

**Donation Pursuant to the Uniform
Anatomical Gift Act
(By Next of Kin or Guardian)**

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(By Next of Kin or Guardian)

Instructions & Checklist

Donation Pursuant to the Uniform Anatomical Gift Act (By Next of Kin or Guardian)

An anatomical gift may be made by any member of the following classes of persons (in the order of priority listed) of an anatomical gift of all or part of the decedent's body or a pacemaker for an authorized purpose, unless the decedent, at the time of death, has made an unrevoked refusal to make that anatomical gift:

the spouse of the decedent;

an adult son or daughter of the decedent;

either parent of the decedent;

an adult brother or sister of the decedent;

a grandparent of the decedent; and

a guardian of the person of the decedent at the time of death

An anatomical gift may not be made by a person listed above if any of the following occur:

A person in a prior class is available at the time of death to make an anatomical gift.

The person proposing to make an anatomical gift knows of a refusal or contrary indications by the decedent.

The person proposing to make an anatomical gift knows of an objection to making an anatomical gift by a member of the person's class or a prior class.

An anatomical gift by a person authorized under subdivision may be revoked by any member of the same or a prior class if, before procedures have begun for the removal of a part from the body of the decedent, the physician, surgeon, technician or enucleator removing the part knows of the revocation.

General Information

Donation Pursuant to the Uniform Anatomical Gift Act (By Next of Kin or Guardian)

A loved one has died and you believe that he/she would desire to make an Anatomical Gift. As the next of kin or guardian, you can prepare and execute an Anatomical Gift on behalf of the decedent.

This kit is designed to fulfill the obligations of the Uniform Anatomical Gift Act for gifts made on behalf of the decedent by the next of kin or guardian.

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Anatomical Gift by Next of Kin or Guardian of the Person

Pursuant to the Uniform Anatomical Gift Act and the law of this state, I hereby make this anatomical gift from the body of _____ (*name of decedent*) who died on _____, 20__ at _____ in _____ (*city and state*).

I. I survive the decedent as (*mark the appropriate box*):

- spouse;
- adult son or daughter;
- parent;
- adult brother or sister;
- grandparent; or
- guardian of the decedent.

II. I hereby (*mark the applicable box*):

- Give any needed organs, tissues, or parts, **OR**
- Give the following organs, tissues, or parts only: _____

III. The gift is for the following purposes (*strike any of the following you do not want*):

- (1) Transplant
- (2) Therapy
- (3) Research
- (4) Education

Date: _____

Signature of Survivor: _____

Printed Name of Survivor: _____

Address: _____

City: _____

State: _____