

**THE QUEEN'S BENCH
Winnipeg Centre**

BETWEEN:

RENISE MLODZINSKI, EVAN MALTMAN, and KYLE DU VAL

Plaintiffs

and

██████████ MANITOBA HEALTH AND SENIORS CARE, THE GOVERNMENT OF
MANITOBA (HER MAJESTY THE QUEEN IN RIGHT OF MANITOBA), DR. BRENT ROUSSIN,
CHIEF PUBLIC HEALTH OFFICER FOR THE PROVINCE OF MANITOBA, and THE MINISTRY OF
ADVANCED EDUCATION, SKILLS AND IMMIGRATION FOR THE PROVINCE OF MANITOBA

Defendants

STATEMENT OF CLAIM

TO THE DEFENDANTS:

A LEGAL PROCEEDING HAS BEEN COMMENCED AGAINST YOU by the plaintiffs. The claim made against you is set out in the following pages.

IF YOU WISH TO DEFEND THIS PROCEEDING, you or a Manitoba lawyer acting for you must prepare a statement of defence in Form 18A prescribed by the *Queen's Bench Rules*, serve it on the plaintiffs' lawyer or where the plaintiffs do not have a lawyer, serve it on the plaintiffs, and file it in this court office, WITHIN TWENTY DAYS after this statement of claim is served on you, if you are served in Manitoba.

If you are served in another province or territory of Canada or in the United States of America, the period for serving and filing your statement of defence is forty days. If you are served outside Canada and the United States of America, the period is sixty days.

IF YOU FAIL TO DEFEND THIS PROCEEDING, JUDGMENT MAY BE GIVEN AGAINST YOU IN YOUR ABSENCE AND WITHOUT FURTHER NOTICE TO YOU.

JAN 10 2022

Date

Issued

D. Champoux
Deputy Registrar

TO: UNIVERSITY OF WINNIPEG:
515 Portage Avenue
Winnipeg, Manitoba R3B 2E9

**COURT OF QUEEN'S BENCH
LAW COURT BUILDING
100 - 408 YORK AVENUE
WINNIPEG, MB
R3C 0P9**

AND TO: MANITOBA HEALTH AND SENIORS CARE:

Civil Legal Services Branch
7th Floor- 405 Broadway
Winnipeg, Manitoba R3C 3L6

AND TO: HER MAJESTY THE QUEEN IN RIGHT OF MANITOBA:

Attorney-General of Manitoba
c/o Michael Connor
Constitutional Law Section, Legal Services Branch Manitoba Department of Justice
1205-405 Broadway
Winnipeg, Manitoba R3C 3L6

AND TO: DR. BRENT ROUSSIN, CHIEF PUBLIC HEALTH OFFICER FOR THE PROVINCE OF MANITOBA:

Civil Legal Services Branch
7th Floor- 405 Broadway
Winnipeg, Manitoba R3C 3L6

AND TO: THE MINISTRY OF ADVANCED EDUCATION, SKILLS AND IMMIGRATION FOR THE PROVINCE OF MANITOBA:

Civil Legal Services Branch
7th Floor- 405 Broadway
Winnipeg, Manitoba R3C 3L6

AND TO: ATTORNEY GENERAL OF CANADA:

Prairie Regional Office- Winnipeg
Department of Justice Canada
400 St. Mary Avenue, Suite 601
Winnipeg, Manitoba R3C 4K5

CLAIM

1. The Plaintiffs jointly seek the following remedies against the Defendants of this action:
 - a. An Order abridging the time for service of this Statement of Claim;
 - b. An Order under s.54(1) of the *Manitoba Human Rights Code*, CCSM H-175:
 - i. Declaring that the Mandatory COVID-19 Vaccination Policy is overbroad, unreasonable, and discriminatory; and
 - ii. Staying or enjoining the Policy until the matter can be properly adjudicated before this Honourable Court;
 - c. A Declaration that the Policy violates s. 9(1), 9(2)(d), 9(2)(j), 9(2)(k), 9(2)(m), 9(3), 13, 14(1), 14(2)(a),(b),(c),(d),(e),(f), 14(4), 14(5), 14(6), 14(12), 15(1) and 19(1) of the *Manitoba Human Rights Code*;
 - d. A Declaration that the University Vaccine Exception Tribunal and the Exception Review Panel, is not handling the exception applications consistently and in an appropriate manner subject to procedural fairness;

