



001

COURT OF APPEAL FILE NO. CA48578
ACTION4CANADA vs HIS MAJESTY THE KING IN RIGHT BRITISH COLUMBIA
RESPONDENT'S FACTUM

COURT OF APPEAL

ON APPEAL FROM the order of Justice Ross of the Supreme Court of British Columbia pronounced on the August 29, 2022.

BETWEEN:

ACTION4CANADA, LINDA MORKEN, GARY MORKEN, JANE DOE #1, BRIAN EDGAR, AMY MURANETZ, JANE DOE #2, ILONA ZINK, FEDERICO FUOCO, FIRE PRODUCTIONS LIMITED, F2 PRODUCTIONS INCORPORATED, VALERIE ANN FOLEY, PASTOR RANDY BEATTY, MICHAEL MARTINZ, MAKHAN S. PARHAR, NORTH DELTA REAL HOT YOGA LIMITED, MELISSA ANNE NEUBAUER, JANE DOE #3

(Plaintiffs/Appellants)

AND:

HIS MAJESTY THE KING IN RIGHT BRITISH COLUMBIA, PRIME MINISTER JUSTIN TRUDEAU, CHIEF PUBLIC HEALTH OFFICER THERESA TAM, DR. BONNIE HENRY, PREMIER JOHN HORGAN, ADRIAN DIX, MINISTER OF HEALTH, JENNIFER WHITESIDE, MINISTER OF EDUCATION, MABLE ELMORE, PARLIAMENTARY SECRETARY FOR SENIORS' SERVICES AND LONG-TERM CARE, MIKE FARNWORTH, MINISTER OF PUBLIC SAFETY AND SOLICITOR GENERAL, BRITISH COLUMBIA FERRY SERVICES INC. (OPERATING AS BRITISH COLUMBIA FERRIES), OMAR ALGHABRA, MINISTER OF TRANSPORT, VANCOUVER ISLAND HEALTH AUTHORITY, THE ROYAL CANADIAN MOUNTED POLICE (RCMP), AND THE ATTORNEY GENERAL OF CANADA, BRITTNEY SYLVESTER, PETER KWOK, PROVIDENCE HEALTH CARE, CANADIAN BROADCASTING CORPORATION, TRANSLINK (BRITISH COLUMBIA)

(Defendants/Respondents)

RESPONDENT'S APPEAL BOOK

Vancouver Island Health Authority and Providence Health Care

Action4Canada et al.

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Counsel for Respondents

INDEXRESPONDENTS' APPEAL BOOK (i)

No	Description	Date of Document	Page
1.	Affidavit #1 of R. Hill	January 10, 2022	1



This is the 1st affidavit of
Rebecca Hill
in this case and was made on
10/JAN/2022

No. 217586
Vancouver Registry

IN THE SUPREME COURT OF BRITISH COLUMBIA

BETWEEN

ACTION4CANADA, KIMBERLY WOOLMAN, THE ESTATE OF JAQUELINE
WOOLMAN, LINDA MORKEN, GARY MORKEN, JANE DOE #1, BRIAN EDGAR,
AMY MURANETZ, JANE DOE #2, ILONA ZINK, FEDERICO FUOCO, FIRE
PRODUCTIONS LIMITED, F2 PRODUCTIONS INCORPORATED, VALERIE ANN
FOLEY, PASTOR RANDY BEATTY, MICHAEL MARTINZ, MAKHAN S.
PARHAR, NORTH DELTA REAL HOT YOGA LIMITED, MELISSA ANNE
NEUBAUER, JANE DOE #3

PLAINTIFFS

AND

HER MAJESTY THE QUEEN IN RIGHT BRITISH COLUMBIA, PRIME MINISTER
JUSTIN TRUDEAU, CHIEF PUBLIC HEALTH OFFICER THERESA TAM, DR.
BONNIE HENRY, PREMIER JOHN HORGAN, ADRIAN DIX, MINISTER OF
HEALTH, JENNIFER WHITESIDE, MINISTER OF EDUCATION, MABLE
ELMORE, PARLIAMENTARY SECRETARY FOR SENIORS SERVICES AND
LONG-TERM CARE, MIKE FARNWORTH, MINISTER OF PUBLIC SAFETY AND
SOLICITOR GENERAL, BRITISH COLUMBIA FERRY SERVICES INC.
(OPERATING AS BRITISH COLUMBIA FERRIES), OMAR ALGHABRA,
MINISTER OF TRANSPORT, VANCOUVER ISLAND HEALTH AUTHORITY, THE
ROYAL CANADIAN MOUNTED POLICE (RCMP), AND THE ATTORNEY
GENERAL OF CANADA, BRITTNEY SYLVESTER, PETER KWOK, PROVIDENCE
HEALTH CARE, CANADIAN BROADCASTING CORPORATION, TRANSLINK
(BRITISH COLUMBIA)

DEFENDANTS

AFFIDAVIT

I, Rebecca Hill, of 1301-865 Hornby Street, in the City of Vancouver, in the Province of
British Columbia, AFFIRM THAT:

1. I am a paralegal with the Ministry of Attorney General, Legal Services Branch,
and am assisting Mark Witten, counsel for the Defendants, Her Majesty the Queen in

Right of the Province of British Columbia, Dr. Bonnie Henry, Premier John Horgan, Adrian Dix (Minister of Health), Jennifer Whiteside (Minister of Education), and Mike Farnworth (Minister of Public Safety and Solicitor General, (collectively, the “Province”), in the above captioned proceedings. As such, I have personal knowledge of the matters deposed to except where such are stated to be based on information and belief, in which case, I verily believe them to be true.

Action4Canada Website Information

2. On November 30, 2021, I visited the website www.Action4Canada.com which I understand to be a website created and maintained by the Action4Canada, a Plaintiff in the above referenced proceeding (the “Action4Canada Site”).

3. Attached and marked as **Exhibit “A”** is a true copy of a printout of the main page of the Action4Canada Site, obtained by me on November 30, 2021.

4. Attached and marked as **Exhibit “B”** is a true copy of a printout of the “Donate” page from the Action4Canada Site, obtained by me on November 30, 2021.

5. Attached and marked as **Exhibit “C”** is a true copy of a printout of the “The House of COVID keeps on Falling” page from the Action4Canada Site, obtained by me on November 30, 2021.

6. Attached and marked as **Exhibit “D”** is a true copy of a printout of the “Action4Canada: Statement of Claim FILED” page from the Action4Canada Site on November 30, 2021.

Notices of Liability

7. Attached and marked as **Exhibit “E”** is a true copy of a printout of the “Notices of Liability” page from the Action4Canada Site, obtained by me on November 30, 2021.

8. Attached and marked as **Exhibit “F”** is a true copy of the “Employer Vaccine Notice of Liability” page from the Action4Canda Site along with a copy of the blank

form and an instruction page for completion and service, obtained by me on November 30, 2021.

9. Attached and marked as **Exhibit “G”** is a true copy of the “Elected Officials Vaccine Notice of Liability” page from the Action4Canada Site along with a copy of the blank form and an instruction page for completion and service, obtained by me on November 30, 2021.

10. Between August and December 2021, our office was provided with copies of approximately seventy (70) Vaccine Notices of Liability to Employers in the template provided on the Action4Canada Site, which had been sent by employees to representatives of various BC government agencies and ministries. Attached and collectively marked as **Exhibit “H”** is a sample of twenty (20) completed Vaccine Notices of Liability to Employers and, where provided, accompanying emails.

11. Between August and December 2021, our office was provided with copies of approximately one hundred ten (110) Vaccine Notices of Liability to Elected/Appointed Officials in the template provided on the Action4Canada Site, which had been sent to representatives of various BC government agencies and ministries. Attached and collectively marked as **Exhibit “I”** is a sample of twenty (20) completed Vaccine Notices of Liability to Elected/Appointed Officials, and, where provided, accompanying emails.

12. Between August and December 2021, our office was provided with copies of approximately five (5) letters in a template provided on the Action4Canada Site, with the subject line “Threat to use an experimental injection as a term of employment.” Attached and collectively marked as **Exhibit “J”** is a copy of those letters, and, where provided, accompanying emails.

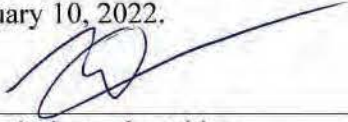
Other Material

13. On November 30, 2021, I conducted an internet search using www.Google.com for a Twitter account related to the name “Rocco Galati”. As a result of that search, I was able to access a Twitter account under the name @roccogalatilaw. Attached and marked as **Exhibit “K”** are true copies of screenshots taken by me of postings from the Twitter

- 4 -

account @roccogalatilaw on November 30, 2021 for the period August 10 – September 1, 2021.

AFFIRMED BEFORE ME
at Vancouver, British Columbia
on January 10, 2022.


A commissioner for taking
affidavits for British Columbia

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Rebecca Hill

MARK WITTEN
BARRISTER & SOLICITOR
MINISTRY OF JUSTICE
LEGAL SERVICES BRANCH
#1301 - 865 HORNBY STREET
VANCOUVER, BC V6Z 2G3

This is Exhibit " A " referred to in the
affidavit of Rebecca Hill
sworn before me at Vancouver
in the Province of British Columbia this
10 day of January, 20 22
[Signature]
A Commissioner for taking Affidavits
within the Province of British Columbia

Action4Canada is a grassroots movement reaching out to millions of Canadians and UNITING our voices in opposition to the destructive policies tearing at the fabric of this Nation.

 action4canada.com/



ACTION4CANADA

Protecting Faith, Family and Freedom

God Keep Our Land Glorious and Free

Action4Canada is a grassroots movement reaching out to millions of Canadians and UNITING our voices in opposition to the destructive policies tearing at the fabric of this nation. Through Call To ACTION campaigns, we equip citizens to take action. We are committed to protecting... FAITH, FAMILY and FREEDOM

[Remembrance Day Message](#)

A Message from Tanya Gaw, Founder of Action4Canada

[Statement of Claim Filed! Legal action against the Government officially commenced!](#)

Action4Canada has commenced legal action against the BC and federal government. We have retained Rocco Galati, a top constitutional lawyer, who is willing to take on the defence of our Charter Rights and Freedoms in response to the extreme and destructive emergency measures and Bill 19.

Please support Action4Canada as we continue our work in defending Canadians.

DONATE NOW



ACTION4CANADA

Protecting Faith, Family and Freedom

Vax Victims



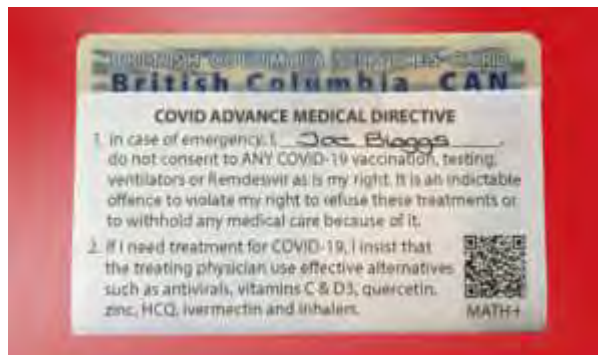
Notices of Liability



Mask Notice of Liability



Advance Medical Directive



Charter Rights



Calls to Action



Join Action4Canada



ACT! For Canada

Laura-Lynn Tyler Thompson

Life Site News

Rebel News

True North

Odessa

Dan Dicks

Epoch Times

C3RF

Our mission is to protect Canada's rich heritage which is founded on Judeo-Christian principles.

Inherited through our British Commonwealth and embedded in the Magna Carta, it forms our laws and values and is a system of governance which sets us apart from totalitarian, communist and socialist regimes. Giving Canadians the freedom to believe, or not to believe, without fear of persecution.




WE ARE UNITED, ON THE MOVE AND DEVOTED TO MAKING CANADA GREAT AGAIN!

D O N A T E N O W

ALL RIGHTS RESERVED ACTION4CANADA INC.

Donate to Action4Canada

 action4canada.com/donate/

August 30, 2019



ACTION4CANADA

Protecting Faith, Family and Freedom

Action4Canada Inc is volunteer run and 100% supported by the generous donations of members who share our concerns and value our work. We are committed to educating, equipping and encouraging Canadians to take action and give the silent majority a much needed voice.

Special Notice –Action4Canada Inc has filed legal action against the Federal and BC governments in response to their extreme emergency measures. For updates **Click Here**. **We have reached 100% of our current fundraising goal for the Constitutional legal action.** Thank you so much to all the donors who helped make this happen. We are going into court fully armed and ready to win!

Please continue to support the work of **Action4Canada** as we work to protect Canadians rights and freedoms through providing effective resources, legal actions, training and more.

Payment Methods



This is Exhibit "B" referred to in the affidavit of Rebecca Hill sworn before me at Vancouver in the Province of British Columbia this 10 day of January, 2022.


A Commissioner for taking Affidavits within the Province of British Columbia

Action4Canada General Fund

Thank you!

We have reached 100% of our original fundraising goal for the Constitutional legal action.

However, this is only one part of our strategy.

Please continue to support A4C by donating to the General Fund and consider becoming a monthly donor.

Action4Canada is working hard to equip Canadians to defend their guaranteed rights!



Donate – A4C General Fund

Donate – Legal Fund

By cheque

Action4Canada Inc.
102 – 15910 Fraser Hwy, Suite #453
Surrey, BC V4N 0X9

E-mail us @

Action4Canada is a registered non-profit organization. We do not have charitable status.

Non-Profit Certificate of Incorporation

ALL RIGHTS RESERVED ACTION4CANADA INC.

The House of COVID keeps on Falling

action4canada.com/the-house-of-covid-keeps-on-falling/

August 30, 2021

Join Tanya Gaw & Rocco Galati On Wednesday September 1st
Via Two Zoom Presentations

Meeting #1 – Action4Canada @ 5:45pm PST/8:45pm EST
Register below



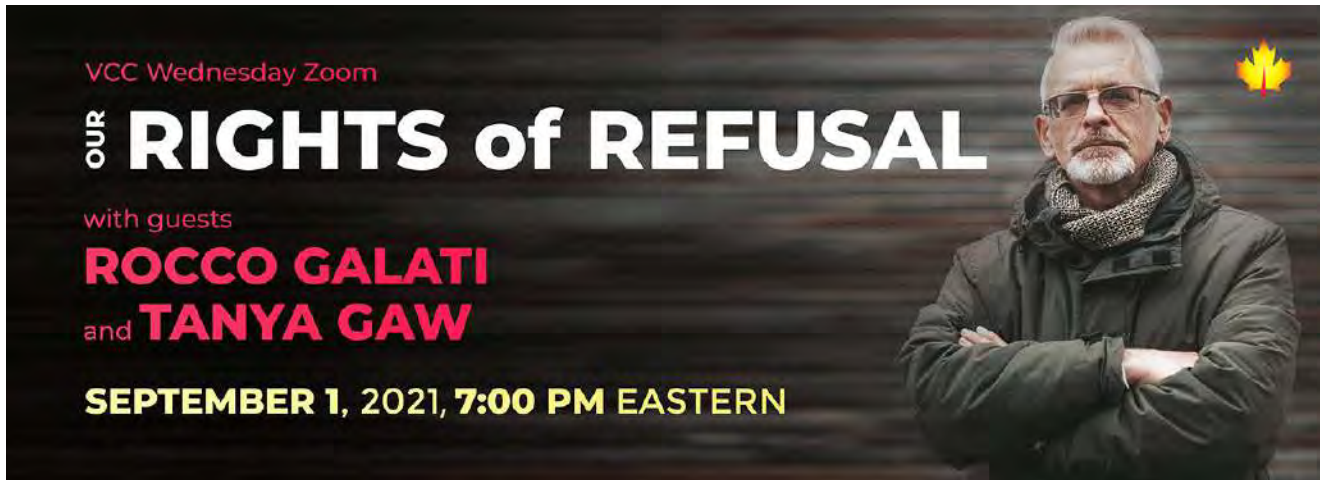
When: September 1st, 2021. Sign on starts at 05:30pm PST/8:30pm EST

The meeting begins at 5:45pm PST/8:45pm EST with an Intro Presentation to Action4Canada and Rocco begins at 6pm PST/9pm EST. Rocco and Tanya will discuss the filing of the Statement of Claim.

