LIVING WILL DECLARATION

DECLARATION made this 10th day of December, 2012.

I, Cora Mae Hill, being at least eighteen (18) years of age and of sound mind, willfully and voluntarily make by desires that my dying shall not be artificially prolonged under the circumstances set forth below, and I declare;

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If at any time my attending physician certifies in writing that;

- 1. I have an incurable injury, disease or illness;
- 2. My death will occur within a short time; and
- 3. The use of life prolonging procedures would serve only to artificially prolong the dying process
- 4. If in the event I become brain dead, I request no life sustaining heroics by being kep artificially alive.

I direct that such procedures be withheld or withdrawn and that I be permitted to distinct that with only the performance or provision of any medical procedure or medication necessary to provide me with comfort care or to alleviate pain and, if I have so indicate below, the provision of artificially supplied nutrition hydration (Indicate your choice by initialing or making mark before signing this declaration.

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I wish to receive artificially supplied nutrition and hydration, even if the effort to sustain life is futile or excessively burdensome to me.

I do not wish to receive artificially supplied nutrition and hydration, if the effort to sustain life is futile or excessively burdensome to me.

I intentionally make no decision concerning artificially supplied nutrition and hydration, leaving the decision to my health care representative appointed under I.C. 16-36-1-7 or my at attorney in fact with health care power under I.C. 30-30-5-5-16 and I.C.30-5-5-17.

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In the absence of my ability to give this declaration regarding the use of life prolonging procedures it is my intention that this declaration be honored by my family and physician as the final expression of my legal right to refuse medical or surgical treatment and accept consequences of the refusal.

I understand the full import of this declaration

* Cora MacHILL

* Cora mae/4:00

I Patricia M. Harris has been personally known to me, and I believe her to be of sound mind. I did not sign her signature above for or at the direction of myself. I am not entitled to any part of Cora Mae Hill estate or directly, financially nor am I responsible for her medical care.

I am competent and at least eighteen (18) years of age.

NOT OFFICIAL!

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