



FAMILY NOTIFICATION FORM

Dear Family,

I want you to know about my decision to become an organ, eye and tissue donor. Upon my death, if I am a candidate for donation, I ask that you honor my wishes. It is important to me that others are given the opportunity to live full and productive lives.

I wish to donate the following:

- any needed organs and tissue
- only the following organs and tissue:

Thank you for honoring my commitment to donate Life through organ, eye and tissue donation.

Donor Name _____

Donor Signature _____ Date _____