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End-of-Life Experiences:

A Guide for Carers of the Dying

Nearing The End of Life: A Guide
for Relatives and Friends of the
Dying

如何方可擺脫死後

見到的幽暗景像

小蘇蔓老人院

百病生於氣一

起則氣上

臨終經驗一

給亡者護理人員的指引

臨近命終一

給亡者親友的指引

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Children Who Speak of Memories of a Previous Life as a Buddhist Monk: Three New Cases (10)

The Case of Gamage Ruvan Tharanga Perera's
Previous Life as A Monk (4)

by Erlendur Haraldsson and
Godwin Samararatne

Excerpt of Last Issue



Gamage Ruvan Tharanga

Ruvan was born in August 1987, and started to speak of a previous life **when he was 2 years old**. He stated that he had been a monk living in the Pitumpe monastery.

Ruvan said that this monastery was in Padukka, which is some 20 miles to the south of their home. Ruvan also stated that there was a monkey in the temple which was made of clay. The unexpected **verification** by the two authors of his very specific statement that there was **in the Pitumpe temple a monkey made of clay** was seen as evidence that Ruvan had lived in this place.

Ruvan's mother stated that he had been talking about a Pitumpe monastery almost from the time he started to speak, and was keen to become a monk. He did not ask for toys, only for pictures of the Buddha, which he collected lovingly.

Later on, a local reporter, Laksman Vithana, learnt about the case, interviewed Ruvan and his parents, and published a report in the newspaper **Lankadeepa** on November 3, 1993, when Ruvan was six years old. In this report some of Ruvan's statements were published. They are particularly important as **they were published before attempts were made to learn whether his statements regarding the Pitumpe monastery could be verified.**



The Previous Life of Gamage Ruvan Tharanga

Table 7

List of Ruvan's Behavioural Features as Reported in Lankadeepa Before the Case was 'Solved'

- 1 Does not eat at night (monks do not).
- 2 Does not want to sleep with his mother (monks do not sleep with women).
- 3 Recites in Pali part of Buddha's first sermon.
- 4 Does not ask for toys, only pictures of Buddha, which he collects lovingly.
- 5 Wants to become a monk.
- 6 Sits in a lotus position when he goes with his parents to the temple.
- 7 Likes to wear monk's robes when he is at home.
- 8 Asks his family not to eat at night and only take refreshments as monks do.
- 9 Does not eat fish or meat.
- 10 Likes to read the 'pirithpotha' (Buddhist texts for protection).
- 11 Ask his mother to make offering to Buddha in the evenings. He scolds her if she does not.
- 12 Takes offence when he learns that his father has taken liquor.
- 13 Knows how to wear a robe as monks do.
- 14 Plays some tunes on a drum that was given to him at his request (drums were used in Pitumpe temple as in many other temples).

A next-door neighbour, Mrs Karuna Wijeman, knew Ruvan from his birth. According to her, he started at the age of two to speak of a life as a monk. Another neighbour, Mrs Puspa Ranjani, also knew Ruvan from early childhood. He then talked about having lived in Pitumpe, and about being a monk.

Other Incredible Alternative Evidences

According to a second article by the reporter, the group visited the shrine room and there Kuvan pointed to the statue of the monkey made of clay, which is not prominently placed. He said: "That is the monkey I told you about".

In the room of the present chief monk at the Pitumpe monastery, the Ven. Mahagama Hematillaka, there were two large framed photographs, each of one monk. Without being asked Ruvan pointed at one of them and said: "This was the chief monk." That photograph was of Ven. Ganihigama Pannasekhara, the former abbot of Pitumpe monastery. **This impressed Ven. Hematillaka.** The other photograph was of Pannasekhara's teacher who previously had also been a chief monk.