- e. Compensatory damages for intentional infliction of mental distress, and assault and battery in a sum to be proven at trial but not expected to exceed \$1,000,000.00;
 - f. *Charter*, punitive and aggravated damages pursuant to s.24(1) of the *Canadian Charter of Rights and Freedoms* (the "*Charter*") and an Order declaring that the Defendants have violated the Plaintiffs' rights under s.2(a), s.7, and s.15 of the *Charter* in the sum of \$1,000,000.00;
 - g. In addition to the damages set out in subparagraphs (f), (g), and (h) above, the Plaintiffs claim for special damages in an amount to be determined with particulars provided prior to trial;
 - h. Costs of this action on a substantial indemnity basis; and
 - i. Such further and other relief that this Honourable Court deems just.
2. The Plaintiff, Renise Mlodzinski ("**Mlodzinski**"), is an instructor at the University of Winnipeg and has been in this position for eight (8) years. She holds degrees in Music-Performance and Education.
 3. The Plaintiff, Evan Maltman ("**Maltman**"), has instructed at the University of Winnipeg for six (6) years. He holds degrees in Kinesiology- Physical Education and Education.
 4. The Plaintiff, Kyle Du Val ("**Du Val**"), has instructed at the University of Winnipeg for three (3) years. He holds degrees in Science- Physics, Music-Performance and Education.
 5. Renise Mlodzinski, Evan Maltman, and Kyle Du Val are collectively henceforth referred to as the "Plaintiffs"
 6. The Defendant, the University of Winnipeg ("**the University**") is a certified post-secondary institution established in accordance with *The University of Winnipeg Act, C.C.S.M. c.U70*. As such, it is a government actor for the purposes of the *Canadian Charter of Rights and Freedoms*.
 7. The Defendant, Manitoba Health and Seniors Care ("**MHSC**") is the single health authority for Manitoba. MHSC delivers medical care on behalf of the Government of Manitoba's Ministry of health and employs or contracts nurses, physicians, and other healthcare personnel.
 8. The Defendant, The Government of Manitoba, her Majesty the Queen in Right of Manitoba is statutorily responsible for the administration of health and safety legislation and policies in the Province. Since March of 2020, the Province has imposed severe restrictions upon the Constitutionally protected freedoms of Manitobans, and has openly supported vaccine mandates. The Plaintiffs say that the University of Winnipeg adopted its mandatory vaccination policy in accordance with the public health policy set by the Government of Manitoba.

9. The Defendant, Dr. Brent Roussin is the Chief Public Health Officer for the Province of Manitoba. Dr. Roussin has made a series of executive Orders restricting the civil liberties of Manitobans during the Covid-19 pandemic. Dr. Roussin has consistently supported vaccine mandates and vaccine passports as pre-requisites to entry into public and private places, including churches, retail stores, museums, court houses, and restaurants.
10. The Defendant, The Ministry of Advanced Education, Skills and Immigration for the Province of Manitoba is responsible for administration and regulation of post-secondary learning institutions within the Province of Manitoba.
11. The Plaintiffs oppose the forced vaccination without their informed consent being mandated by the University. The Plaintiffs also oppose disclosure of their private health information or disclosure of their private health information with respect to their vaccination status against their will under threat of termination or unpaid long-term leave.

