

DECLARATION OF LIFE

I, the undersigned, being of sound and disposing mind and memory, do hereby in the presence of witnesses make this Declaration of Life.

1. I am opposed to capital punishment on any ground whatsoever.
2. I believe it is morally wrong for any state or other governmental entity to take the life of a human being by way of capital punishment.
3. I believe (and am statistically supported) that capital punishment serves no purpose other than that of revenge. Taking life for the purpose of revenge is abhorrent to me.

THEREFORE, I hereby declare that should I die as a result of a violent crime, I plead, pray and request that the person or persons found guilty of homicide for my killing not be subject to or put in jeopardy of the death penalty under any circumstances, no matter how heinous their crime or how much I may have suffered. The death penalty would only increase my suffering.

I plead, pray and request that the Prosecutor or District Attorney having jurisdiction over the person or persons alleged to have committed my homicide not file or prosecute an action for capital punishment as a result of my homicide.

I plead, pray and request the Court to allow this Declaration to be admissible as a statement of the victim at the sentencing of the person or persons charged and convicted of my homicide; I pray that the Court will pass sentence in accordance with my wishes.

I plead, pray and request that the Governor or other executive officer grant pardon, clemency or take whatever action is necessary to stay and prohibit the carrying out of the execution of any person or persons found guilty of my homicide.

I plead, pray and request that my family and friends take whatever actions are necessary to carry out the intent and purpose of the Declaration; I further request them to take no action contrary to this Declaration.

During my life, I want to feel confident that under no circumstances whatsoever will my death result in the capital punishment of another human being.

I request that, should I die under the circumstances as set forth in this Declaration and the death penalty is requested, my family, friends and personal representative deliver copies of this Declaration as follows: to the Prosecutor or District Attorney having jurisdiction over the person or persons charged with my homicide; to the attorney representing the person or persons charged with my homicide; to the Judge presiding over the case involving my homicide; for recording, to the Recorder of the County in which my homicide took place and to the Recorder of the County in which the persons or persons charged with my homicide are to be tried; to all newspapers, radio and television stations of general circulation in the County in which my homicide took place and the County in which the persons or persons charged with my homicide are to be tried; and to any other person, persons or entities my family, friends or personal representative deem appropriate in order to carry out my wishes as set forth herein.

I affirm under the pains and penalties for perjury that the above Declaration of Life is true.

Signature _____

Date _____

Witness _____

Date _____