In May 1997 we visited Ruvan's former primary school. It was early morning and a group of children were waiting for the school to open. Some of them had been class mates with Ruvan, who had left school the year before to join a monastery. We asked them about Ruvan, whom they remembered well. He had been a class leader all his three and a half years in primary school, appointed by the teacher. Would they have liked another pupil as a class leader? No, they said, **they liked Ruvan as class leader.**

On occasions Ruvan got his fellow pupils to recite the Five Precepts (which compare roughly to the Lord's Prayer in Christianity), and he preached to his fellow pupils. He sat in an elevated position, but they sat on the floor (according to tradition). In his sermons **Ruvan had taught them the importance of behaving well.**



The Birth of Gamage Ruvan Tharanga

Did Ruvan ever get angry? No, three of them replied, **he did not get angry, was always calm**. What did they think of his becoming a monk? It was a good thing, and they evidently were not surprised by it.

In Sri Lanka a class leader is traditionally the best pupil in the class (usually of 30 to 40 pupils). The principal of Keselhenewa Junior School, Milton Dharmasinghe, allowed us to examine the grade books. Ruvan had completed his studies in grades 1 to 3. The first two years he ranked first in his mean school performance, and in the third year another pupil shared with him the first rank. In his fourth year he left the school for the 'pirivena' (school for child novices living in monasteries).

According to the principal **Ruvan had been a very talented pupil and popular with the other children, a true class leader**, although he did not move much with them. He **had a keen memory, and even remembered what he heard only once**. **He was obedient to his teachers, quiet, and peaceful**. He did not like to be with girls, not even his sister.

In his early years in primary school Ruvan started to **give frequent public pujas (Bodhi-pujas)** at the request of various persons, and **his fame started to spread**, also through several articles in the newspapers. We were told that he conducted these ceremonies, which consist mostly of chanting, with the dignity of a senior monk.

On August 9, 1996, **Ruvan was ordained into the ancient Pushparamaya Pathawatta temple in Rajgama**. The monks there had heard about Ruvan, and happened to know some people where he regularly went for meditation.

One day Ruvan's family had visited the temple to discuss the possibility of his entering as a monk novice. Then he told his parents: "I wish to stay here; you can go home." Ruvan told us he is happy in the temple, does not miss home, has time to meditate and that there is much to study.

The abbot, Ven. Dhammarama, told us that Ruvan is different from the other child novices, is **more calm and composed**, and gets on well with them, **has a better memory and much greater knowledge of Buddhism**. On the last full moon day he had performed the Bodhi-puja and did that very well. (To Be Continued)



Wearing His Favorite Robes

End-of-Life Experiences: A Guide for Carers of the Dying (2)

By Sue Brayne and
Dr Peter Fenwick

The Life Enlightenment Charity Foundation Limited hereby acknowledges the kind authorization, with a written permission, by the two authors to publish their following two publications in our English and Chinese bilingual magazine "Life Enlightenment" for a wider circulation to the general public, namely:

- (1) **Nearing the End of Life: A Guide for Relatives and Friends of the Dying;**
- (2) **End-of-Life Experiences: A Guide for Carers of the Dying.**

Short Introduction of Both Authors

Sue Brayne MA, Post Grad Dip Couns, PGCE



Sue Brayne originally qualified as a State Registered Nurse. She went onto train as a **Life, Death, and Transition Facilitator** with the Elizabeth Kubler-Ross Foundation. After completing an **MA in the Rhetoric and Rituals of Death** in 2001, Sue began working with Dr Peter Fenwick as a Honorary Researcher into end-of-life experiences. She has several academic papers published on end-of-life experiences and provides educational workshops for carers, relatives and friends on the dying experience and spiritual aspects of the end-of-life care. Sue is also a psychotherapist, specializing in **trauma and bereavement work**, and is a trained **Further Education** teacher.

