IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
WESTERN DIVISION

Anne M. Leathers, Michael Roe, Jr., Lonnie Pittman, Heather Falzone, Linda McAllister, Lynda Murray, Amy Abahazie-Young, Tania Bartell, Camie McCorkle, Christina Henry

Plaintiffs,

-v-

United States of America, Joseph R. Biden, President of the United States, Department of Health and Human Services, Xavier Becerra, Secretary Department of Health and Human Services, Center for Disease Control and Prevention, Rochelle P. Walensky, Director Centers for Disease Control and Prevention, Food and Drug Administration, Robert M. Califf, Commissioner Food and Drug Administration, National Institutes of Health, Lawrence A. Tabak, Director National Institutes of Health, National Institute for Allergy and Infectious Diseases, Hugh Auchincloss, Acting Director National Institute for Allergy and Infectious Diseases, Vivek Murthy, U.S. Surgeon General, United States Department of Homeland Security, Alejandro

Case No. 1:23-cv-175

COMPLAINT FOR DECLARATORY AND INJUNCTIVE RELIEF

Mayorkas, Secretary United States
Department of Homeland Security,
Deanne Criswell, Administrator
Federal Emergency Management
Agency, Pfizer, Inc., and,
The Ad Council

Defendants.

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INTRODUCTION

This case is brought against the United States government and certain of its agencies and officers to seek redress for violation of fundamental human rights and rights guaranteed under the 1st and 14th Amendments to the U.S. Constitution. At its essence, this action seeks to halt the disinformation warfare campaign being waged against the American people by their own government, a campaign designed to force universal "vaccination"—with ***experimental drugs***—on the American people—including the unnecessary and highly risky "vaccination" of our children down to babies as young as 6 months of age. The U.S. government has used its awesome power and a virtual monopoly on dissemination of information to put a target on the backs of the "unvaccinated," muzzle dissent and encourage and facilitate exclusion of the "unvaccinated" from society. In an effort to override or vitiate the right of every American to informed consent to treatment and bodily integrity and autonomy the U.S. government has infused itself into every aspect of life causing untold death and harm. Using the imprimatur of its trusted federal health agencies, the U.S. government has hoodwinked the American public as to the necessity for, and safety and efficacy of, the COVID-19 "vaccines"—and the lack of alternative treatments. It has engaged in a scheme to silence dissent and scientific debate through manipulation of the media and state medical and pharmaceutical boards and has purposely interfered in the physician-patient relationship to deny the American people access to

safe, proven effective therapeutics in treatment of COVID-19. It has applied all the power at its disposal (both legitimate and illegitimate) to coerce the American people through fraud, duress and intimidation into submitting to "vaccination."

Pfizer, which committed fraud in securing Emergency Use Authorization (EUA) for its "vaccine" and which conspired with the U.S. government to fraudulently represent the COVID-19 "vaccines" are necessary and "safe and effective" in preventing infection and transmission of the virus is also joined as a party to this action for injunctive and declaratory relief as is the Ad Council, a propaganda arm of the U.S. government that has partnered with the CDC and HHS to sponsor false and deceptive Public Service Advertisements (PSAs) as to the necessity for, and safety and efficacy of, the "vaccines" and persuade employers to impose "vaccine" mandates on their employees.

Through this action, plaintiffs seek to stop the dissemination, publication, and marketing of disinformation, misinformation, propaganda, and false representations to the American people as well as affirmative relief requiring the government defendants to correct the misrepresentations they made as to the necessity for, and safety and efficacy of, the "vaccines" and the appropriateness of using drugs off-label for treatment of COVID-19.

PARTIES

Plaintiffs

1. Plaintiff Anne M. Leathers [hereinafter "Leathers"] is a resident of Butler County, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Leathers in her employment relations.

1. Leathers' has been, and continues to be, discriminated against in employment because of her "unvaccinated" status. Her employer, General Electric Aviation [hereinafter "GEA"], is located in Evandale, Ohio. GEA, has followed guidance issued by the Centers for Disease Control and Prevention [hereinafter "CDC"] in formulating its COVID-19 policy.

2. In October 2021, GEA imposed a COVID-19 "vaccine" mandate ***threatening employees*** with termination if they did not get "vaccinated."

a. As part of the rollout for the "vaccine" mandate, GEA, a federal contractor, informed employees that the CDC says COVID-19 "vaccines" are safe and 100% effective. GEA has further encouraged employees to upload their "vaccine" card into the company data base ("vaccine" cards are issued by whoever administers the "vaccine") for the obvious reason to allow the company to track compliance with the "vaccine" mandate and the "vaccination" status of is employees.

b. Leathers applied for a religious exemption from the mandate but has never heard back on her application. However, any exemption granted would only be good for six (6) months and must be renewed.

c. In January 2022, GEA advised employees it was not enforcing the "vaccine" mandate. However, GEA employs contact tracing and imposes mandatory time off for anyone caught up in that or who tests positive for the virus. GEA discriminates against the "unvaccinated" with regard to mandatory time off. "Unvaccinated" employees must use

vacation time, instead of sick time, while the "vaccinated" may use sick leave. This policy is clearly discriminatory and coercive as "unvaccinated" employees are penalized (denied a benefit of employment) for their failure to get the "vaccine."

d. It is reasonably foreseeable that GEA will issue another mandate requiring employees to submit to the injection of an experimental drug that will jeopardize Leathers' employment as precedent has been set and GEA has not foreclosed the possibility that another mandate will issue.

e. Further, on information and belief, because "vaccine" mandates are common in companies that receive federal contracts, the industry in the state of Ohio and throughout the country, Leathers' mobility in employment is restricted, another penalty imposed for her failure to get the "vaccine." On information and belief, many, if not all, employers in the industry are only hiring people who have been "vaccinated" for COVID-19.

f. Leather's daughter, a disabled veteran, who suffered serious, disabling conditions from the anthrax vaccine, works for a federal contractor. Her employer mandated the COVID-19 "vaccine" and she was required to ***get the "vaccine"*** (***or lose her job***) even though she ***works from home in isolation***. Shortly after receiving the COVID-19 "vaccine," all of the disabling conditions from which she was suffering worsened dramatically. The injury suffered by Leather's daughter reinforces

Leather's reasonable, legitimate fear of injury or death from the "vaccine" especially since she shares the same gene pool with her daughter.

B. Leathers' health and welfare are threatened as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Leather's PCP has stated he cannot to prescribe ivermectin or hydroxychloroquine for treatment of COVID-19 and Leathers is unaware of any pharmacy in this state that will prescribe these drugs for treatment of COVID-19. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription. Leathers was able to obtain a prescription for ivermectin to treat COVID-19 from an out of state pharmacy and achieved tremendous results. However, it cost over $400.00 to fill the prescription for this generic drug.

C. Leathers has been damaged in her family relationships due to her "unvaccinated" status. Leather's mother has cut-off contact with her because she is "unvaccinated." Leathers is also estranged from her sisters (one of whose husbands was fully "vaccinated" and developed multiple brain tumors—an adverse event associated with the "vaccine"—resulting in his death) and brother who are fully "vaccinated" and who have articulated their belief that the "unvaccinated" (like Leathers) are a threat to their health and safety.

D. The acts and conduct of the government defendants have created a hostile living environment for Leathers, one that impacts her employment and personal relationships and infringes, or threatens to infringe, upon her constitutional rights.

2. Plaintiff Lonnie Pittman [hereinafter "Pittman"] is a resident of Butler County, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Pittman in his employment relations.

1. Pittman is a Senior Bargaining Committeeman (SBC) for the union at the Evandale, Ohio General Electric Plant where Leathers is employed. GEA, has followed guidance issued by the Centers for Disease Control and Prevention [hereinafter "CDC"] in formulating its COVID-19 policy.

a. In October 2021, GEA imposed a COVID-19 "vaccine" mandate threatening employees with termination if they did not get "vaccinated."

b. As part of the rollout for the "vaccine" mandate, GEA, a federal contractor, informed employees that the CDC says COVID-19 "vaccines" are safe and 100% effective. GEA has further encouraged employees to upload their "vaccine" card into the company data base ("vaccine" cards are issued by whoever administers the "vaccine") for the obvious reason to allow the company to track compliance with the "vaccine" mandate and the "vaccination" status of is employees.

c. In January 2022, GEA advised employees it was not enforcing the "vaccine" mandate. However, GEA employs contact tracing and imposes mandatory time off for anyone caught up in that or who tests positive for the virus. GEA discriminates against the "unvaccinated" with regard to mandatory time off. "Unvaccinated" employees must use vacation time, instead of sick time, while the "vaccinated" may use sick leave. This policy is clearly discriminatory and coercive as "unvaccinated" employees are penalized (denied a benefit of employment) for their failure to get the "vaccine."

d. It is reasonably foreseeable that GEA will issue another mandate requiring employees to submit to the injection of an experimental drug that will jeopardize Pittman's employment as precedent has been set and GEA has not foreclosed the possibility that another mandate will issue.

e. Further, on information and belief, because "vaccine" mandates are common in companies that receive federal contracts, the industry in the state of Ohio and throughout the country, Pittman's mobility in employment is restricted, another penalty imposed for his failure to get the "vaccine." On information and belief, many, if not all, employers in the industry are only hiring people who have been "vaccinated" for COVID-19.

B. Pittman's health and welfare are threatened as a result of the unlawful interference by the government defendants in the physician-patient relationship which

obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Pittman's PCP has stated he is not permitted to prescribe ivermectin or hydroxychloroquine for treatment of COVID-19 and Pittman is unaware of any pharmacy in this state that will prescribe these drugs for treatment of COVID-19. On information and belief, the overwhelming majority of pharmacies in this state will not fill prescriptions for these drugs in treatment of COVID-19. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription.

2. Pittman's mother and father both took the two shot Pfizer "vaccine" and both advised Pittman they never felt the same afterward. Pittman's mother died of a fast-acting cancer in September 2022 and his father's health has declined since getting "vaccinated." Pittman believes both of his parents were "vaccine"-injured.

C. The government defendants have created a hostile living environment for Pittman, one that impacts his employment relationships and infringes, or threatens to infringe, upon his constitutional rights.

3. Plaintiff Michael Roe, Jr. [hereinafter "Roe"] is a resident of Warren county, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of

the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. Roe is director of a family business, Kingdom Sports Center, has been damaged in his business relations and suffered economic loss as a direct result of the ***unscientific*** lockdowns, masking and testing requirements imposed by the state of Ohio, requirements which were implemented following CDC guidance.

B. Roe's health and welfare and that of his wife and unborn child are threatened as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Members of Roe's extended family have suffered "vaccine"-related injuries. Roe reasonably fears for his health and welfare and that of his wife and child in the event of their hospitalization as a result of the amount of blood donated by "vaccinated" individuals. Roe's grandfather-in-law died after receiving a "vaccine-"infected blood transfusion in the hospital, his health deteriorated immediately thereafter, the cause of death resulted from side-effects associated with the "vaccine" (multiple massive strokes) and his death occurred shortly in point of time after receiving the blood.

2. Roe's PCP refuses to discuss ivermectin as a treatment of COVID-19

and will not prescribe it. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription.

C. Government collaboration with social media and print and broadcast media to censor and ban anyone—including well-credentialed experts—critical of the government response to COVID-19, or who question the safety and efficacy of the "vaccines" has resulted in Roe himself being permanently banned from Twitter and suspended several times from Facebook and shadow-banned, because he posted information critical of the "vaccines" and the government's response to the COVID-19 pandemic and provided information on effective early treatments, how to get ivermectin and find a physician that will prescribe it.

D. Roe has been damaged in his family relationships due to his "unvaccinated" status. Roe's family has been divided as the "vaccinated" have shunned the "unvaccinated."

E. The government defendants have created a hostile living environment for Roe, one that impacts his employment and personal relationships and infringes, or threatens to infringe, upon his constitutional rights.

4. Plaintiff Heather Falzone [hereinafter "Falzone"] is a resident of Lucas County, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Falzone in her employment relations.

1. The company for which Falzone works has implemented a policy discriminating against the "unvaccinated" by restricting new hires to those who are "vaccinated" against COVID-19. Falzone has been restricted from in-person work in the past due to her "unvaccinated" status resulting in a substantial loss of income. The company for which she works has never foreclosed the possibility of reinstituting a "vaccine" mandate and its past history and current "vaccination" policy portend a threat to her employment.

2. On information and belief, Falzone's mobility in employment is restricted as a result of industry-wide "vaccine" mandates.

B. Falzone's health and welfare are threatened as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Falzone's PCP refuses to prescribe ivermectin or hydroxychloroquine, all local pharmacies, except for one compounding pharmacy she found—which would fill a prescription at a cost of ***$500.00 for these generic drugs***—will not fill prescriptions for those drugs in treatment of COVID-19. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription.

a. On information and belief, Falzone's brother died at University of Cincinnati Hospital due to the deadly hospital treatment protocol for

COVID-19. Her brother suffered kidney failure (a known side effect of remdesivir) after being administered remdesivir in compliance with NIH Treatment Guidelines sometime after his admission to a hospital in Galion, Ohio for treatment of COVID-19. After her brother was transferred to Riverside Hospital, then to the University of Cincinnati Hospital, Falzone requested her brother be treated with ivermectin. The hospital refused to even consider her request despite the horrendous, life-threatening results obtained from administration of remdesivir. Falzone's brother was denied the right to try a proven safe and effective therapeutic, to determine his own fate, to make the most important decision of his life.

C. Falzone has been damaged in her family relationships due to her "unvaccinated" status. Falzone has been shunned by half of her extended family because she is "unvaccinated."

D. Falzone has been refused medical care because she refused to wear a mask which has long been ***proven*** to be ineffective in preventing infection or transmission of COVID-19.

E. The government defendants have created a hostile living environment for Falzone, one that impacts her employment and personal relationships and infringes, or threatens to infringe, upon her constitutional rights.

5. Plaintiff Linda McAllister is a resident of Union County, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants

as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured McAllister in her employment relations.

1. McAllister works for an employer (Ohio Health) which instituted a COVID-19 "vaccine" mandate which remains in effect. Ohio Health is a large employer that owns and operates twenty (20) hospitals throughout this state (from southwestern Ohio to the Toledo and Cleveland areas.) It also has a large physician's group of PCPs and specialists.

a. McAllister, who has always worked from home and has ***absolutely no contact*** with any patients or co-workers, was nonetheless subjected to the "vaccine" mandate. Although she was granted a religious exemption from the mandate and her initial exemption was honored on renewal of the mandate this year, her employer may, in future years as the mandate is renewed, require resubmission and reevaluation of her request for exemption. Ohio Health has never foreclosed the possibility of requiring resubmission of an exemption request and the current "vaccine" mandate—and its past history—portend a threat to McAllister's employment. As a result, McAllister reasonably fears that she may lose her exemption from the mandate as the mandate is renewed in future years.

b. Further, under Ohio Health guidelines, at all Ohio Health facilities, only the "unvaccinated" are required to wear a mask onsite in

areas where there is no patient contact (an office, lab or similar location within the facility.)