The Virus

12. Severe acute respiratory syndrome coronavirus 2 ("SARS-CoV-2" or "COVID19") is a novel form of the coronavirus, causing respiratory distress death in a very small portion of the general population, with the largest proportion of deaths occurring in persons over the age of 75 suffering with multiple comorbidities.
13. Both the common cold and COVID-19 are subsets of coronavirus. The most recent variant of the virus, Omicron, presents symptoms similar to the common cold.
14. Government of Manitoba statistics indicate that a significant proportion of deaths attributed to COVID-19 occur within 10-14 days of people being vaccinated with their second vaccine dose of either the Moderna or Pfizer vaccines.
15. Strains of COVID-19 that have been found in Manitoba to date include the native strain of COVID-19, the B.1.1.7 United Kingdom variant ("Alpha"), the B.1.351 South African Variant ("Beta"), the B.1.617 India variant ("Delta") the P.1 Brazilian variant ("Gamma") and B.1.1.529 variant ("Omicron").
16. Disclosed public data and statements made by The Chief Provincial Public Health Officer, Dr. Brent Roussin, indicates that the Delta variant is currently the predominant strain of COVID-19 in Manitoba, though Omicron has been recently confirmed in the Province.
17. The current science indicates that the predominant variant is just as transmissible by those considered to be fully vaccinated (ie. Persons with two doses) as those who are unvaccinated. This is particularly true of Omicron.

The Vaccines

18. Prior to any vaccines being made available to Canadian citizens, medical staff and health professionals relied upon personal protective equipment ("PPE"), and the implementation of screening protocols for symptoms of COVID-19 or contact with an individual who has tested positive for COVID-19. These were deemed an appropriate and sufficient risk mitigation procedure in all medical care facilities in Canada prior to the rollout of "vaccines".

19. At all material times, there were four (4) Covid-19 "vaccines" approved by Health Canada for use amongst Canadians, which include the Moderna Spikevax COVID-19 vaccine ("Moderna"), Pfizer-BioNTech Comirnaty COVID-19 vaccine ("Pfizer"), the AstraZeneca Vaxzevria COVID-19 vaccine ("AstraZeneca"), and the Janssen (Johnson & Johnson) COVID-19 vaccine ("Janssen"), collectively henceforth referred to as the "COVID-19 Vaccines".
20. Current data from Ontario indicates that the Moderna vaccine has been observed to cause myocarditis in 1 in 5,000 patients. Observed data indicates that the Pfizer vaccine causes myocarditis in 1 in 28,000 patients. On this basis, these vaccines are less safe than the AstraZeneca vaccine.
21. The Plaintiffs assert that the COVID-19 Vaccines are experimental in nature and have not undergone sufficient long-term safety observation. None have these vaccines been subject to the stringent and rigorous scientific approval process that previous vaccines and medications have endured by Health Canada. Commonly, the approval process lasts years in order to properly assess the benefits and risks from clinical data, including any potential long-term side effects.
22. The Plaintiffs further claim that the ingredients in these vaccines have never been fully disclosed publicly such that any person would know if they had a potentially fatal allergy to any of the ingredients or if they were unsafe to a given person.
23. The current COVID-19 Vaccines approved by Health Canada were developed and approved in under a year under President Donald Trump's "Operation Warp Speed" program.
24. Before and during implementation of the Policy, Moderna and Pfizer mRNA vaccines were the only COVID-19 vaccines being administered in and available to Manitobans.
25. AstraZeneca is a viral vector-based vaccine. Due to its lesser efficacy, the potential risks, and negative side effects recorded worldwide in the first half of 2021, its use was discontinued in Manitoba and is no longer being made available or administered to Manitobans due to serious safety concerns, such as thrombosis.
26. Prior to its use being discontinued in Manitoba, the Government of Manitoba recommended against the use of AstraZeneca in people under the age of 55 due to vaccine-induced immune thrombotic thrombocytopenia ("VITT"), a blood clot disorder.
27. mRNA vaccines are a new type of vaccine technology, and this is the first time that such vaccines are being administered to humans without widespread and lengthy clinical trials first being conducted. There is no long-term data to develop any safety studies or safety history with respect to the mRNA vaccine technology. As such, any potential long-term side effects are currently unknown.
28. The vaccination program in Canada is being adjusted on the fly as adverse effects manifest, necessitating the need for constant amendments of safety guidelines. This underlines the experimental nature of these vaccines.
29. On or about 29 September 2021, the Government of Ontario recommended that people between the ages of 18-24 receive Pfizer instead of Moderna due to an observed increase in cases of

