

## **LETTER OF DIRECTION**

То:	My Family, Attorney, Agent under a Power of Attorney, Trustee or Executor (hereinafter referred to as my "Representatives")
From:	
Re:	Directions to Sell My Dental Practice Upon My Death or Disability
would expended event of my greatest pos	nt that you realize that in the event of my death or incapacity, my dental practice rience an immediate and rapid decline in value, by reason of my absence. In the death or incapacity, the immediate sale of my dental practice would preserve the ssible amount of this valuable asset for me, my family, or my heirs. These directions d to authorize my Representatives to proceed with such a sale immediately, under instances.
representat Representat under these quickly as poincapacitate this fashion. Probate Coo that, before	alted with Guy Jaffe, Jim Ackerman and/or Peter Ackerman of ADS Midwest for ion in the event a sale becomes necessary under these circumstances. My cives are hereby authorized and directed to employ ADS Midwest to sell my practice circumstances, to execute the necessary listing agreement, and to proceed as essible with a sale under these circumstances. In the event I am living but ed, this Letter of Directions shall be considered my legal authorization to proceed in In the event of my death, the Illinois Probate Act, Section 56-14, the Missouri le, Chapter 473, Section 297 or the Iowa Probate Code Chapter 633.84 provides court appointment of an executor, the executor named in my Will may proceed to etion as is necessary to preserve my estate
other legal i	sale of my practice, including execution of the necessary listing agreement and nstruments, shall be considered action necessary for the preservation of my estate, of my death.
Dated this_	day of, 20
	Signed:
Witness:	
Witness:	