

REVOCATION OF MEDICAL POWER OF ATTORNEY
AND LIVING WILL

(West Virginia State Code §16-30-18)

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

West Virginia State Code §16-30-18 provides that a Medical Power of Attorney and Living Will can be revoked by me at any time by any of the following methods:

- (1) By being destroyed by the principal or by some person in the principal's presence and at his or her direction;
- (2) By a written revocation signed and dated by the principal or person acting at the direction of the principal; or
- (3) By a verbal expression of the intent to revoke the Medical Power of Attorney and Living Will in the presence of a witness eighteen years of age or older who signs and dates a writing confirming that such expression of intent was made.

This is my written revocation of my Medical Power of Attorney and Living Will and is provided to all persons to whom I have provided a copy of my Living Will.

DATED this the ____ day of _____, 20_____.

Signature of Declarant: _____

Printed Name of Declarant: _____

Address of Declarant: _____