Register in advance for this meeting. After registering, you will receive a confirmation email.

Meeting #2 – Rocco and Tanya with Vaccine Choice Canada

This is Exhibit C referred to in the
affidavit of Rebecca Hill
sworn before me at Vancouver
in the Province of British Columbia this
10 day of January 2022
.....
A Commissioner for taking Affidavits
within the Province of British Columbia



When: September 1st, 2021 4pm PST/7pm EST

Register in advance for this meeting. After registering, you will receive a confirmation email.

The Word is Getting Out



Grassroots group sues Canadian gov't over "dictatorial and unlawful" COVID measures.

The Canadian government's "actions appear to constitute criminal negligence, breach of trust, incitement of hatred, crimes against humanity committed against our elderly, our children and society at large," **Action4Canada** said. **[Read More.](#)**

Trudeau's Waning Fan Club

Opposition Rising! Angry crowd in White Rock, British Columbia force Trudeau out of the neighbourhood, whilst in Milton Ontario he was too afraid to get out of his bus (video below).

Please support Action4Canada via a **donation** as we continue our work in defending Canadians. We are a not-for-profit and rely solely on the contributions of our donors to support the work we are doing.

Thank you and God bless Canada.

**The Team @
Action4Canada**

Vax Victims



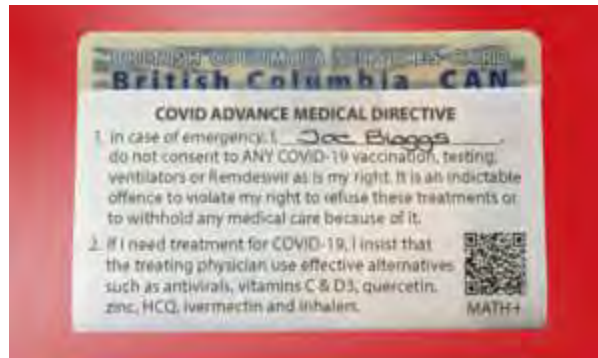
Notices of Liability



Mask Notice of Liability



Advance Medical Directive



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Calls to Action



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Life Site News

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Epoch Times

C3RF

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affidavit of Rebecca Hill
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in the Province of British Columbia this
10 day of January 2022
ra
A Commissioner for taking Affidavits
within the Province of British Columbia

Thank you! We have reached 100% of our current Legal Fund financial goal!

action4canada.com/action4canada-statement-of-claim-filed/

August 26, 2021



Action4Canada Statement of Claim FILED!

Action4Canada and the Constitutional Rights Centre are very pleased to announce that the Statement of Claim for the BC/Federal legal action has been filed.

On August 16th, 2021, **Action4Canada** formally filed legal action in the BC Supreme Court, to hold multiple parties accountable for their actions with respect to COVID-19 measures. The defendants include: the Government of Canada, the Government of British Columbia, various public health officers, the Canadian Broadcasting Corporation, and others. **Action4Canada** is committed to defending faith, family and freedom.

Video from the Press Conference

Statement of Claim

[Select here for the full Statement of Claim \(PDF\)](#)

Action4Canada and the Constitutional Rights Centre believe the government is infringing on human rights and have exceeded their authority causing irreparable harm. Their actions appear to constitute criminal negligence, breach of trust, incitement of hatred, crimes against

humanity committed against our elderly, our children and society at large, by withholding life-saving treatments, causing extreme psychological trauma due to the ordering of isolation, lockdowns, masking, social distancing and, without making full, true and plain disclosure of the known risks thereof, mandating and promoting dangerous experimental medical injections which they know, or ought to know, cause adverse reactions and death.

The government's dictatorial and unlawful measures and their out-of-control spending, in response to COVID-19 are further destroying our businesses, our communities, and our economy. Many small businesses have been forced to close. Furthermore, the escalating national debt is putting the future of our children and grandchildren at risk.

The measures are in violation of the Constitution and nearly every section of the Charter of Rights and Freedoms. Canadians have "guaranteed" rights. Such as Section 7 of the Charter and 1(a) of the Bill of Rights; "the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice".

The government's actions are putting our sovereignty, national security, and our democracy at risk.

Financial Goal 100% 100%

Please **consider a donation** as we are a not-for-profit and rely solely on the contributions of our donors to support the ongoing work we are doing.

Vax Victims



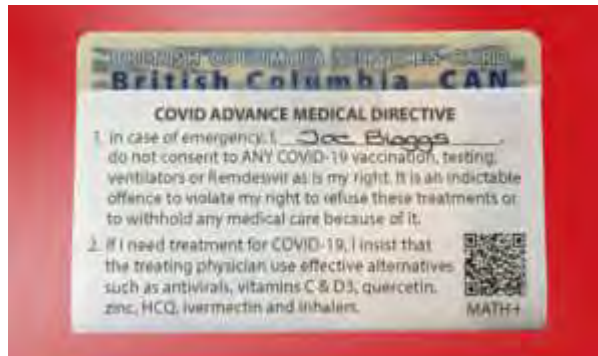
Notices of Liability



Mask Notice of Liability



Advance Medical Directive



Charter Rights



Calls to Action



Join Action4Canada

BLOGROLL

[ACT! For Canada](#)

[Laura-Lynn Tyler Thompson](#)

[Life Site News](#)

[Rebel News](#)

[True North](#)

[Odessa](#)

[Dan Dicks](#)

[Epoch Times](#)

[C3RF](#)

This is Exhibit "E" referred to in the
affidavit of Rebecca Hill
sworn before me at Vancouver
in the Province of British Columbia this
10 day of January, 2022
[Signature]
A Commissioner for taking Affidavits
within the Province of British Columbia

COVID-19 Liability Notices | Action4Canada

action4canada.com/covid-liability-notice/

August 4, 2021

Notices of Liability

Business, Mask, Jab, Testing etc



All things COVID Related: Protect yourself, your job and your children

Personal liability is a critical weapon in this war against individual rights and freedoms. Canadians have inalienable rights. We have a Constitution and a Charter of Rights and Freedoms, plus the Rule of Law. If you do not want to lose your rights then you need to take action to protect them by holding those who are violating your rights, personally liable.

No Order or government mandates supersede YOUR guaranteed right to work; assemble; worship; or see your family or loved ones; nor to force you to have anything stuck into any part of your body without your 100% consent. If you do not want to lose your rights then you must not concede, comply or give in to this tyranny.

To assist you, **Action4Canada** has created the following Notices of Liability and non-consent form to protect you and your family from a government that is out of control.

Click on these links to jump directly to each Notice of Liability section:

NOTE: You do not need a lawyer to serve a Notice of Liability.

Fill in the top of the NOL with the name of the person you are serving, sign and date the bottom, keep a copy, and either deliver personally or send by registered mail.

COVID Advance Medical Directive

COVID Advance Medical Directive

Print off and attach to your medical card to advise medical professionals of your wishes should you need hospital care.

COVID Testing

Notice of Liability Against Forced Covid Testing

Right to REFUSE Covid Testing. The Genetic Non-Discrimination Act, Bill S201, It is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity. The PCR test measures the “genetic” material in a sample.

Warning Letter: PDF

Vaccine NOLs

PROTECT MINORS – **Do not give the NOL to your child to serve. Follow the instructions provided.

Student Mask/Covid Notice Non-Consent NOL to Educators

- **Student Mask/Covid Notice to Educators**
- **British Columbia Mask Exemption**

If anyone is disregarding the Notice of Liability and interfering with education, extra-curricular activities or essential or non-essential services then use the following letter to inform them they will be held ‘personally’ liable for any loss of income, damages and/or injury you suffer as a result of their actions. You are not addressing them in their capacity as an educator, business owner or coach but as a citizen who is committing indictable offenses. Any post-secondary student being prohibited from attending school is missing out on future income and should be included in your claim.

NEW: Additional Vax Mandate Letter of Response

PROTECT EMPLOYEES

- **Employer Notice of Liability**
- **Union Notice of Liability**
- **Join the Workers Unite group**

If your employer or union is disregarding the NOL then use the following letter to inform the ‘individual’ that they will be held ‘personally’ liable for any loss of income or damages you suffer as a result of their actions. You are not addressing them in their capacity as employer

or union rep but as a citizen who is committing indictable offenses.

NEW: Employee Further Letter of Response

If all else fails...it is time to file criminal charges. Remember, you are not going after anyone in their capacity as an employer or union rep but as a citizen who is in violation of the criminal code and your guaranteed protected Constitutional rights.

David Lindsay's E-book on how to file criminal charges against other citizens, "The Annotated Criminal Code Procedure in Canada," is available by emailing David at [\[email protected\]](#)

Go to the **Empower Hour page** and listen to Oct. 13 and Oct. 27, 2021 for further instructions.

AGAINST ELECTED OFFICIALS

Elected Officials Notice of Liability

AGAINST 'ANYONE' ADMINISTERING THE EXPERIMENTAL INJECTION

We have a duty to protect the public and minors from this harmful, deadly, injection.

Public Health Nurses/Physicians/Pharmacist/Firefighters/etc. Notice of Liability

Businesses

Premiers & Health Officials

If you are a church leader, business owner, educator, medical professional, law enforcement or firefighter.... Sign and send one of the following notices to your Premier and Provincial Health Officer advising them that **you will no longer comply with Orders that are unlawful, irrational, causing harm, and in violation of the Constitution and Charter of Rights and Freedoms.**

Notices to Premiers and Health Officials

Mobility Rights

Every citizen has the Guaranteed right to travel in Canada. The right to enter, remain and leave Canada.

Printable PDF

Notice of Liability Flyers

Notice of Liability Flyer

NOLs in Action

Notice of Liability (Elected/Appointed Official) Served to Mayor and Council (Kamloops, BC)



Watch Video At: <https://youtu.be/gNRi31VZyls>

Action4Canada accepts no responsibility or liability for any harms or losses that occur as result of delivering this notice. If you do not agree to these terms then please do not use this notice. We do not make any representations or warranties about the potential consequences of delivering this Notice of Exemption/Non-Consent (eg. removal of child from a private school). A parent/legal guardian must decide what is in the best interest of their child.

Vax Victims



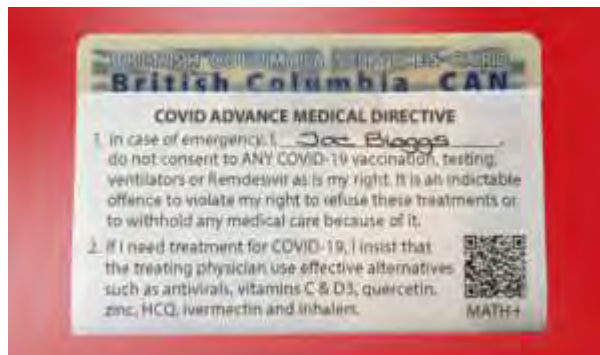
Notices of Liability



Mask Notice of Liability



Advance Medical Directive



Charter Rights



Calls to Action



Join Action4Canada



ACT! For Canada

Laura-Lynn Tyler Thompson

Life Site News

Rebel News

True North

Odessa

Dan Dicks

Epoch Times

C3RF

People rallying against COVID-19 health orders marched along Dewdney Trunk Road Wednesday, Nov. 3. (Colleen Flanagan/The News)

Rally opposes vaccines

About 200 people turned up for a march Wednesday

Colleen Flanagan
cflanagan@mapleridgenews.com

Hundreds of people took to the streets in Maple Ridge calling for an end to COVID-19 mandates Wednesday afternoon.

About 200 people started and finished their march at Memorial Peace Park for what organizers called a peaceful rally at the bandstand.

The group Action4Canada was behind the event – a group that calls COVID-19 vaccine an experimental injection.

Organizers were hoping to give “notices of liability” to Maple Ridge Mayor Mike Morden, and the rest of city council – a notice they were encouraging people to print from their website to “inform” community elected officials that they have “absolutely no authority or jurisdiction to prescribe medical treatments and that they must cease and desist or be held personally, civilly, and criminally liable...”

Mayor Mike Morden said he met with a group outside city hall and received documents that he was told were intended for

“It was a cordial exchange,” he remarked.

Ridge Meadows RCMP stood by the entrance to city hall making sure those taking part in the rally did not enter.

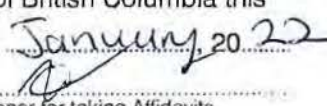
People were holding signs saying: “Last year’s hero, this year unemployed,” “I am not an experiment,” and “Informed consent not coercion.”

Guest speakers at the event were with a group called Police On Guard – who describe themselves as a group of active duty and retired law enforcement officers, who want to see an end to what they call “unconstitutional public health orders.”

“Our mission is to uphold the oath that we’ve all taken, to uphold the Charter of Rights and Constitution for all Canadians coast-to-coast. Why is this important? As we see these mandates affect the lives of many Canadians, it has been very important for us to take that stand,” said a representative, addressing the rally.

The Ridge Meadows chapter of Action-4Canada the group was started only six weeks ago and this is its second known appearance in Maple Ridge.

The same group was behind an anti-vaccine protest around Webster’s Corners Elementary on Oct. 26, where a group of about 20 people were handing out information sheets about the HPV vaccine to parents who were dropping off their children for class.

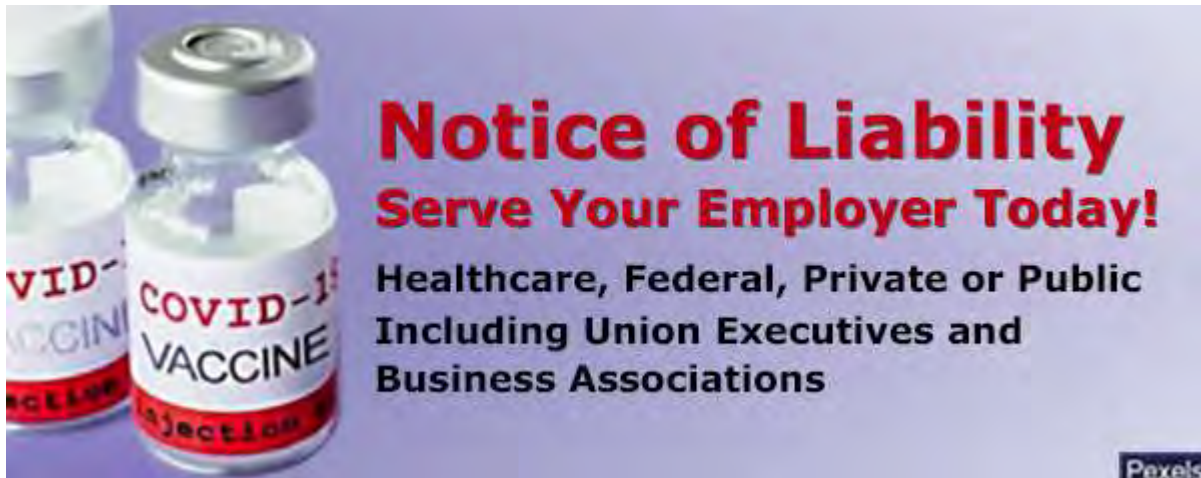
This is Exhibit " F " referred to in the
affidavit of Rebecca Hill
sworn before me at Vancouver
in the Province of British Columbia this
10 day of January 20 22

A Commissioner for taking Affidavits
within the Province of British Columbia

Notice of Liability: Employee | Action4Canada

action4canada.com/liability-notice-employee/

June 5, 2021

Is your job at risk due to the COVID Experimental Injection?



Print PDF: [Employer Vaccine Notice of Liability](#)

Employers, whether medical or not, are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable”.

Therefore, notify your employer today that you will hold them personally liable for any financial injury and/or loss of your personal income and ability to provide food and shelter for your family if they choose to use coercion or discrimination against you based on your decision not to participate in the COVID-19 experimental treatments.

Take ACTION!

- Print the Notice of Liability (link in blue above)
- Fill in the name of the person you are sending it to, owner and/or management (one notice per person), at the top and then fill in your name and your signature at the bottom (you do not need to get your employer to sign it).
- Keep a photocopy of the Notice for your records
- Then either personally give the signed copy to your employer/owner/manager in person or you can send it by mail.

