

REVOCATION OF DECLARATION (Living Will)

(Pennsylvania Consolidated Statutes §5406)

I, _____, Declarant,
executed a Declaration (Living Will) on the _____ day of _____,
20____.

Pennsylvania Consolidated Statutes §5404 provides " A declaration may be revoked at any time and in any manner by the declarant without regard to the declarant's mental or physical condition. A revocation is effective upon communication to the attending physician or other health care provider by the declarant or a witness to the revocation."

This is my written revocation of my Declaration (Living Will) and is provided to all persons to whom I have provided a copy of my Declaration.

DATED this the _____ day of _____, 20____.

Signature of Declarant: _____

Printed Name of Declarant: _____

Address of Declarant: _____