

ADVANCE DIRECTIVE CARD

I (name)

Date of birth _____

have a written advance directive that is kept with following person(s) or in the following place:

My advance directive is an important document in which I have expressed my will on my care.

I hope that You will find the advance directive form I have filled, read it carefully and respect my will.



Muistiliitto

Alzheimer Centralförbundet Alzheimer Society of Finland

www.muistiliitto.fi/en