2. Because "vaccine" mandates exist throughout the entire health care industry in the state of Ohio—and throughout the country—McAllister's mobility in employment is restricted. On information and belief, all employers in the health care industry are only hiring people who have been fully "vaccinated" for COVID-19.

B. McAllister's health and welfare are at risk as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. McAllister's PCP will not prescribe ivermectin for McAllister in treatment of COVID-19, nor test her for COVID-19 antibodies as she has informed McAllister it is against America Health Network policy, the physician group with which she is associated. America Health Network is another large physician group that serves Ohio and Indiana. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription.

C. McAllister has been damaged in her family relationships due to her "unvaccinated" status in that she has been ***prohibited from seeing her grandchildren*** for more than a year and a half due to McAllister's "unvaccinated" status. She has been

estranged from and shunned by her daughter (her grandchildren's mother) because her daughter has bought—hook, line and sinker—into the disinformation propaganda campaign spearheaded by the government defendants which have censored, maligned and "discredited" well-credentialed— even imminent—experts and anyone else that has been critical of the "vaccines," the government response to COVID-19 or its official publications and statements.

1. McAllister's daughter has expressed the belief that McAllister is a threat to the health and welfare of her and her children and that McAllister has intentionally breached her duty to protect them (a highly emotional condemnation of betrayal of the family trust.) She views her mother and all the "unvaccinated" as uncaring and misinformed people who put their personal preferences above the welfare of their families and the common good of this nation.

2. McAllister has tried to inform her daughter of the risks associated with the "vaccine" as well as its lack of efficacy and durability but her daughter has refused to consider any information, no matter how authoritative, that in any way questions the government guidance, the pronouncements and Public Service Advertisements (PSA) and McAllister's efforts have only served to further alienate her daughter.

3. McAllister used to watch her grandchildren (ages 6 and 2)—who live right down the block—two days a week. It breaks McAllister's heart that she is missing out on being a part of her grandchildren's life during such precious times and she fears that, as time passes, her once strong relationship with her daughter and grandchildren, one that has brought her such joy and fulfillment, will be

forever lost. McAllister also fears for the health of safety of her grandchildren (ages 6 and 2) as a result of the FDA approving the "vaccines" for children 6 mos. and older, its recent EUA of the bivalent booster for children 6 mos. and older and the addition of COVID-19 "vaccines" to the Childhood Immunization Schedule.

4. McAllister has personally observed the dangers posed by the "vaccines." McAllister's husband, who took the COVID-19 "vaccine"—which was mandated at his place of employment—in February 2021, suffered a horrible allergic reaction the day following his second Moderna shot. His reaction was like the "full blown" flu. He suffered shaking, freezing, fever, body aches, loss of appetite, weak (could not get out of bed for two days), chronic fatigue, lethargy (from which he has ***never*** fully recovered), his blood pressure skyrocketed and he was required to go on blood pressure medication (a condition from which he has ***never*** recovered.)

D. The government defendants have created a hostile living environment for McAllister, one that impacts her employment and personal relationships and infringes, or threatens to infringe, upon her constitutional rights.

6. Plaintiff Amy Abahazie-Young [hereinafter "Young"] is a resident of this state who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Young in her employment relations.

1. Young was fired from her job because she protested an executive leadership exemption from a company-wide "vaccine" mandate.

2. Young has two college-age children who have so far been granted an exemption from a "vaccine" mandate and a child in high school who was forced to wear a mask as a condition for school attendance. Young reasonably fears "vaccine" mandates will threaten her children's pursuit of education and employment and otherwise restrict their access to the full privileges and immunities of U.S. citizenship.

B. Young's health and that of her children are at risk as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Young's PCP refuses to prescribe ivermectin for treatment of COVID-19 and Riverside Hospital refused to administer either ivermectin or hydroxychloroquine for treatment of her mother who was hospitalized with COVID-19. Insurance will not cover the cost of a tele-med conference with a physician willing to prescribe the drug or the cost of the prescription.

C. The government defendants have created a hostile living environment for Young, one that impacts her employment and personal relationships and infringes, or threatens to infringe, upon her constitutional rights.

7. Plaintiff Tania Bartell [hereinafter "Bartell"] is a resident of Richland county, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Bartell in her employment relations.

1. Bartell attended North Central State College [hereinafter "North Central"], Mansfield, pursuing a degree in physical therapy assisting, but had to drop out because, although she was granted a religious exemption from the "vaccine" mandate at North Central, the nursing home in which she was placed for her clinical program, Kingston of Ashland [hereinafter "Kingston"], cancelled her clinical because she was not "vaccinated." On information and belief, Kingston exempted their employees from the "vaccine" mandate but required "vaccination" for students.

2. After Kingston cancelled her clinical, North Central mandated she find her own placement. Although she found a placement in close proximity to her home, North Central placed her in a program one hours drive away falsely claiming there was no opening in the placement she had found. As a result, she dropped out of school.

3. Bartell has inquired of three hospitals in her locality regarding the availability of observation hours, a prerequisite for admission to the x-ray technician program for which she wants to apply. All hospitals she has contacted have a "vaccine" mandate in place. Two of the hospitals have informed Bartell they would recognize her religious exemption on file at the college for observation hours. Ohio

Health hospitals, however, do not allow any exemption from their "vaccine" mandate for participants enrolled in observation hours.

a. Ohio Health, a very large healthcare provider in this state, notified Bartell that proof (documentation) of "vaccination" for COVID-19 was required and no exemptions would be granted for those taking observation hours.

B. Bartell's health and welfare are at risk as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Bartell asked her PCP if he would prescribe ivermectin as she was developing a plan for dealing with COVID-19. She was advised he could not. She had to search for a doctor who would prescribe it. During her search, Bartell contracted COVID-19. Thankfully, Bartell found a compounding pharmacy that would fill prescriptions for ivermectin, and the pharmacy recommended a doctor that would prescribe it. She contacted the doctor and scheduled a tele-med visit. She was successfully treated with ivermectin and monoclonal antibodies (which her PCP could prescribe) at Ohio Health and recovered. She has natural immunity to COVID-19.

C. The government defendants have created a hostile living environment for Bartell, one that impacts her employment relationships and infringes, or threatens to infringe, upon her constitutional rights.

8. Plaintiff Camie McCorkle [hereinafter "McCorkle"] is a resident of Licking County, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured McCorkle in her employment relations.

1. McCorkle worked on a contingent basis for Mother Angeline McCrory Manor [hereinafter "Manor"] (nursing home), picking up shifts where there was an opening. The Manor sent out a notice in August 2021 stating that it was mandating workers be "vaccinated" but would respect applications for medical or religious exemptions.

a. However, on October 19, 2021, when McCorkle turned in her application for religious exemption, she was handed a form stating that, as an "accommodation," the Manor would put her on ***unpaid leave*** for a period of up to 30 days. McCorkle did not hear back from the Manor on her request for exemption.

b. In December 2021, the Manor simply notified McCorkle she did not work there any longer and informed her last day of work was November 18, 2021.

2. McCorkle also worked at Columbus State, which asked for her "vax" card. After she refused to supply information concerning her "vaccination" status, she received a notification in the mail confirming her "resignation."

3. McCorkle's mobility in employment is restricted as a result of the "vaccine" mandates prevalent throughout the medical care industry in this state.

B. McCorkle's health and welfare are threatened as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. McCorkle would like to have the option to, in consultation with her physician, determine her own course of treatment for COVID-19. This would include the option of receiving ivermectin if hospitalized.

C. The government defendants have created a hostile living environment for McCorkle, one that impacts her employment and infringes, or threatens to infringe, upon her constitutional rights.

9. Plaintiff Christi Henry [hereinafter "Henry"] is a resident of Scioto county, Ohio who has suffered, and will continue to suffer, injury in the following particulars as a direct and proximate result of the government defendants' policies, their acts and conduct and that of the private sector defendants as set forth in in detail *infra*, unless defendants are enjoined and the relief requested herein is granted:

A. "Vaccine" mandates have injured Henry in her employment relations.

1. Henry is a nurse who was employed briefly at Southern Ohio Medical Center. The Medical Center instituted a "vaccine" mandate and, although Henry was eventually granted a religious exemption, she was terminated for refusing weekly testing for COVID-19. Although she ultimately secured employment working for a physician, her mobility in employment is severely restricted as, on

information and belief, most hospitals within this state mandate "vaccination" as a condition of employment.

B. Henry's health and welfare are at risk as a result of the unlawful interference by the government defendants in the physician-patient relationship which obstruct and restrict access to generic (inexpensive) FDA approved drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19 and, on information and belief, the hospital protocol that restricts the use of antivirals in early treatment to ***remdesivir only***.

1. Henry's aunt and uncle have both been "vaccinated" and boosted and both suffered strokes. Her sister-in-law got the Pfizer vaccine and one month later got seriously ill with COVID-19. Due to industry-wide "vaccine" mandates, her family history and Henry's first-hand observations that question both the safety and efficacy of the "vaccines," Henry reasonably fears that forced "vaccination" is an imminent threat to her health and welfare.

C. Henry has been damaged in her family relationships as a result of her "unvaccinated" status. She was estranged from her parents for a year and aunts and uncles for three years because she refused to get "vaccinated."

D. The government defendants have created a hostile living environment for Henry, one that has impacted her family relationships, impacts her employment and infringes, or threatens to infringe, upon her constitutional rights.

Defendants

10. Defendant, Joseph R. Biden, Jr., [hereinafter "Biden"] is sued in his official capacity as President of the United States.

11. Plaintiffs sue the United States of America [hereinafter "the U.S. government or government"] under 5 U.S.C. §§702 – 703 and 28 U.S.C. §1346 for the acts and conduct of its agencies and officers with regard to the following:

A. Manipulation of data to exaggerate the danger presented by COVID-19 for the purpose of using fear to motivate submission to the "vaccine" and compliance with other government interventions (lockdowns, masking, social distancing.)

B. The making of false representations as to the necessity for, and safety and efficacy of the "vaccine" and boosters and the application of duress and coercion to overcome "vaccine hesitancy" and force universal "vaccination" upon the American people, including the false and deceptive marketing of the COVID – 19 "vaccines" as "safe and effective" through "public service" advertising (PSA);

C. Representing the "vaccines" are necessary to prevent infection and transmission of COVID-19 and to reduce the risk of serious illness, hospitalization or death in children; recommending "vaccination" of children; targeting of children for "vaccination" in PSAs; and, including the COVID-19 "vaccine" on the Childhood Immunization Schedule when healthy children are at near zero risk statistically of suffering severe illness, hospitalization or death from COVID-19 and the "vaccine" substantially elevates their risk of suffering severe adverse events/side effects, including death;

D. Abuse of power by banning and/or suppressing safe and effective generic drug therapies in treatment of COVID-19 through the misrepresentation that off-label drugs (like ivermectin and hydroxychloroquine) are neither safe nor effective in treatment of COVID-19 knowing that these false representations would encourage and induce doctors

and hospitals to rely thereon in treatment of COVID-19 and encourage and induce pharmacies to deny the filling of prescriptions for these generic drugs; that these false representations would deny doctors the ability to prescribe safe and effective off-label generic drugs in the early treatment of COVID-19; and, deny patients the opportunity for safe and effective treatment of COVID-19, endangering their health and welfare;

E. Effectively limiting early treatment of hospitalized patients to the FDA-approved drug remdesivir (a highly toxic and deadly drug treatment) to the exclusion of safe, effective generic drugs off-label in treatment of COVID-19;

F. Engaging in a disinformation campaign to vitiate or override informed consent to "vaccination" by collaborating/colluding/conspiring with the media to censor and suppress information critical of the "vaccines" safety and efficacy, or the necessity of taking the "vaccines" including the banning and censoring of highly credentialed experts;

G. Publishing disinformation regarding the COVID-19 virus, early treatment therapeutics and the "vaccines" to encourage or induce punitive measures against physicians (loss of medical license, certification, employment, and hospital privileges) who are critical of the "vaccine" or who advocate for and/or prescribe cheap, safe and proven effective drugs off-label for treatment of COVID-19;

H. Publishing disinformation to enlist state and local government entities, employers, schools, universities and others to mandate COVID-19 "vaccinations" for the express purpose of coercing the American people into submitting to "vaccination" as a condition to access the full benefits of the privileges and immunities of citizenship guaranteed all American citizens;

I. Intentionally vilifying the "unvaccinated" in official announcements and portraying them as a threat to the health and welfare of their fellow citizens, for the purpose of using the court of public opinion and society-at-large as a tool of coercion, one designed to force people into submitting to the experimental gene therapy injection ("vaccine") to preserve their personal and family relationships and access the full benefits of the privileges and immunities of U.S. citizenship;

J. Imposing masking and other requirements (such as lockdowns) for the stated purpose of preventing infection and transmission of COVID-19 knowing there was no scientific basis for these mandates and, specifically, with regard to masking, that masking school-age children would substantially retard their development and result in severe developmental delays and that masking presented a substantial risk of adversely affecting the health of all mask-wearers due to the bacteria and other materials retained or contained in the masks and the highly elevated level of CO2 that would be breathed in while wearing a mask;

12. Defendant Health and Human Services [hereinafter "HHS"] is the agency that oversees the CDC and, through its operating division (FDA), is responsible for the approval of the COVID-19 "vaccines" under Emergency Use Authorization (EUA) and termination of that approval in consultation with the CDC and NIH both of which, on information and belief, receive royalties from patents related to the "vaccines" and are thus possessed of a conflict of interest. [21 U.S.C. §360bbb-3(a),(b) and (c)] Further, HHS is responsible for spearheading the Biden administration's vaccine-centric, anti-therapeutics (alternative treatments), universal vaccination policy and has engaged in a propaganda/disinformation campaign designed to

override and vitiate ***informed consent*** to treatment after the president's sweeping mandates could not pass constitutional muster.[1]

13. Defendant Xavier Becerra is Secretary of HHS and is sued in his official capacity.

14. Defendant Center for Disease Control and Prevention [hereinafter "CDC"] is an operating division of HHS and, on information and belief, is responsible for providing COVID-19 guidance, administers the "vaccination" program and engages in PSAs with other agencies and/or private partners to advocate "vaccination" for all Americans with the goal of achieving universal "vaccination."

15. Defendant Rochelle P. Walinsky is sued in her official capacity as the Director of the CDC .

16. Defendant Food and Drug Administration [hereinafter "FDA"] is an operating division of HHS and is the government agency responsible for approval and marketing of drugs—including COVID-19 "vaccines." The core of the FDA's work is approving drugs and ensuring drugs are marketed in conformance with their known qualities, disclosure of their known risks and any limits on proven efficacy and that drugs are marketed in conformance with the requirements of ***informed consent***, the universal governing medical norm and a foundational element of any free society as codified in the Nuremberg Code of 1947.