- Video record serving the NOL when done in person and use registered mail if sending by post so you have proof of them having received it.

Action4Canada accepts no responsibility or liability for any harms or losses that occur as result of delivering this notice. If you do not agree to these terms then please do not use this notice.

Vax Victims



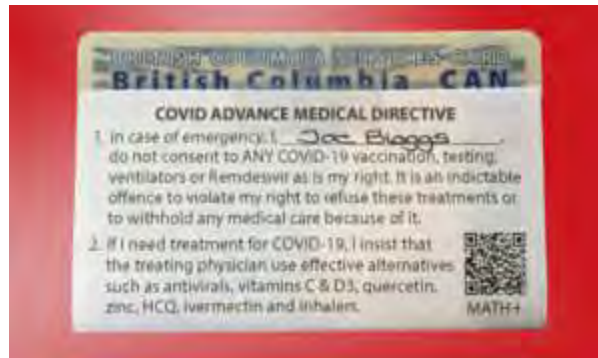
Notices of Liability



Mask Notice of Liability



Advance Medical Directive



Charter Rights



Calls to Action



Join Action4Canada



ACT! For Canada

Laura-Lynn Tyler Thompson

Life Site News

Rebel News

True North

Odessa

Dan Dicks

Epoch Times

C3RF

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ACTION4CANADA

Protecting Faith, Family and Freedom

“Vaccine” Notice of Liability: **Employers (Health Care, Federal, Private and Public)** **Business Associations, and the like**



How to Serve the Notice of Liability

- Print two copies of the Notice of Liability.
- Fill in the name of the person you are serving it to in the space provided at the top of the first page - on both copies.
- Sign your name and fill in the date in the space provided on the last page - on both copies.
- Keep one copy of the Notice for your records.
- Give the second copy to the person you are serving it to. If they choose not to accept it, then leave it on the floor at their feet.
- If you are serving the Notice in person, be sure to video record yourself serving it (or audio record if video is not possible).
- **If sending by mail, you must use registered mail as that provides proof of delivery.**

Keep all information (eg. Liability Notice copy, video, mailing proof etc.) in a safe place for future use.

NOTE: You do not need a lawyer to serve a Notice of Liability and you do not need consent, or the signature of the person you are serving it to.

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**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: _____

Attn: _____

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

Despite this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter”⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen’s Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections is not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Vaccine development is a long, complex process, often lasting 10-15 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-peopleafter-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

(Referenced on Page 8 of “An Assessment of Covid-19...”) ¹⁹. Per the American Council on Science and Health, as well as the National Institutes of Health (NIH), “the estimated age-specific Infection Fatality Rate (IFR) is very low for children and younger adults (e.g., 0.002% at age 10 and 0.01% at age 25) which translates to a survivability rate of 99.99% to 99.998%, whereas the IFR is 0.4% at age 55 and 1.4% at 65 translating to a survivability rate of 99.6% to 98.6% respectively” ^{20 21}. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

7. According to Health Canada's Summary Basis of Decision ²², updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real-world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines”.

Under the Risk Management plan section of the Summary Basis of Decision, it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)”. In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

In an article titled “Vaccination against SARS-CoV-2 and disease enhancement – knowns and unknowns” published on NCBI they specifically state: “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)” ²³.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined ²⁴. It is further reported that only one percent of vaccine injuries are reported to VAERS ²⁵, compounded by several month’s delay in uploading the adverse events to the VAERS database ²⁶.

On November 5, 2021, VAERS data release for the period December 14, 2020 to October 29, 2021, showed 856,919 adverse events reports following COVID-19 injections, including 18,078 deaths and 131,027 serious injuries. Of that total, 1,320 adverse injury reports were of miscarriage or premature birth; 3,090 reported cases of Bell’s Palsy; 2,070 reports of serious anaphylaxis; 10,686 reports of blood clotting disorders; and 3,030 cases of myocarditis and pericarditis ²⁷.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths”. He further added, “...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it’s pulled off the market” ²⁸.

9. Canada’s Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

¹⁹ <https://ghoorganisation.com/wp-content/uploads/2021/07/GHO-updated-pdf.pdf>

²⁰ <https://www.acsh.org/news/2020/11/18/covid-infection-fatality-rates-sex-and-age-15163>

²¹ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7566857/>

²⁴ <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

²⁵ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁶ <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/reporting-vaccinations.html>

²⁷ <https://childrenshealthdefense.org/defender/vaers-cdc-adverse-events-deaths-covid-vaccines/>

²⁸ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{29 30}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³¹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*³², a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³³, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the *Canadian Criminal Code*³⁴, to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.
R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

²⁹ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

³⁰ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³³ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192³⁵, the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30³⁶.

Vaccination is voluntary in Canada³⁷. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁸ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁹ (2005)
- **Nuremberg Code**⁴⁰ (1947)
- **Helsinki Declaration**⁴¹ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴²

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴³. For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take ANY vaccine including the COVID-19 experimental injection.

Name: _____

Signature: _____

Date: _____

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/1980/1980canlii14/1980canlii14.html>

³⁷ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁸ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>


³⁹ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

⁴⁰ <http://www.cirp.org/library/ethics/nuremberg/>

⁴¹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴² <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴³ <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

This is Exhibit " G " referred to in the
affidavit of Rebecca Hill
sworn before me at Vancouver
in the Province of British Columbia this
10 day of January, 2022

A Commissioner for taking Affidavits
within the Province of British Columbia

Notice of Liability – Elected Officials

action4canada.com/liability-notice-elected-officials/

July 11, 2021



Print PDF – Elected Officials Vaccine Notice of Liability

Elected officials are not medical professionals and, therefore, they are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist citizens submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...”

Be proactive and take action and inform the elected officials in your community that they have absolutely no authority or jurisdiction to prescribe medical treatments and that they must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including minors.

Take ACTION!

- Print the Notice of Liability
- Fill in the name of the person you are sending it to, owner and/or management (one notice per person)
- Keep a photocopy of the Notice for your records
- Record the event when providing the signed copy to the recipient in person.
- **If sending by mail we recommend you send it by registered mail**

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ACTION4CANADA

Protecting Faith, Family and Freedom

“Vaccine” Notice of Liability: Elected/Appointed Officials



How to Serve the Notice of Liability

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- Sign your name and fill in the date in the space provided on the last page - on both copies.
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- **If sending by mail, you must use registered mail as that provides proof of delivery.**

Keep all information (eg. Liability Notice copy, video, mailing proof etc.) in a safe place for future use.

NOTE: You do not need a lawyer to serve a Notice of Liability and you do not need consent, or the signature of the person you are serving it to.

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“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: _____

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in anyway by you to the public

This is your official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist citizens, including minors, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a “vaccine”.

Experimental vaccines are only authorized to be used under an official State of Emergency and only if there are no other adequate, approved or available alternatives. The Federal Government did not enact a State of Emergency for COVID-19 and effective alternatives including Vitamin D, Ivermectin and Hydroxychloroquine have been available from the onset but their use was prohibited.

The emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

Despite this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter”⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/en/sensational-verdict-from-weimar-no-masks-no-distance-no-more-tests-for-pupils/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections is not required or recommended.

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Vaccine development is a long, complex process, often lasting 10-15 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

6. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.¹⁹ In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

According to Health Canada's Summary Basis of Decision, updated May 20, 2021²⁰, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²¹.

7. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²². It is further reported that only one percent of vaccine injuries are reported to VAERS²³, compounded by several month's delay in uploading the adverse events to the VAERS database²⁴.

On November 5, 2021, VAERS data release for the period December 14, 2020 to October 29, 2021, showed 856,919 adverse events reports following COVID-19 injections, including 18,078 deaths and 131,027 serious injuries. Of that total, 1,320 adverse injury reports were of miscarriage or premature birth; 3,090 reported cases of Bell's Palsy; 2,070 reports of serious anaphylaxis; 10,686 reports of blood clotting disorders; and 3,030 cases of myocarditis and pericarditis²⁵.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁶.

8. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
9. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{27 28}.**

¹⁹ <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08%20> (pg. 9)

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7566857/> <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

²³ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁴ <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/reporting-vaccinations.html>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-adverse-events-deaths-covid-vaccines/>

²⁶ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁷ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁸ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families.

You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental injection, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make medical decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these qualified individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*²⁹, a crime against humanity means, among other things: murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³⁰, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³¹, it is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

²⁹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³¹ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

It is a further violation of the Canadian Criminal Code³², to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁴

Vaccination is voluntary in Canada³⁵. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts that lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, but they are also putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose these experimental injections on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³³ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁴ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁵ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms³⁶ (1982)** Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights³⁷ (2005)**
- **Nuremberg Code³⁸ (1947)**
- **Helsinki Declaration³⁹ (1964, Revised 2013)** Article 25, 26

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a “medical procedure”. Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering ANY vaccine including the experimental COVID-19 injections to members of the public, including myself, and/or including minors.

Name (print): _____

Signature: _____

Date: _____

³⁶ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁷ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁸ <http://www.cirp.org/library/ethics/nuremberg/>

³⁹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴⁰ <https://www.bitchute.com/video/W5qSPiy1onXt/>

From: Daniel Braun <danielpbraun@gmail.com>
Sent: Wednesday, November 3, 2021 9:11 PM
To: Byers, Carol S FLNR:EX; Simpson, Cameron FLNR:EX; Ozel, Gokce FLNR:EX
Subject: Fwd: Vaccine NoL
Attachments: D.Braun-Vaccine Notice of Liability.pdf

[EXTERNAL] This email came from an external source. Only open if you are expecting it from a known contact.

Hello Cam, Carol, and Gokce.

I wanted to send you the attached letter for the sake of information sharing in regards to the vaccine mandate. There are numerous additional documents that indicate more study results and references but this one covers a lot of the main points. It is worded with a fairly strong viewpoint but I am simply sharing it for information at this time.


I had my reservations about these vaccines well over a year ago when they were first talking about them and after multiple personal interactions with first hand medical knowledge and experience, I made my decision to pass on the currently available Covid-19 vaccines.

I know that we are all trying to make the best decisions for ourselves at this point and time, and I'm not trying to convince anyone one way or another, so I hope this sheds some light on an alternative perspective. I disagree with the BCPS vaccine mandate, the covid passport requirements, and the singular method of fighting a viral infection with the experimental vaccinations.

I am always open to talk so feel free to call me anytime.

Regards,

Daniel Braun
 778-978-0171

This is Exhibit "H" referred to in the
 affidavit of Rebecca Hill
 sworn before me at Vancouver
 in the Province of British Columbia this
10 day of January, 2022

 A Commissioner for taking Affidavits
 within the Province of British Columbia

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: Ministry of FLNRORD - Stuart Nechako - TSN

Attn: BCTS - Stuart Nechako Management

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter”⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

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⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

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3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

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There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)”. In other words, the shot increases the risk of disease and side-effects, and **weakens immunity toward future SARS related illness.**

The report specifically states, “the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)”²².

8. **As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³.** It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month’s delay in uploading the adverse events to the VAERS database²⁵.

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Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths”. He further added, “...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it’s pulled off the market²⁷”.

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10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.**

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

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Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

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Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
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According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take ANY vaccine including the COVID-19 experimental injection.

Name: Daniel Braun

Signature: Daniel Braun

Date: November 2, 2021

Source: **action4canada.com**

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmte/07vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.citp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: British Columbia Provincial Government
British Columbia Public Service Agency

Attn: Lori Wanamaker

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivizing, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cornandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

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7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in pediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

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Therefore, I hereby notify you that you will be held liable for any and all damage and/or harm caused or done to myself and/or my family directly or indirectly, including but not restricted to financial injury and/or loss of my personal income and my ability to provide food and shelter for myself and/or my family. If you use coercion, intimidation, discrimination, or force against me at any time, as well as any and all damage or harm directly or indirectly caused or done to myself and/or my family including mental/psychological/physical damage, including loss of life or in any other manner. In accepting the Covid-19 injection and any subsequent boosters, it will not be done voluntarily, and my personal medical information will not be disclosed voluntarily.

Name: David Vinkle

Signature: David Vinkle

Date: Nov. 7, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

November 2, 2021

Ms. Bobbi Sadler, Deputy Minister
BC Public Service Agency
PO Box 9404 Stn Prov Govt
Victoria, B.C. V8W 9V1

Dear Ms. Sadler,

By complying to and implementing the provincial mandates of COVID injections, testing and masking, you are personally liable for any death or injuries as a result of carrying out the mandates. You are complicit in violating the Nuremberg Code, because these are experimental treatments. The staff, supervisors and managers have the right to informed consent. The Canadian Charter of Rights and Freedoms prohibits coercion into experimental medical treatments.

Contrary to the narrative being promoted by our governments, public health agencies and the mainstream media, we are directly observing unprecedented levels of vaccine-associated injury and death. This is documented in official databases such as the *Vaccine Adverse Events Reporting System (VAERS)* (<https://openvaers.com/index.php>), which is jointly developed and supported by the *US Centers for Disease Control (CDC)* and the *Food and Drug Administration (FDA)*. As of October 22, 2021, there are over 837,593 reported adverse events, including 17,619 deaths, and over 27,277 permanently disabled.

This is your formal Notice of Liability. You have been served.

This COVID injection, testing, and masking program must be terminated immediately.

Respectfully,

Concerned Employees
Enclosure

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: BC Public Service Agency

Attn: Bobbi Sadler

Re: COVID-19 injections recommended or administered to employees, staff, supervisors and managers.

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nOgg0BxXIZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://commandrosterreview.com/report/>

⁵ <https://unitvnewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

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⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.iccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMI_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshelthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugg>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/live-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-ccc.lexum.com/scc-ccc/scc-ccc/en/item/2553/index.do>

³⁵ <https://www.cmlti.org/en/cu/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: Concerned Employees

Signature: _____

Date: November 2, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

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Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Union Executives, Business Associations, and the like

Name of Employer/Union/Assoc: BC Provincial Government / BCGEU

Attn: Inspector / ~~Stephen~~ Cantelon

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

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4 <https://cornandrogenreview.com/report/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{14 15 16} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;¹⁸
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16 https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

18 <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

19 <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

20 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

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22 <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

23 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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R.S., c. C-34, s. 198

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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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Vaccination is voluntary in Canada. The federal and provincial governments made it clear that getting the COVID-19

32 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

33 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

34 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

35 <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

injections would not be mandatory. Even if they do attempt to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a "medical procedure". In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: Essal Masinda

Signature: 

Date: Nov 10 2021

Source: Action4Canada.com

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cjrp.org/library/ethics/nuremberg>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Union Executives, Business Associations, and the like

Name of Employer/Union/Assoc: VSB / VESTA / BCTF

Attn: Adrian Dix

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

MINISTER'S OFFICE HEALTH	
# _____	
DRAFT <input type="checkbox"/>	SEP 07 2021
REPLY <input type="checkbox"/>	<input type="checkbox"/> REPLY DIRECT
FYI <input type="checkbox"/>	<input type="checkbox"/> FILE
REMARKS _____	
<input type="checkbox"/> PHONE CALL	<input type="checkbox"/> BATCH
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE

1 <https://www.bitchute.com/video/nOgq0BxXfZ4f>

2 <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

3 <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

4 <https://cormandrostentreview.com/report/>

5 <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

6 <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

7 <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

8 <https://greatgameindia.com/austria-court-pcr-test/>

9 <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

10 <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

11 <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{14 15 16} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.²⁰

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the "vaccine" gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation." The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

12 https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

13 <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

14 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

16 <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

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There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a "medical procedure". In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: Emilie Pemon

Signature: Emilie

Date: Sept. 3rd 2021

Source: Action4Canada.com

37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

39 <http://www.cirp.org/library/ethics/nuremberg>

40 <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

41 <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

42 <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: Government of British Columbia

Attn: Rodney Chapman

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

Despite this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections is not required or recommended.

¹ <https://www.bitchute.com/video/nQn0BxNIZ4/>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/cia1491/5912603>

⁴ <https://commandrosterreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principle-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

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⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

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¹¹ <https://www.icel.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-36-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Vaccine development is a long, complex process, often lasting 10-15 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399.