Dr Peter Fenwick BA (Cantab), MBBChir (Cantab), FRCPsych

Dr Peter Fenwick is a Fellow of the Royal College of Psychiatrists and has worked mainly in the field of **neuropsychiatry and epilepsy**. He has held Consultant posts at St Thomas's Hospital, the Westminster Hospital and for many years at the Maudsley Hospital and Kings College Institute of Psychiatry, the Radcliffe Infirmary in Oxford, and now at the Department of Neuropsychiatry at Southampton University. Currently, he is the Honorary Clinical Consultant neurophysiologist at Broadmoor Hospital, and Honorary Senior Lecturer at the Institute of Psychiatry, University of Southampton, UK. He has a long standing interest in End-of-Life Experiences (ELEs), as well as in Near-Death Experiences (NDEs), and featured in the first UK documentary film shown on NDEs in 1987. He is now leading a multi-disciplinary project, researching End-of-Life Experiences and their importance for the dying and the bereaved.

SO, WHAT ARE ELEs?

We suggest that there are two categories of ELEs: Transpersonal and Final Meaning.

1. TRANSPERSONAL ELEs

Transpersonal ELEs possess an other-worldly quality that not only seems to predict approaching death, but can often calm and soothe the manner of dying. However, they cannot easily be linked to the pathological process of dying.

**Dr Peter Fenwick and Sue Brayne**

Since ELEs are multicultural, individuals sometimes report seeing a religious figure associated with their own belief. For example, a Christian may see Christ or Mary, or a Hindu may see Vishnu.

One of the most famous illustrations of an ELE can be found on the Giotto frescoes in the San Francesco church which surround the tomb of St Francis of Assisi in Umbria.

One of the frescoes shows St Francis on his deathbed being visited by a choir of angels. Another shows a dying monk elsewhere in Italy, aware that St Francis is dying, calling out to him, 'Wait for me St Francis, I am coming, I am coming'.

Transpersonal ELEs can include for example:

- ★ Visions involving **deceased family members or religious figures who come** to help the dying through their dying process.
- ★ Being able to transit to and from other realities, often involving **love and light**.
- ★ Coincidences which are experienced by someone emotionally close to the dying person but physically distant. The person might for

example report that **the dying came to them** at the moment of death, often to say they were OK, sometimes across great distances and often at the precise moment of the person's death.

- * Other 'strange' or transcendent phenomena occurring at, or around the time of death such as a **change in room temperature, clocks stopping synchronistically, and the witnessing of vapours, mists and shapes around the body**. These shapes can be accompanied by **feelings of love, light and reassurance**, which may stay with the person who witnesses it for many years.
- * **Cats, dogs and birds can behave strangely**. Some carers feel a 'presence' in the room for a short period of time after death has occurred. Often carers describe this as **a warm, loving atmosphere**. Other find it more **troubling**.

2. FINAL MEANING ELEs

Final Meaning ELEs are profoundly significant in the sense that they appear to prompt the dying person to settle unfinished business in life before death.

Doing this can relieve existential discomfort and allows the person to enter into spiritual readiness as death approaches.

Final Meaning ELEs can include, for example:

- * A sudden **desire to become reconciled with estranged family members** or to put personal and family affairs in order.

- * Previously confused, semi-conscious or unconscious individuals might experience unexpected **lucid moments** that enable them to rally enough to say farewell to those around them.
- * Unconscious or dying people may appear to possess **the capacity to wait for the arrival — or departure — of relatives** before they die.
- * **Profound** waking or sleeping **dreams** which help the individual to come to terms with what may have happened during their life, perhaps in part to prepare them for their death.

SPIRITUAL QUALITIES OF ELEs

Transpersonal and Final Meaning ELEs appear to possess spiritual qualities, such as a sense of meaning and purpose, hope, connectedness and belief.

Both carers and the dying frequently described these experiences in compassionate and reassuring terms such as calming, soothing, greeting, comforting, beautiful, readying, quieting.

In most cases ELEs are seen to ease spiritual suffering and distress, and therefore ease the passage of death.