17. Defendant Robert M. Califf is sued in his official capacity as Commissioner of the FDA.

18. Defendant National Institutes of Health [hereinafter "NIH"] is an operating division of HHS and identifies as "the nation's medical research agency." In addition to consulting with

[1] https://www.whitehouse.gov/briefing-room/statements-releases/2021/11/04/fact-sheet-biden-administration-announces-details-of-two-major-vaccination-policies/; https://www.nbcnews.com/politics/white-house/biden-announce-additional-vaccine-mandates-he-unveils-new-covid-strategy-n1278735.

HHS and the CDC on the approval, and termination of approval, of COVID-19 "vaccines" for EUA, it publishes guidelines for treatment of COVID-19 and stewards the COVID Collaborative which has partnered with the Ad Council to disseminate disinformation and propaganda on the necessity for and safety and efficacy of the "vaccines.

19. Defendant Lawrence A. Tabak is sued in his official capacity as Director of the NIH.

20. Defendant the National Institute for Allergy and Infectious Diseases [hereinafter "NIAID"], is a division of the NIH. Until December 2022, Anthony Fauci was the Director of NIAID and Chief Medical Advisor to Biden. He was the primary government spokesperson on COVID-19.

21. Hugh Auchincloss, is sued in his official capacity as the acting director of NIAID.

22. Defendant Vivek Murthy is sued in his official capacity as Surgeon General of the United States.

23. Defendant, United States Department of Homeland Security [hereinafter "DHS"], in conjunction with Defendant the Federal Emergency Management Agency [hereinafter "FEMA"], chartered the FEMA National Advisory Council which has partnered with the COVID Collaborative, the Ad Council and the CDC to air and publish PSAs touting the importance of getting COVID-19 "vaccinations" and boosters in furtherance of the Biden Administration's policy of universal "vaccination"—including "vaccination" of infants as young as 6 months of age.

24. Defendant, Alejandro Mayorkas, is sued is his official capacity as Secretary of DHS.

25. Defendant, Deanne Criswell, is sued in her official capacity as Administrator of FEMA.

26. Defendant Pfizer, Inc. is Delaware for profit corporation with an extensive history of corruption and fraud.[2] Pfizer is registered to do business in this state and is the manufacturer and distributor of the BioNTech and Comirnaty COVID-19 "vaccines" which have been advertised as ***fully FDA approved***, distributed and administered throughout this state.

A. Pfizer engaged in a ***joint venture*** with the U.S. government to produce, distribute and market its BioNTech "vaccine" as if it was fully FDA approved for the purpose of justifying "vaccine" mandates and increasing distribution and administration of its "vaccine" in furtherance of the Biden Administration's universal "vaccination" policy. Pfizer has worked in partnership with Dr. Anthony Fauci, the former director of NIAID, and federal health agencies (NIAID, NIH, CDC) in the research and development of its drugs (including the COVID-19 "vaccines") paying royalties to Fauci, these agencies ***and*** their employees for transfer of intellectual property rights once the drugs come to market—an event contingent upon FDA approval.[3] Additionally, many employees of the FDA move to jobs with Pfizer after leaving government service. This symbiotic relationship between Pfizer and our federal health agencies provides Pfizer with undue influence over the drug approval process[4] and creates, ***at the very least***, a potential conflict of interest in the approval and marketing of the COVID-19 "vaccines"

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[2] Children's Health Defense, *Pfizer Has a Long History of Fraud, Corruption and Using Children as Human Guinea Pigs* (01/09/23), https://childrenshealthdefense.org/defender/pfizer-albert-bourla-fraud-corruption/

[3] The Defender, *Thanks to Pfizer Vaccine, 3rd-Party Royalties to NIH Doubled to $127 Million in 2021* (01/18/2023), https://childrenshealthdefense.org/defender/adam-andrzejewski-pfizer-vaccine-royalties-nih/?eType=EmailBlastContent&eId=ce82eb85-7bd8-4a9b-bfe7-b9d9736464e1

[4] https://www.youtube.com/watch?v=ywlpArNWKxM--"This video has been removed for violating YouTube's Community Guidelines"

as the government and the FDA officials charged with overseeing the approval process stand to profit from approval of the "vaccines" the government helped invent.

B. Pfizer conspired with the FDA to misrepresent clinical trial results of its COVID-19 BioNTech "vaccine" (submitting data the FDA knew was false, manipulating data, fraudulently representing the "vaccine" was "safe and effective" in preventing both infection from, and transmission of, COVID-19, for the purpose of securing EUA of its COVID-19 "vaccines") and to conceal public release of its Post-Authorization Adverse Events Reports (post-marketing experience) for a period of 75 years to conceal this fraud.

C. Pfizer is the beneficiary of government largesse in connection with the manufacture and distribution of its COVID-19 BioNTech "vaccine" which has been slickly marketed by the government—at taxpayer expense—as "safe and effective" and ***fully FDA-approved*** (as a result of the FDA finding it is interchangeable with the FDA-approved Comirnaty)—even though it's ***approval is limited to emergency use*** under the EUA statute. Pfizer has further benefited from the ***unnecessary*** declaration and extension of the public health emergency allowing marketing and distribution of its experimental COVID-19 "vaccine," the government's purchase of its "vaccine" en masse and the addition of its EUA "vaccine" to the Childhood Immunization Schedule which, in addition to vouching for the necessity, safety and effectiveness of this experimental drug for children, provides Pfizer long-term liability protection once the government declares the emergency over. [42 U.S.C. §300aa-19 and 22]

D. Pfizer is responsible for conducting "vaccine" clinical trials in conformance with industry and government standards and for accurately reporting the results of those trials. The EUAs granted Pfizer for its COVID-19 "vaccines" were premised on Pfizer's

clinical trial findings and its report of those findings. Pfizer manipulated and misrepresented the results of its clinical trials with full knowledge of the government defendants [hereinafter collectively referred to as "government or U.S. government"], to falsely portray the quality of the "vaccines" (their safety and efficacy.) Pfizer, working in combination with the U.S. government, reaps the benefit of the false "public service" messaging emanating from those agencies and directly engages is unfair and deceptive advertising practices which undermine and thwart the informed consent requirements of the EUA statute [21 U.S.C. §360bbb-3(e)(1)(A)(ii)], the U.S. Constitution and the international norm for informed consent set forth in the Nuremberg Code. To wit: Pfizer advertises its "vaccine", implying it is necessary to protect yourself and others from being infected with COVID-19, that it is safe and effective and FDA-approved ***without any disclosures, warnings, disclaimers or caveats and without disclosing the "vaccine" is authorized for emergency use, the extent to which potential benefits and risks are unknown or the right to refuse the injection*** with the full approval of the U.S. government. Further, on information and belief, Pfizer has suppressed information critical of COVID-19 "vaccines" by tacitly, implicitly or explicitly conditioning receipt of advertising dollars by media outlets on suppression of information critical of its "vaccine."

27. Defendant the Ad Council, advertises in this state and sponsors Public Service Advertisements (PSAs) for, at the direction or with the assistance of, the U.S. government. It, working in combination with one or more U.S. government defendants, has partnered with the COVID Collaborative to do "public service" advertising touting the COVID-19 "vaccines" as "safe and effective" and necessary to protect yourself and others from being infected with the

virus. It has partnered with the CDC and other private corporations to fund and design campaigns to convince employers to institute "vaccine" mandates by falsely representing both the necessity for and safety of the "vaccines" and their effectiveness in preventing infection and transmission of the virus.

Jurisdiction and Venue

28. This court has jurisdiction, and is authorized to award the relief requested, under 5 U.S.C. §§ 701–706, 28 U.S.C. §§1331, 1346, 1361, 2201, the U.S. Constitution and this court's equitable powers.

29. Venue properly lies in this district under 28 U.S.C. §1391(c)(2) and (e)(1)(B)and (C) as the United States, its agencies and officers sued in their official capacity are defendants, a substantial part of the events giving rise to plaintiffs' claim occurred within this district, the plaintiffs Leathers (Butler county), Pittman (Butler county) and Roe (Warren county) reside in this district, no real property is involved and the non-governmental, individual defendants are subject to this court's personal jurisdiction.

General Factual Allegations

Emergency Use Authorization and Rollout of the "Vaccines"

30. Prior to rollout of the vaccines, the federal health agencies, their directors, department heads and spokespersons, and other U.S. government officials [hereinafter referred to collectively as "the government"] portrayed COVID-19 as an imminent and dangerous threat to ***all*** Americans that was untreatable through the administration of ***any*** drug.[5] A vaccine, we were

[5] NIH *COVID-19 Treatment Guidelines*, Guidelines Archive, https://www.covid19treatmentguidelines.nih.gov/about-the-guidelines/guidelines-archive/; CDC, National Center for Health Statistics, *Weekly Updates by Select Demographic and Geographic Characteristics* (Table 1. Deaths involving Coronavirus 2019 (COVID-19) …by sex and age

told, provided the ***only hope*** of combating COVID-19, a virus the government ***falsely*** portrayed as being both deadly—even though "the risk of dying from COVID-19 was * * * miniscule" (it had a median infection mortality rate of 0.5% (comparable to the seasonal flu) among people under age 70)[6]—and highly transmissible by asymptomatic people—even though it contradicted "[a] city-wide prevalence study of almost 10 million people in Wuhan [finding] no evidence of asymptomatic transmission.")[7] Among children and young adults, the infection fatality rate was close to zero.[8] A study published in Science Direct in January 2023 found "[t]he median IFR [Infection Fatality Rate] was 0.0003% at 0–19 years, 0.002% at 20–29 years, 0.011% at 30–39 years, 0.035% at 40–49 years, 0.123% at 50–59 years, and 0.506% at 60–69 years.[9] Yet, government announcements and press releases, citing a highly exaggerated and falsified death

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group for 2020—data as of 1/4/2023), https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#print

[6] Brownstone Institute, *Dear Pfizer: Leave the Children Alone* (Oct. 20, 2021), citing loannidis update, https://brownstone.org/articles/dear-pfizer-leave-the-children-alone/; The Defender, Children's Health Defense, *Risk of Dying From COVID Always Was 'Miniscule,' Regardless of Age* (11/02/22), https://childrenshealthdefense.org/defender/covid-miniscule-death-risk-cola/?eType=EmailBlastContent&eId=61483b7f-b9d9-4322-bad6-4e9175d7eef2

[7] BMJ, Shaun Griffin, *Covid-19: Asymptomatic cases may not be infectious, Wuhan Study Indicates*, (Dec. 1, 2020), https://www.bmj.com/content/371/bmj.m4695; Brownstone Institute, *Dear Pfizer: Leave the Children Alone* (Oct. 20, 2021), citing loannidis update, https://brownstone.org/articles/dear-pfizer-leave-the-children-alone/ .

[8] *Id*., citing nature, *Deaths from COVID 'incredibly rare' among children; Studies find that overall risk of death or severe disease from COVID-19 is very low in kids,* (July 15, 2021); CDC, National Center for Health Statistics, *Weekly Updates by Select Demographic and Geographic Characteristics* (Table 1. Deaths involving Coronavirus 2019 (COVID-19) …by sex and age group for 2020—data as of 1/4/2023), https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#print

[9] Science Direct, Environmental Research, *Age-stratified infection fatality rate of COVID-19 in the non-elderly population* (Volume 216, Part 3, 1 January 2023, 114655), https://www.sciencedirect.com/science/article/pii/S001393512201982X, https://reader.elsevier.com/reader/sd/pii/S001393512201982X?token=57EB69D1F0866461388E2E7E2078DB49EB5BD942BC1DD3C4BF03165A02D8356A1AD7D0A37BB1E634A8A4B8E0F5B80F2D&originRegion=us-east-1&originCreation=20230114143125

toll, spurred panic among the American public.[10] People were sanitizing their groceries, voluntarily locking down, flocking to get face masks—even though the science was well settled that face masks were ineffective at preventing infection or transmission of a viral infection such as COVID-19, a fact well-known by the CDC[11]—and eagerly awaiting the availability of an ***experimental drug*** to save them from impending doom.

31. Fauci himself initially confirmed the rarity of asymptomatic transmission. On January 28, 2020, at an HHS press conference held to address U.S. response to COVID-19, Fauci explained that it was futile to mask asymptomatic people as a containment strategy for the outbreak of any respiratory borne virus:[12]

> …in ***all the history*** of respiratory borne viruses ***of any type***, asymptomatic transmission has ***never*** been the driver of outbreaks. The driver of outbreaks is ***always*** a symptomatic person. Even if there's a ***rare*** asymptomatic person that might transmit, an epidemic is not driven by asymptomatic carriers. (Emphasis added)

32. Fauci's customary disregard of scientific evidence would become a hallmark of the government's COVID-19 policy. In addition to his unscientific lockdowns and the masking and social distancing recommendations (which became part of the CDC guidance)—none of which

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[10] The Epoch Times, *Prominent CNN Doctor Concedes US Has Been 'Overcounting' COVID-19 Deaths* (Jan. 18, 2023), https://www.theepochtimes.com/mkt_app/prominent-cnn-doctor-concedes-us-has-been-overcounting-covid-19-deaths_4994546.html?src_src=News&src_cmp=breaking-2023-01-19-1&est=iVYNP1Cn%2F2wSIpShT3VdEc5Qg42XuYb%2Bu09dySOx8NkQWoODvsgmrN34PQFhLllW

[11] Brownstone Institute, *More Than 400 Studies on the Failure of Compulsory Covid Interventions (Lockdowns, Restrictions, Closures)* (Nov. 30, 2021), https://brownstone.org/articles/more-than-400-studies-on-the-failure-of-compulsory-covid-interventions/

[12] YouTube, U.S. Department of HHS, *Update on the New Coronavirus Outbreak First Identified in Wuhan, China | January 28, 2020*, at 00:44:12 https://www.youtube.com/watch?v=w6koHkBCoNQ

were effective at controlling the spread of the virus[13]—he recommended "vaccination" even for those previously infected with COVID-19 despite overpowering scientific evidence that it was not necessary and quite risky.[14]

33. Hydroxychloroquine and ivermectin were falsely portrayed, not only as ineffective, but dangerous, despite many decades of documented safe use and emerging data evidencing their effectiveness in treatment of COVID-19.[15] The corporate media parroted this message and demonized these drugs and state medical boards warned—and are still warning— doctors against prescribing them.

