STATUTORY FORM FOR SUPPORTED DECISION-MAKING AGREEMENT

(1) INTRODUCTION			
I,			
My supporters may share information with each other (select one of the following): Yes [] No []			
(2) SUPPORTERS			
These are my supporters:			
SUPPORTER NO. 1			
Name:			
Address:			
Telephone number:			
Electronic mail address:			
I want this supporter to help me with (mark any of the following you want):			
[] Making choices about food and clothing			
[] Making choices about where and with whom I live			
[] Making choices about my health and health care			
[] Making choices about how I spend my time			
[] Making choices about where I work			
[] Making choices about my support services			
[] Making choices about how I spend my money and how I save my money			
[] Making choices about legal matters			
[] Making choices about (list other areas the supporter will help you with):			
I do not want this supporter to help me with:			
SUPPORTER NO. 2			
Name:			
Address:			
Telephone number:			
Electronic mail address:			
I want this supporter to help me with (mark any of the following you want):			
[] Making choices about food and clothing			
[] Making choices about where and with whom I live			
[] Making choices about my health and health care			
[] Making choices about how I spend my time			

[] Making choices about where I work
[] Making choices about my support services
[] Making choices about how I spend my money and how I save my money
[] Making choices about legal matters
[] Making choices about (list other areas the supporter will help you with):
I do not want this supporter to help me with:

SUPPORTER NO. 3
Name:
Address:
Telephone number:
Electronic mail address:
I want this supporter to help me with (mark any of the following you want):
[] Making choices about food and clothing
[] Making choices about where and with whom I live
[] Making choices about my health and health care
[] Making choices about how I spend my time
[] Making choices about where I work
[] Making choices about my support services
[] Making choices about how I spend my money and how I save my money
[] Making choices about legal matters
[] Making choices about (list other areas the supporter will help you with):
I do not want this supporter to help me with:
ALTERNATE SUPPORTER
If one of my supporters dies, becomes unable to act as my supporter, refuses to act as my supporter,
terminates the supporter's part of this agreement, I want the following person to become my support
and help me with the areas the original supporter was helping me with: Name:
Address:
Telephone number:
Electronic mail address:
(3) INFORMATION ACCESS FORMS
I am attaching to this agreement (mark yes or no for each choice below):
A form that lets my supporter(s) obtain my health information under the Health Insurance Portability
and Accountability Act
Yes [] No []
A form that lets my supporter(s) see my educational records under the Family Educational Rights and Privacy Act of 1974

Yes [] No []	
(4) GUARDIANS AND CONSERVATORS If I have a guardian or conservator, I must notify the guardian or conservation agreement encroaches on the authority of that guardian or conservator must approve this agreement in writing. [] I have a guardian, and I have notified the guardian about this agree [] I am attaching a signed statement by my guardian approving my us [] I have a conservator, and I have notified the conservator about this [] I am attaching a signed statement by my conservator approving my	ervator, the guardian or ement se of this agreement s agreement
(5) NOTICE TO THIRD PARTIES This is a summary of the rights and obligations of a supporter under A this agreement. A supporter does not make decisions for the principal principal with help when making decisions, obtaining information for and understanding the options, responsibilities, and consequences of accompany the principal and participate in discussions with other peragreement the areas in which the supporter may help the principal wirecognize a decision or request of the principal that is made or commissupporter as the decision or request of the principal (AS 13.56.130). Tenforce the decision or request in law or equity. A principal may act we	I, but a supporter may provide a decision, communicating decisions decisions. A supporter may sons. The principal sets out in this ith decisions. A third party must unicated with the assistance of a the principal or supporter may
(6) DURATION AND TERMINATION OF AGREEMENT I can end all or part of this agreement at any time by giving notice to r must be signed and notarized or witnessed like this agreement. This a and will continue until the agreement is terminated by me or my supp	greement starts (date)
(7) SIGNATURE OF PRINCIPAL I know that I do not have to sign this agreement. I am entering into th without coercion or undue influence. I understand the nature and effectant change this agreement at any time. Signature: Printed name: Telephone number: Electronic mail address: Date:	ect of this agreement. I know that I
(8) SIGNATURES OF SUPPORTERS Signature of Supporter No. 1 Signature: Printed name: Date:	- - -
Signature of Supporter No. 2 Signature Printed name: Date:	- -