They (ELEs) also appear to be in marked contrast to the anxiety and distress caused by drug-induced hallucinations..... (To be Continued)



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HOW TO TALK ABOUT DEATH AND DYING?

"When the end is near, most people tend to want a bottom-line, no-nonsense handling of the situation. However, I have seen families in complete denial of the impending death who refuse to participate in anything that sounds like concluding affairs. 'No Dad, you are going to pull through this. We don't want to hear about wills or insurance papers.' And the family turns its back on the dying person's very real need to settle accounts."

Megory Anderson,
Author of ***Sacred Dying***

Those who are dying usually know what is happening to them.

Nevertheless, when a dying person believes relatives and friends can't cope with the truth, it can be hard for them to talk about what they're experiencing, or ask for what they want or need. This can leave the person feeling isolated and lonely, not knowing how to reach out or say goodbye.

So, how can a meaningful conversation happen?

Those who are dying sometimes help indirectly by throwing out 'tester questions' to check if you are willing to engage with them.

They might, for example, ask you 'What do you think happens to you after you die?' They might ask if you think there is life after death. They may ask, 'Do you think God really exists?'

On the other hand, you yourself may want to broach the subject of death with your relative or friend, but don't quite know how, especially if death has never been mentioned before.

One of the easiest ways of opening up the subject is to ask your relative or friend who they would like you to contact if they became very seriously ill. This conveys that you know they may not recover and are willing to talk about it. It also gives them the space to decide whether or not to respond.

If you don't feel quite ready to have this kind of conversation and you're in a hospital, hospice or care home setting, talk with the nursing staff so they can offer appropriate support.



'Heiner's friends clearly didn't want him to be sad and were trying to take his mind off things. They watched football with him just like they used to do: they bought beers, cigarettes, had a bit of a party in the room. Some of them even said "Get well soon", as they were leaving: "Hope you're soon back on track, mate"!

"But no-one asked me how I was feeling. They don't get it? I'm going to die."

**(Taken from
Noch Mal Leben Vor Dem Tod,
2007)**

HOW TO LISTEN WELL

The most important gift you can give to a dying person is to listen.

Here are few **golden rules** of good listening which can help you to open up communication.

Be respectful: None of us truly knows what is going to happen after death, whatever our religious or spiritual beliefs. So it's important not to force our viewpoint onto the person. This is their dying experience. It's our job to bear witness, and not to judge.

Be honest: Often in difficult situations we tend to search for the 'right' or clever thing to say. Or we deny what's happening, or make a joke of it. While such reactions are very understandable – humour has an important place too, even in death – dying is a profound process that just needs us to be there, and perhaps hold a hand. The act of sharing ourselves openly and honestly can be very liberating and soothing for the dying person.

Engaged body language: Don't be afraid to look your relative or friend in the eye. Be alert and attentive to what they are telling you, and the way they are saying it. Listen to their tone of voice and be aware of changes to their facial colour; their willingness to engage with you; their willingness to meet your eyes.

Is what they are saying really what they mean? Are they asking you something with their body language that they are not expressing with words? If so, invite them to tell you what they really want to say.

Try to put your own thoughts aside. It's easy for your attention to be emotionally hijacked by thoughts about this person, your fear about them dying, or perhaps by something else that is happening in your life which is preoccupying you or causing you distress.

You may also feel embarrassed by this kind of emotional intimacy, or fearful of seeing your relative or friend cry or become helpless and vulnerable. Breathe slowly to calm yourself.

Ground yourself by feeling your feet firmly on the floor. This will help you be present and accepting of what is happening.

Use open questions: such as How, When, Where, Who, What, and Why (although be a little careful with Why, as it can sometimes sound accusatory or intrusive). Open questions give the message that you are paying attention, and will encourage your relative or friend to talk frankly.

Using direct questions: Asking 'Are you frightened of dying?' or 'What are your fears about dying?' provides an opportunity for honest communication. However, it can take courage to put such questions to someone for whom you care deeply.