34. Although early intervention drug therapies like ivermectin and hydroxychloroquine were safe and effective as both a prophylactic and treatment for COVID-19, had been subject to favorable reviews in scientific literature as safe and effective in treatment of Coronavirus (including MERS) and had been shown to be so in observational studies,[16] the ***treatment***

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[13] Brownstone Institute, Paul Elias Alexander, *More Than 400 Studies on the Failure of Compulsory Covid Interventions (Lockdowns, Restrictions, Closures)* (Nov. 30, 2021), https://brownstone.org/articles/more-than-400-studies-on-the-failure-of-compulsory-covid-interventions/

[14] Nature Microbiology, Wen Shi Li, et al., *Antibody-dependent enhancement and SARS CoV-2 vaccines and therapies*, (Sept. 9, 2020), https://www.nature.com/articles/s41564-020-00789-5; and Journal of Infection Noura Yahi, et al., *Infection-enhancing anti-SARS-CoV-2 antibodies recognize both the original Wuhan/D614G strain and Delta variants. A potential risk for mass vaccination?*, (Aug.9, 2021), https://www.journalofinfection.com/article/S0163-4453(21)00392-3/fulltext

[15] The Epoch Times, *Ivermectin Is Safe and Effective: The Evidence* (Dec. 25, 2023), https://www.theepochtimes.com/health/ivermectin-is-safe-and-effective-the-evidence_4944960.html?src_src=Health&src_cmp=health-2022-12-26&est=Os2rFjkP0xfFVKDhrfLXcQQe21EeAVPsk%2BSHKyc29r2aMGZJevobDGR8GTDvrZQU; *The World Tribune, Hydroxychloroquine track record: Politicians lied and patients died* (Feb. 1, 2023), https://www.worldtribune.com/hydroxychloroquine-track-record-politicians-lied-and-patients-died/

[16] NIH, National Library of Medicine, *Chloroquine is a potent inhibitor of SARS coronavirus infection and spread* (2005 Aug. 22), https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1232869/; NIH, National Library of Medicine, *Repurposing of Clinically Developed Drugs for Treatment of Middle East Respiratory Syndrome Coronavirus Infection* (2014 Aug),

protocol established by the government—***no treatment***—led to thousands upon thousands of unnecessary deaths and increased the death count from COVID-19, a statistic publicized by the government to fuel fear and panic prior to the roll out of the "vaccines." Thus, physicians were instructed to send their patients home, without prescribing anything to treat their symptoms, where they were to remain until they had such difficulty breathing that hospitalization was required.[17]

35. Doctors who prescribed hydroxychloroquine or ivermectin and who advocated their use based on the success they enjoyed in treating their own COVID-19 patients, or who criticized "vaccine" safety and efficacy once the "vaccines" rolled out, were marginalized, maligned, had hospital privileges revoked, were fired and threatened with revocation of their license to practice medicine. The publicizing of these punitive measures had the desired effect of chilling doctor's exercise of free speech and intruding upon the physician-patient relationship.

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https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4136000/; PubMed, *Efficacy of early hydroxychloroquine treatment in preventing COVID-19 pneumonia aggravation, the experience from Shanghai, China* (2021 Jan 23), https://pubmed.ncbi.nlm.nih.gov/33342929/; NIH, National Library of Medicine, Harvey A. Risch, *Early Outpatient Treatment of Symptomatic, High-Risk COVID-19 Patients That Should Be Ramped Up Immediately as Key to the Pandemic Crisis* (2020 Nov 2), https://pubmed.ncbi.nlm.nih.gov/32458969/; Medical Press, Journal of Biomedical Research and Clinical Observation, *Study of the Efficacy and Safety of Topical Ivermectin + IotaCarrageenan in the Prophylaxis against COVID-19 in Health Personnel* (November 2020), https://www.researchgate.net/publication/346034534_Study_of_the_Efficacy_and_Safety_of_Topical_Ivermectin_Iota-_Carrageenan_in_the_Prophylaxis_against_COVID-19_in_Health_Personnel; NIH, National Library of Medicine, PubMed, *Ivermectin: a multifaceted drug of Nobel prize-honoured distinction with indicated efficacy against a new global scourge, COVID-19* (2021 Aug 3), https://pubmed.ncbi.nlm.nih.gov/34466270/

[17] NIH, COVID 19 Treatment Guidelines (5-20-2020), https://files.covid19treatmentguidelines.nih.gov/guidelines/archive/covid19treatmentguidelines-05-12-2020.pdf; NIH, COVID 19 Treatment Guidelines (7-17-2020), https://files.covid19treatmentguidelines.nih.gov/guidelines/archive/covid19treatmentguidelines-07-17-2020.pdf;

36. The corporate media would not give doctors or scientists who advocated use of early intervention drug therapeutics or who criticized the "vaccines" print or airtime. As they would challenge the government "science," they were also banned and censored from YouTube and social media (Twitter and Facebook) in an effort to silence them and prevent dissemination of their highly authoritative, well-credentialed opinions to the American public.

37. In addition to denying patients access to safe and effective early treatments like ivermectin and hydroxychloroquine, under CDC guidance—and financial incentives from the government—hospitals were led to institute a COVID protocol that literally killed people. Patients who tested positive for COVID (using the overly sensitive, overly-cycled and flawed RT-PCR test (95% false positive rate), were sedated, intubated, ventilated and killed by the treatment protocol—not by COVID-19.[18] They were treated with Remdesivir, a highly toxic and ineffective drug therapy, and, in the state of Ohio, widely, if not completely, denied any option for alternative drug therapies.

38. Hospitals, following NIH Treatment Guidelines, prohibited the administration of ivermectin and hydroxychloroquine. Patients were thus denied informed consent to treatment and forced to submit to the lethal treatment protocol of the hospital. This resulted in many thousands of unnecessary deaths that were attributed to COVID-19. The highly exaggerated number of deaths (and COVID-19 cases) were then insidiously used to inculcate fear throughout the populace and herd the American people to the "vaccines," which they were told—until real

[18] The Epoch Times, *Controversial Drug Remdesivir Plays Key Role in COVID-Related Hospital Deaths: Dr. Ardis* (Aug. 7, 2022), https://www.theepochtimes.com/controversial-drug-remdesivir-plays-key-role-in-covid-related-hospital-deaths-dr-ardis_4646394.html?est=ACd4N5BZriNgseEeBxGDIuIhmrmbqCcovQ6oWOu4E3XhQT%2F4suoh0luwfhEaFUgi

world data made its way to the public domain—would prevent infection and transmission of the virus—even though the clinical trials never tested transmissibility of the virus.

39. In its response to the pandemic the government established early on that "science" is what the government says it is, so the government is the ***only*** entity that can possibly be following the "science." By elevating itself to this lofty status—with the help of its media partners—the government established control of the information highway to promote wide-spread inoculation of the populace with ***experimental drugs***. Any contrary views or opinions are labeled dangerous "misinformation" which the media must rightly ban for the safety of the American people—who, government "science" falsely represents, are ***all*** threatened by a deadly menace known as COVID-19, including our children.

40. On January 31, 2020, the Secretary of HHS determined that COVID-19 presented a public health emergency, and, subsequently, effective March 27, 2020, declared that circumstances exist justifying authorization for the use of non-FDA approved drugs ("vaccines.") The FDA was authorized to issue EUAs to allow these ***unapproved***, ***experimental*** medical products to be used on a ***massive scale*** in response to COVID-19.[19]

41. On March 10, 2020, the Secretary of HHS issued a declaration under the authority of the Public Readiness and Emergency Preparedness ("PREP") Act (42 U.S.C. §247d-6d) providing liability immunity—except for claims of death or serious injury from willful misconduct—to manufacturers, distributors, and others who deliver or dispense a "vaccine" or other drug or biologic in the treatment of COVID-19, or any variant. The declaration, effective

[19] U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response, Public Health, Public Health Emergency https://www.phe.gov/emergency/news/healthactions/phe/Pages/2019-nCoV.aspx; U.S. Food and Drug Administration, Emergency Use Authorization, https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization

from February 4, 2020 through October 2024, permits the use of drugs that have not been approved by the FDA.

42. On December 11, 2020, the first EUA was granted by the FDA.[20]

43. 21 U.S.C. §360bbb-3(c) sets out the conditions under which the HHS Secretary may issue an EUA. The statute granting this authority, states, in pertinent part:

> **(c) Criteria for issuance of authorization** The Secretary may issue an authorization under this section with respect to the emergency use of a product ***only if***, after consultation with the Assistant Secretary for Preparedness and Response, the Director of the National Institutes of Health, and the Director of the Centers for Disease Control and Prevention (to the extent feasible and appropriate given the applicable circumstances described in subsection (b)(1)), the Secretary concludes—* * *
>
> **(2)** that, based on the totality of scientific evidence available * * *, it is reasonable to believe that—
>
> **(A)** the product ***may*** be effective in diagnosing, treating, or preventing—
>
> **(i)** such disease or condition; * * * and
>
> **(B)** the known and potential benefits of the product, when used to diagnose, prevent, or treat such disease or condition, outweigh the known and potential risks of the product, taking into consideration the material threat posed by the agent or agents identified in a declaration under subsection (b)(1)(D), if applicable;
>
> **(3)** that there is ***no adequate, approved, and available alternative to the product*** for diagnosing, ***preventing***, ***or treating*** such disease * * * (Emphasis added)

44. 21 U.S.C. §360bbb-3(e)(1)(A)(ii) requires the Secretary of HHS to impose such conditions on the granting of EUA as "the Secretary finds necessary or appropriate to protect the public health," including "appropriate conditions designed to ***ensure***" recipients of the "vaccine" give ***informed consent*** to inoculation. (Emphasis added) Informed consent, which is a constitutionally recognized right to refuse treatment, is explicitly required by this statute which provides, in pertinent part, that individuals are to be informed of "the ***option to accept or refuse*** administration of the product * * *" 21 U.S.C. §360bbb-3(e)(1)(A)(ii)(iii). (Emphasis added)

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[20] FDA News Release, *FDA Takes Key Action in Fight Against COVID-19 By Issuing Emergency Use Authorization for First COVID-19 Vaccine* (December 11, 2020), https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19.

45. HHS is also responsible for approval of advertising for EUA drugs under 21 U.S.C. §360bbb-3(e)(4) and has approved advertising and itself engaged in Public Service Advertisements (PSAs) that undermine and thwart the statutory requirement of informed consent set out in 21 U.S.C. §360bbb-3(e)(1)(A)(ii)(iii).

46. On December 11, 2020, the FDA issued the first EUA for a COVID-19 "vaccine," the Pfizer BioNTech.[21] The FDA stated "science" guided "its decision-making" and that the Pfizer clinical trial documents supported issuance of the EUA as the "vaccines known and potential benefits ***clearly*** outweigh the known and potential risks."[22] (Emphasis added) The FDA stated there was no indication of how long the "vaccine" would remain effective and that there was no evidence it would prevent transmission of the virus, but this information was lost on the American public[23] as the FDA touted a 95% effectiveness rate in preventing COVID-19 and Biden touted its effectiveness at preventing transmission of the virus,[24] as did the CDC.[25] These pronouncements were made despite the fact that Pfizer ***never tested*** the "vaccine" for preventing transmission of the virus.[26] Further, the effectiveness rate of the "vaccine" was based on ***relative***

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[21] FDA News Release, *FDA Takes Key Action in Fight Against COVID-19 By Issuing Emergency Use Authorization for First COVID-19 Vaccine* (December 11, 2020), https://www.fda.gov/news-events/press-announcements/fda-takes-key-action-fight-against-covid-19-issuing-emergency-use-authorization-first-covid-19. EUA for Pfizer's BioNTech "vaccine" has been renewed on several occasions, the last being March 29, 2022. It has never received FDA approval.

[22] *Id*.

[23] *Id.*

[24] Politifact, *People who are vaccinated for the coronavirus "cannot spread it to you."* (Oct. 7, 2021) https://www.politifact.com/factchecks/2021/oct/14/joe-biden/joe-biden-overstates-effectiveness-vaccines-preven/

[25] verywellHealth, *CDC Study Confirms That COVID-19 Vaccines Block Transmission In the Real World* (April 8, 2021), https://www.verywellhealth.com/cdc-study-covid-19-transmission-vaccines-5121080

[26] The Defender, *Pfizer Exec Admits COVID Vaccine Was Not Tested for Preventing Transmission* (Oct. 12, 2022), https://childrenshealthdefense.org/defender/pfizer-covid-vaccine-

risk reduction (RRR) citing specific data from the Pfizer clinical trials. However, Pfizer's methodology was flawed as using ***relative risk reduction*** (RRR) as a means of gauging effectiveness ***exaggerated*** the benefits of its "vaccine,"[27] a fact known by the FDA at the time of its announcement. The FDA knowingly misled the American people by concealing data showing an ***absolute risk reduction*** (ARR) of a meager 0.84%, meaning 119 people would need to be vaccinated to prevent one COVID-19 infection.[28]

47. Communicating ***absolute risk reduction*** (ARR) to patients is essential to informed consent.[29] Failure to communicate this information goes against traditional guidance on informed consent and is unethical.[30] After millions of Americans were "vaccinated" under the misconception that the "vaccine" would prevent infection and transmission of the virus, the CDC retracted this statement and acknowledged the "vaccines" do not prevent infection or block transmission. The CDC now claims that the "vaccines" merely reduce the risk of severe illness, hospitalization and death.[31]

48. The EUA required that ***fact sheets*** containing "***important information***" be provided to "vaccine" recipients but the FDA declined to require ***any*** disclaimers or warnings in advertisements or "public service" advertisements for the "vaccines" and there were not even

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never-tested-prevent-transmission-et/?eType=EmailBlastContent&eId=7b58ef9a-4d4f-40f3-abba-fde81d1f0816

[27] The Defender, Children's Health Defense, *UK Documentary Exposes Lies Behind 'Safe and Effective' COVID Vaccine Narrative* (10/14/2022), https://childrenshealthdefense.org/defender/safe-effective-second-opinion-documentary-covid-vaccines/

[28] *Id.*

[29] *Id.*

[30] *Id.*

[31] CDC, COVID-19, Guidance for Institutions of Higher Education (IHEs) (Updated February 7, 2022), https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html#anchor_1643908914518

rudimentary disclosures in government-sponsored PSAs or other advertisements for the "vaccines." (Emphasis added)

49. On December 18, 2020, the FDA, following the same protocol it implemented for approval and marketing of the Pfizer "vaccines" and under the same circumstances set out above, issued the first EUA for the Moderna COVID-19 "vaccine" for individuals ages 18 and older.[32] The EUA was reissued several times and, on December 8, 2022 the FDA reissued the EUA for the Moderna COVID-19 Vaccine, Bivalent for children as young as 6 months through age 17.[33]

50. In early 2021, HHS began its disinformation campaign touting the "vaccines" as "safe and effective" in ***preventing*** infection from, and transmission of, COVID-19.

51. After rollout of the "vaccines," the CDC, fully aware of the science showing the spike protein in the "vaccines" to be the dangerous part of the virus and that it was causing damage to the heart (myocarditis, enlargement of the heart), misrepresented to the American people that the spike protein would dissipate after a few hours and the "vaccine" would remain in the injection site.[34] This pronouncement has since been quietly expunged in light of the ***overwhelming*** evidence that it was wrong.[35]

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[32] U.S. Food and Drug Administration, EUA Letter Moderna (December 8, 2022) at https://eua.modernatx.com/covid19vaccine-eua/fda-letter-eua.pdf; https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/spikevax-and-moderna-covid-19-vaccine

[33] *Id*.

