

# **SUPPORTED DECISION-MAKING AGREEMENT**

**OF**

# **Charles Heston**

This Agreement was made under the supervision of Supported Decision-Making New York (SDMNY), a project funded by the New York State Developmental Disabilities Planning Council (DDPC). (See “Attachment A.”) The undersigned “Decision-Maker” and “Supporter(s)” have completed a professionally evaluated facilitation process that began on October 10<sup>th</sup>, 2019 and concluded with the signing of this Agreement. A facilitator trained and supervised by SDMNY assisted the parties in negotiating and fully understanding the terms of this Agreement.

This Agreement must be read out loud or otherwise communicated to all parties to the Agreement. The form of communication shall be appropriate to the needs and preferences of the Decision-Maker.

(1)

## **SUPPORTED DECISION-MAKING AGREEMENT**

### **(1) NOTICE TO THE DECISION-MAKER:**

Your Supported Decision-Making Agreement is an important document. It lets you choose people you trust to help you make decisions in the areas where you want support.

This document describes how you get support to make decisions. It also lets others know that these are the ways you want your Supporters to help you. It lets others know you want them to respect your decisions, too. And it lets others know the ways in which you make decisions.

By signing this document, you agree to the following (*make your mark below*):

- I have freely completed the SDMNY facilitation process.
- I want Supporters to help me make decisions.
- My Supporters cannot make decisions for me.
- I can end this Agreement at any time.
- I can change this Agreement at any time.
- I can change my Supporters at any time.
- My Supporters can quit or resign at any time.
- I will let my Supporters know about major changes I make to this Agreement and get their agreement on the changes, if needed.
- If needed, I will tell others about my Agreement and any major changes I make to it.
- Only I am responsible for my decisions, even if I receive support in making those decisions.

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(2) **DESIGNATION OF SUPPORTERS:**

I, Charles Heston, residing at 14 Curry Lane, New York, NY 10035, choose the following people as my Supporters:

|                      |                        |             |  |
|----------------------|------------------------|-------------|--|
| <b>Supporter #1:</b> | <u>Janet Heston</u> ,  | residing at | <u>14 Curry Lane, Apt 1B, New York, NY 10035</u> ;     |
| <b>Supporter #2:</b> | <u>Hank Heston</u> ,   | residing at | <u>14 Curry Lane, Apt 1B, New York, NY 10035</u> ; and |
| <b>Supporter #3:</b> | <u>Cathy Johnson</u> , | residing at | <u>25 Darling Plaza #4B, Queens, NY 10146</u> .        |

(1) Hank Heston will provide me with support for **housing** decisions. He will provide me the following kinds of support:

- Gathering information;
- Helping me to understand information; and
- Helping me to weigh my options.

(2) As to decisions about **managing money**, all my Supporters will provide support.

Janet Heston will provide me the following kinds of support:

- Gathering information;
- Helping me to carry out my decisions.

Cathy Johnson will provide me the following kinds of support:

- Helping me to understand information;
- Helping me to weigh my options;
- Helping me to understand consequences.

Hank Heston will provide me the following kinds of support:

- Helping me to understand information;
- Identifying possibilities and alternatives;

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- Helping me to weigh my options;
- Helping me to understand consequences; and
- Helping me to carry out my decisions.

(3) Any other areas not listed above are not included in this Agreement.

(3) **AUTHORIZATIONS:**

[RESERVED.]

(4) **OTHER INSTRUMENTS:**

[RESERVED.]

(5) **ACCEPTANCE BY THIRD PARTIES:**

I want third parties to rely on this Supported Decision-Making Agreement. I accept the actions of my Supporters who act in accordance with this Agreement.

If a third party asks, I will sign a form created by SDMNY stating that I have used the supports in this Agreement to make a specific decision. (See "Attachment B.")

(6) **TERMINATION:**

This Agreement continues until I end it in writing or I die or the Agreement is ended by legal action.

(7) **REVOCATION AND MODIFICATION:**

At any time, I may end or change this Agreement by signing a form created by SDMNY that must be notarized. (See "Attachment C" and "Attachment D.")

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**(8) SIGNATURE AND ACKNOWLEDGMENT BY THE DECISION-MAKER:**

In Witness Whereof I have hereunto signed my name on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature

STATE OF NEW YORK        )  
  )        ss:  
COUNTY OF \_\_\_\_\_)

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

**(9)**

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**(10) ATTESTATION AND SIGNATURE BY SUPPORTERS**

**SUPPORTER # 1:**

I, Janet Heston, residing at 14 Curry Lane, Apt 1B, New York, NY 10035, have read and understand the Agreement. I recognize and honor Charlie's right to make his own decisions. By virtue of signing this Agreement, I fully commit to support him in exercising that right. In that role, I will not act as a substitute decision-maker, I will avoid conflicts of interest, and I will not exert undue influence.

\_\_\_\_\_  
Signature

STATE OF NEW YORK            )  
  )     ss:  
COUNTY OF \_\_\_\_\_)

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

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**SUPPORTER # 2:**

I, **Hank Heston**, residing at **14 Curry Lane, Apt 1B, New York, NY 10035**, have read and understand the Agreement. I recognize and honor **Charlie's** right to make his own decisions. By virtue of signing this Agreement, I fully commit to support him in exercising that right. In that role, I will not act as a substitute decision-maker, I will avoid conflicts of interest, and I will not exert undue influence.

\_\_\_\_\_  
Signature

STATE OF NEW YORK            )  
  )     ss:  
COUNTY OF \_\_\_\_\_)

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

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**SUPPORTER # 3:**

I, Cathy Johnson, residing at 25 Darling Plaza #4B, Queens, NY 10146, have read and understand the Agreement. I recognize and honor Charlie's right to make his own decisions. By virtue of signing this Agreement, I fully commit to support him in exercising that right. In that role, I will not act as a substitute decision-maker, I will avoid conflicts of interest, and I will not exert undue influence.

\_\_\_\_\_  
Signature

STATE OF NEW YORK            )  
  )  
  )     ss:  
COUNTY OF \_\_\_\_\_)

On the \_\_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

(11)



**SUPPORTED DECISION-MAKING AGREEMENT**

**(12) SIGNATURE AND ACKNOWLEDGMENT BY THE FACILITATOR:**

I, ***Matthew Simpson***, acted as the SDMNY-trained facilitator for the Decision-Maker in the process leading up to signing this Agreement.

\_\_\_\_\_ )  
Signature

STATE OF NEW YORK )

) ss:

COUNTY OF \_\_\_\_\_ )

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, the undersigned, personally appeared \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

\_\_\_\_\_  
Notary Public

