller
Address : 786 Pine Avenue
Dallas , County of Las Collinas , state of Texas , 13232
Phone :

State of Texas

County of Las Collinas

On this day, before me, the undersigned authority, in and for and residing in the above County and state, personally appeared Jerry Miller who is personally known to me to be the same persons whose name is subscribed to the foregoing document, and, being duly sworn, he/she verified that the information contained in the foregoing document is true and correct on personal knowledge and acknowledged that said document was signed as a free and voluntary act.

Subscribed and sworn to this _____ day of _____, 20__.

Name and signature

My commission expires: _____