- myocarditis and death in young adults. Other jurisdictions around the world, such as Denmark, Finland, Iceland and Sweden, have either made similar recommendations or enacted regulations banning the administration of Moderna for those below 30 years of age due to the risk of heart inflammation as a potential side effect. The Government of Manitoba has not followed this safety protocol, nor has it provided an explanation for ignoring these concerns to Manitobans.
30. Janssen is a viral vector-based vaccine that was approved by Health Canada but has not been made available to the general population. In actuality, the availability of Janssen in Canada is currently unknown.
 31. The COVID-19 Vaccines do not provide full immunity to COVID-19 or its known variants. They merely provide some "benefits" or "protection" that in certain circumstances at best lessens severity of symptoms or potentially reduces the risk of hospitalization. The "benefits" or "protection" of the COVID-19 Vaccines vary depending on numerous factors that are still being observed and studied, including any underlying health conditions, the individual's age, and when the COVID-19 vaccine was administered in relation to any variant of concern.
 32. It is because these experimental vaccines do not provide immunity, that the United States of America Centre for Disease Control amended, on or about 1 September 2021, its published definition of vaccine, from "produce immunity" to "provide protection".
 33. Neither Moderna nor Pfizer prevent a vaccinated individual from being infected with variants, or prevent a vaccinated individual from being infectious to others. This is especially so with the Omicron variant.
 34. It is common knowledge and scientifically proven that the vaccines' efficacy deteriorates or wanes over approximately 4-6 months.
 35. Individuals who are considered to be fully vaccinated can still be infected and transmit the virus ("Breakthrough Cases") to unvaccinated or vaccinated individuals at similar rates to unvaccinated individuals. Further, third doses, or "boosters" are now being contemplated with little thought to their efficacy against mutated variants of COVID-19.
 36. Fully vaccinated individuals are regularly admitted to hospitals, including the Intensive Care Unit ("ICU") or have died from COVID-19.
 37. The Government of Manitoba, Manitoba Health and Seniors Care, and Dr. Roussin routinely present modeling statistics, conclusions, or information concerning the vaccines.
 38. As the efficacy of the COVID-19 vaccines wane, breakthrough cases, transmission, and death among fully vaccinated individuals are observably increasing.
 39. COVID-19 Vaccines kill people. The Public Health Agency of Canada has admitted that 165 people have died in Canada as a result of the COVID-19 Vaccines. The Plaintiffs are aware of the evidence that indicates the number of people killed in Canada by the COVID-19 Vaccines are substantially higher.
 40. The Pfizer and Moderna emergency use authorization in the United States of America specifically state that "sudden death" is a known side effect of the vaccines. The VAERS system in the USA

attributes 44,000 deaths to COVID-19 vaccines. The number of deaths in Canada is likely proportional to that number on the basis of population, but is not being honestly acknowledged by Dr. You who continually falsely claim that "vaccines are safe and effective".

