

**North Carolina  
Organ/Tissue Donor Card**

I wish to donate my organs and tissues. I wish to give:  any  
needed organs and tissues; or  only the following organs and  
tissues: \_\_\_\_\_

\_\_\_\_\_

Donor Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_

Witness \_\_\_\_\_