FILED FOR RECORD SKAPAHIA OD WASH BY Clara Dudley

Jun 14 12 33 PH 195

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LIYING WILL

DIRECTIVE TO PHYSICIANS AND TO WHOMEVER ELSE IT MAY CONCERN

Directive made this / 2 day of June, 19.95

I, Roy Merlo Dedeneing of sound mind, wilfully, and voluntarily make known my desire that my life shall not be artificially prolonged under the circumstances set forth below, and do hereby declare that

- (a) If at any time I should have an incurable injury, disease, or illness certified to be a terminal condition by two physicians, and where the application of life-sustaining procedures would serve only to artifically prolong the moment of my death and where my physician determines that my death is imminent whether or not life-sustaining procedures are utilized, I direct that such procedures be withheld or withdrawn, and that I be permitted to die naturally.
- (b) In the absence of my ability to give directions regarding the use of such life-sustaining procedures, it is my intention that this directive shall be honored by my family and physician(s) as the final expression of my legal right to refuse medical or surgical tyreatment and I accept the consequences from such refusal.
- (c) I understand the full import of this directive and I am emotionally and mentally competent to make this directive.

Address, D.D. L. Wegrich Rd.
Stevenson, Skamania County, Washington

The declarer has been personally known to me and I believe hepto be of sound mind.

Witness RM Holker F Witness Loveta Solbert

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STATE OF Washingto					
Country of Stamonia	34.				
On this 13th day	Washington	A. D. 19	95, before	me, the undersign	ned, a Not
troy M. Dudle	4		2757.5	nd sworn persons	
to me known to be the individual that he signed and sealed the	described in and where said instrument asb	executed the fore	reing instrumentary act and	ent, and acknowl deed for the uses	edged to
thoraid inentioned. WEINES my hand and office	ial seal hereto affixed th	a day and where is the	s carificate a	have written	1 . 1
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