Using indirect questions: A softer approach can be to use an indirect question such as 'I wonder whether there's anything you want to talk to me about?' or 'Perhaps there's something bothering you which you want to tell me about?' or 'What can I do to help you at the moment?' This gives your relative or friend the choice to respond, or to say no. Providing choice is empowering. They may decline initially, but will know the door is open if they want to talk about it later. Indirect, exploring questions give the signal that you are safe to talk to, and that you care.

Leading questions: You can also gently ask leading questions to find out how they are feeling, such as, 'If you become really ill, would you like me to sit with you?' or 'If you become ill, what medical care would you like?' or 'Have you ever thought about what you want to do with your belongings?' or 'Have you thought about what kind of service you would like at your funeral?' Again, this provides the dying person with the choice to respond or not.

Using short statements: These can also provide comfort. You might say 'If there ever comes a time when you want to talk about something or you feel frightened, please do tell me'. This gives your relative or friend permission to talk in his or her own time, without expectation.

It's okay to cry: Crying is natural response to emotionally charged situations. Being brave enough to express our grief can have a powerful healing effect on your relationship, as well as giving your relative or friend permission to grieve for the life he or she is leaving behind.

DON'T FEEL YOU HAVE TO TALK ALL THE TIME.

Just being there quietly at the bedside is important, and can often be surprisingly peaceful.

Life Reviews

Many people who are approaching death find **Life-Reviews** help them validate what has happened during their life-time. Going through old letters and photograph albums with them can be particularly healing.

Some set themselves clear objectives to complete and they may need help to accomplish this. Others may begin to question their religious or spiritual beliefs. Or they may find solace in old or new faith.

..... (To be Continued)

The Project on the "Life Enlightenment Hospital"

The notion and plan of the "Life Enlightenment Hospital" is a totally new, innovative and unique large project on medical services. The core of the project is initially to establish a full service private hospital with 260 beds. Besides the provisions of general medical care, it will also provide **an innovative integrated holistic caring service** that has never been provided by hospitals and other institutions before. This unique kind of **"end-of-life care"** will comprise of the following:

1. **Death Education, and knowledge on course of the after-death world** – to eliminate the patients' feeling of loss towards death and fear;
2. **Palliative care before death** – including care service for the dying persons' relatives and caregivers;
3. **An all-round "end-of-life care" and after-death services** – caring services for the dead at the crucial moments of death and dying, as well as the "guiding services for both the few hours, and (for navigating through the critical period) within 49 days, after death".

In fact, modern people have a very limited understanding on death.



Currently, the services provided are very incomplete and fragmented, such that it makes the dying persons and their relatives to have suffered, especially from the **flaws and faults** that are caused by the present death and dying services. The scientific knowledge on brain cognition in advanced modern sciences has unveiled the fact that "human cognition" does not necessarily occur only in the human brain. There are some cardiac arrest patients who have suffered from their health problems and

had gone through the "Near-Death Experiences" (NDEs), as well as those who have revived from their deaths, due to various causes, and had also gone through the "Near-Death Experiences". These people could provide lots of relevant information in providing a clue that deceased persons could still have their "cognitive ability" even after "clinical death". **These empirical experiments, which have been conducted by world-renowned authoritative scientists with their reports published in scientific journals, have found to be strong proofs with solid scientific evidence.**





Scientists have found that about 10-15% of those cardiac arrest patients who had been confirmed as "clinically dead" (that is, the cessations of breaths, heart beats and brain functions) could be revived by "cardiopulmonary resuscitation" (CPR) from death. Their "experiences of clinical death" could provide solid scientific evidence in proving that the human "consciousness and awareness" continue to exist during the "state of death".

In fact, the findings of at least five scientific researches conducted independently in England, USA and Holland have shown that about 10% of those patients who have later survived, after suffering from acute cardiac arrest and were confirmed as in the "state of clinical death", were found that they still had their "continuation of consciousness" during that time period.

