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**HALO**

**I REFUSE TO  
BE AN ORGAN  
DONOR**

I, \_\_\_\_\_,

**REFUSE TO BE AN ORGAN DONOR.**

**Do not** perform an apnea test.  
**Do not** notify an organ procurement organization if I appear to be at or near death.

**Do not** take any organs for transplantation or research.

Signature: \_\_\_\_\_

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_