41. Deaths and hospitalization from COVID-19 Vaccines in children and young adults are likely a greater risk than death and hospitalization from COVID-19 itself.
42. Despite high vaccine compliance, the Delta wave exceeded the preceding third wave in Israel. Furthermore, in the United Kingdom and Israel, hospitalization for fully vaccinated individuals now exceed hospitalizations for unvaccinated individuals, and in fact may even exceed their national vaccination rates on a proportional basis when compared to the unvaccinated.
43. The purchase contracts for the vaccines are not publicly available. These contracts state that the vaccines are experimental, continue to be studied, possess unknown long-term effects and efficacy, and that any adverse effects are unknown. Furthermore, the contracts state that the manufacturers of the vaccines accept no liability whatsoever for any injuries that arise from individuals being injected with these products. Notwithstanding, requests for the ingredients of these vaccines being made public, Dr. Roussin, and Manitoba Health and Seniors Care have failed either negligently or willfully in their duty of care with respect to obtaining copies of these contracts, and to disclose these contracts and vaccine ingredients publicly so that the Plaintiffs could make a fully informed decision as to whether or not to consent to the injection of these products into their bodies.
44. All of the Plaintiffs have suffered vilification and extreme ill-will being directed at them as "unvaccinated" people as a result of the University of Winnipeg and other Government of Manitoba representatives making false public statements and promulgating policies which have the effect of stating that the unvaccinated are to blame for the pandemic and hospital overcrowding; the unvaccinated are spreading COVID-19; that natural immunity from COVID-19 recovery is inferior to the vaccines; and actively promulgate policies that make the unvaccinated "sub-humans" with restricted rights to access society.
45. The Plaintiffs were placed on an involuntary unpaid leave of absence on 7 September 2021 and are being held up to public opprobrium, ridicule, hatred, maltreatment, discrimination, detestation, contempt, enmity, extreme ill will, denigration, abuse, or delegitimization on the basis of their vaccine status. This violates s.319(2) of the *Criminal Code of Canada*.

The Policy

46. The University announced the Mandatory COVID-19 Vaccination Policy # A-001-21, ("the Policy"), which, effective 7 September 2021, required that all those coming to indoor campus spaces to be fully vaccinated or declare that they are either (a) fully vaccinated and will provide proof of same by 15 October 2021; or (b) partially vaccinated and will be fully vaccinated and provide proof of same by 15 October 2021.
47. The Plaintiffs did not receive notice of the Policy until 4 October 2021.
48. The Policy alleges that "vaccination against COVID-19 is the single most effective public health measure to reduce the spread of COVID-19. Its inclusion as one of multiple public health

measures (including, where possible, physical distancing, capacity limits, and indoor mask use) is essential to the University's institutional response to the COVID-19 pandemic".

49. Proponents of vaccine mandates typically claim that everyone who can be vaccinated has a moral or ethical obligation to do so for the sake of those who cannot be vaccinated, or in interest of "public health". These assertions are false. There is neither a moral obligation to vaccinate nor a sound ethical basis to mandate vaccination under any circumstances, even for hypothetical vaccines that are medically risk free. Personal autonomy with respect to self-constitution has absolute normative priority over reduction or elimination of the associated risks to life. In practical terms, mandatory vaccination amounts to discrimination against health, and innate biological characteristics, which completely violate established ethical norms. Under the present circumstances, when the science clearly demonstrates that the so-called vaccines do not provide either complete sterilizing immunity nor prevent the "fully vaccinated" from infecting others, the grossly unethical nature of vaccine mandates under these circumstances are even more observably manifested.
50. That statement is at best only theoretically true insofar as the mandated vaccines do not provide complete immunity or sterilizing "immunization".
51. The Plaintiffs plead that this statement is untrue, false, and materially misleading.
52. There is no scientific basis upon which the Policy's statement is rooted. Breakthrough cases and the transmission of the virus amongst fully vaccinated individuals are widely reported.
53. Scientific studies now show no significant difference in the viral load between vaccinated and unvaccinated individuals who tested positive for COVID-19.
54. The current COVID-19 vaccines approved by Health Canada being administered in Manitoba do not prevent transmission of COVID-19. In actuality, the COVID-19 vaccines dampen symptoms of COVID-19 and therefore have the potential to increase asymptomatic transmission. Consequently, with muted symptoms, the risk of transmission may increase from peer to peer amongst healthcare professionals, and between parties and their treating healthcare professionals.
55. Furthermore, the narrative with respect to COVID-19 vaccines that the Government of Manitoba and Dr. Roussin have perpetuated have created a false sense of security. The rhetoric has resulted in a large portion of Manitobans believing that if they are fully vaccinated, they are safe from the virus and cannot become infected or infect others. Omicron has exploded this mythology.
56. The vaccinated with "vaccine passports" can attend restaurants, bars, concerts, sport venues, including hockey games, and elsewhere under the mistaken guidance of Dr. Roussin and the Government of Manitoba that they are not able to "spread" COVID-19, while they actually can and do spread COVID-19 as efficiently as an unvaccinated individual.
57. The Policy allegedly provided for accommodations for those who are unable to be immunized due to a medical reason, or for other protections found under the Manitoba *Human Rights Code*, and purports that they will be reasonably accommodated, up to the point of undue hardship, in accordance with the Workplace Accommodation Policy.

