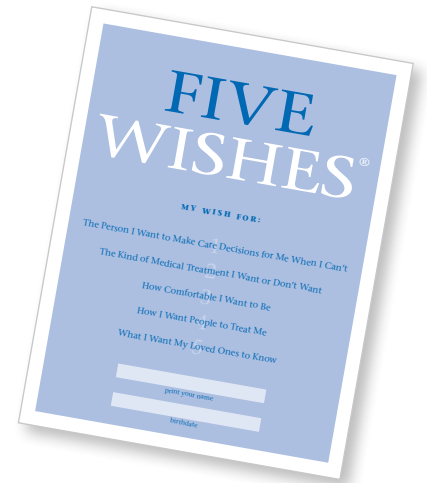


MY FIVE WISHES



Dear

Enclosed is my completed, signed and properly witnessed copy of Five Wishes and summary page. I have used this Five Wishes document to make decisions about my health care in case something happens and I am no longer able to make my own decisions. I did this to be sure that the people I care the most about do not have to guess what I would have wanted.

You will see in Wish 1 that I selected you as someone I trust to make decisions for me. This section is legally called a durable power of attorney for health care (or “health care agent”). You are one of three people named in this section. If a time comes when I cannot make my own health care decisions, the person I chose as health care agent will be called on to make decisions for me. If that person is not available or able to make those decisions, then the second person named will speak on my behalf. And if the second person cannot fulfill this responsibility then I have named a third.

I ask that you do two things:

- Keep a copy of my completed Five Wishes and be prepared to make a copy to give to a health care provider or facility (hospital, rehab hospital, nursing home, etc.), should I be admitted to one.
- Be bold in advocating for me, even if it means going against the wishes of my other family members, friends or health care providers. I chose you as my health care agent because I know you'll follow through.

Note that in Wishes 3, 4 and 5, I express my preferences about comfort (pain management), dignity and other personal and family matters. I understand these wishes are not legally binding on anyone as are Wishes 1 and 2, but I ask that you review them and act in accordance with them as much as possible.

I have sent a copy of my completed Five Wishes to my physician and asked that it be placed in my medical record. It gives me great peace of mind to know that I have planned ahead for times of serious illness.

Sincerely,

Five Wishes is the most popular advance directive in America with more than 25 million copies in circulation. It was created with the help of medical experts and the American Bar Association's Commission on Law and Aging. It meets the legal requirements for an advance directive in most states. Any questions regarding the format of the document may be directed to the nonprofit organization Aging with Dignity, 1-888-5-WISHES. For more information visit www.agingwithdignity.org.