¹² https://media.technet.org/medialibrary/2011/04/BJM_Vol_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-suggest>

(Referenced on Page 8 of "An Assessment of Covid-19...")¹⁹. Per the American Council on Science and Health, as well as the National Institutes of Health (NIH), "the estimated age-specific Infection Fatality Rate (IFR) is very low for children and younger adults (e.g., 0.002% at age 10 and 0.01% at age 25) which translates to a survivability rate of 99.99% to 99.998%, whereas the IFR is 0.4% at age 55 and 1.4% at 65 translating to a survivability rate of 99.6% to 98.6% respectively"^{20 21}. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

7. According to Health Canada's Summary Basis of Decision²², updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

In an article titled "Vaccination against SARS-CoV-2 and disease enhancement -- knowns and unknowns" published on NCBI they specifically state: "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²³.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁴. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁵, compounded by several month's delay in uploading the adverse events to the VAERS database²⁶.

On November 5, 2021, VAERS data release for the period December 14, 2020 to October 29, 2021, showed 856,919 adverse events reports following COVID-19 injections, including 18,078 deaths and 131,027 serious injuries. Of that total, 1,320 adverse injury reports were of miscarriage or premature birth; 3,090 reported cases of Bell's Palsy; 2,070 reports of serious anaphylaxis; 10,686 reports of blood clotting disorders; and 3,030 cases of myocarditis and pericarditis²⁷.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁸.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

¹⁹ <https://ghoorganisation.com/wp-content/uploads/2021/07/GHO-updated.pdf.pdf>

²⁰ <https://www.achs.org/news/2020/11/18/covid-infection-fatality-rates-sex-and-age-15163>

²¹ <https://clinicaltrials.gov/st2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7566857/>

²⁴ <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

²⁵ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁶ <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/reporting-vaccinations.html>

²⁷ <https://childrenshealthdefense.org/defender/vaers-cdc-adverse-events-deaths-covid-vaccines/>

²⁸ <https://leahofmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{29 30}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³¹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*³², a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³³, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the *Canadian Criminal Code*³⁴, to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.
R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

²⁹ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

³⁰ <https://alethoneews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³³ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192³⁵, the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30³⁶.

Vaccination is voluntary in Canada³⁷. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁸ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁹ (2005)
- **Nuremberg Code**⁴⁰ (1947)
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According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴²

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Name:

Harginder Sandhu

Signature:

[Handwritten Signature]

Date:

November 17, 2021

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/1980/1980canlii14/1980canlii14.html>

³⁷ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-nmtc/97vol23/23s4/23s4b_e.html

³⁸ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

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6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-surge>

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7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

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Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

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²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

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(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: Gordon Walters
 Signature: Gordon Walters
 Date: November 25, 2021

Source: [action4canada.com](https://www.action4canada.com)

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations and the like**

Employer: Interior Health Authority – Columbia House, Invermere, British Columbia

Attention: Adrian Dix
British Columbia Health Minister, MLA
PO Box 9050 STN PROV GOVT
Victoria, BC V8W 9E2
Phone: 250-953-3547 Fax: 250-356-9587
Email: HLTH.Minister@gov.bc.ca

Re: COVID-19 injections recommended or administered to employees.

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivizing, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶.

Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter”⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/cia1491/5912605>

⁴ <https://coronadrogenreview.com/report/>

⁵ <https://uninewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgatemedia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsanteil-aus-weimar-keine-masken-kein-abstand-keine-teste-mehr-fuer-schweizer/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males are 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

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³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing criminally on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If my employment is terminated or status changed to a status which creates a condition where I am declared as a non-employed employee without pay or the ability to work because of what you have done by creating a status whereby I am not employable or if I am disciplined, discriminated against, or harassed in any way, or my employment is terminated or affected by any new technical non-employment name such as unpaid leave of absence or unapproved unpaid leave of absence where I have not consented nor requested to such status change, as a result of my non-consent to any medical treatment as mandated in my employment context, such actions by you are fully liable under the Criminal Code of Canada and the four Charters, Declarations, and Codes stated above. As a result of my natural and legal rights and decisions to simply decline the COVID-19 vaccination and testing mandates, including my decision to not disclose my vaccination status, which was already violated; and/or any injury or adverse effect I suffer from compliance with such policies, then you make me, who has a perfect unblemished record of employment through many years, through no request by me, “a used Registered Nurse without pay or pension and without any ability to work or collect any ongoing income for myself and family.” If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

The cost for this ongoing action against me will be One Billion Two Hundred Million legal Canadian dollars paid by each person and institution separately in real legal tender, which is 29,542,000 ounces of 9999 Purity Canadian Maple Leaf Silver Coins. This will be payable immediately with no withholding, delay or taxation of any form to me personally. Criminal filings will occur after October 13, 2021 as a mandate declaration was received verbally by me while on holidays from Heather Dorsey on September 20, 2021 at 2:58PM MDT. Heather Dorsey inferred her declaration was given from the Interior Health Authority and higher management authority.

I hereby notify you that if you use coercion or discrimination against me based on my decision not to take any vaccine including the COVID-19 experimental injection, then I will hold you personally liable both criminally and for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family. I will not be prejudiced against nor have any recourse taken against me by those violating my legal rights provincially, federally or internationally for asserting my natural and legal rights in this Notice.

Name: Janice Ellen Cahill

Notary Public:

Signature:

Janice E Cahill

Date: October 6, 2021.

Employee for: Interior Health Invermere
Columbia house

Email: jnurse@protonmail.com

Address: PO Box 773, Invermere, BC V0A1K0

Phone: 250-342-2110

J.S.
Jonathon Sievenpiper
Barrister & Solicitor
Rockies Law Corporation
908 - 8th Avenue, Box 2647
Invermere, BC V0A 1K0
Tel: 250-342-4447 Fax: 250-342-3298

Witnessed as to Execution Only
No Legal Advice Sought or Given

Source: action4canada.com

- 36 https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html
- 37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>
- 38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>
- 39 <http://www.cirp.org/library/ethics/nuremberg/>
- 40 <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>
- 41 <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>
- 42 <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: Coastal Fire Centre

Attn: Clint Parker

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

Despite this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections is not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4I/>

² <https://rumble.com/vlu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/cia1491/5012601>

⁴ <https://cormandostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid-19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vluw4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid-19-diagnosis/>

¹¹ <https://www.iccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Vaccine development is a long, complex process, often lasting 10-15 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399.

¹² https://media.gdn.org/medialibrary/2011/04/BMJ_No_7070_Volume_343_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation>

¹⁵ <https://www.landfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-symms-peopleafter-covid-19-vaccination-2494534>

¹⁷ <https://childrenshealthdefense.org/defender/vaccine-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-nierson/new-peer-reviewed-study-on-covid-19-vaccines-suggest>

(Referenced on Page 8 of "An Assessment of Covid-19...")¹⁹. Per the American Council on Science and Health, as well as the National Institutes of Health (NIH), "the estimated age-specific Infection Fatality Rate (IFR) is very low for children and younger adults (e.g., 0.002% at age 10 and 0.01% at age 25) which translates to a survivability rate of 99.99% to 99.998%, whereas the IFR is 0.4% at age 55 and 1.4% at 65 translating to a survivability rate of 99.6% to 98.6% respectively^{20 21}. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

7. According to Health Canada's Summary Basis of Decision²², updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

In an article titled "Vaccination against SARS-CoV-2 and disease enhancement – knowns and unknowns" published on NCBI they specifically state: "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²³.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁴. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁵, compounded by several month's delay in uploading the adverse events to the VAERS database²⁶.

On November 5, 2021, VAERS data release for the period December 14, 2020 to October 29, 2021, showed 856,919 adverse events reports following COVID-19 injections, including 18,078 deaths and 131,027 serious injuries. Of that total, 1,320 adverse injury reports were of miscarriage or premature birth; 3,090 reported cases of Bell's Palsy; 2,070 reports of serious anaphylaxis; 10,686 reports of blood clotting disorders; and 3,030 cases of myocarditis and pericarditis²⁷.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁸.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

¹⁹ <https://gh.organisation.com/wp-content/uploads/2021/07/GHO-updated.pdf>

²⁰ <https://www.ach.org/news/2020/11/18/covid-infection-fatality-rates-sex-and-age-15163>

²¹ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7566857/>

²⁴ <https://vaccineimpact.com/2021/edc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

²⁵ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines

²⁶ <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/reporting-vaccinations.html>

²⁷ <https://childrenshelthdefense.org/defender/vaers-edc-adverse-events-deaths-covid-vaccines>

²⁸ <https://leottolmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths>

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{29 30}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³¹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*³², a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³³, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the *Canadian Criminal Code*³⁴, to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

²⁹ <https://www.washingtonexaminer.com/news-study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

³⁰ <https://alethoneews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-treatment-against-covid-19/>

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-45/9/page-1.html>

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³³ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192³⁵, the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30³⁶.

Vaccination is voluntary in Canada³⁷. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

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According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴²

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Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take ANY vaccine including the COVID-19 experimental injection.

Name: Jordan Struthers
 Signature: [Signature]
 Date: Nov 23, 2021

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/1980/1980canlii14/1980canlii14.html>

³⁷ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/07vol23/23s4_23s4hr_e.html

³⁸ <https://www.canada.ca/en/canadian-heritage-services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁹ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

⁴⁰ <http://www.cirp.org/library/ethics/nuremberg/>

⁴¹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴² <https://www.constitutionalrightscentre.ca/employees-rights-the-covid-19-vaccine/>

⁴³ <https://www.chrc-cdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability Employers (Public) Business Associations, and the like

Name of Employer/Business Assoc: The Province of BC, Ministry of Attorney General, CMSB

Attn: David Hoadley

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person”.

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⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Vaccine development is a long, complex process, often lasting 10-15 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://www.historyofvaccines.org/content/articles/vaccine-development-testing-and-regulation>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-peopleafter-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

(Referenced on Page 8 of “An Assessment of Covid-19...”¹⁹. Per the American Council on Science and Health, as well as the National Institutes of Health (NIH), “the estimated age-specific Infection Fatality Rate (IFR) is very low for children and younger adults (e.g., 0.002% at age 10 and 0.01% at age 25) which translates to a survivability rate of 99.99% to 99.998%, whereas the IFR is 0.4% at age 55 and 1.4% at 65 translating to a survivability rate of 99.6% to 98.6% respectively^{20 21}. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

7. According to Health Canada's Summary Basis of Decision²², updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real-world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines”.

Under the Risk Management plan section of the Summary Basis of Decision, it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)”. In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

In an article titled “Vaccination against SARS-CoV-2 and disease enhancement – knowns and unknowns” published on NCBI they specifically state: “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)”²³.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁴. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁵, compounded by several month’s delay in uploading the adverse events to the VAERS database²⁶.

On November 5, 2021, VAERS data release for the period December 14, 2020 to October 29, 2021, showed 856,919 adverse events reports following COVID-19 injections, including 18,078 deaths and 131,027 serious injuries. Of that total, 1,320 adverse injury reports were of miscarriage or premature birth; 3,090 reported cases of Bell’s Palsy; 2,070 reports of serious anaphylaxis; 10,686 reports of blood clotting disorders; and 3,030 cases of myocarditis and pericarditis²⁷.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths”. He further added, “...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it’s pulled off the market”²⁸.

9. Canada’s Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

¹⁹ <https://ghorganisation.com/wp-content/uploads/2021/07/GHO-updated-pdf.pdf>

²⁰ <https://www.acsh.org/news/2020/11/18/covid-infection-fatality-rates-sex-and-age-15163>

²¹ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7566857/>

²⁴ <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

²⁵ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁶ <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/reporting-vaccinations.html>

²⁷ <https://childrenshealthdefense.org/defender/vaers-cdc-adverse-events-deaths-covid-vaccines/>

²⁸ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{29 30}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³¹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*³², a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³³, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the *Canadian Criminal Code*³⁴, to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.
R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

²⁹ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

³⁰ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³³ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192³⁵, the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30³⁶.

Vaccination is voluntary in Canada³⁷. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁸ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁹ (2005)
- **Nuremberg Code**⁴⁰ (1947)
- **Helsinki Declaration**⁴¹ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴²

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴³. For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take ANY vaccine including the COVID-19 experimental injection or to have to show proof thereof.

Jeremy Taylor

Name:

Signature:

Nov 19th 2020

Date:

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/1980/1980canlii14/1980canlii14.html>

³⁷ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁸ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁹ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

⁴⁰ <http://www.cirp.org/library/ethics/nuremberg/>

⁴¹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴² <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴³ <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



[REDACTED]

From: Bolinder, Karl CITZ:EX <Karl.Bolinder@gov.bc.ca>

Sent: October 5, 2021 6:37 PM

To: Bott, Ian CITZ:EX <Ian.Bott@gov.bc.ca>

Subject: Vaccine Notice

Hello Ian,

I have placed the signed document on your office desk as well as attached the electronic version.

Let's discuss this tomorrow.

I am deeply troubled and anguished with the executive mandate to terminate my employment by our deputy minister Lori Wanamaker for my non participation in the experimental gene therapy injections for COVID-19.

Karl Bolinder

Manager, Business Services – BC Registries and Online Services

Service BC

Ministry of Citizens' Services

T: 778-698-2705 | Web: <http://www.servicebc.gov.bc.ca>

"Access to government services made easy"

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: Ministry of Citizens' Services - Province of British Columbia

Attn: Jan Bott Director, Application Management

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021. BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

- ¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>
- ² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>
- ³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>
- ⁴ <https://comandrosteneview.com/report/>
- ⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>
- ⁶ <https://principia-scientific.com/who-finally-admits-covid-19-pcr-test-has-a-problem/>
- ⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>
- ⁸ <https://greatgameindia.com/austria-court-pcr-test/>
- ⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>
- ¹⁰ <https://lapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid-19-diagnosis/>
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3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

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¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

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The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

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On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

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²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁴ https://www.fewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethoews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- Canadian Charter of Rights and Freedoms³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- Universal Declaration on Bioethics and Human Rights³⁸ (2005)
- Nuremberg Code³⁹ (1947)
- Helsinki Declaration⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: KARL BOLINDER
 Signature: Karl Bolinder
 Date: 2021-10-05

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

From: Straughan, Nicholas AG:EX <Nicholas.Straughan@gov.bc.ca>
Sent: Monday, November 1, 2021 3:02 PM
To: Wharton, Peter AG:EX <Peter.Wharton@gov.bc.ca>
Cc: Dass, Shan R AG:EX <Shan.Dass@gov.bc.ca>
Subject: Vaccine exemption request

Superintendent Wharton,

Note: Inspector Blundell (as first level excluded) is attending to other very important matters so I am sending this to you to forward as necessary. I discussed this with S.Sgt Dass and determined this was appropriate under the circumstances.

I am formally requesting an exemption to the COVID 19 vaccine mandate as stipulated in Lori Wanamakers emails, subject *Executive Message from Lori Wanamaker: COVID-19 Vaccination Policy for the BC Public Service* issued to all PSA

employees on November 1 2021. I am requesting an exemption based on the BC Human Rights code, specifically section 13:

“Discrimination in employment

13 (1) *A person must not*

(a) refuse to employ or refuse to continue to employ a person, or

(b) discriminate against a person regarding employment or any term or condition of employment

because of the race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age of that person or because that person has been convicted of a criminal or summary conviction offence that is unrelated to the employment or to the intended employment of that person.”

Political belief: I hold the political belief that this mandate and indeed covid do not exist in isolation from other agenda now prevalent in Canada and other so-called democratic nations. I hold the political belief that QR codes and other forms of proof of vaccination are symptoms of our rapidly eroding democracy and a sign of impending political oppression. I hold the political belief that mandating a vaccine, especially as a new term of employment, is utterly immoral and a complete contravention of the principles founding this country. I hold the political belief that this mandate is a direct assault on my personal rights and freedoms and that control of ‘the person’ i.e. ones own body, is fundamental to individual autonomy. I hold the political belief that our current provincial and federal administrations have removed any reasonable mechanism by which a person can reasonably challenge the legality of this mandate; this BC Public Service ‘mandate’ is an extension of that legal oppression. I am seeking an exemption on the basis that coercing me into receiving this vaccine against my will is a direct violation of my human rights under the BC Human Rights Code. It is absurd and abhorrent to suggest that threatening a persons livelihood is not coercion and that this is somehow tantamount to free choice. A denial of an exemption on this basis is a denial of my ability to hold and maintain a political position; one which does not discriminate against others as a tenet of the belief i.e. not a morally or legally objectionable position.

