“I Have A Health Care Proxy” Wallet Card

Katon pou bous “M gen yon mandatè sou swen medikal”

DIREKTIV :

1. Premyèman, enprime paj sila sou yon fèy papye òdinè.
2. Dekoupe sou liy nwa yo foto ki annapre a.
   Se sa k ap katon pou mete nan bous ou a.
3. Pliye sou liy pwentiye a. Fè sa ki sou foto ki annapre a.
4. Ranpli enfomasyon yo ; mete l nan bous ou.

Please call my Health Care Agent if I need help.
Tanpri, telefonnen ajan swenyaj mwen an si m bezwen èd.

MY NAME (M rele)

MY AGENT’S NAME (Non ajan an)

AGENT’S PHONE NUMBERS (Nimewo telefòn ajan an)

MY ALTERNATE AGENT’S NAME (Non yon dezyèm ajan)

ALTERNATE AGENT’S PHONE NUMBERS (Lòt nimewo dezyèm ajan an)

Who’s Your Agent?® Program Informational Wallet Card; not a legal document.
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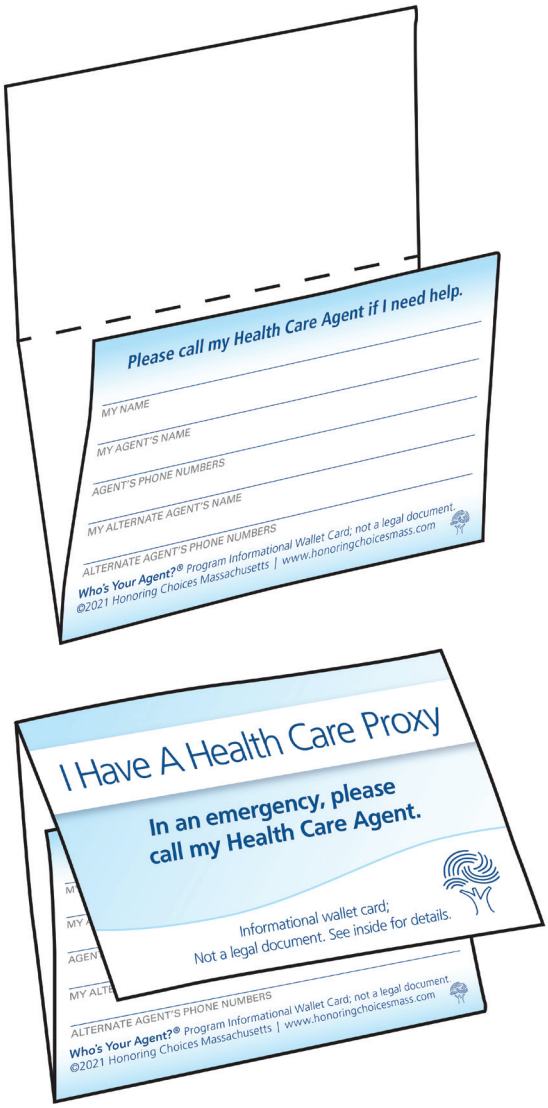
I Have A Health Care Proxy

M gen yon mandatè sou swen medikal

In an emergency, please call my Health Care Agent.

Si gen yon ijans, telefonnen tanpri ajan swenyaj mwen an.



IMPORTANT: In order to use this wallet card, you must have completed a valid MA Health Care Proxy. Your Health Care Proxy is your legal document that gives your Health Care Agent the authority to make decisions on your behalf. This informational wallet card is NOT a legal document. It does not replace your Health Care Proxy.

See the website to download a free MA Health Care Proxy:
www.honoringchoicesmass.com/5-ma-planning-documents/health-care-proxy

This informational card belongs to you. You can add other information to help emergency personnel contact your Health Care Agent.