[34] The Burning Platform, *'We Made a Big Mistake' — COVID Vaccine Spike Protein Travels From Injection Site, Can Cause Organ Damage,* https://www.theburningplatform.com/2021/06/04/we-made-a-big-mistake-covid-vaccine-spike-protein-travels-from-injection-site-can-cause-organ-damage/

[35] The Epoch Times, *Spike Protein Disrupting Immunity in Millions After COVID Infection or Vaccination: Here's How It's Being Treated*, https://www.theepochtimes.com/health/spike-protein-disrupting-immune-function-in-millions-after-covid-infection-or-vaccination-heres-how-its-being-treated_4813835.html?src_src=Health&src_cmp=health-2022-10-25&est=nU8HxuzzERUHCgOTRIFGVAm4se98mA3LV2o50TOqtHIi%2Fe1CE%2F72pGy7R7%2BeD1Zi

52. On August 23, 2021, the FDA approved the Biologics License Application (BLA) for Pfizer Comirnaty "vaccine," reissued the letter of EUA for Pfizer Comirnaty for uses not approved under the BLA and reissued and clarified the EUA for Pfizer BioNTech "vaccine."[36] [See: FDA Approval Letter dated August 23, 2021, attached hereto, marked Exhibit A and specifically incorporated by reference as if fully reproduced herein]

Vaccine Failure, Lack of Efficacy and Necessity and Safety Concerns

53. "Historically, a vaccine is subjected to an average of 10-12 years in clinical trials before it is authorized to be administered to the general population. The response to the COVID-19 pandemic organized under Operation Warp Speed rolled out ***novel*** SARS-CoV-2 "vaccines" in record time. Under an Emergency Use Authorization (EUA), these vaccines were available to the public as early as 10 months after development.

54. Although the "vaccine" was promoted as the sole solution to the pandemic, as early as December1, 2020, Pfizer (and presumptively, the FDA) were aware there was evidence showing the "vaccine" to be of limited efficacy. From December 1, 2020 through February 20, 2021, Pfizer received multiple reports of both vaccine failure and vaccine ineffectiveness. (*See*: Pfizer's 5.3.6 *Cumulative Analysis of Post Authorization Adverse Events Reports,* attached hereto, marked Exhibit B and specifically incorporated by reference as if fully reproduced herein.)[37]

55. In its Summary of Safety Concerns, Pfizer identified missing information: use in pregnancy or lactation, use in children under age 12 and vaccine effectiveness. (*Id*., 3.1.2.

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[36] U.S. Food & Drug Administration, *Pfizer-BioNTech COVID-19 Vaccines Comirnaty, Pfizer-BioNTech COVID-19 Vaccine and Pfizer-BioNTech COVID-19 Vaccine, Bivalent*, https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/pfizer-biontech-covid-19-vaccines

[37] https://phmpt.org/wp-content/uploads/2021/11/5.3.6-postmarketing-experience.pdf

Summary of Safety Concerns in the US Pharmacovigilance Plan, Table 3. Safety concerns) Only 34 cases were reported for children under age 12 and out of 1665 lack of efficacy cases, a staggering 1230 outcomes were unknown. (*Id*. at pp. 13 – 14)[38] Out of 270 mother cases, no outcomes were reported for a staggering 238 cases. (*Id*. Table 6. Description of Missing Information, at p. 12) Of the 12% of the known outcomes, the Pfizer clinical trial data showed ***82 – 97% of pregnant women*** injected with the "vaccine" lost their babies. (Id. at p. 12)[39] Incredibly, 88% of the pregnant women involved in the trial were not followed, so outcomes for these participants was not known.[40] (*Id*.)

56. According to Pfizer, there were 16 serious cases of vaccine failure and 1,625 serious cases of vaccine ineffectiveness reported. (*See*: Ex. C. at p. 14.) In the same Pfizer document, Covid-19 is identified as an adverse event of special interest (AESI), with 3,067 cases of Covid-19 reported after receiving the vaccine. From that number, there were 2,585 serious relevant events, including Covid pneumonia, and 136 people died. (*Id*. at p. 17) Pfizer excluded cases from analysis, including 546 cases in which SARS-CoV-2 infection was developed between days 1-13 from the first dose. (*Id*. at p. 15) After allowing for Pfizer's exclusion of some cases, this data still reveals multiple serious cases, including fatalities, indicating there is vaccine failure and vaccine ineffectiveness with Pfizer's vaccine. Worse yet, Pfizer, which is responsible for the post authorization analysis, admits that there are limitations in the reporting of adverse events and that "the magnitude of ***underreporting*** is unknown." (Emphasis Added) (*Id*. at p. 5)

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[38] *See also*: Trial Site News, *Did Biden Administration Pay Physician Networks to Push COVID-19 Vaccine Prematurely?* (Feb. 17, 2023), https://www.trialsitenews.com/a/did-biden-administration-pay-physician-networks-to-push-covid-19-vaccine-prematurely-bcf50597

[39] Health Impact News, *FDA had Data Showing 82% – 97% of Pregnant Women Injected with the Pfizer COVID-19 Vaccine Lost Their Babies Before Approving the Shots* (May 31, 2022), https://healthimpactnews.com/2022/fda-had-data-showing-82-97-of-pregnant-women-injected-with-the-pfizer-covid-19-vaccine-lost-their-babies-before-approving-the-shots/;

[40] *Id*.

57. Additionally, there were 133 cases of infants' exposure to "vaccine" through mother's breast milk indicating the "vaccine" did not stay in injection site as advertised. (*Id*.) Knowing this, the FDA nonetheless approved the "vaccine" without any disclaimers or warnings for pregnant or breastfeeding women and, on April 23, 2021, the CDC actually recommended the "vaccine" for these women and continues to promote it to this day.[41] By comparison, the United Kingdom recommends against "vaccinating" pregnant women or those who are breast feeding and the World Council of Health has called for a ban on "vaccination" of pregnant or lactating women.[42]

58. "In just 15 months after the vaccine rollout, 1,366 peer-reviewed articles document severe adverse events after the COVID-19 vaccinations, a concerning safety signal not even rivaled by combining all other vaccines in the worldwide medical literature over the last century."[43]

59. There has been "an alarming drop" in birth rates "since the rollout of the COVID-19 vaccines"[44] and a "massive rise" in the still birth rate, "the enormity of which cannot be

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[41] U.S. Food & Drug Administration, *Pfizer-BioNTech COVID-19 Vaccine Frequently Asked Questions* (Content current as of 02/16/2022), https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/pfizer-biontech-covid-19-vaccine-frequently-asked-questions; verywell health, *Can Pregnant and Breastfeeding Women Get the COVID-19 Vaccine?* (Updated May 14, 2021), https://www.verywellhealth.com/pregnant-women-covid-vaccine-5092509; CDC, *COVID-19 Vaccines While Pregnant or Breastfeeding* (Updated Oct. 20, 2022), https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/pregnancy.html

[42] Preprints.org, *COVID-19 Vaccines: The Impact on Pregnancy Outcomes and Menstrual Function* (Posted 30 December 2022), https://www.preprints.org/manuscript/202209.0430/v2

[43] *Id*.

[44] *Id*.

overemphasized."[45] In Canada, a highly "vaccinated" country, the still birth rate "is unfathomable at over 300 standard deviations (sigma) above baseline."[46]

60. Pfizer and the FDA concealed material information regarding the number of "vaccine-related" adverse events reported during its clinical trials from the public. Because there were such large numbers of adverse events reported, Pfizer advised the FDA that it was required to increase its workforce by some 2,400 personnel to process the reports. This information was redacted from Pfizer's initial Cumulative Analysis of Post-Authorization Adverse Event Reports," released November 17, 2021, and not publicly disclosed until the report was "reissued" on April 1, 2022.[47]

61. Additionally, although the FDA knew on April 30, 2021 when it received the completed 5.3.6 Cumulative Analysis of Post-authorization Adverse Event Reports (Ex. B) that there was a safety signal for myocarditis, the FDA waited until June 25, 2021, to issue a formal adverse event warning announcement—a two-month delay where, on information and belief, millions received the "vaccine" completely unaware of this risk.[48] Further, Pfizer reported 1403 cases of cardiac events (1441 total events) with average onset of less than 24 hours post inoculation, 69 cases of acute kidney injury/renal failure with an average onset of 4 days, and in February 2021, 22 cases of myocarditis were reported within 7 days of "vaccination" with a average onset of 2 days. Pfizer, however, concluded there were "no new safety issues." (Ex. B)

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[45] *Id*.
[46] *Id*.
[47] [your] News, *Pfizer un-redacted doc shows their hiding pre-knowledge of stunning numbers of serious adverse events* (June 27, 2022) https://yournews.com/2022/04/08/2326507/pfizer-un-redacted-doc-shows-their-hiding-pre-knowledge-of-stunning-numbers/; Daily Clout, *Secret Documents: How Pfizer Covered Up a Flood of Adverse Events*, (April 5, 2022) https://dailyclout.io/how-pfizer-covered-up-anticipated-adverse-events/; Ex. C at p. 6.
[48] U.S. Food & Drug Administration, FDA News Release, *Coronavirus (COVID-19) Update: June 25, 2021*, *https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-june-25-2021*

62. In 2020, Fauci anticipated the duration of vaccine protection would be limited. Fauci stated that "if Covid-19 acts like other coronaviruses, "it likely isn't going to be a long duration of immunity."[49] This information was lost on the American public, however. It was not communicated to the American public in the advertising and "public service" messaging in the roll out for the "vaccines." And, Biden falsely proclaimed "You are not going to get COVID if you have these vaccinations."[50]

63. Further, viruses that mutate rapidly, like COVID-19, are poor candidates for vaccines. That is why "all previous attempts to develop a vaccine against coronaviruses have failed."[51] That the attempt to develop a vaccine against COVID-19 has also failed is borne out by the history of rapid mutations of the COVID-19 virus and boosters not keeping up with the variants.[52] Additionally, there is evidence the sub-optimal "vaccine" is the driving force behind the variants as it does not completely block the virus.[53]

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[49] CNBC, HEALTH AND SCIENCE, *Dr. Anthony Fauci says there's a chance coronavirus vaccine may not provide immunity for very long* (June 3, 2020), https://www.cnbc.com/2020/06/02/dr-anthony-fauci-says-theres-a-chance-coronavirus-vaccine-may-not-provide-immunity-for-very-long.html

[50] Politifact the Poynter Institute (July 21, 2021) (Biden at CNN Townhall) *Joe Biden exaggerates efficacy of COVID-19 vaccines*, https://www.politifact.com/factchecks/2021/jul/22/joe-biden/biden-exaggerates-efficacy-covid-19-vaccines/

[51] Brownstone Institute, *The FDA's "Future Framework" for COVID Vaccines is a Reckless Plan* (June 22, 2022), https://brownstone.org/articles/the-fdas-future-framework-for-covid-vaccines-is-reckless-plan/

[52] TrialSite News, FDA Uses Little Girl to Market Moderna and Pfizer Bivalent Booster Jabs—Crosses a Line Yet Again (Nov. 30, 2022), https://www.trialsitenews.com/a/fda-uses-little-girl-to-market-moderna-and-pfizer-bivalent-booster-jabscrosses-a-line-yet-again-8f2f8b86

[53] The Epoch Times, *The COVID Jabbed Are Dying While Fueling Variants* (Jan. 10, 2023), https://www.theepochtimes.com/mkt_app/health/the-covid-jabbed-are-dying-while-fueling-variants_4974363.html?src_src=Health&src_cmp=health-2023-01-11&est=lVICNIIi4eVgX0H%2BmzR8wVoQXMtVUmy%2Ba8rhew4K4%2BgTlGV4kMxMnS9v2FIKRSec; The Defender, Children's Health Defense, *WSJ Latest to Suggest COVID Vaccines May Be Fueling New Variants* (01/04/23), https://childrenshealthdefense.org/defender/wall-

64. Dr. Fauci told Dr. Collins in 2020 regarding the Covid "vaccines" that "we're going to assume that there's a ***degree of protection***, but we have to assume that it's going to be ***finite***. It's ***not*** going to be like a measles vaccine. So there's going to be follow-up in those cases to see if we need a boost. We may need a boost to continue the protection."[54] (Emphasis added) The American public, however, belabored under the perception that the COVID "vaccines" were indeed like the measles and polio vaccines due to the drugs being mislabeled "vaccines"—instead of therapeutics—and information/"public service" messaging coming from Fauci, the CDC, HHS, NIH, the Ad Council, the COVID Collaborative, Sesame Workshop and Biden which incorporated the misrepresentation and broadcast it to the public in furtherance of the government's disinformation campaign, a campaign designed to overcome "vaccine" hesitancy and achieve universal "vaccination," a policy diametrically opposed to the concept of liberty.

65. The FDA, in its letter to BioNTech on August 23, 2021 "explained that neither the VAERS nor VSD surveillance systems were adequate to determine the risk of myocarditis resulting from the Pfizer vaccine." (*See*: Children's Health Defense [hereinafter "CHD"] letter sent via email to Dr. Califf, Dr. Walensky, Sec. Becerra, Dr. Marks and VRBPAC members dated June 10, 2022 attached hereto, marked Exhibit C and specifically incorporated by reference as if fully reproduced herein at p. 6, ¶15)

66. Although the FDA proclaimed the "vaccine" was safe, more deaths were recorded in the "vaccine" group than the placebo group. The Pfizer data showed, that for every 22,000 people "vaccinated," one life would be saved from COVID-19 (two died from COVID-19 in the placebo group and only one in the "vaccine" group), however, there was a five-fold increase in

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street-journal-covid-new-variants/?eType=EmailBlastContent&eId=37913dcb-2744-4cb7-9abe-60bf83d9b387

[54] Excerpts from NIH Director Dr. Collins's conversation with NIAID Director Dr. Fauci https://newsinhealth.nih.gov/2020/08/dr-*anthony*-fauci-covid-19-vaccines.

deaths in the "vaccine" group from cardiac arrest.[55] Twenty (20) people died in the "vaccine" group versus fourteen (14) in the placebo group. Although Table 16 shows fifteen (15) deaths in the "vaccine" group, Pfizer, after unblinding the placebo group, reported five (5) additional deaths among those in the group who opted to receive the "vaccine" recording twenty (20) total deaths from July 2020 to March 2021. Apparently panicked over the number of deaths in the "vaccine" group, Pfizer omitted five (5) deaths from the table and disclosed them in the text of a six month supplemental report.[56] This manipulation of data in its report to the FDA was done for the express purpose of reporting a more positive risk/benefit analysis to obtain EUA.