Physical disability: by not receiving the vaccine, the BC public service is in essence seeking to place me on unpaid leave or even terminate my employment on the basis that I am physically disabled. By not vaccinating against the COVID 19 virus, the public service is stating that something about my physical being renders me unemployable which is again a violation of my rights under the BC Human Rights Code. Furthermore is BC Public Service is rendering me unemployable without any proof that I have placed any other person at risk or that I intend to place another person at risk (i.e. termination without cause). As such I am seeking an exemption on the basis that, as of Nov 22nd 2021, I am physically disabled according to the BC Public Service. Should the employer wish to discuss accommodations that usually follow along with physical disabilities, I am open to this. To say that it is inappropriate to skip directly to threatening my employment in the manner that Lori Wanamaker has now done on several occasions is an understatement.

It is important to note that the BC Public Service appears to be seeking *termination for cause* with respect to individuals who either refuse to vaccinate or refuse to show acceptable proof of vaccination. This is a fundamental change to the terms of our employment and, failing all else, the BC Public Service should be offering severance as per the collective before seeking outright termination. There are those of us who have been with this employer for long periods of time, who’ve sacrificed a great deal in service to the province and who would continue to sacrifice in service to the province given the opportunity. As I’ve alluded to above, this is so much more than a health crisis and to term it as such would be a vast over-simplification and injustice.

In addition to the reasons noted above, I have attached the notice of liability previously forwarded to PSA on October 22nd 2021 as well as sent to Inspector Blundell (as first level excluded representative). I want to make it very clear that this email and my response to this mandate i.e. alleging breaches of my human rights (if not given an exemption), is in no way a reflection of my colleagues or management here in Prince George. At a local level I have been treated with utmost respect as a person might reasonably expect from professional law enforcement personnel.

Respectfully,



Nicholas Straughan, BA

**Court Sergeant
Prince George Law Courts
250 George Street
Prince George, BC V2L 5S2
Ph: 250 614-2743**

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: MINISTRY OF ATTORNEY GENERAL, PROVINCE OF BC

Attn: LORI WANAMAKER - HEAD OF BC PUBLIC SERVICE

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nOgg0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://commandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

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²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

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It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

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³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/cn/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

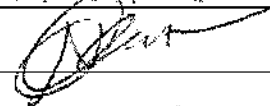
The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.**
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According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: NICHOLAS JOHN STRAUGHAN
 Signature: 
 Date: 2021-10-22

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_c.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

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**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: PSSG / BC Corrections

Attn: Matthew Waters

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

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² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://creategameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.iccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.ighn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sueee>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

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Name: Pawel Szadlowski 161401

Signature: 

Date: November 5, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

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- ⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>
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- ⁸ <https://greatgameindia.com/austria-court-pcr-test/>
- ⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>
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5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tghn.org/mediaLibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-suggest>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.**

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/01/01/death-toll-following-experimental-Covid-injections-now-at-4865-more-than-23-previous-years-of-recorded-vaccine-deaths-as-continuing-to-aver>

²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

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Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/rival-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-esc.lexum.com/scc-esc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name:

Phonda Zachary

Signature:

Phonda Zachary

Date:

Nov. 15, 2021

Source: [action4canada.com](https://www.action4canada.com)

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-nspc.gc.ca/publicat/ccdr-rmtc/97vol23/2364/2364b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chre-ccdp.gc.ca/en/about-human-rights/what-discrimination>

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Union Executives, Business Associations, and the like**

Name of Employer/Union/Assoc: BC Provincial Government / BCGEU

Attn: Insp. Cantelon / Stephanie Smith

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter." ⁹On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

1 <https://www.bitchute.com/video/nQg0BxXfZ4f>

2 <https://rumble.com/vh94rz-kary-mullis-inventor-of-the-pcr-test.html>

3 <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

4 <https://comandrostentreview.com/report/>

5 <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

6 <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

7 <https://rumble.com/vhw4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

8 <https://greatgameindia.com/austria-court-pcr-test/>

9 <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

10 <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

11 <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{14 15 16} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.²⁰

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

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15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

16 https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

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21 <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugg>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including The World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)²⁴,"

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁵.

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database²⁷.

On May 21, 2021, VAERS data release (in the USA alone) showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week²⁸.

Dr. McCullough, a highly cited Covid doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market²⁹,"

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported;
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

22 <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

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(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada. The federal and provincial governments made it clear that getting the COVID-19

32 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

33 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

34 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

35 <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

injections would not be mandatory. Even if they do attempt to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.**
- **Universal Declaration on Bioethics and Human Rights³⁸ (2005)**
- **Nuremberg Code³⁹ (1947)**
- **Helsinki Declaration⁴⁰ (1964, Revised 2013) Article 25, 26**

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a "medical procedure". In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: Theresa Wiebe

Signature: Theresa Wiebe

Date: 2021-11-03

Source: Action4Canada.com

37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

39 <http://www.cirp.org/library/ethics/nuremberg/>

40 <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

41 <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

42 <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like**

Name of Employer/Business Assoc: Ministry of Citizen's Services

Attn: Gina Powar

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nOgg0BxXfZ4f>

² <https://rumbie.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostereview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid-19-pcr-test-has-a-problem/>

⁷ <https://rumbie.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid-19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.ghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.pbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.

10. Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

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Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.


The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations... mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: Alex Potschka
 Signature: 
 Date: October 7th, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Union Executives, Business Associations, and the like**

Name of Employer/Union/Assoc: _____

Attn: _____

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

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¹ <https://www.bitchute.com/video/nOgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

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⁴ <https://cormandrostereview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{14 15 16} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.²⁰

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

12 https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

13 <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

14 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

16 https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

18 <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

19 <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

20 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

21 <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugg>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real-world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines.”

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, “the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including The World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)²⁴,”

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁵.

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database²⁷.

On May 21, 2021, VAERS data release (in the USA alone) showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week²⁸.

Dr. McCullough, a highly cited Covid doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths.” He further added, “...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market²⁹,”

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported;
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

22 <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

23 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

24 <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

25 <https://vaccineimpact.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

26 https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

27 <http://vaxoutcomes.com/thelatestreport/>

28 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

29 <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

30 <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

31 <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. *Hopp* also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada. The federal and provincial governments made it clear that getting the COVID-19

32 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

33 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

34 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

35 <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

injections would not be mandatory. Even if they do attempt to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a “ medical procedure”. In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: _____

Signature: _____

Date: _____

Source: Action4Canada.com

37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

39 <http://www.cirp.org/library/ethics/nuremberg>

40 <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

41 <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

42 <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: PROVINCE OF BRITISH COLUMBIA

Attn: TOMJA JOYCE

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostereview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.iccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-I) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² [https://media.techn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.techn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use**^{28 29}.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

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Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

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Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

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(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

³¹ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³² <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³⁴ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁵ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name: JOHN JOHNSON
 Signature: [Signature]
 Date: NOVEMBER 9, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg/>

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

⁴² <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Business Associations, and the like

Name of Employer/Business Assoc: Province of BC FLNRORD/BC Wildfire Service

Attn: Dimitri Vaisius, Wildfire Officer, Cobble Hill Fire Base
South Island Zone/
Coastal Fire Centre

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist employees, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. People under the age of 30 are at a very low risk of contracting or transmitting this respiratory illness. According to the statistical expert David Spiegelhalter of the University of Cambridge and Office of National Statistics (ONS) of the United Kingdom, risk of death from COVID for the age group between 15 and 24 is 1 in 218,399¹⁹. According to Centre for Disease Control and Prevention (CDC), survival chances in the age category of 20-29 with no underlying condition, for males is 99.9997% and for females 99.9998%, and with underlying conditions 99.9037% and 99.9466 respectively²⁰. Despite these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

¹² https://media.tehn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁰ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²¹, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²².

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²³. It is further reported that only one percent of vaccine injuries are reported to VAERS²⁴, compounded by several month's delay in uploading the adverse events to the VAERS database²⁵.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁶.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁷.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{28 29}.**

Under the *Crimes Against Humanity and War Crimes Act of Canada*³⁰, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general

²¹ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²² <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²³ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁴ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁵ <http://vaxoutcomes.com/thelatestreport/>

²⁶ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁷ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁸ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³¹, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³², it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

It is a further violation of the Canadian Criminal Code,³³ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁴ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁵

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Vaccination is voluntary in Canada³⁶. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose ANY vaccine including the COVID-19 experimental injections on employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to take the ANY vaccine including the COVID-19 experimental injection.

Name:

Jay Davis employee 155706

Signature:

Jay Davis

Date:

November 22, 2021

Source: action4canada.com

³⁶ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

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**Vaccine Notice of Liability
Employers (Health Care, Federal, Private and Public)
Union Executives, Business Associations, and the like**

Name of Employer/Union/Assoc: B.C. GOVERNMENT

Attn: PERRY THERRIEN

Re: COVID-19 injections recommended or administered to employees

This is an official and personal Notice of Liability.

You are unlawfully practising medicine by prescribing, recommending, and/or using coercion to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

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⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment;
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy;
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{14 15 16} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models;¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.²⁰

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

12 https://media.ghn.org/mediaLibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

13 <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

14 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

16 <https://www.pfizer.com/news/press-releases/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

18 <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

19 <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

20 <https://childrenshealthdefense.org/defender/vaxs-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

21 <https://cnn.com/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugg>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including The World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"^{24,25}

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²⁵.

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database²⁷.

On May 21, 2021, VAERS data release (in the USA alone) showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week²⁸.

Dr. McCullough, a highly cited Covid doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"^{29,30}

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported;
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

22 <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

23 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

24 <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

25 <https://vaccineinjury.com/2021/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-vaers/>

26 https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

27 <http://vaxoutcomes.com/thelatestreport/>

28 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

29 <https://lelohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

30 <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine2>

31 <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada. The federal and provincial governments made it clear that getting the COVID-19

32 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

33 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

34 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

35 <https://scc-csc.lexum.com/scc-csc/en/item/2553/index.do>

36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

injections would not be mandatory. Even if they do attempt to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Employers are infringing on human rights and putting themselves personally at risk of a civil lawsuit for damages, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.**
- **Universal Declaration on Bioethics and Human Rights³⁸ (2005)**
- **Nuremberg Code³⁹ (1947)**
- **Helsinki Declaration⁴⁰ (1964, Revised 2013) Article 25, 26**

According to top constitutional lawyer, Rocco Galati, “both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable.”⁴¹

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim, as well as a claim for a human rights code violation⁴². For those employees who are influenced, pressured or coerced by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil liability, and potential personal criminal liability, under the Nuremberg Code, the Criminal Code of Canada, and the *Crimes Against Humanity and War Crimes Act of Canada*, all referenced above.

In conclusion, administration of vaccines is defined as a “medical procedure”. In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: Barry A Bertoli

Signature: 

Date: Nov 9 2021

Source: Action4Canada.com

37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

39 <http://www.cirp.org/library/ethics/nuremberg>

40 <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

41 <https://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>

42 <https://www.chrc-ccdp.gc.ca/en/about-human-rights/what-discrimination>

From: Maya Natural Health <mayanaturalhealth@gmail.com>
Sent: Friday, August 27, 2021 4:33 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: notice of Liability
Attachments: Vaccine-Notice-of-Liability BJM 23 AUG 21.pdf

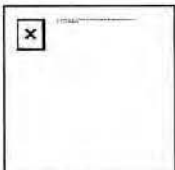
[EXTERNAL]

Please read this entire document and send me a receipt of delivery along with an acknowledgement that the entire document has been read and fully understood.

Bev Lach
 Maya Natural Health

***RECEPTION IS IN TO ANSWER CALLS ON MONDAYS AND THURSDAYS ONLY FROM 9:30AM - 2:00PM*. EMAILS WILL BE CHECKED REGULARLY THROUGHOUT THE WEEK.**

If I haven't answered your email in your expected timeframe, please know that I have read it and am formulating a thoughtful response for you :)



Maya Natural Health
 1738 Coleman street
 North Vancouver, BC V7K 2V6
 Tel: 604-990-4548 x 2

This is Exhibit "I" referred to in the
 affidavit of Rebecca Hill
 sworn before me at Vancouver
 in the Province of British Columbia this
10 day of January 2022

 A Commissioner for taking Affidavits
 within the Province of British Columbia

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
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A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

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¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

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²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

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³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

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Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

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Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print)

August 23, 2021

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: _____

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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Andy Stewart
Name (print)

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

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**"Vaccine" Notice of Liability
Elected/Appointed Officials**

MINISTER'S OFFICE HEALTH			
#			
DRAFT <input type="checkbox"/>	SEP 07 2021	REPLY <input type="checkbox"/>	DIRECT <input type="checkbox"/>
REPLY <input type="checkbox"/>		FYI <input type="checkbox"/>	FILE <input type="checkbox"/>
REMARKS			
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH		
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE		

On Notice To: MLA: Hon. Adrian Dix

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This is your official and personal Notice of Liability.

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To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

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⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-rmedia-blackout/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² [https://media.tehn.org/medialibrary/2011/04/BJMj No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tehn.org/medialibrary/2011/04/BJMj%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatesreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that; even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine".

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

B. Hudson
Name (print)

BH
Signature

Aug 24/21
Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

**“Vaccine” Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

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¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

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Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

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Duty of persons undertaking acts dangerous to life

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Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, *supra*; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Camilla Desor

Name (print)

[Signature]

Signature

Sept 11, 2021

Date

Source: Action Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**



On Notice To: Stephen Brown Deputy of Health

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nOgg0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://eormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² [https://media.ghn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.ghn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

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¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

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¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine".

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Christina Weir
Name (print)

Chit Weir
Signature

Aug 30, 2021
Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

From: Steeves, Heidi [FH] <Heidi.Steeves@fraserhealth.ca>

Sent: October 21, 2021 7:38 PM

To: Dix.MLA, Adrian LASS:EX <Adrian.Dix.MLA@leg.bc.ca>; Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>; OfficeofthePremier, Office PREM:EX <Premier@gov.bc.ca>; Minister, HLTH HLTH:EX <HLTH.Minister@gov.bc.ca>; Horgan.MLA, John LASS:EX <John.Horgan.MLA@leg.bc.ca>

Subject: Official Notice of Liability

Importance: High

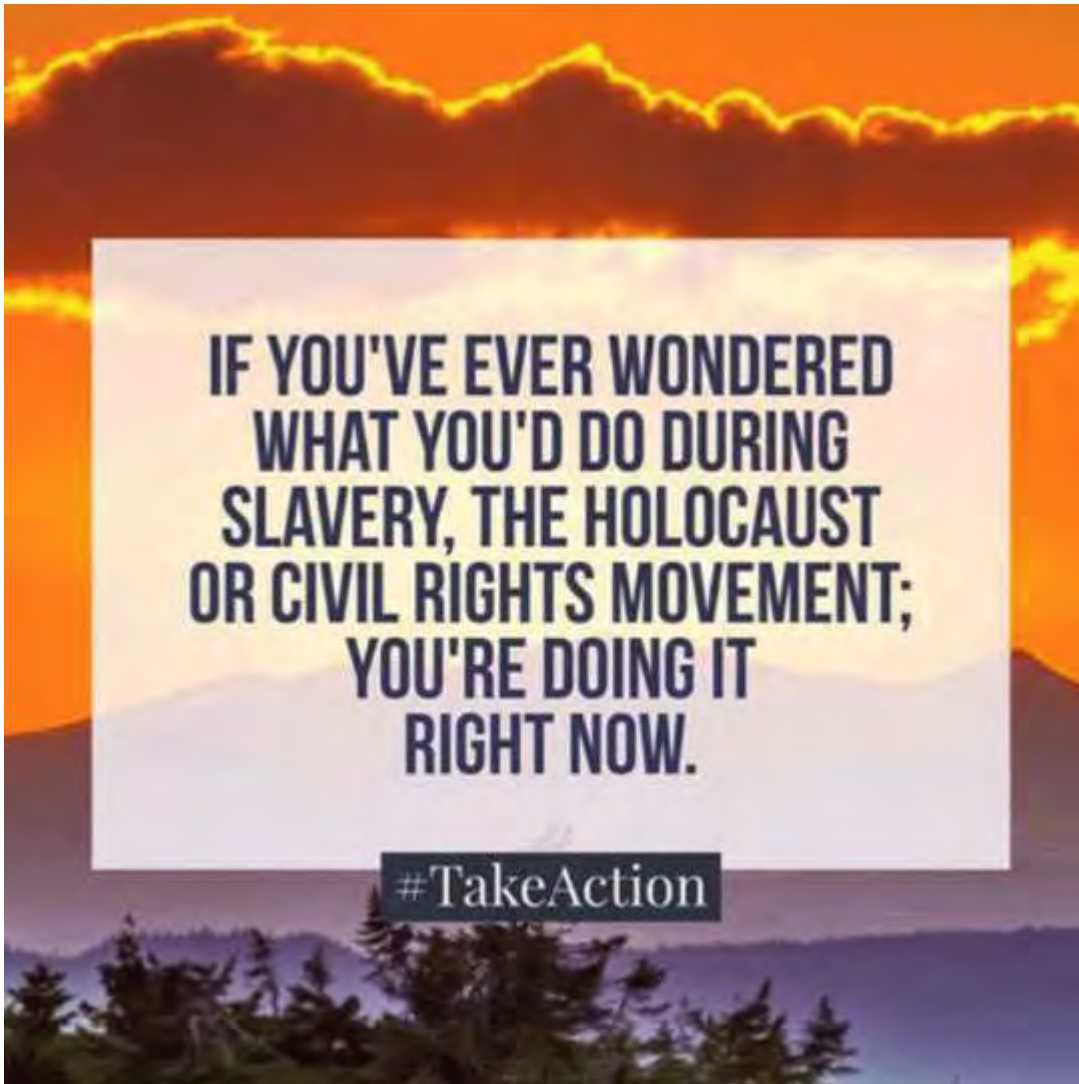
[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi,

Please see the attached notice of liability for the unlawful mandating of experimental covid 19 gene therapy.