This "continuation of consciousness" of a person never cease even during the "state of clinical death".

This discovery has a strong and significant meaning to it, which has confirmed the fact that it does not mean that nothing will remain after death, but instead, the "continuation of consciousness" of a person still continues to keep on functioning. In fact, these relevant researches and their findings had now been published in such renowned medical journals as "Resuscitation" and "The Lancet", where availed relevant research reports.

Dr. Sam Parnia, as Chairman of the "Horizon Research Foundation", an independent organization focused on research of the "mental states of human beings during terminal moments", has announced the launching of a large-scale research project during the "Symposium on Human Consciousness" held by the United Nations in September of 2008. This is a large-scale research experiment on the topic of "whether

there is the continuation of consciousness and awareness at the moment of death"? This research project would last for three years, and has been carried out by 25 physicians from nine different hospitals in both England and USA. This research project has sampled on researching 1,500 patients

who had survived cardiac arrest, which is led by Dr. Sam Parnia, the Honorary Senior Clinical Researcher at the University of Southampton, UK, together with **Dr. Peter Fenwick**, an authoritative Neuropsychiatrist.

The numerous research findings of the different experiments have confirmed that the "consciousness and cognitive ability" of human beings continue to exist even after death. Furthermore, it has also shown that the physical bodies still have not yet died completely after a few hours to a few days, and so special caring services for them are much needed. In fact, a related large-scale study of near-death experiences has already been launched. Therefore,



the palliative care services before death, the end-of-life care services, and the “guiding services after death” are clearly all extremely important for the dying persons. If the dying person has received the necessary **“Death Education”** while one is still alive, and has learned the necessary knowledge on the operations of the **“World After Death”**, they will definitely understand the importance of the “end-of-life care services”. As a result, the society will have a huge demand for this kind of service. Unfortunately, there is still not a single institution that can provide such type of comprehensive services

at the present moment. **Such a fault is, indeed, a great regret for all human beings, but, at the same time, it is actually a great business opportunity.** As such, in order to assist the dying persons to have real and civilized cares during their last journeys in life, the “Life Enlightenment Charity Foundation Limited” has proposed to establish this Special Project on the “Life Enlightenment Hospital”.

“Life Enlightenment Charity Foundation” *

“Life Enlightenment Charity Foundation Limited” (herein known as the “Foundation”) actively advocates the Special Project on the “Life Enlightenment Hospital”, through playing the role of a **charity body**. Upon the completion of this Special Project, **the “Foundation” will re-invest all the amounts of profits gained from this operation for other charity projects**, so that this innovative

project of great potential can help to nurture numerous other charity projects and items, with its sustainable resources to be perpetually developing, without ever drying up. The “Foundation” anticipates that this Special Project of the “Life Enlightenment Hospital” would create great demands in Hong Kong, the Mainland, and even for the whole world,

due to **its innovativeness and uniqueness** (especially on the various integral components of the end-of-life care, education on death, as well as the continuity of the holistic integrated services). Hence, upon the completion of its structure and the launching of its operation in Hong

Kong, the “Life Enlightenment Hospital” will become a unique role model of its own, so that its mode of operations would then be further extended to the rest of China, and to the global market of the whole world in a “franchise manner”.

It is estimated that the total investments for the first phase of development for the “Life Enlightenment Hospital” will require HK\$2.7 billion. As this Special Project will have new sources of income coming from its innovative services (such as the “end-of-life care”



services, etc.), therefore it is expected that the payback period for this project would be around seven years. Furthermore, the "Foundation" is exploring its feasibility on all sorts and styles of financing alternatives, which may take different formats of

financial cooperation with public and/or private organizations, and direct investments of individuals, as well as loans, subsidies, and/or donations.

