

THE LEGACY LAW FIRM

Moshe B. Newman, Esq. ♦ 24361 Greenfield Road, Suite # 310, Southfield, MI 48075 ♦ 248-629-0161

FOREWORD

In these perilous times, as a lawyer and a law firm focused on Elder Law and Estate Planning, we wanted to give back to the community. Many doctors have been advising that, besides for washing your hands and practicing social distancing, there are a couple of other steps that each of us can take to help out. One of those steps is to prepare instructions for medical professionals to use, if you do end up needing medical care, which is called a Living Will. Therefore, we have decided to offer a free Do-It-Yourself copy of a living will for everyone to be able to use.

What is a Living Will? A Living Will is a document that allows you to direct how you wish to be treated, should you need medical care. The right to make our own decisions, especially when it comes to medical care, is one that we all value. However, due to injury or illness, at times we are unable to participate in those decisions. By filling out the Living Will, below, and giving a copy to your doctor and to your loved ones, you ensure that you have a voice in every decision made regarding your care.

Is this everything I need to do to be prepared? No. There are several other steps that we recommend everyone take in order to make sure that they have a say in their care.

- **Power of Attorney for Healthcare:** This is a document that allows you to appoint someone to be in charge of your care, should you be unable to make those decisions for yourself. This document has a much stronger legal weight than a living will alone, and is a very effective tool that we recommend to our clients.

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- **Power of Attorney for Finances:** This is a document that allows you to appoint someone to be in charge of your finances, in the event you are no longer able to handle them, so that all of your bills, mortgages, etc, will be paid..
- **Last Will and Testament:** A Will allows you to determine what happens with your assets upon your passing. Without a Will, the government rules decide what happens with your assets. With a Will, you can dictate where your money, house, etc. goes, with the added benefit of reducing fighting and conflict between your inheritors, as your wishes will be clear for everyone to see.
- **Trust:** Even with a Will, your inheritors will be forced to go through probate, which is a costly and drawn out process. If you create a Trust, they can skip that step, which will reduce the cost to them, as well as leave a clearer legacy without the hassle or opportunity for fighting.

Please see below for a free do-it-yourself¹ Advanced Directives, a Living Will.

If you are interested in any of the other forms of advanced directives mentioned above, such as a Power of Attorney, Will, etc, please feel free to call our office at 248-629-0161. We would be happy to help you get those set up. Mention that you saw this on the living will form, and we will offer you a 10% discount as well.

Sincerely,

Moshe B. Newman

Attorney & Counselor at Law
The Legacy Law Firm

¹ Please note that no attorney-client relationship is formed by you using this form. There is a resource we are offering to the public, not legal advice. An Attorney-client relationship is only formed by the signing of an engagement agreement and payment of any required retainer.

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Photostatic copies of this document, after it is signed and witnessed, shall have the same legal force as the original document.

I sign this document after careful consideration. I understand its meaning and I accept its consequences.

Dated: _____ Signed: _____
(Your signature)

(Address)

STATEMENT OF WITNESSES

We sign below as witnesses. This declaration was signed in our presence. The declarant appears to be of sound mind, and to be making this designation voluntarily, without duress, fraud or undue influence.

(Print Name) (Signature of Witness)

(Address)

(Print Name) (Signature of Witness)

(Address)

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DO-NOT-RESUSCITATE ORDER

I have discussed my health status with my physician, _____. I request that in the event my heart and breathing should stop, no person shall attempt to resuscitate me.

This order is effective until it is revoked by me.

Being of sound mind, I voluntarily execute this order, and I understand its full import.

(Declarant's signature) (Date)

(Type or print declarant's full name)

(Signature of person who signed for declarant, if applicable) (Date)

(Type or print full name)

(Physician's signature) (Date)

(Type or print physician's full name)

ATTESTATION OF WITNESSES

The individual who has executed this order appears to be of sound mind, and under no duress, fraud, or undue influence. Upon executing this order, the individual has (has not) received an identification bracelet.

(Witness signature) (Date) (Witness signature) (Date)

(Type or print witness's name) (Type or print witness's name)

THIS FORM WAS PREPARED PURSUANT TO, AND IN COMPLIANCE WITH, THE MICHIGAN DO-NOT-RESUSCITATE PROCEDURE ACT

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Declaration of Anatomical Gift

I, _____, am of sound mind, and I voluntarily make this declaration. In the hope I may help others, I make the following anatomical gift to take effect upon my death: (You may check any one box, or both boxes A and C)

A. Any needed organs or body parts for the purposes of transplantation, therapy, medical research or education.

B. Only the following listed organs or body parts for the purposes of transplantation, therapy, medical research or education: _____, _____, _____.

C. My entire body for anatomical study.

Dated: _____ Signed: _____
(Your Signature)

(Address)

OPTIONAL

I wish my gift to go to _____.
(Insert name of doctor, hospital, school, organ bank or individual)

I wish to have my body at my funeral: yes no

STATEMENT OF WITNESSES

This declaration was signed in our presence by the declarant or at his or her direction. We sign below as witnesses in the presence of the declarant.

(Print Name)

(Signature of Witness)

(Address)

(Print Name)

(Signature of Witness)

(Address)