Signature of Supporter No. 3	
Signature:	
Printed name:	
Date:	
Signature of Alternate Supporter	
Signature:	
Printed name:	
Date:	
(9) DECLARATIONS OF SUPPORTERS	
DECLARATION OF SUPPORTER NO. 1	
I,, am the principal's to the principal). I am willing to act as the principal's supporter. I acknowledge	(relationship
and understand information for decisions, communicate decisions, an responsibilities, and consequences of decisions. My support may incluin a way that the principal can understand, discussing pros and cons o principal communicate the principal's decisions. I will act with care, conthat I may not make decisions for the principal. I will not exert undue not sign for the principal or provide an electronic signature of the principal's information confidential. I will not use information I reconcept other than as authorized by the principal for decision making another use.	de giving the principal information f decisions, and helping the impetence, and diligence. I know influence on the principal. I will cipal to a third party. I will keep seive under this agreement for a
Signature:	
Printed name:	
Date:	
DECLARATION OF SUPPORTER NO. 2	
I,, am the principal's	
to the principal). I am willing to act as the principal's supporter. I acknowned AS 13.56. I understand that my job as a supporter is to help the and understand information for decisions, communicate decisions, an responsibilities, and consequences of decisions. My support may incluin a way that the principal can understand, discussing pros and consoprincipal communicate the principal's decisions. I will act with care, contact I may not make decisions for the principal. I will not exert undue not sign for the principal or provide an electronic signature of the principal's information confidential. I will not use information I reconstructed by the principal for decision making another use. Signature: Printed name:	principal make decisions, obtain d understand the options, de giving the principal information f decisions, and helping the impetence, and diligence. I know influence on the principal. I will cipal to a third party. I will keep seive under this agreement for a
Printed name:	
Date:	

DECLARATION OF SUPPORTER NO. 3

I,, am the principal's	(relationship
to the principal). I am willing to act as the principal's supporter. I acknowledge	
under AS 13.56. I understand that my job as a supporter is to help the	principal make decisions, obtain
and understand information for decisions, communicate decisions, and	
responsibilities, and consequences of decisions. My support may include	•
in a way that the principal can understand, discussing pros and cons of	
principal communicate the principal's decisions. I will act with care, co	
that I may not make decisions for the principal. I will not exert undue in	
not sign for the principal or provide an electronic signature of the principal	·
the principal's information confidential. I will not use information I reco	· · · · · · · · · · · · · · · · · · ·
purpose other than as authorized by the principal for decision making,	•
another use.	unless the principal consents to
Signature:	
Printed name:	
Date:	
DECLARATION OF ALTERNATE SURPORTER	
DECLARATION OF ALTERNATE SUPPORTER	
I,, am the principal's	
(relationship to the principal). I am willing to act as the principal's supp	
a supporter under AS 13.56. I understand that my job as a supporter is	· · · · · ·
decisions, obtain and understand information for decisions, communic	
options, responsibilities, and consequences of decisions. My support n	
information in a way that the principal can understand, discussing pros	s and cons of decisions, and
helping the principal communicate the principal's decisions. I will act w	vith care, competence, and
diligence. I know that I may not make decisions for the principal. I will	not exert undue influence on the
principal. I will not sign for the principal or provide an electronic signat	ure of the principal to a third
party. I will keep the principal's information confidential. I will not use	information I receive under this
agreement for a purpose other than as authorized by the principal for	decision making, unless the
principal consents to another use.	
Signature:	
Printed name:	
Date:	
(10) NOTARIZATION OR WITNESSING	
The signatures on this agreement must be either (1) notarized, or (2) w	vitnessed by two witnesses.
NOTARIZATION	
State of, Judicial District On this day of, in the year, before me,	(name of
notary public) appeared (name of princi	nall and
notary public), appeared (name of princi (name of each	pail, allu n supportor and alternate
supporter named in the agreement), personally known to me to be the	
• • • • • • • • • • • • • • • • • • • •	•
agreement, and each acknowledged to me that each executed the agreement, and dead for the uses and purposes under this agreement	
voluntary act and deed for the uses and purposes under this agreemen	it. witness my nand and official
seal the day and year written above.	
16' and an afficient with the	
(Signature of notary public)	
(Seal, if any)	

 (Title and rank)	
My commission expires:	
,	
WITNESSING	
If the signatures are not notarized, two adults must witness the sig	natures of the principal, the
supporter(s), and any alternate supporter, and all must sign togeth	er in the presence of the witnesses. A
witness CANNOT be a supporter named in this agreement. The witi	nesses CANNOT be employees or
agents of the supporter(s) named in this agreement. Unless a person	on who understands the principal's
means of communication is present to assist when the agreement	is signed, each witness must
understand the means of communication used by the principal.	
1. Witness signature:	
Printed name:	
Date:	
2. Witness signature:	
Printed name:	
Date:	
(11) APPROVAL BY GUARDIAN	
I am the guardian of I have	e read and understand the nature and
effect of this agreement. I approve the use of this agreement by $_$	(name
of principal) to obtain support in making decisions.	
Signature:	
Printed name:	
Date:	
(12) APPROVAL BY CONSERVATOR	
I am the conservator of I have	read and understand the nature and
effect of this agreement. I approve the use of this agreement by	(name
of principal) to obtain support in making decisions.	·
Signature:	
Printed name:	
Date:	
<u>See</u> , A.S	