67. "A critical appraisal of phase III clinical trial data for the Pfizer/BioNTech vaccine BNT162b2 and Moderna vaccine mRNA-1273 shows that absolute risk reduction (ARR) measures were insignificant. Yet, the manufacturers failed to report absolute risk reduction (ARR) in publicly released documents, the U.S FDA Advisory Committee (VRBPAC) did not follow FDA published guidelines for communicating risks and benefits to the public, and the committee failed to report absolute risk reduction (ARR) in authorizing the BNT162b2 and mRNA-1273 vaccines for emergency use. Such examples of outcome reporting bias mislead and distort the public's interpretation of COVID-19 mRNA "vaccine" efficacy and violate the ethical and legal obligations of informed consent."[57]

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[55] BNT162b2 2.7.4 Summary of Clinical Safety, Table 16, https://phmpt.org/wp-content/uploads/2021/12/STN-125742_0_0-Section-2.7.4-summary-clin-safety.pdf (A copy of Table 16 is attached hereto, marked Exhibit D and specifically incorporated by reference as if fully reproduced herein)

[56] Daily Clout, Aaron Siri, *Pfizer's Clinical Trial Had More Deaths After Vaccination than Placebo* (February 22, 2023), https://dailyclout.io/pfizers-clinical-trial-had-more-deaths-after-vaccination-than-placebo/

[57] MDPI, medicina, *Outcome Reporting Bias in COVID-19 mRNA Vaccine Clinical Trials*, Ronald B. Brown, citing Fischhoff, B.; Brewer, N.; Downs, J. *Communicating Risks and Benefits: An Evidence-Based User's Guide*; Food and Drug Administration (FDA), US

68. "The most vaccinated regions in the world"—including the United States—have had the highest current COVID-19 case counts and the highest COVID-19 death counts.[58] The fully vaccinated and boosted are the ones that are dying from the current COVID-19 variants and the United States has one of the highest case and death counts in the world. This data is evidence that the "vaccines" not only wane in effectiveness after a few months, but their efficacy turns negative and increases the likelihood of COVID-19 infection, severe illness, hospitalization and death.[59]

69. Data from the original Moderna Clinical Trial provides evidence that repeated booster shots of the "vaccine" (which we know with certainty will clearly be required) could impair the immune response. Of those infected with COVID-19, the immune response among the "unvaccinated" is far superior to the immune response among the "vaccinated." In the trial, "93**% of unvaccinated controls** produced detectable SARS-CoV-2 anti-nucleocapsid antibody after infection [but] only **40% of the vaccinated** produced this antibody after infection * * * [and] most of the vaccinated failed to mount the expected immune response."[60] Further, there is mounting evidence that the spike protein in MRNA COVID-19 injections is a toxic protein and

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Department of Health and Human Services: Silver Spring, MA, USA, 2011. https://www.mdpi.com/1648-9144/57/3/199/htm

[58] Ex. C (CHD letter). at p. 7, ⁋17 citing *New York Times* articles, "Coronavirus in the U.S.: Latest Map and Case Count" updated June 8, 2022; "Coronavirus World Map: Tracking the Global Outbreak," updated Jun. 8, 2022,

[59] *Id*.

[60] *Id.* at p. 11, ⁋23, note 45 citing Dean Follmann, Holly E. Janes, Olive D. Buhule, et al., "Anti-Nucleocapsid Antibodies Following SARS-CoV-2 Infection in the Blinded Phase of the mRNA-1273 Covid-19 Vaccine Efficacy Clinical Trial," *medRxiv* preprint,, Apr. 19, 2022, https://doi.org/10.1101/2022.04.18.22271936) and note 46 (Irina Anghel, "Frequent Boosters Spur Warning on Immune Response," *Bloomberg*, Jan. 11, 2022, https://www.bloomberg.com/news/articles/2022-01-11/repeat-booster-shots-risk-overloading-immune-system-ema-says; *See also:* Global Covid Summit Declaration Update ("**natural immunity is the most protective** and longest lasting solution against development of COVID-19 disease and its more serious outcomes" (Original emphasis); "**Naturally immune persons are at the lowest risk of transmission** * * *" (Original emphasis)

interferes with cancer suppression. Since the roll out of the "vaccines," cases of aggressive, fast-acting cancers have skyrocketed and "patient[s] in stable remission are * * * suddenly experiencing an explosive relapse," facts the CDC has attempted to disguise and bury.[61]

70. In early October 2022, the CDC was ***forced*** by court order to release V-Safe data as a result of two lawsuits filed by Informed Consent Action Network (ICAN).[62] V-Safe is a tool developed by the CDC that runs on smart phones. It is designed to collect health evaluations post "vaccination" to help the CDC monitor safety of the COVID-19 "vaccines" "in near real time."[63] "Out of the 10 million people who used v-safe, 3,353,110 were hurt * * * and 6,458,751 health impacts" (unable to work or go to school, perform daily activities and/or sought medical care) "were reported."[64] An incredibly high 7.7% of the participants "had to seek medical care after "'vaccination—'"(emergency rooms, hospitalization.)[65]

71. The science is settled, the "vaccines" prevent neither infection nor transmission of COVID-19.[66] Noting that CDC guidelines on quarantine and isolation were the same for

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[61] The Epoch Times, *How Cancer Deaths From the COVID Jabs Are Being Hidden* (Oct. 14, 2022), https://www.theepochtimes.com/health/how-cancer-deaths-from-the-covid-jabs-are-being-hidden_4796410.html?src_src=News&src_cmp=breaking-2022-10-16-1&est=508ZiGfSedasqyKvYSzoF4dqQwkF7aigaf7gbN0HxAHifUXPaXRMWGj70sTYaUB5; The Epoch Times, Joseph Mercola, *COVID Boosters Trigger Metastasis Patient after patient in stable remission are now suddenly experiencing an explosive relapse* (Jan. 5, 2023), https://www.theepochtimes.com/mkt_app/health/covid-boosters-trigger-metastasis_4964755.html?src_src=Healthtop5&src_cmp=htop5-2023-01-14&est=xxgdcy8R2KpQqmnrLgcO5CTptpmLli1rruR6JSh8iRUnZR2hy%2FiKo4WEAxcwpJLl

[62] Gateway Pundit, *Breaking: ICAN Wins Lawsuit Forcing CDC to Turn Over V-Safe COVID Vaccine Injury Data—Shows 7.7% Seek Medical Care After Vaccination and 25% Have Serious Side Effects (Video)* (Oct. 4, 2022); https://www.thegatewaypundit.com/2022/10/breaking-ican-wins-lawsuit-forcing-cdc-turn-v-safe-covid-vaccine-injury-data-shows-7-7-seek-medical-care-vaccination-25-serious-side-effects-video/

[63] *Id.*

[64] *Id.*

[65] *Id.*

[66] Madeline Holcomb, *Fully Vaccinated People Who Get a CoVID-19 Breakthrough Infection Transmit the Virus, CDC Chief Says*, CNN HEALTH (August 6, 2021)

"vaccinated" and "unvaccinated," and finding that "vaccination" prevents neither infection nor transmission of the COVID-19 virus, the Supreme Court of New York for Richmond County, struck down a "vaccine" mandate for NYC workers.[67] In *Plaintiff Psychologist v. Order of Psychologists of Tuscany r.g.* 7360/2022 (Ordinary Court of Florence, July 6, 2022) the judge found that: 1) the COVID-19 "vaccines" "show a phenomenon opposite to what was intended to be achieved with the vaccination, that's to say a spread of contagion with the formulation of multiple viral variants and the numerical prevalence of infections and deaths among those vaccinated with three doses…. We know that in the short term they have already caused thousands of deaths and serious adverse events."[68]

72. Although the CDC now claims the "vaccines" reduce the risk of severe illness, hospitalization and death (but not infection or transmission) there is no reliable scientific evidence to back up that assertion.[69] No randomized controlled trials (RCTs) have ever been conducted.

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https://www.cnn.com/2021/08/05/health/us-coronavirus-thursday/index.html, see also The New England Journal of Medicine, *Resurgence of SARS-CoV-2 Infection in a Highly Vaccinated Health System Workforce*, N ENGL J MED 2021; 385:1330-1332 (September 30, 2021) https://www.nejm.org/doi/full/10.1056/NEJMc2112981 . Brown CM, Vostok J, Johnson H, et al. Outbreak of SARS-CoV-2 Infections, Including COVID-19 Vaccine Breakthrough Infections, Associated with Large Public Gatherings — Barnstable County, Massachusetts, July 2021. MMWR MORB MORTAL WKLY REP 2021;70:1059-1062, https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm?s_cid=mm7031e2_w (last visited March 1, 2022).

[67] The Epoch Times, *Judge Strikes Down NYC Vaccine Mandate*, (pdf), *Garvey et al. v. City of New York et al.*, at p. 11, Index #85163/2022, https://www.theepochtimes.com/judge-strikes-down-nyc-vaccine-mandate-for-all-city-workers_4818407.html?src_src=News&src_cmp=breaking-2022-10-25-1&est=n1O4lDCf2xhfI9yd0xcd9ddo7391Wv7pv0Z%2BX6V6VrbuCdj2TmGoKt7ZHZ2sAq4v

[68] https://childrenshealthdefense.eu/wp-content/uploads/2022/07/Tribunal-Firenze-06072022_EN.pdf

[69] CDC, COVID-19, Guidance for Institutions of Higher Education (IHEs) (Updated February 7, 2022), https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html#anchor_1643908914518; Ex. D (CHD letter) at p. 2, ⁋2, citing

73. Any potential benefit from "vaccination" is outweighed by known and potential harm as "we are currently at historic lows for severe COVID disease and the CDC has "extrapolated that 95% of Americans have complete or partial immunity to COVID. "[70] This holds especially true for our children who are at a statistically ***near zero risk*** of severe illness, hospitalization or death.

74. As of October 22, 2022, the COVID-19 "vaccines" have accounted for 84% of all deaths in VAERS from vaccines over the last 31 plus years.[71] Additionally, VAERS, one of the databases used by the CDC to monitor vaccine safety, reflects the COVID-19 "vaccines" have injured millions of Americans.[72] Adverse events reported in VAERS are estimated to only account for a small percentage of the total adverse events associated with a vaccine.[73] And, the reliability of the VAERS data is further brought into question as a result of the CDC's intentional or negligent mismanagement of the database. Any report on V-Safe of missing work, inability to do normal daily activities or receiving care from a doctor was to be followed up by VAERS staff who were then to generate a VAERS report, if appropriate.[74] Out of 10,108,273 V-Safe participants, 800,000 suffered an adverse event that required medical care, yet only 30,492 have

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Rui Wang, Jiahui Chen, Yuta Hozumi et al., "Emerging Vaccine-Breakthrough SARS-CoV-2 Variants," *ACS Infect Dis.* 8, no. 3 (2022), www.doi.org/10.1021/acsinfecdis.1c00557;

[70] Ex. C (CHD letter) at p. 11, ⁋24.

[71] Health Impact News, *COVID-19 Vaccines Have Caused 84% of All Deaths Recorded in VAERS for the Past 32 Years – Pfizer #1 in Vaccine Deaths, Even Before COVID*, https://healthimpactnews.com/2022/covid-19-vaccines-have-caused-84-of-all-deaths-recorded-in-vaers-for-the-past-32-years-pfizer-1-in-vaccine-deaths-even-before-covid/

[72] OpenVAERS, https://openvaers.com/

[73] Grant Final Report, Grant ID: R18 HS 017045, *Electronic Support for Public Health–Vaccine Adverse Event Reporting System (ESP:VAERS)*, https://openvaers.com/images/r18hs017045-lazarus-final-report-20116.pdf

[74] v-safe protocol: Jan 28, 2021, version 2, https://www.cdc.gov/vaccinesafety/pdf/V-safe-Protocol-v2-012821.pdf

been logged into VAERS as of November 4, 2022.[75] The V-Safe data has been recently confirmed by a Rasmussen poll that found an unprecedented 7% of vaccinated people (12 million adults in U.S.) suffered a major side-effect.[76]

75. On or about January 14, 2023, the CDC reported its Vaccine Safety Datalink (VSD) suggested that ischemic stroke presented a possible safety risk for the Pfizer COVID-19 "vaccine" bivalent booster.[77] However, in early March, 2021 documents from Pfizer's Cumulative Analysis of Post-authorization Adverse Event Reports (Ex. B at 23 – 24) had already revealed a safety risk for stroke as 275 "vaccine" recipients suffered a stroke within the first 24 hours – 41 days, with ***half of the strokes occurring within the first 2 days*** post "vaccination" and reported 3 cases of cerebral venous sinus thrombosis (a ***very rare*** diagnosis) within the first 90 days. (*Id*.) Oddly, Pfizer, the FDA and CDC concluded these reports "did not raise any new safety issues."

76. In reporting there was a safety signal for ischemic strokes, the CDC stated it issued its public statement in the interest of transparency, but, as no other databases triggered this signal, it did not consider the signal significant at this time and would not change its recommendation for "vaccination."[78] However, the VAERS database in fact identified a safety

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[75] OpenVAERS, *V-Safe in VAERS*, https://www.openvaers.com/covid-data/vsafe-in-vaers
[76] HJ News, Steve Kirsch, *Rasmussen poll shows the COVID vaccines are not safe* (December 14, 2022), https://www.hjnews.com/townnews/politics/rasmussen-poll-shows-the-covid-vaccines-are-not-safe/article_244d925e-7967-11ed-a3a8-9b4efdf13039.html
[77] CDC, COVID-19, *CDC & FDA Identify Preliminary COVID-19 Vaccine Safety Signal for Persons Aged 65 Years and Older* (updated Jan. 13, 2023), https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/bivalent-boosters.html; New York Post, *CDC investigating whether Pfizer COVID vaccine increases stroke risk for people over 65* (January 14, 2023), https://nypost.com/2023/01/14/cdc-investigating-pfizer-covid-vaccine-for-stroke-risk/
[78] CNN, *CDC detects possible increase in stroke in those 65 and older who received Pfizer COVID booster shot* (updated Jan. 14, 2023), https://www.wjcl.com/article/possible-safety-issue-with-pfizer-s-updated-covid-19-vaccine/42491973

signal for stroke and, in all, "***more than 500 adverse events*** larger than myocarditis and pericarditis."[79] Additionally, the CDC failed to quantify the risk of ischemic stroke making it impossible for the public to evaluate the risk of dying from COVID-19 versus suffering an ischemic stroke.[80] For example, "170,000-620,500 boosters are required to prevent a single COVID-19 death per week. How many ischemic strokes will result from more than a half million bivalent booster doses? The CDC doesn't tell us."[81] None of the studies cited by the CDC in support of its recommendation allow the public to evaluate the risk/benefits of receiving the bivalent booster.[82] And, its sister agency, the FDA attempted to conceal data from the Pfizer clinical trials for 75 years citing a lack of staff to process the request.[83]

77. Failing to provide the public with information that allows potential recipients of the "vaccine" to evaluate its risk and benefits obstructs and impairs their informed consent to treatment. And, using irrelevant statistics and studies to support recommendations made by federal health agencies is particularly deceptive.