It is disgraceful that you would even try to implement such tyrannical measures especially on an already suffering healthcare system. You clearly DO NOT CARE about the people of this province or you would not be doing such things. If you cared you would not be putting our system into a tailspin where people will get poor care or die. My husband's appointment he has been waiting over a year for was cancelled today because of your policies which have created major staffing shortages. You are terrible people who should not be allowed to be leaders.

You should all be ashamed of yourselves for what you are doing at this moment in time. None of you will be remembered for the good things you did (if any), only for the lives that were lost because of the unlawful policies YOU implemented. You are not following science, you only care about lining your own pockets with money. You're as bad as the Nazi's how can you not see that what you are doing is wrong and is history repeating itself. I hope you are all tried for your crimes and spend the rest of your life in prison. I look forward to being able to testify at each of your trials. You are on the wrong side of history.





Regards,

Heidi Steeves
Registered Nurse

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To:

John Horgan + Bonnie Henry +
Adrian Dix.

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist citizens, including minors, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

Experimental vaccines are only authorized to be used under an official State of Emergency and only if there are no other adequate, approved or available alternatives. The Federal Government did not enact a State of Emergency for COVID-19 and effective alternatives including Vitamin D, Ivermectin and Hydroxychloroquine have been available from the onset but their use was prohibited.

The emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhvw4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.¹⁹ In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08%20> (pg. 9)

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²⁰, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²¹.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²². It is further reported that only one percent of vaccine injuries are reported to VAERS²³, compounded by several month's delay in uploading the adverse events to the VAERS database²⁴.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁶.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use**^{27 28}.

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families.

²⁰ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²¹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²² <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²³ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁴ <http://vaxoutcomes.com/thelatestreport/>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁶ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁷ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁸ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental injection, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*²⁹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³⁰, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³¹, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

²⁹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³¹ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

It is a further violation of the Canadian Criminal Code,³² to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁴

Vaccination is voluntary in Canada³⁵. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, but they are also putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose these experimental injections on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³³ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁴ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁵ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html


The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁶ (1982) Section 2a, 2b, 7, 8, 9, 15.
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All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a "medical procedure". Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering ANY vaccine including the experimental COVID-19 injections to members of the public, including myself, and/or including minors.

Name (print): Heidi steeves

Signature:  RN

Date: OCT. 21/21

Source: action4canada.com

³⁶ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁷ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁸ <http://www.cirp.org/library/ethics/nuremberg/>

³⁹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴⁰ <https://www.bitchute.com/video/W5qSPiv1onXt/>

On Notice To: Premier John Horgan

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <http://www.bbc.com/video/60qgfb3s4z4t>

² <http://pundits.com/chuck-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article-abstract/doi/10.1093/cid/cia1491/5912604>

⁴ <https://www.undiscovernews.com/report/>

⁵ <https://dailynews-brazil.com/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-medical-blink.com>

⁶ <https://principles-science.com/who-finally-admits-covid-19-pcr-test-has-a-problem>

⁷ <https://canada.com/health/4416-the-deadliest-fact-admits-pcr-test-is-unreliable.html>

⁸ <https://www.munich.com/austria/covid-pcr-test>

⁹ <https://www.munich.com/austria/covid-pcr-test>

¹⁰ <https://www.munich.com/austria/covid-pcr-test>

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Whereas:

- A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

[illegible]

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
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Under the Risk Management plan section of the Summary Basis of Decision,²⁴ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

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It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

²² <https://online.anyflip.com/mbtw/ufbs/mobile/index.html> % 003

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccines-Moderna-Health-Canada.pdf>

²⁴ https://www.fandonline.com/doc/full/10_1086_14760584_2020.1800463

²⁵ <https://www.theweekend.com/2021/03/30/cdc-death-toll-following-experimental-covid-injections-now-at-4863-more-than-2-5-prior-years-combined-covid-deaths-including-injuries>

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²⁷ <https://www.cbc.com/news/health-55411111> the latest report

²⁸ <https://www.bbc.com/news/health-55411111> defender vaers data reports injuries 12-to-17-year-olds more than triple

²⁹ <https://www.bbc.com/news/health-55411111> 30 highly-cited-covid-doctor-comes-to-stunning-conclusion-for-govt-scrubbing-unprecedented-numbers-of-injections

³⁰ <https://www.bbc.com/news/health-55411111> new study finds 84 fewer hospitalizations for patients treated with controversial drug hydroxychloroquine

³¹ <https://www.bbc.com/news/health-55411111> 2021/03/20/has-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <http://laws-lois.justice.gc.ca/eng/acts/c-45/9/page-1.html>

³³ <http://laws-lois.justice.gc.ca/eng/acts/c-45/page-57.html#docCont>

³⁴ <http://laws-lois.justice.gc.ca/eng/acts/c-45/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. *Hopp* also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ *Hopp v Lepp*, [1980] 2 SCR 192, 30 DTC 100 (1980).

³⁶ *British Columbia Women's Hospital Center*, 2013 SCC 30, 36 DTC 100 (2013).

³⁷ *Canadian Charter of Rights and Freedoms*, s. 2(a), 2(b), 7, 8, 9, 15.

³⁸ *Universal Declaration on Bioethics and Human Rights*, 2005.

³⁹ *Nuremberg Code*, 1947.

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine¹¹.

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Jordan Boardman

Name (print)

August 23, 2021

Date

Source: Action Canada.com

¹¹ <https://www.actioncanada.com/2021/08/23/who-vaccines-not-under-mature-minor-doctrine/>
¹² <https://www.actioncanada.com/2021/08/23/who-vaccines-not-under-mature-minor-doctrine/>

From: Jason Howes <jhowes@shaw.ca>
Sent: Tuesday, August 24, 2021 10:51 AM
To: Horgan.MLA, John LASS:EX; OfficeofthePremier, Office PREM:EX
Cc: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Attn: John Horgan - Notice of Liability re: vaccine passports
Attachments: Signed-Vaccine-Notice-of-Liability-John-Horgan.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

John Horgan,

Find attached my signed Notice of Liability regarding my objection with your policies and coercion of the general public to be vaccinated against covid-19.

In addition, you should reconsider your recent decision to require a vaccine passport for all BC residents to participate in certain activities (i.e. attend sporting events, eat at a restaurant). I see this as discriminatory against unvaccinated, medically unable to be vaccinated and previously infected persons. Your own science shows that vaccinated people are contracting and transmitting covid-19 in the general public (see Israel case data too). Their transmission rate may be less than that of unvaccinated persons but it is still not zero %. You will be creating a false sense of security for the vaccinated while continuing the fear and divisiveness within or communities that does no one any good. Again, review this policy thru the discriminatory lens and retract it.

Sincerely,

Jason Howes

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: _____

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

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⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

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¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

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Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

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Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

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Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

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Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

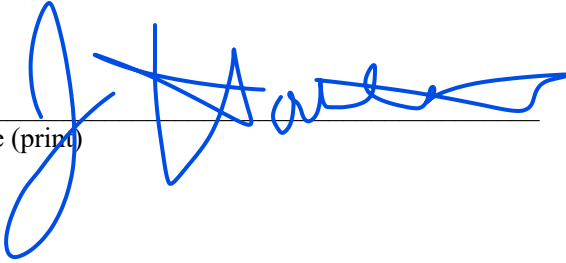
³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



Name (print)

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Bonnie Henry and Adrian Dix

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%. ²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

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Jesse Hutch

Name (print)

August 25, 2021

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

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To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
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4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
 (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



Name (print)

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: _____

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

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The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

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Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

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Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
 (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Kurt Feltrin

Name (print)

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

MINISTER'S OFFICE HEALTH	
# _____	
DRAFT <input type="checkbox"/>	NOV - 3 2021
REPLY <input type="checkbox"/>	<input type="checkbox"/> REPLY DIRECT
FYI <input type="checkbox"/>	<input type="checkbox"/> FILE
REMARKS _____	
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH
<input type="checkbox"/> IMPROVEMENT	<input type="checkbox"/> BRIEFING NOTE

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist citizens, including minors, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

Experimental vaccines are only authorized to be used under an official State of Emergency and only if there are no other adequate, approved or available alternatives. The Federal Government did not enact a State of Emergency for COVID-19 and effective alternatives including Vitamin D, Ivermectin and Hydroxychloroquine have been available from the onset but their use was prohibited.

The emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

¹ <https://www.bitchute.com/video/nOgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.¹⁹ In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

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On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁶.

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10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{27 28}.**

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families.

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Based on the *Genetic Non-Discrimination Act, Bill S-201*³¹, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

²⁹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³¹ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁴

Vaccination is voluntary in Canada³⁵. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, but they are also putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose these experimental injections on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³³ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁴ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁵ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms³⁶ (1982)** Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights³⁷ (2005)**
- **Nuremberg Code³⁸ (1947)**
- **Helsinki Declaration³⁹ (1964, Revised 2013)** Article 25, 26

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a “medical procedure”. Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering ANY vaccine including the experimental COVID-19 injections to members of the public, including myself, and/or including minors.

Name (print): Kathleen M. Swanson

Signature: 

Date: October 29, 2021

Source: action4canada.com

³⁶ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁷ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁸ <http://www.cirp.org/library/ethics/nuremberg/>

³⁹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴⁰ <https://www.bitchute.com/video/W5qSPiv1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials #**

MINISTER'S OFFICE HEALTH	
DRAFT <input type="checkbox"/>	REPLY DIRECT <input type="checkbox"/>
REPLY <input type="checkbox"/>	FILE <input type="checkbox"/>
FYI <input type="checkbox"/>	
AUG 09 2021	
REMARKS _____	
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE

On Notice To: ADRIAN DIX

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQg0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://pricipia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

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³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Kathryn Turner
Name (print)

Kathryn Turner
Signature

Aug 4, 2021
Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

From: Lindsay Gibson <lindsayagibson@gmail.com>
Sent: Wednesday, August 25, 2021 2:15 PM
To: Horgan.MLA, John LASS:EX; OfficeofthePremier, Office PREM:EX; Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: ATTN: John Horgan - notice of liability re: vaccine passports
Attachments: Send!!!.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

YOU CAN NOT DO THIS. I have been a guinea pig in this health system my ENTIRE LIFE!!! My body my choice!!! OUR HEALTH SYSTEM HAS COMPLETELY RUINED ME!!!! My body can NOT physically handle this 'vaccine'
I have a half paralyzed nervous system already from an EXPERIMENTAL brain surgery THAT I WAS COERCED INTO GETTING FOR MY OWN HEALTH!!!!!! THEY PARALYZED MY VAGUS NERVE, MY THROAT, MY VOCAL CORD AND HAVE RUINED MY LIFE! I HAVE HEALED MY BIDY THE LAST 5 years WITH EXTENSIVE NATURAL TREATMENTS.
MY. BODY. MY CHOICE.
HOW DARE YOU LIE THIS ENTIRE TIME. HOW DARE YOU.

Sent from my iPhone

ii) $\phi_1 = \phi_2 = 0$ is a M -invariant, bi-homomorphism and bilinearly symmetric. Send positive a log negative others and

Whereas:

- A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

B $\frac{d}{dt} \left(\frac{\partial L}{\partial \dot{x}} \right) = \frac{\partial L}{\partial x}$, where $L = T - V$. If $m = 10$ kg, $k = 100$ N/m, $x_0 = 0.1$ m, $v_0 = 0$ m/s, find $x(t)$.

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."²³

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9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

²² <https://online.anyflip.com/mbtw/ufbs/mobile/index.html> % 303

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccines-Moderna-Health-Canada.pdf>

²⁴ https://www.fandonline.com/doc/full/10_1086_14760584_2020.1800463

²⁵ <https://www.impact.com/2021/CDC-death-toll-following-experimental-Covid-injections-now-at-4863-more-than-2-5-prior-years-combined-covid-deaths-including-injuries>

²⁶ <https://www.foxnews.com/2019/10/10/no-author-harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccine>

²⁷ https://www.foxnews.com/2021/05/21/10-1086_14760584_2020.1800463

²⁸ https://www.foxnews.com/2021/05/21/10-1086_14760584_2020.1800463

²⁹ https://www.foxnews.com/2021/05/21/10-1086_14760584_2020.1800463

³⁰ https://www.foxnews.com/2021/05/21/10-1086_14760584_2020.1800463

³¹ https://www.foxnews.com/2021/05/21/10-1086_14760584_2020.1800463

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <http://laws-lois.justice.gc.ca/eng/acts/c-45/9/page-1.html>

³³ <http://laws-lois.justice.gc.ca/eng/acts/c-45/page-57.html#docCont>

³⁴ <http://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Lindsay A. Gibson
Name (print)

August 23, 2021

Date

Source: Action Canada.com

⁴⁰ <https://www.actioncanada.com/2021/08/23/declaration-of-the-law/>
⁴¹ <https://www.actioncanada.com/2021/08/23/declaration-of-the-law/>

**“Vaccine” Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgg0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostereview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

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²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethnews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

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Under sections 265 and 266 of the *Criminal Code of Canada*,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the *Canadian Criminal Code*,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

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³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
- (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, *supra*; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

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In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Marla Fortier

Name (print)

M Fortier

Signature

Sept 11 / 21

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: Mike Farnworth

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

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⁴ <https://comandrosreview.com/report/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
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4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
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¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/press-releases/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://lephohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
(a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
(b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.citp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print)

Marilyn Sigvardson
Signature

Sept 30/2021
Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

From: Sheila Ulansky <sheila@ulansky.ca>
Sent: Wednesday, August 25, 2021 12:49 PM
To: OfficeofthePremier, Office PREM:EX
Cc: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Attn: John Horgan - Notice of Liability re: vaccine passports
Attachments: Vaccine-Notice-of-Liability-Elected-Officials.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear John Horgan,

In light of the announcement made in BC on the 23rd August 2021 regarding vax passports, please find attached a Notice of Liability to you, Premier John Horgan.

Your actions in light of this 'mandate' constitute breach of trust and massive deception to us, the population that you promised to serve. Your actions will one day be tried under the Crimes Against Humanity and War Crimes Act of Canada.

We understand that you and your families may be personally threatened and we will continue to work hard to save, not only ourselves, but you and your families. The alternative is to walk with our arms open wide into a monstrous system of oppression and centralized control that WILL enslave us and our children (and that's not the worst of it).