58. Accommodation of the Exception Panel is illusory. None of the Plaintiffs have been granted an exemption, and in some cases, cannot even get a physician to write an exception letter due to doctors being threatened by the College of Physicians and Surgeons (CPSM) if they write such letters.
59. Further, the Policy is not being administered on published factors that are applied consistently. The University had worded the medical exemption accommodation to allow for the University to seek one's medical history with the Plaintiffs' physicians. The Plaintiffs submitted Religious/Creed letters.
60. Recently, the Chief Medical Officer for the Province of Ontario, Dr. Kieran Moore, publicly acknowledged that natural exposure to COVID-19 provides an effective level of immunity to the virus.
61. Further, the Policy violates the most basic standard of care of the CPSM, which requires "informed consent" for any medical treatment or procedure.
62. The fact that the majority of the ingredients have not been disclosed means that informed consent has not been obtained or cannot be obtained from anyone. Additionally, no one in Manitoba is being advised of the risk of death from the vaccines. Instead, they are being lied to by being told that the vaccines are "safe and effective" notwithstanding that the Pfizer and Moderna monograms for these products acknowledge risk of death and numerous other side effects including Bells' palsy and myocarditis.
63. Manitoba Health and Seniors Care should be imposing the least restrictive means to protect the public interest in interim situations under unproven or unreliable scientific information, which they have either failed to do or willfully refused to do.
64. The Policy is not in the public interest. By placing professors and others on "Leave of Absence" without pay, they are removing caring professionals from public service in a random and disruptive manner that will irreparably harm students in the Province of Manitoba.

The Claim

65. Any medical procedure performed on a patient without their informed consent amounts to assault.
66. To the extent that the Policy seeks to coerce employees to be vaccinated against their will, without informed consent, the Policy amounts to an expressed intention to engage in a conspiracy to commit assault.
67. The Policy fails the test for legitimate workplace policy, as it is inconsistently applied and unreasonable.
68. The Policy is contrary to and a breach of the Plaintiffs' right to security of the person guaranteed under section 7 of the *Canadian Charter of Rights and Freedoms* (the "*Charter*"). There is no more basic right to security of the person than to have control and physical autonomy over one's own body.