78. There is a temporal correlation between "vaccination" and an ***unprecedented increase in all-cause mortality***, a clear safety signal that is being utterly ignored—and explained

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[79] The Defender, Children's Health Defense, *CDC Finds Hundreds of Safety Signals for Pfizer, Moderna COVID Vaccines* (01/03/2023) By the Epoch Times, https://childrenshealthdefense.org/defender/cdc-safety-signals-pfizer-moderna-covid-vaccines-et/

[80] The Defender, Children's Health Defense, *CDC Shrugs Off Increased Risk of Ischemic Stroke From COVID Bivalent Boosters After Identifying 'Safety Signal'* (01/17/23), https://childrenshealthdefense.org/defender/cdc-ischemic-stroke-covid-bivalent-boosters-safety-signal/?eType=EmailBlastContent&eId=74df7d9d-72d6-4999-8e99-2e5371c9357b

[81] *Id*.

[82] *Id*.

[83] Reuters, *'Paramount importance': Judge orders FDA to hasten release of Pfizer vaccine docs* (Jan. 7, 2022), https://www.reuters.com/legal/government/paramount-importance-judge-orders-fda-hasten-release-pfizer-vaccine-docs-2022-01-07/

away—by the CDC.[84] Using CDC and insurance data, "Josh Stirling, a top insurance research analyst, has found a 7% aggregate mortality increase for each COVID vaccine dose received, meaning a "fully vaccinated" individual who took 5 doses increased their risk of [premature] death by 35%."[85] According to Stirling, all-cause mortality rose by about 15% in the U.S. in 2022 from 2021.[86] Further, the number of deaths from the COVID-19 "vaccines" exceed the threshold established by the CDC for safety signals of a drug.[87]

79. There is an unexplained increase in Sudden Adult Death Syndrome (SADS) among previously healthy young people and an "unprecedented number of athletes while playing on the field."[88] For the period January 2021 through April 2022, there was a ***1,696% increase*** in deaths

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[84] Australian Bureau of Statistics, *Provisional Mortality Statistics*, (Jan. – Sep. 2022), https://www.abs.gov.au/statistics/health/causes-death/provisional-mortality-statistics/latest-release; The Center Square, *Indiana life insurance CEO says deaths are up 40% among people ages 18-64* (Jan. 1, 2022) https://www.thecentersquare.com/indiana/indiana-life-insurance-ceo-says-deaths-are-up-40-among-people-ages-18-64/article_71473b12-6b1e-11ec-8641-5b2c06725e2c.html; The Epoch Times, *The COVID Jabbed Are Dying While Fueling Variants* (Jan. 10, 2023), https://www.theepochtimes.com/mkt_app/health/the-covid-jabbed-are-dying-while-fueling-variants_4974363.html?src_src=Health&src_cmp=health-2023-01-11&est=lVICNIIi4eVgX0H%2BmzR8wVoQXMtVUmy%2Ba8rhew4K4%2BgTlGV4kMxMnS9v2FIKRSec

[85] G. Edward Griffin's Need to Know, *Top Insurance Analyst Finds 7% Increase In Mortality for Each Covid Vax Dose Received* (February 3, 2023), https://needtoknow.news/2023/02/top-insurance-analyst-finds-7-increase-in-mortality-for-each-covid-vax-dose-received/

[86] *Id*.

[87] Steve Kirsch's Newsletter, *Exclusive: Proof that the CDC is deliberately ignoring the safety signals from the COVID vax* (Oct. 3, 2022), https://stevekirsch.substack.com/p/unassailable-proof-of-incompetence; *Vaccine Adverse Event Reporting System (VAERS) Standard Operating Procedures for COVID-19 (as of 29 January 2021)*, https://www.cdc.gov/vaccinesafety/pdf/VAERS-v2-SOP.pdf; *The Epoch Times, EXCLUSIVE: CDC Finds Hundreds of Safety Signals for Pfizer and Moderna COVID-19 Vaccines* (Jan. 3, 2023), https://www.theepochtimes.com/health/exclusive-cdc-finds-hundreds-of-safety-signals-for-pfizer-and-moderna-covid-19-vaccines_4956733.html

[88] Global COVID Summit, *The Medical Crisis Declaration* (Sept. 11, 2022), https://globalcovidsummit.org/news/the-medical-crisis-declaration; Home Vaccine-injured, *1024 Athlete Cardiac Arrests, Serious Issues, 666 Dead, After COVID Shot* (May 21, 2022), https://globalcovidsummit.org/vaccine-injured/-1024-athlete-cardiac-arrests-serious-issues-666-dead-after-covid-shot; The Epoch Times, *Young Adults Dying in Record Numbers, but Not From*

above the historical monthly norm from 1966 through 2004 in the number of ***athletes who died suddenly***.[89]

80. Moderna CEO Stephane Bancel has likened COVID-19 to seasonal flu, stating that those over 50 years of age and those at high risk should definitely consider a booster.[90] Yet, the CDC continues to push boosters for anyone 6 months of age and older and its advisory committee (ACIP) voted unanimously to add COVID-19 "vaccines" to the Childhood Immunization Schedule, a move that would effectively insulate COVID-19 "vaccine" manufacturers from liability for a "vaccine" that has caused many more deaths and serious side-effects than all other vaccines combined over the past 31 years.[91]

81. On January 12, 2023, Dr. Paul Offit an advisor to the FDA's vaccine panel and "prominent" expert on vaccines, citing the fact that bivalent boosters do not "produce 'superior

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COVID-19 (Sept. 7, 2022), https://www.theepochtimes.com/young-adults-dying-in-record-numbers-but-not-from-covid-19_4716218.html?est=9E9SYOhBfZWE7rJ1mlpppC%2FTl29RjFJ6ZPO05JkrUgvEkw6f3NruIlmnuzTx797X; The Epoch Times, *Sudden Death: The No. 1 Cause of Death for Under 65s in 2021* (Jan. 6, 2023), https://www.theepochtimes.com/mkt_app/health/sudden-death-the-no-1-cause-of-death-for-under-65s-in-2021_4966680.html?src_src=Health&src_cmp=health-2023-01-07&est=vyaNcZxtvAncGI%2BfYxeNuVU%2B1rPnzHC7XN24GFaMrUiPnxUfaX1TiNi%2BFqRCRuuj

[89] The Epoch Times, *Are Athletes Dropping Dead From the COVID Jab?* (Jan. 17, 2023), https://www.theepochtimes.com/mkt_app/health/are-athletes-dropping-dead-from-the-covid-jab_4990537.html?src_src=Health&src_cmp=health-2023-01-18&est=LrPmiGwNNerlqizRfWLIeuXOOLM%2BTOJOFw4aNla7LND0zYbsTpb7tKwxwyBjihyP; The Epoch Times, *More Than 270 Deaths in US Athletes After Vaccination: Peer-Reviewed Letter* (Jan. 4, 2023), https://www.theepochtimes.com/mkt_app/more-than-270-sudden-cardiac-deaths-in-us-athletes-after-vaccination-peer-reviewed-study_4960561.html?src_src=Healthtop5&src_cmp=htop5-2023-01-08&est=3%2BKxBa1qx52M8yk21t1E5I5CyVHqbkhOQizdkL%2F%2FKPg%2FYOKVuse6iazow%2BoCV1Ua

[90] Daily Mail, *Moderna's CEO admits only the vulnerable need a COVID booster and likens the virus to flu*, (Oct. 18, 2022), https://www.dailymail.co.uk/health/article-11327615/Modernas-CEO-admits-vulnerable-need-Covid-booster-shot.html

[91] *Id*.; National Review, *CDC Panel Votes to Add Covid-19 Vaccine to Recommended Childhood Schedule* (Oct. 19, 2022), https://www.nationalreview.com/news/cdc-votes-to-add-covid-19-vaccine-to-recommended-childhood-schedule/;

immune responses'"[92] to original "vaccines," advised against COVID-19 mRNA "vaccine" boosters for young, healthy people stating it made no sense to "vaccinate" against strains of the virus that "might disappear in a few months."[93] Although this has always been the case—by the time boosters hit the market, they are obsolete—the CDC continues to recommend the "vaccines" and the boosters (including the bivalent booster) for ***all age groups*** (including children as young as 6 months) even though the current Omicron variants present as "a mild cold or flu-like illness" for the overwhelming majority of people.[94]

82. Further, the more dangerous a "vaccine" is, the less likely it is to flag a safety-signal under the CDC's guidelines which are intentionally structured to limit safety signals. A great number of different adverse events (like the 9 single-spaced pages of AEs documented in the Pfizer clinical trials) considered individually may not meet the three criteria threshold: (1) a Proportional Reporting Ration (PRR) of at least 2; (2) chi-squared statistic of at least 4; ***and*** (3) 3 or more cases of the AE following receipt of the specific vaccine of interest.[95]

No Scientific Basis to "Vaccinate" Children—The Irrationality of the Government's Targeting Our Children for Participation in a Grand Experiment

83. There is no basis to subject our children to ***experimental gene-therapy treatment*** for COVID-19. Their ***recovery rate is 99.995%*** and a number of studies and government-collected

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[92] The Defender, *Bivalent COVID Boosters Offer No Extra Protection, Studies Suggest + More* (01/12/23), https://childrenshealthdefense.org/defender/covid-nw-bivalent-boosters-no-extra-protection-studies/?eType=EmailBlastContent&eId=68d9b3d6-2e25-4d03-82a3-fc3bbaf2eeec

[93] HUFFPOST, *Vaccine Expert Says Additional COVID Boosters Not Required For Young, Healthy People* (Jan. 12, 2023), https://www.huffpost.com/entry/vaccines-expert-covid-19-boosters_n_63bfdd94e4b0cbfd55efb6d0, citing The New England Journal of Medicine, *Bivalent Covid-19 Vaccines — A Cautionary Tale*, Paul A. Offit, M.D. (Jan. 11, 2023), https://www.nejm.org/doi/full/10.1056/NEJMp2215780

[94] *Id.*; TrialSite News, *FDA Uses Little Girl to Market Moderna and Pfizer Bivalent Booster Jabs—Crosses a Line Yet Again* (Nov. 30, 2022), https://www.trialsitenews.com/a/fda-uses-little-girl-to-market-moderna-and-pfizer-bivalent-booster-jabscrosses-a-line-yet-again-8f2f8b86

[95] Vaccine Adverse Event Reporting System (VAERS) Standard Operating Procedures for COVID-19 (as of 29 January 2021), https://www.cdc.gov/vaccinesafety/pdf/VAERS-v2-SOP.pdf

data reveals that "***almost zero healthy children***" under the age of 5 years "have ***died*** from COVID."[96] Children's Health Defense, in its letter opposing EUA for "vaccines" for infants and children ages 6 months and older (Exhibit C), cited the following scientific studies and data in support of its position:

A. "A Johns Hopkins study monitoring 48,000 children diagnosed with COVID showed a ***zero mortality*** rate in children under 18 without comorbidities."[97] (Emphasis added)

B. "A study in Nature demonstrated that children under 18 with no comorbidities have virtually ***no risk of death***."[98] (Emphasis added)

C. "Data from England and Wales, published by the UK Office of National Statistics on January 17, 2022, revealed that throughout 2020 and 2021, only one (1) child under the age of 5, without comorbidities, had died from COVID in the two countries, whose total population is 60 million."[99]

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[96]CHD Letter to VRBPAC (Ex. C) at p. 1, ⁋1; *See also*: Global COVID Summit Pediatric Declaration, https://globalcovidsummit.org/news/global-covid-summit-pediatric-declaration

[97] *Id*. at p. 1, ⁋1, notes 1 and 2 citing Audrey Unverferth, "Johns Hopkins Study Found Zero COVID Deaths among Healthy Kids," *The Federalist*, Jul. 21, 2021, https://thefederalist.com/2021/07/21/johns-hopkins-study-found-zero-covid-deaths-among-healthy-kids); FAIR Health, West Health Institute, and Marty Makary, MD, MPH, "Risk Factors for COVID-19 Mortality among Privately Insured Patients" *FAIR Health,* Nov. 11, 2020, https://s3.amazonaws.com/media2fairhealth.org/whitepaper/asset/Risk%20Factors%20for%20COVID-19%20Mortality%20among%20Privately%20Insured%20Patients%20-%20A%20Claims%20Data%20Analysis%20-%20A%20FAIR%20Health%20White%20Paper.pdf.

[98] *Id*. at p. 1, ⁋1, note 3 citing Clare Smith, David Odd, Rachel Harwood, et al., "Deaths in Children and Young People in England after SARS-CoV-2 Infection during the First Pandemic Year," *Nat Med* 28 (2022): 185–192, https://doi.org/10.1038/s41591-021-01578-1.

[99] *Id*. at p. 2, ⁋1, note 4 citing "COVID-19 Deaths and Autopsies Feb 2020 to Dec 2021, Table 1: Number of Deaths Where COVID-19 Was the Only Cause Mentioned on the Death Certificate, 1 February 2020 to 31 December 2021, by Sex and Age Group, England and Wales," Jan. 17, 2022, *Office for National Statistics,*

D. "A large study conducted in Germany showed ***zero deaths*** for children ages 5-11 and a case fatality rate of three per million in all children without comorbidities."[100] (Emphasis added)

E. "Another study in Nature from April suggests children's bodies clear the virus more easily than adults."[101]

F. "This study published in December in Nature demonstrated how children efficiently mount effective, robust, and sustained immune responses."[102]

G. The CDC published data reflecting 203 children aged 6 months through 4 years have died "***with***" COVID since the start of the pandemic, averaging 85 deaths in this age group "with" COVID yearly.[103] (Emphasis added)

H. The Global COVID Summit Pediatric Declaration dated June 6, 2022 declared and affirmed that children "have [s]uperior innate immunity, natural immunity, and minimal risk of COVID-19 disease" and that "[d]ue to unprecedented adverse safety signals, administration of COVID-19 injections should be halted immediately for all age

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https://www.ons.gov.uk/aboutus/transparencyandgovernance/freedomofinformationfoi/covid19deathsandautopsiesfeb2020todec2021.

[100] *Id*. at p. 2, ¶1, note 5 citing A.L. Sorg, M. Doenhardt, N. Diffloth et al., "Risk of Hospitalization, Severe Disease, and Mortality Due to COVID-19 and PIMS-TS in Children with SARS-CoV-2 Infection in Germany," *MedRxiv* preprint, Nov. 30, 2021, https://www medrxiv.org/content/10.1101/2021.11.30.21267048v1.

[101] *Id*. at p. 2, ¶1, note 6 citing Kevin J. Selva, Carolien E. van de Sandt, Melissa M. Lemke, et al., "Systems Serology Detects Functionally Distinct Coronavirus Antibody Features in Children and Elderly," *Nature Communications* 12, no. 2037 (2021), https://doi.org/10.1038/s41467-021-22236-7.

[102] *Id*. at p. 2, ¶1, note 7 citing Alexander C. Dowell, Megan S. Butler, Elizabeth Jinks, et al., "Children Develop Robust and Sustained Cross-Reactive Spike-Specific Immune Responses to SARS-CoV-2 Infection," *Nat Immunol* 23 (2022): 40–49, https://doi.org/10.1038/s41590-021-01089-8.