All tyrannical regimes were set up using the following: (1) Mass Fear, (2) Emergency Government Measures, (3) Divide and Conquer Tactics, and (4) Moral Indignation/Moral Justification Sentiments. Prove to us how humans in positions of power today are now fundamentally different from ALL rulers in the past. I have Volumes of evidence that prove that this is Not true.

I pray for your salvation.

Regards, Sheila

"To see in front of one's own nose is a constant struggle" -- George Orwell

"The world is a dangerous place, not because of those who do evil, but because of those who look on and do nothing" - Albert Einstein

"Go with the crowd and lose your soul. Go with your soul and lose the crowd" -- anonymous

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: John Horgan

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

To begin with, the emergency measures are based on the claim that we are experiencing a “public health emergency.” There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

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³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

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¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

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7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%. ²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
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The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

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Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

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It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

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Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
 (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Sheila Ulansky

Name (print)

SU

Signature

25 August 2021

Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**



On Notice To: Stephen Brown

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person."

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter."⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nOgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostentreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid-19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhuw4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

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Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the "vaccine" gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation." The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² [https://media.tghn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

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¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ <https://www.pfizer.com/news/hot-topics/the-facts-about-pfizer-and-biontech-s-covid-19-vaccine>

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Causing bodily harm by criminal negligence

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- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
- (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Ursula Klein
Name (print)

[Signature]
Signature

Aug 30/2021
Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: _____

Adrian Dix

MINISTER'S OFFICE HEALTH			
# _____			
DRAFT <input type="checkbox"/>	NOV 18 2021		REPLY DIRECT <input type="checkbox"/>
REPLY <input type="checkbox"/>			FILE <input type="checkbox"/>
FYI <input type="checkbox"/>			
REMARKS _____			
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH		
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE		

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public

This is your official and personal Notice of Liability.

You are unlawfully practicing medicine by prescribing, recommending, facilitating, advertising, mandating, incentivising, and using coercion to insist citizens, including minors, submit to ANY vaccine including the experimental gene therapy injections for COVID-19, commonly referred to as a "vaccine".

Experimental vaccines are only authorized to be used under an official State of Emergency and only if there are no other adequate, approved or available alternatives. The Federal Government did not enact a State of Emergency for COVID-19 and effective alternatives including Vitamin D, Ivermectin and Hydroxychloroquine have been available from the onset but their use was prohibited.

The emergency measures are based on the claim that we are experiencing a "public health emergency". There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season¹.

The purported increase in "cases" is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronaviruses². Mullis warns that, "the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person".

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life-science scientists has also detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable⁵. On December 14, 2020, the WHO admitted the PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. Feb 16, 2021, BC Health Officer Bonnie Henry, admitted PCR tests are unreliable⁷. On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸. On April 8, 2021, a German Court ruled against PCR testing stating, "the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between "dead" matter and living matter"⁹. On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason¹⁰. On May 10th, 2021, Manitoba's Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross-examination in a trial before the court of the Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses¹¹.

¹ <https://www.bitchute.com/video/nOgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injections are not required or recommended.

Whereas:

1. The Nuremberg Code¹², to which Canada is a signatory, states that voluntary informed consent is essential before performing medical experiments on human beings. It also confirms that the person involved should have the legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved so as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experiment's subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. The treatments being marketed as COVID-19 "vaccines", are still in Phase III clinical trials until 2023¹³, and hence qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and many are unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. Most vaccines are trialed for at least 5-10 years¹⁴. COVID-19 injections have only been in trials for just over a year so there is no long-term safety data available and therefore fully informed consent is not possible.
4. No other coronavirus vaccine (i.e., MERS, SARS-1) has ever been approved for market due to antibody-dependent enhancement, which results in severe illness and death in animal models¹⁵.
5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

Dr. Byram Bridle, a pro-vaccine Associate Professor of Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study¹⁸ on COVID-19 shots. The Spike Protein added to the "vaccine" gets into the blood and circulates throughout the individuals over several days post-vaccination. It then accumulates in the tissues such as the spleen, bone marrow, liver, adrenal glands, testes, and of great concern, it accumulates in high concentrations in the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation". The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc.

There is also a high concentration of the Spike Protein getting into breast milk, and subsequent reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

6. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.¹⁹ In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁵ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁶ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

¹⁷ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

¹⁸ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

¹⁹ <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08%20> (pg. 9)

7. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines".

Under the Risk Management plan section of the Summary Basis of Decision²⁰, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)"²¹.

8. As reported to the Vaccine Adverse Events Reporting System (VAERS) in the United States, there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined²². It is further reported that only one percent of vaccine injuries are reported to VAERS²³, compounded by several month's delay in uploading the adverse events to the VAERS database²⁴.

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

Dr. McCullough, a highly cited COVID doctor, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths". He further added, "...with a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market"²⁶.

9. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, and is extremely time-consuming for physicians to use hence, many adverse events are going unreported there.
10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{27 28}.**

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families.

²⁰ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²¹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

²² <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²³ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁴ <http://vaxoutcomes.com/thelatestreport/>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

²⁶ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

²⁷ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

²⁸ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental injection, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*²⁹, a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada³⁰, a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

Based on the *Genetic Non-Discrimination Act, Bill S-201*³¹, it is an indictable offence to force anyone to take an DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both.

²⁹ <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³⁰ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

³¹ <https://www.parl.ca/DocumentViewer/en/42-1/bill/S-201/royal-assent>

It is a further violation of the Canadian Criminal Code,³² to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill and care in so doing.

R.S., c. C-34, s. 198

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Vaccination is voluntary in Canada³⁵. Even if the government attempts to mandate it, there is no law, nor can there be, as it is a violation of Human Rights, International Agreements, etc. Yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, but they are also putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose these experimental injections on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

³³ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁴ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

³⁵ https://web.archive.org/web/20080414131846/http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/97vol23/23s4/23s4b_e.html

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All Canadian law, contrary to misinformation spread by the WHO, does not allow for "implied consent." The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴⁰.

In conclusion, administration of vaccinations is defined as a "medical procedure". Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering ANY vaccine including the experimental COVID-19 injections to members of the public, including myself, and/or including minors.

Name (print):

Signature:

Date:

Viktoria Siemens V. Siemens Oct 22/21
 Carmen VanStraaten Carmen VanStraaten Oct 22/21
 Teresa Gibbs T. Gibbs Oct 22, 2021
 Brenda Johnstone Brenda Johnstone Oct 22, 2021
 Monica Gagnon M. Gagnon Oct 22, 2021
 Taliya Stepan Taliya Stepan Oct 22, 2021
 Brandy Stepan Brandy Stepan Oct 22/21
 O. April Kareza O. Kareza Oct 22, 2021
 Mandy McLelland M. McLelland Oct 22/21
 Gina McLelland Gina McLelland Oct 22/2021
 Louise Brunham Louise Brunham Oct 22/2021
 Amy Wrochta Amy Wrochta Oct 22/2021
 Dan Bahen Dan Bahen Oct 22/2021
 Carrine Hoskins Carrine Hoskins Oct 22/2021
 Source: action4canada.com Briana Powell Briana Powell Oct 29/21
 Ingo Theeruviz Ingo Theeruviz Oct 22/2021
 Angie Anderlini Angie Anderlini Oct 22/21
 Tyler Anderlini Tyler Anderlini Oct 22/21
 Ruth Jewitt Ruth Jewitt Oct 22/21
 Katherine Spencer Katherine Spencer Oct 26/21
 Coleen Welton Coleen Welton Oct 22/21
 Debra Chambling Debra Chambling Oct 22/21
 Julia Hecker Julia Hecker Oct 24/21
 Caroline Barr Caroline Barr Oct 24th 2021
 Lydia McLelland Lydia McLelland Oct 22.2021
 John Kim John Kim Oct 25
 Joey Pistone Joey Pistone Oct 26/21
 Rob Pistone Rob Pistone Oct 21
 Annette Meade Annette Meade Oct 24/21
 Cheryl Apelin Cheryl Apelin Oct 29/2021

³⁶ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁷ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>

³⁸ <http://www.cirp.org/library/ethics/nuremberg/>

³⁹ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴⁰ <https://www.bitchute.com/video/W5qSPiYlonXu/>

Dix

Room 337 Parliament Building.
Victoria BC

V8V 1X4.

From: Lucan Charchuk <lucancharchukart@gmail.com>
Sent: Saturday, September 4, 2021 2:11 PM
To: Kennedy.Stewart@vancouver.ca; Henry, Bonnie HLTH:EX; pcqo@vch.ca; OfficeofthePremier, Office PREM:EX; cbcnewsvancouver@cbc.ca
Cc: christinesorensen@bcnu.org; CFLN@protonmail.com; Horgan.MLA, John LASS:EX; pcqoffice@fraserhealth.ca; hcinfo.infosc@canada.ca; Health, HLTH HLTH:EX; Farnworth.MLA, Mike LASS:EX; Singh.MLA, Rachna LASS:EX; admininfo@bccdc.ca
Subject: NOTICE of Liability You are not listening
Attachments: VGH-BC Health authority.pdf; Vaccine-Notice-of-Liability-Elected-Officials VGH.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

"Vancouver mayor tells demonstrators to 'stay the hell home'; premier slams 'harassment' of health-care workers?"

<https://www.cbc.ca/news/canada/british-columbia/vaccine-passport-protest-1.6161817>

TO:
 Mayor Kennedy Stewart and council of Vancouver, Executive Team of VGH Vancouver General Hospital, Bonnie Henry Health Authority of BC, Vivian Eliopoulos Vancouver Coastal Health Authority Leadership Executive, Fraser Health Authority, Rachna Singh Surrey-Green Timbers/Surrey Community College/Surrey Memorial Hospital, BC Ministry of Health, Provincial Health Services Authority, Minister of Public Safety and Solicitor General, Health Canada Patty Hajdu, CBC Fake News

NOTE:
 Nurses are caregivers. They are telling you there is "no care left in the fake pharma system".

They are telling you that the experimental so-called "vaccine" is causing adverse side effects to healthy people.

These are 5,000 concerned citizens trying to convey the truth about what they are witnessing to the risk to the blind followers of poison experimental so-called vaccines peddling hope porn and death.

Masks do not stop viruses. The false positive PCR test does not detect Covid, it detects dead cells and records DNA.

Healthy people have 95% natural immunity. Double vaccinated people have 40% reduced immunity, which diminishes with each booster, which in this case is not a vaccine. It is a weaponized chemical agent pushed by drug companies. Natural cures and treatments are being blocked from use in Canada suddenly by the Health Canada big pharma globalist agenda.

Here is the typical response from the media brainwashed CBC follower : The eyes cannot see what the heart cannot feel.

"Nancy van der Meulen

2 days ago

This wasn't a peaceful protest.

This was an angry mob attacking health care workers.

What is wrong with these people?"

CONCLUSION:

mRNA spike protein, luciferase, graphene oxide, propylene glycol is not a vaccine, these are poison chemicals.

People Are not Sick of Covid, We Are Sick of Lies:

Why are you administering poison to humans?

Why are you not listening?

Please see the attached documents

This is to be forwarded to all Members, Agents, Affiliates and Associates, Employees of Provincial Service Bodies, Vancouver General Hospital, BC Nurses Union, All Associates in British Columbia and Their Employees, Bonnie Henry, Fraser Health, All Provincial and Regional Health Authorities Administering said Procedures Provincial and Federal Governments and their allegiances, Health Canada, (As listed in Appendix below)

YOU ARE BEING PUT ON NOTICE!
September 01, 2021

LEGAL PREMISE:

Before You Attempt to Implement Any Restrictions Regarding the so called Covid Virus or Fake Vaccine, You Should Understand The Crime in which You Are Participating.

Take Time to Explore These LINKS Below: There is Hope For You Yet

“Vaccine” and/or Vaccine Passport Notice of Liability To BC Health Authorities

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivized in any way by you to the public. Restriction of Individual

Human Rights.

On Notice To: _____**Bonnie Henry**_____

And All Parties Named Herein As Per Appendix Below
This is your official and personal Notice of Liability.

As a person involved in public oversight for your organization and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivizing, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to any restrictions under the experimental medical treatment for COVID-19, namely requiring the wearing of masks to enter a place of business, being injected with one of the experimental gene therapies commonly referred to as a “vaccine”, or the requirement of so called freedom of movement passports to do business.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹ In fact these manufactured claims have been egregiously inflated by uninformed individuals acting in positions of public spectre and private stewardship.

The False Positive PCR DNA Test

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵

On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶.

February 16, 2021, Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷.

On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.⁹”

On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸.

On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason.¹⁰

On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

VAERS Ignoring the Evidence of Adverse Effects Reporting System, Suffered from the Experimental Vaccine

The risks far outweigh the benefits and prove to exacerbate and infect further

As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.

On Mar 16, 2021 It was reported that more than a dozen countries mostly European, including Poland and Germany, Italy, France, Spain, Sweden, Latvia, Luxembourg, Cyprus, Portugal, Slovenia, Indonesia, Ireland, Bulgaria, Congo, Thailand, Romania, Iceland, Denmark, Austria, Norway, and the Netherlands have suspended AstraZeneca's COVID-19 experimental vaccine due to adverse reactions, developing "mystery" blood clots in recipients. 12

On August 26, 2021 Japan Suspends 1.63 Million Doses Of Moderna's COVID-19 Vaccine Over Contamination 13

On July 13, 2021 Seattle Times published an article titled **"What to know about blood clots, anaphylaxis and other COVID-19 vaccine fears"** 14

On August 26, Using lies and deception, the American FDA criminal drug organization in coercion with the NIH, CDC, Pfizer-BioNTech, Moderna, AstraZeneca and other Pharmaceutical Manufacturers, gave unlawful permission to use experimental chemical agents as weapons onto an unconsenting public under fake emergency measures. Health Canada takes its model from this same group of criminal pharmaceutical drug organizations. (For those who cannot think or investigate for themselves, this is not a good thing, but the opposite of truth) 15

U.K. and U.S. have advised people who have allergies to any component of a COVID vaccine not to receive experimental mRNA so called “Covid Vaccine”, containing undisclosed ingredients, therefore NOT MEETING CRITERIA for open transparent or INFORMED CONSENT. 25 (section Whereas:)

On April 5, 2021 a long practising physician in Lytton BC, bringing adverse reactions in his patients to AstraZeneca so called vaccine, had his license revoked for asking how to deal with this unprecedented anomaly after contacting BC Chief Health Officer Bonnie Henry with concerns as to patient safety after so called vaccine. Dr. Hoffe had his hospital visitation privileges removed, so that he was not able to follow his practice and care for his patients. His practice and the whole town of Lytton has since been (conveniently) devastated by wildfires. See Letter of Concern to Bonnie Henry 16

As of June 23rd, 2021 it has come to light that a Portugal court ruling revealed that only 0.9% of ‘verified cases’ died of COVID, numbering 152, not the 17,000 deaths that have been claimed 17

On August 16, 2021 Action4Canada and the Constitutional Rights Centre have filed a statement of Claim for the BC/ Federal legal action in evidence against unwarranted Covid measures. *Please note what a legal civil action against you will look like. 18

- 1 <https://www.bitchute.com/video/nQgg0BxXfZ4f>
- 2 <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>
- 3 <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>
- 4 <https://cormandrostenreview.com/report/>
- 5 <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>
- 6 <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>
- 7 <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>
- 8 <https://greatgameindia.com/austria-court-pcr-test/>
- 9 <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>
- 10 <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>
- 11 <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>
- 12 <https://www.aljazeera.com/news/2021/3/15/which-countries-have-halted-use-of-astrazenecas-covid-vaccine>
- 13 <https://www.npr.org/2021/08/26/1031208526/japan-suspends-1-63-million-doses-of-moderna-covid-19-vaccine-over-contamination>
- 14 <https://www.seattletimes.com/nation-world/what-to-know-about-blood-clots-anaphylaxis-and-other-covid-19-vaccine-fears/>
- 15 <https://www.fda.gov/emergency-preparedness-and->

response/coronavirus-disease-2019-covid-19/covid-19-vaccines

16 [https://assets-global.website-files.com/](https://assets-global.website-files.com/606d3dece4ec3c3866cc798a/60a601ccd6eac8d0fc8a311e_53%20Health%20Impact%20News%202021%20Canadian%20Doctor%20Defies%20Gag%20Order%20and%20Tells%20the%20Public.pdf)

606d3dece4ec3c3866cc798a/

60a601ccd6eac8d0fc8a311e_53%20Health%20Impact%20News%202021%20Canadian%20Doctor%20Defies%20Gag%20Order%20and%20Tells%20the%20Public.pdf

17 [https://americasfrontlinedoctors.org/frontlinenews/](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

[lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

[not-17000-claimed/](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

18 [https://action4canada.com/wp-content/uploads/](https://action4canada.com/wp-content/uploads/21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf)

[21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf](https://action4canada.com/wp-content/uploads/21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf)

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection and/or vaccine passports is not required or recommended.