69. The Policy is contrary to and in violation of the Plaintiff's s.8 Charter right to be protected from unreasonable search and seizures, including compelled disclosure of private medical information such as vaccination status or compelled submission of the results of PCR or Rapid Covid-19 testing, as well as compelled disclosure of private religious and medical data.
70. The University of Winnipeg has personally violated s. 3(1)(b) of the *Act* by repeatedly making false public statements concerning the "unvaccinated" being the cause of the need for lockdowns and other human rights violations of the University of Winnipeg. Continual spread of misinformation concerning the transmissibility of the Delta and Omicron variants by unvaccinated as opposed to vaccinated individuals; and by falsely claiming that individuals who have recovered from COVID-19 have inferior immunity to persons who were injected with the Pfizer or Moderna vaccines.
71. This discrimination against the unvaccinated is also contrary to s.15 of the *Charter*.
72. The Policy also violates s. 9(1), 9(2)(d), 9(2)(j), 9(2)(k), 9(2)(m), 9(3), 13, 14(1), 14(2)(a),(b),(c),(d),(e),(f), 14(4), 14(5), 14(6), 14(12), 15(1) and 19(1) of the *Manitoba Human Rights Code*.
73. The Policy, as drafted and promulgated, amounts to an attempted assault under common law as the Policy violates the Plaintiffs' right to bodily autonomy and vitiates medical consent.
74. The Policy breaches the Plaintiffs' express or implied contracts with MHSC. No reasonable interpretation of those contracts can create a requirement to be physically assaulted or to obtain a medical treatment below the minimum medical standard of informed consent as a condition of employment. Such an interpretation would render it a contract for an illegal or immoral purpose not enforceable by law.
75. The Policy is unethical, unlawful, and discriminatory in both conception and its effects upon the Plaintiffs.
76. The Policy effectively subjects the Plaintiffs to the Pfizer and Moderna mRNA vaccines, which are unproved, unsafe, and with undetermined long-term side effects. Currently, no other vaccine choices are being made available.
77. The Policy violates the CPSM's standards of Practice on informed consent.
78. With respect to the demand for the Plaintiffs' vaccination status, the Policy breaches the *Freedom of Information and Protection of Privacy Act*, in that it is devoid of the source of legal authority for the collection of the information or the contact information of any member or employee at the University who can answer individuals' questions about the collection.
79. The collection of vaccine status is not confidential. The minute an employee is placed on unpaid leave, their status is immediately apparent.
80. As a result of these breaches, the Plaintiffs have each suffered the following damages:
 - a. Severe and permanent psychological, physical and emotional trauma;
 - b. Loss of employment opportunities;
 - c. Worsening physical health because of inadequate medical support;

- d. Threats and assaults;
- e. Loss of sleep;
- f. Loss of trust in others;
- g. Loss of self-confidence;
- h. Loss of income;
- i. Loss of opportunity for future income;
- j. Post-traumatic stress disorder; and
- k. Other such damages as will be proven at the trial of this action.

- 81. The Defendants actively, knowingly, and willfully participated in harming the Plaintiffs. The Defendants' actions were malicious, oppressive, and high-handed and would offend the court's sense of decency.
- 82. The Plaintiffs plead provisions of the *Canadian Charter of Rights and Freedoms*, Part 1 of the *Constitutional Act, 1982*, being Schedule B to the *Canada Act 1982 (UK)*, 1982 c11, the *Freedom of Information and Protection of Privacy Act*, c F-25, the *Personal Health Information Act*, RSA 2000, c H-7, the *Human Rights Code (Manitoba)*, the *Criminal Code of Canada*, RSC 1985, c. C-46 s. 319(2), and any further and such legislation as may become relevant during the trial of this action.
- 83. The Plaintiffs propose that the trial of this action take place in Winnipeg.
- 84. The Plaintiffs state that the trial will take no longer than twenty-five (25) days.

JAN 10 2022

Date of issue

GREY WOVK SPENCER LLP

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THE QUEEN'S BENCH - GENERAL DIVISION CENTRE

20

RE:

BETWEEN:

Mlodzinski

Plaintiff/Applicant

- and -
v of W et al

Defendant/Respondent

CIVIL DISPOSITION SHEET (MASTERS)

DATE May 13/22 MASTER hull

COUNSEL S. Whitehead Plaintiff Applicant
J. McKay Defendant Respondent

TYPE OF ACTION Book 121 Folio 68
 Motion: Without Notice Consent
 Reference: Uncontested Contested
 Relief strike sic as against v of W

DISPOSITION
 Adjourned to _____

TERMS: _____

- Settled
- Reserve decision
- Judgment
- Withdrawn
- Report
- Order
- Directions
- Report and Order

DETAILS: I strike sic w/o leave to amend w costs
in favour of def v of W.
- Presumed essential character of the dispute
is arbitrable & ∴ court w/o jurisdiction applying
the Weber test

DATE May 13/22 [Signature] Master
 Order to Master