

**UNIFORM DONOR CARD**

of

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print or type name of donor

In the hope that I may help others, I hereby make this anatomical gift, if medically acceptable, to take effect upon my death. The words and marks below indicate my desires.

- I give:
- (a) \_\_\_\_\_ any needed organs or parts
  - (b) \_\_\_\_\_ only the following organs or parts

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specify the organ(s) or part(s)

for the purposes of transplantation, therapy, medical research, or education;

- (c) \_\_\_\_\_ my body for anatomical study if needed.

Limitations or special wishes, if any:

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Signed by the donor and the following 2 witnesses in the presence of each other:

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Signature of donor

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Date of birth of donor

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Date signed

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City and State

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Witness

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Witness

This is a legal document under the District of Columbia Revised Anatomical Gift Act (District of Columbia Code 7-1531.04) or similar laws.