Suppression of Common Effective Therapeutics

HQC plants being destroyed by mysterious events.

Restriction by Health Authorities under Big Pharma to allow distribution of Ivermectin or Hydroxychloroquine in Canada and the US.

Ivermectin shows instant results in improvement of symptoms from conditions said to be Covid. Doctors have safely and successfully administered such cures, whereas those not given this option have died due to untreated complications.

Ventilators kill people with respiratory conditions that are being claimed to be “Covid caused or Covid related”. To the point of those dying from unrelated circumstances are being assigned on false death certificates to have “died of Covid”.

Refusal to take into account comorbidities from Covid reactions exacerbates oxytosis, “cell death” and related to the so called vaccine, in patient being mistreated with ventilators.

Oxytosis, “cell death” and blood clots related to spike protein in the so called vaccine, which is in fact an mRNA bio-weapon, laced with questionable “secret” ingredients such as graphene oxide poison, luciferase DNA disruptor, hijacks our auto immune system in to overreaction and therefore attacking and compromising our own biome.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the

nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.

2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.

3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada ^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.

4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.

5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸

6. Numerous doctors, scientists, and medical experts are

issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the "vaccine" gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they "have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation." The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

- 12 https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf
- 13 <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>
- 14 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>
- 15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>
- 16 https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine
- 17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>
- 18 <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>
- 19 <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>
- 20 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>
- 21 <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with

the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government and well-meaning businesses are pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real- world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines.”

– *Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.*

– *The report specifically states, “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety*

concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA).²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

– It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

– On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

– Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths

*it's pulled off the market.*²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.

11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

22 <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

23 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

24 <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463against-covid-19/>

25 <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

26 https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

27 <http://vaxoutcomes.com/thelatestreport/>

28 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

29 <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing->

unprecedented-numbers-of-injection-related-deaths/
 30 <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>
 31 <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin->

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivized the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented

amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 “vaccine” curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, “full” disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make ‘medical’ decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these ‘qualified’ individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from ‘medically unqualified’ people such as yourself, have

placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the **Crimes Against Humanity and War Crimes Act of Canada**³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years,

or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

32 <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

33 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont>

34 <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or

performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
 (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192, 35 the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote."

Hopp v Lepp, *supra*; Bryan v Hicks, 1995 CanLII 172 (BCCA); British Columbia Women's Hospital Center, 2013 SCC 30.36

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivized the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms** 37 (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights** 38 (2005)
- **Nuremberg Code** 39 (1947)
- **Helsinki Declaration** 40 (1964, Revised 2013) Article 25, 26

- 35 <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>
- 36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>
- 37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>
- 38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>
- 39 <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO and Health Canada and its affiliates, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating,

facilitating, incentivizing, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

_____ Lucan Charchuk _____ Name (print)
 _____ *LC* _____ Signature
 _____ September 04, 2021 _____ Date

Citizen of Canada

Lucan Charchuk, Member of Vaccine Choice Canada
<https://vaccinechoiccanada.com>
 Member of Action4Canada
<https://action4canada.com>
 Supporter Canadian Frontline Nurses

APPENDIX: Forward NOTICE

CC: Many

BCC: Health Canada, Public Health Authorities, Boards of Trade, Regional Chambers of Commerce, Local Businesses, MLAs and MPS, BC Government, Government of Canada

See Email Directed To The Following Parties:

Kennedy.Stewart@vancouver.ca,
 bonnie.henry@gov.bc.ca, pcqo@vch.ca, premier
 <premier@gov.bc.ca>, cbcnewsvancouver@cbc.ca,
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 CFLN@PROTONMAIL.COM, john.horgan.mla@leg.bc.ca,

pcqoffice@fraserhealth.ca, hcinfo.infosc@canada.ca,
hlth.health@gov.bc.ca, mike.farnworth.mla@leg.bc.ca,
rachna.singh.MLA@leg.bc.ca, admininfo@bccdc.ca

NOTICE OF LIABILITY

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: ____All Government Leaders Workers, Health Officials and Agencies____

This is your official and personal Notice of Liability.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the PCR instrument to diagnose so-called COVID-19. It has been well established that the PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure viral infections. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus². Mullis warns that, “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives³. Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RTPCR test to detect SARS-CoV-2⁴.

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC

On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivised in any way by you to the public.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by

recommending, advertising, incentivizing, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸.

Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷.

Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a

¹⁰. On May 10th, 2021, trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://www.bitchute.com/video/nQgq0BxXfZ4f>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected;

and the effects upon his/her health or person which may possibly come from participation in the experiment.

2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada ^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

A. Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²¹ on COVID-19 shots. The added Spike Protein to the “vaccine” gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood.

¹² https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf

¹³ <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>

¹⁴ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>

¹⁶ https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

¹⁷ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>

¹⁸ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>

¹⁹ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/> ²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%. ²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in paediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real- world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines.”

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA).²⁴”

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.

11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

- ²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>
- ²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>
- ²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf> ²⁴
- ²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463> against-covid-19/
- ²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>
- ²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/
- ²⁷ <http://vaxoutcomes.com/thelatestreport/>
- ²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>
- ²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>
- ³⁰ [https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?](https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?hpid=hp_hp-top-table-main-drug-study-2pm%3Ahomepage%2Fstory)
- ³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivized the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented amounts of fear, instability, shaming, psychological trauma, bullying, and segregation through the COVID-19 measures and are therefore, even more susceptible to being influenced by those in authority than their developmental stage would usually entail. Schools include vaccine and COVID-19 "vaccine" curriculum, which is politically and medically biased, prejudicial, and is a form of undue influence on any minor child.

The curriculum, and indeed all government narratives, exclude full disclosure of the growing risks (adverse reactions and death) of the experimental treatments, and the emerging evidence that the shots do not provide protection, as claimed. Informed consent with FULL disclosure is mandatory and yet, due to lack of research data, "full" disclosure cannot be provided.

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make 'medical' decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these 'qualified' individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from 'medically unqualified' people such as yourself, have placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in

the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

It is a further violation of the Canadian Criminal Code,³⁴ to endanger the life of another person. Sections 216, 217, 217.1 and 221.

³² <https://laws-lois.justice.gc.ca/eng/acts/c-45.9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont> ³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

Sec. 216: Everyone who undertakes to administer surgical or medical treatment to another person or to do any other lawful act that may endanger the life of another person is, except in cases of necessity, under a legal duty to have and to use reasonable knowledge, skill, and care in so doing.

R.S., c. C-34, s. 198

Duty of persons undertaking acts

Sec. 217: Everyone who undertakes to do an act is under a legal duty to do it if an omission to do the act is or may be dangerous to life.

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or, (b) an offence punishable on summary conviction.

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivized the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

The citizens of Canada are protected under the medical and legal ethics of express informed consent, and are entitled to the full protections guaranteed under:

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
- **Nuremberg Code**³⁹ (1947)
- **Helsinki Declaration**⁴⁰ (1964, Revised 2013) Article 25, 26

- ³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>
- ³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>
- ³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>
- ³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>
- ³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending,

encouraging, advertising, mandating, facilitating, incentivizing, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

_____ Lucan Charchuk _____ Name (print)

_____ *LC* _____ Signature

_____ September 04, 2021 _____ Date

Source: Action4Canada.com

⁴⁰ <https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>

⁴¹ <https://www.bitchute.com/video/W5qSPiylonXt/>

This is Exhibit "J" referred to in the
 affidavit of Rebecca Hill
 sworn before me at Vancouver
 in the Province of British Columbia this
10 day of January 2022
 A Commissioner for taking Affidavits
 within the Province of British Columbia

about:blank

Attn: Euan McAskile

RE: Threat to use an experimental COVID-19 injection, mask or testing as a condition of employment

There are no provisions in any orders of any health minister, doctor, or provincial legislation, that can, nor pretend that any measures can, override Charter or other pre-Charter constitutional rights.

All Statutes, Orders, By-laws, and Acts must be consistent with the Constitution...or they are of no force or effect.

Section 52(1) of the **Constitution Act, 1982**: The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.

According to the Public Health Agency of Canada, Canadian National Report on Immunization, 1996:

"Vaccines are not mandatory in Canada and they cannot be made mandatory because of the Canadian Constitution."

If the Federal Government had invoked the **Federal Emergencies Act**, which it has not, even that Emergencies Act states:

AND WHEREAS the Governor in Council, in taking such special temporary measures, would be subject to the Canadian Charter of Rights and Freedoms and the Canadian Bill of Rights and must have regard to the International Covenant on Civil and Political Rights, particularly with respect to those fundamental rights that are not to be limited or abridged even in a national emergency.

Employment is 100% guaranteed and protected under Section 7 of The Canadian Charter of Rights and Freedoms:

"Everyone has the right to life, liberty, and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice."

Consent to Medical Treatment and Testing

In Canada, a doctrine of informed consent regarding any medical treatment has become part of Canadian Federal law. According to Supreme Court rulings, no Canadian citizen is required to take any medical treatment without informed consent, which includes the right to refuse such treatment¹.

¹ https://bottomlineresearch.ca/pdf/informed_consent.pdf

The Genetic Non-Discrimination Act, Bill S- 201, states that it is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both².

Extortion; committing tort; privacy violations; willful misconduct; assault and battery; and acting in bad faith are serious indictable criminal code offences. Interfering with someone's right to gainful employment, or essential and non-essential services, is a further violation of the Constitution and Charter of Rights and Freedoms.

I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the COVID-19 injection, testing, mask or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act, Order or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms.

It is the duty of every Canadian citizen to uphold the law and respect the Constitution and Charter Rights. You have been duly warned.

Name: Gordon Walker,

Signed: Gordon Walker

Date: 12 / 10 / 2021

² <https://laws-lois.justice.gc.ca/eng/acts/G-2.5/index.html>

Attn: ADAM MCKINNON

RE: Threat to use an experimental injection as a term of employment

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Name: JOHN JOHNSON

Signed: 

Date: 9 / 11 / 2021

Attn: DAVID GALBRAITH

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2

"Extortion, committing tort, privacy violations, wilful misconduct and acting in bad faith are serious indictable criminal code offences. Interfering with someone's right to gainful employment or essential, or non-essential services, is a further violation of the Constitution and Charter of Rights and Freedoms.

I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the injection or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms. You have been duly warned."

Name: JOHN JOHNSON

Signed: 

Date: 9 / 11 / 2021

Attn: HEATHER HOUSE

RE: Threat to use an experimental injection as a term of employment

There are no provisions in any orders of any health minister, doctor, or provincial legislation, that can, nor pretend that any measures can, override Charter or other pre-Charter constitutional rights.

All Statutes, by-laws, and Acts must be consistent with the Constitution...or they are of no force or effect.

Section 52(1) of **the Constitution Act, 1982**: The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.

According to the Public Health Agency of Canada, Canadian National Report on Immunization, 1996

"Vaccines are not mandatory in Canada and they cannot be made mandatory because of the Canadian Constitution."

If the Federal Government had invoked the **Federal Emergencies Act**, which it has not, even that Emergencies Act states:

AND WHEREAS the Governor in Council, in taking such special temporary measures, would be subject to the Canadian Charter of Rights and Freedoms and the Canadian Bill of Rights and must have regard to the International Covenant on Civil and Political Rights, particularly with respect to those fundamental rights that are not to be limited or abridged even in a national emergency.

Employment is 100% guaranteed and protected under Section 7 of The Canadian Charter of Rights and Freedoms:

"Everyone has the right to life, liberty, and **security** of the person and the right not to be deprived there of except in accordance with the principles of fundamental justice."

Consent to Medical Treatment and Testing

In Canada, a doctrine of informed consent regarding any medical treatment has become part of Canadian Federal law. According to Supreme Court rulings, no Canadian citizen is required to take any medical treatment without informed consent, which includes the right to refuse such treatment. https://bottomlineresearch.ca/pdf/informed_consent.pdf

The Genetic Non-Discrimination Act, Bill S- 201, states that it is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both. (<https://laws-lois.justice.gc.ca/eng/acts/G-2.5/index.html>)

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Name: JOHN JOHNSON

Signed: 

Date: 9 / 11 / 2021

This is Exhibit ~~31~~ referred to in the
affidavit of Rebecca Hill

sworn before me at Vancouver
in the Province of British Columbia this
10 day of January, 2022

A Commissioner for taking Affidavits
within the Province of British Columbia



Rocco Galati

@roccogalatilaw

Constitutional Lawyer. Executive Director (Founder)-- Constitutional Rights Centre Inc. (CRC), founded November, 2004.

constitutionalrightscentre.ca Joined April 2017

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Rocco Galati @roccogalatilaw · Mar 3

Who would have thought that of all the Tyrannical -isms to plague and persecute the masses, from fascism, colonialism, communism, to imperialism, the most enveloping and pervasive, at the masses' request, would be Covidism.

538

1.7K

4.4K



Rocco Galati @roccogalatilaw · Sep 1

Electronic Tattoos.



CP24 @CP24 · Sep 1

#BREAKING: Proof of vaccination will be required at gyms and movie theatres, and will be needed to dine indoors at restaurants under Ontario's new vaccine certification program, government sources confirm to CTV News Toronto.
cp24.com/news/proof-of-...

207

454

1K



Constitutional Rights Centre Inc. Centre De Droit Constitutionnel Inc.

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Follow

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cp24.com/news/proof-of-...

207

454

1K





Rocco Galati @roccogalatilaw · Aug 28

Please view press conference video on BC Court challenge.



constitutionalrightscentre.ca

Constitutional Rights Law Centre - Canada

The Constitutional Rights Centre's sole mission is the protection, defence, enforcement, and enhancement of constitutional rights in ...

98

667

1.2K



Rocco Galati @roccogalatilaw · Aug 28

Attached is the Statement of Claim (Notice of Civil Liability) filed in BC Supreme Court covering a comprehensive challenge to Covid measures. Currently working on injunction on "Vaccine passports" in BC.

constitutionalrightscentre.ca/20CRC16/wp-con...

340

1.9K

4K





Rocco Galati @roccogalatilaw · Aug 23

Re-posting of our March 8th, 2023 video outlining your rights to decline a vaccine in the employment context. This analysis equally applies to the University and College context with respect to the contract governing educational/academic services.



youtube.com

Your Rights to decline a Vaccine in the context of ...

Your Rights to decline a Vaccine in the context of
EmploymentPlease subscribe to our ...

122

1.4K

2.2K



Rocco Galati @roccogalatilaw · Aug 14

This is what desperation of a failing agenda brings. Tyrannical hate-speech. Canada is no different.



147

947

2.2K





Rocco Galati @roccogalati1aw · Aug 14

328 ...

More government hate speech. **335** predicted, anyone critical of Covid-19 measures will be branded a "terrorist threat". Another fascist move that shows that they are loosing the battle on their agenda. My mother: "If you wanna make God laugh, make a big f----- plan".



Trish Wood @WoodReporting · Aug 14

Another move to criminalize and smear C-19 heretics.
twitter.com/ConceptualJame...



63



365



920



Rocco Galati @roccogalati1aw · Aug 10

...

Watch our expert panel discussing School re-opening Court application with: Robert Kennedy, Jr., Prof. Byram Bridle, Amina Sherazee, Dr. Palmer, and more.



constitutionalrightscentre.ca

Constitutional Rights Law Centre - Canada

The Constitutional Rights Centre's sole mission is the protection, defence, enforcement, and enhancement of constitutional rights in ...



35



327



620