We strongly believe this Special Project on the "Life Enlightenment Hospital" can actually cater for the real needs of dying persons, and will really provide the real caring services for their last journeys in life while living in a civilized society, all of which will simultaneously create a whole new market. Therefore, this is, indeed, a project that is both of a charitable nature and of great commercial opportunities.

* "Life Enlightenment Charity Foundation Limited" is a registered charity body in the Hong Kong Special Administration Region of China. The general public can find evidence on the Hong Kong Special Administration Region Government website at URL: http://www.ird.gov.hk/chi/tax/ach_search.htm

No Restrictions on Any Religious Beliefs

Many people might have misunderstood that the all-rounded "end-of-life care services" during and after death – especially the "guiding services for both the few hours, and (for navigating through the critical



period) within 49 days, after death" – would let this Special Project on the "Life Enlightenment Hospital" to be restricted by and confined with the religious norms of "Tibetan Buddhism"?

The answer is totally negative, that is, there are absolutely no restrictions at all on any religious beliefs. This is because the

"World After Death" is a kind of environment that exist in Nature, and its Law of Evolution is well beyond any religious norms. In this regard, the kind of spiritual guidance for all human beings, and even for all sentient beings, to select for the right paths, while protecting them from falling into dangerous pitfalls, when entering into the "World After Death" should be a kind of universal education and basic knowledge, and is thus not confined to any religions. As such, this Special Project on the "Life Enlightenment Hospital" is suitable for all human, and sentient, beings. Yet, on the other hand, this Special Project will not hinder anyone to conduct any kind of religious rituals and ceremonies. Indeed, it can be described as the best place of help and guidance, in terms of spiritual shelter and refuge, for all human, and sentient, beings. It is

also the best place of spiritual assistance in guiding one's spiritual "life" to be uplifted, and to become "enlightened" eventually and successfully. From the deepest of our hearts, we hereby sincerely wish and pray that such a perfect kind of "Life Enlightenment Hospital" would soon be established !





Donation Form

"Life Enlightenment Charity Foundation Limited" is a registered charity in the Hong Kong Special Administrative Region government, and all donations will be exempted from tax under Inland Revenue Ordinance 88 of the HKSAR Government.

Please make a donation to the Life Enlightenment Charity Foundation Limited and help to carry out



Life and Death Education

**Various charitable activities,
Establishment of the "Life Enlightenment"
Hospital and its innovative services.**



We need your donations!

To make your donation, please complete this form and return it to: "Life Enlightenment Charity Foundation Limited", at 4/F, Federal Centre, 77 Sheung On Street, Chaiwan, Hong Kong.

Title: _____ First name: _____ Surname: _____

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I would like to make a donation of HK\$ _____ for:

- ☐ All projects:
- ☐ Life and Death Education, Printing of "Life Enlightenment" Bi-monthly Magazine:
- ☐ "Life Enlightenment" Hospital Establishment Foundation:
- ☐ No need to express gratitude.

I prefer to make payment in:

- ☐ Cash:
- ☐ Cheque(s) (_____ Bank, Cheque number: _____):
- ☐ Directly deposit to the Foundation's Bank account (Please fax the deposit slip to 3157 1144, dated: _____):
- ☐ AutoPay (Monthly AutoPay amount: _____, Receipt will be sent in April of each year. If you choose the AutoPay method, please contact us at 2558 3680 for registration.)

Please make payment by sending a crossed cheque, payable to "Life Enlightenment Charity Foundation Limited", together with the filled-in form to 4/F, Federal Centre, 77 Sheung On Street, Chaiwan, Hong Kong; OR Deposit to the bank account of "Life Enlightenment Charity Foundation Limited" (Hong Kong Bank: 809-523715-292). After which, please send the deposit slip and the filled-in form to our address, or fax them to (852) 3157 1144. Receipt will be sent to you afterward. For phone enquiry, please call: 2558 3680.

Boundless Thanks, Boundless Blessings