[103] *Id*. at p. 2, ¶1, note 7 citing "Provisional COVID-19 Death Counts by Age in Years, 2020-2022," Centers for Disease Control and Prevention, updated Jun. 2, 2022, https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Age-in-Years-/3apk-4u4f.

groups, most especially children."[104] The pediatricians and pediatric specialists signatory to the Declaration further affirmed that "there has never been a state of emergency for infants, children, and adolescents regarding COVID-19, as their natural immunity is robust and their risk for severe disease or death is minimal. Furthermore, most children have now developed natural immunity to SARS-CoV-2."

84. Other, ***eminently*** qualified, experts concur, ***based on the evidence and data***, that there is no reason to "vaccinate" healthy children, that the "**[l]ong term safety of the current COVID vaccines in children cannot be determined**, * * * [they] **risk severe adverse events**, [**that] [h]ealthy, unvaccinated children are critical to achieving herd immunity** and that the known and potential risk of harm substantially outweighs any known or potential benefits of the "vaccine."[105] (Original emphasis)

85. Statistically, children have a ***zero risk*** of severe illness and death from the COVID virus. Despite this scientific fact, the FDA recently approved "vaccinations" for children ages 6 mos. to 5 years and "public service" advertisements soon followed targeting both children and their parents to get "vaccinated."[106] Subtly acknowledging this scientific fact, recently, the UK banned COVID-19 "vaccines" for healthy children under twelve years of age (12).[107]

86. And, despite this uncontroverted scientific data, the CDC Advisory Panel voted to add COVID-19 "vaccine"—an ***experimental drug***—to the recommended Childhood

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[104] https://globalcovidsummit.org/news/global-covid-summit-pediatric-declaration
[105] *Id*.
[106] U.S. Food and Drug Administration, FDA News Release, *Coronavirus (COVID-19) Update: FDA Authorizes Moderna and Pfizer-BioNTech COVID-19 Vaccines for Children Down to 6 Months of Age*, https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-moderna-and-pfizer-biontech-covid-19-vaccines-children
[107] The Vigilant Fox, *UK Government Bans COVID Shots for Children 11 Years Old and Younger*, (Sept. 7, 2022), https://thevigilantfox.substack.com/p/uk-government-bans-covid-shots-for

Immunization Schedule and, in February 2023, the CDC added it to the schedule.[108] This action is an "important first step in inclusion of the COVID-19 vaccines in a ***routine*** vaccination program" and insulates the pharmaceutical companies from liability for adverse reactions to the "vaccines."[109] (Emphasis added) *See*: 42 U.S.C. § 300aa-22. Additionally, many states rely on the CDC's Childhood Immunization Schedule in adopting "vaccine" requirements for school attendance, including attendance at daycares and private schools. Including the COVID-19 "vaccines" on the Childhood Immunization Schedule unnecessarily exposes children to a substantial risk of "vaccine" injury for no good reason.

87. The fact that the CDC has gone to such lengths to promote the ***mandatory*** inoculation of America's children shows that it has been corrupted and coopted by the pharmaceutical industry.

Unreliability of "Vaccine" Clinical Trials and the FDA's "Vaccine" Approvals

88. The Pfizer clinical trials of the COVID-19 "vaccines" were inadequate and tainted by fraudulent error. Contrary to popular belief, none of the "vaccine" clinical trials were designed to determine the effectiveness of the "vaccine" in preventing hospitalization or death or transmission of the virus as severe COVID-19 cases were so uncommon in the population studied as to render even a sample size in excess of 30,000 subjects too small to achieve a

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[108] *'Tragic': CDC Adds Original COVID mRNA Vaccine to Childhood Schedule Despite Known Harms* (02/10/23), https://childrenshealthdefense.org/defender/cdc-covid-mrna-vaccine-childhood-schedule/?eType=EmailBlastContent&eId=2cbc918a-8bc7-47ce-af80-70306725676d

[109] National Review, *CDC Panel Votes to Add COVID-19 Vaccine to Recommended Childhood Schedule*, (quoting Dr. Sara Oliver, member of CDC's Advisory Committee) (Oct. 19, 2022), https://www.nationalreview.com/news/cdc-votes-to-add-covid-19-vaccine-to-recommended-childhood-schedule/

statistically significant comparison.[110] Neither Pfizer nor the FDA nor any other federal health agency did anything to dispel this notion. Instead, they deceptively touted the 95% efficacy of the "vaccine" and millions of Americans lined up to get the jab laboring under the misimpression it would provide robust and complete immunity from COVID-19.

89. Pfizer, with full knowledge of the FDA, concealed, manipulated and falsified data on the safety and efficacy of the "vaccines" and their risks and benefits.

90. Astoundingly, unredacted documents released by court order showed ***over 158,000 adverse events*** in the first twelve (12) weeks of the rollout of the Pfizer "vaccine." (Ex. B, 5.3.6 Cumulative Analysis of Post-Authorization Adverse Event Reports at p.6)

91. According to the CDC, the vaccine licensing process is a lengthy one that "can take ten years or longer."[111] The FDA, however, completed the licensing process in months "by omitting most of the preclinical requirements, overlapping the Phase 1 – 3 trials, using so few pediatric subjects that serious safety issues are missed, and failing to review the vast majority of Phase 4 safety and efficacy data available to it in FDA's B.E.S.T. databases and elsewhere."[112]

92. On October 29, 2021, the FDA granted an Emergency Use Authorization (EUA) for Pfizer-BioNTech's COVID-19 "vaccine" for children ages 5-11,[113] even though this "vaccine" presents an imminent risk of harm to them without proportionate benefit. To justify this authorization, the FDA ignored, and even concealed, data showing severe short-term risks of

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[110] BMJ, *Covid-19 vaccine trials cannot tell us if they will save lives* (21/10/2020), https://www.bmj.com/company/newsroom/covid-19-vaccine-trials-cannot-tell-us-if-they-will-save-lives/

[111] Exhibit C (CHD Letter) at p. 13, ¶25, note 47 citing "U.S. Vaccine Safety: Overview, History and How the Process Works," Centers for Disease Control and Prevention last reviewed Sept. 9, 2020, https://www.cdc.gov/vaccinesafety/ensuringsafety/history/index.html.

[112] *Id*.

[113] FDA Authorizes Pfizer-BioNTech COVID-19 Vaccine for Emergency Use in Children 5 through 11 Years of Age, https://www.fda.gov/news-events/press-announcements/fda-authorizes-pfizer-biontech-covid-19-vaccine-emergency-use-children-5-through-11-years-age

COVID-19 "vaccination" for children and failed to acknowledge that its studies were too short in duration to reliably assess the long-term risk of severe and permanent injury.

93. The unreliability of the clinical trials was disclosed in an alarming report published by the British Medical Journal (BMJ) on November 2, 2021. The Journal reported information brought forward by whistleblower Brook Jackson, a regional director at Ventavia Research Group concerning Pfizer's Phase III clinical trials of the COVID-19 "vaccine." Ventavia is a privately owned clinical research company responsible for completing a portion of the clinical research upon which Pfizer, the FDA and the public relied in assessing the safety and efficacy of Pfizer's "vaccine."

94. According to Jackson, Ventavia "***falsified data, unblinded patients, employed inadequately trained vaccinators and was slow to follow-up on adverse events reported in Pfizer's pivotal Phase II trial***."[114] (Emphasis added) Jackson had gathered documentation demonstrating these problems were continuously occurring from shortly after the clinical trial began. She advised her supervisors of concerns she had with "poor laboratory management, patient safety concerns, and data integrity issues," and, when no action was taken, she called the FDA and filed a written complaint by email. That same day, Jackson was fired.[115]

95. The complaint Jackson emailed to the FDA set out a number of concerning practices she had witnessed: "lack of timely follow-up of patients who experienced adverse events;" "protocol deviations not being reported;" "vaccines not being stored at proper temperatures;"

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[114] Paul Thacker, *Covid-19: Researcher Blows the Whistle on Data Integrity Issues in Pfizer's Vaccine Trial*, available at https://www.bmj.com/content/375/bmj.n2635.full.print

[115] *Id*.

"mislabeled laboratory specimens;" and, "targeting of Ventavia staff for reporting these types of problems."[116] The FDA responded to her email, but failed to follow up or inspect Ventavia.[117]

96. After her discharge, Jackson brough a Qui Tam action against Pfizer under the False Claims Act. Pfizer moved to dismiss the case asserting the government knew of the fraud yet continued to make payments to Pfizer.[118] According to Jackson's lawyer, Pfizer asserted "the ***government was fully aware of the fraud*** being committed during the development of Pfizer's mRNA jab * * *" Pfizer's allegation of ***government involvement in the fraud*** indicates the purpose of the clinical trials and subsequent FDA approval was not to ensure safety and efficacy of a new experimental drug, but was done to convince the American people of the safety and efficacy of a "vaccine" that was never proven safe nor effective.

97. The pediatric clinical trials for the COVID-19 "vaccines" were too small (only 140 participants in the booster trial for 5 – 11 year olds) to effectively gauge safety and there is no means to gauge long-term safety of the "vaccine."[119] By definition, the COVID-19 "vaccines" are ***experimental drugs*** since they have not been tested long enough to assess long-term safety risks.

98. Further, the Pfizer shots for ages 5 – 11 years had demonstrably poor efficacy. According to the CDC, the efficacy was 31%[120] and a massive data base (New York Department

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[116] *Id*.
[117] *Id*.
[118] Gateway Pundit, *Can't Make This Up: Pfizer Asks Court to Dismiss Whistleblower Lawsuit Because the US Government Was Aware of Vaccine Fraud* (July 9, 2022), https://www.thegatewaypundit.com/2022/07/cant-make-pfizer-asks-court-dismiss-whistleblower-lawsuit-us-government-aware-vaccine-fraud/
[119] Ex. C (CHD letter) at p. 5
[120] Ashley L. Fowlkes, ScD, Sarang K. Yoon, DO, Karen Lutrick, PhD, et al., *"Effectiveness of 2-Dose BNT162b2 (Pfizer BioNTech) mRNA Vaccine in Preventing SARS-CoV-2 Infection Among Children Aged 5–11 Years and Adolescents Aged 12–15 Years—PROTECT Cohort, July*

of Health) of over 3.1 million children, 365,000 of whom were vaccinated, showed a drop in efficacy to 12% after seven weeks.[121] Within 8 weeks after receiving the second dose, the vaccine had negative efficacy (higher risk of developing COVID-19) among this age group.[122] In addition, since the rollout of the "vaccines" there has been an off-the-chart increase in mortality ("a 1 in 390,632,286,180 chance of occurring spontaneously"), including a dramatic increase in fatalities that are heart related.[123]

99. Current mRNA "vaccines" were formulated based on the original Wuhan strain of the virus [124] and have no efficacy against the current Omicron strains.[125] The safety and efficacy of the bivalent boosters are currently being ***tested*** on the general population (8 mice were the test subjects on which approval was based) with the imprimatur of the FDA.[126] Although the FDA

2021–February 2022," Centers for Disease Control and Prevention (MMWR) (Mar. 18, 2022), https://www.cdc.gov/mmwr/volumes/71/wr/mm7111e1 htm?s cid=mm7111e1 w.

[121] Vajeera Dorabawila, PhD, Dina Hoefer, PhD, Ursula E. Bower, PhD et al., "Effectiveness of the BNT162b2 Vaccine among Children 5-11 and 12-17 years in New York after the Emergence of the Omicron Variant," *medRxiv,* Feb. 28, 2022, https://www medrxiv.org/content/10.1101/2022.02.25.22271454v1.full.pdf.

[122] Vajeera Dorabawila, PhD, Dina Hoefer, PhD, Ursula E. Bower, PhD et al., "Risk of Infection and Hospitalization among Vaccinated and Unvaccinated Children and Adolescents in New York After the Emergence of the Omicron Variant," JAMA (2022), www.doi.org/10.1001/jama.2022.7319.

[123] The Epoch Times, Joseph Mercola, *Pfizer's Shots Aren't Safe and Were Never Shown to Be Germans Unleash Spike Protein Bombshell* (Dec. 27, 2022), https://www.theepochtimes.com/health/pfizers-shots-arent-safe-and-were-never-shown-to-be_4947190.html?src_src=Healthtop5&src_cmp=htop5-2023-01-01&est=wIeNTPSN%2F%2BDD9L7ZtymkoRdNFTNjw%2Bp3L7m9ZlC4oC4MDk%2FVLjqKAenBQzcnN51g

[124] Ex. C (CHD letter), at p. 2, ⁋2, citing Rui Wang, Jiahui Chen, Yuta Hozumi et al., "Emerging Vaccine-Breakthrough SARS-CoV-2 Variants," *ACS Infect Dis. 8*, no. 3 (2022), www.doi.org/10.1021/acsinfecdis.1c00557.

[125] The Defender, *FDA Risk-Benefit Analysis Hides 'Bad Data' on Moderna Shots for Kids* (06/13/22), https://childrenshealthdefense.org/defender/fda-eua-moderna-covid-vaccine-young-kids/?eType=EmailBlastContent&eId=fee61304-a3e2-40e3-b46f-9adae2dcd863

[126] World Council for Health, *"Updated" Covid-19 mRNA Injections Approved After Testing on 8 Mice and 0 Humans* (Sept. 6, 2022), https://worldcouncilforhealth.org/news/statements/bivalent-vaccines-approved/

has approved boosters, including the Moderna bivalent booster for ages 6 months and up, the boosters do little to protect against variants of the virus and wane quickly in efficacy.[127]

100. Long term side-effects from these experimental drugs are unknown and mass "vaccination" is driving variants that may be more virulent and deadly for all concerned ("vaccinated" and "unvaccinated.")[128] Excess mortality" has risen markedly since the "vaccines" were rolled out due mostly to ***double digit increases in the death rate*** among ***working age adults and children*** from 1 to 4 years of age.[129]

101. Although the "vaccine" clinical trials were supposed to run for three years, the FDA aborted the trials at six months and allowed Pfizer to unblind its study and "vaccinate" the control group.[130] By removing the control group prematurely, the FDA effectively concealed the long-term side effects of the "vaccine."

102. Pfizer claimed 95% efficacy of its COVID-19 "vaccine" and the FDA granted EUA for the "vaccine" based on efficacy alone and touted 95% efficacy in its sales pitch to the

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[127] *Id*.; U.S. Food & Drug Administration, *COVID-19 Bivalent Vaccine Boosters* (Content current as of 01/11/2023), https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-bivalent-vaccine-boosters; The Epoch Times, *New COVID-19 Vaccine Boosters Perform Poorly Against Symptomatic Infection: CDC Study* (Nov. 22, 2022), https://www.theepochtimes.com/new-covid-19-vaccine-boosters-perform-poorly-against-symptomatic-infection-cdc-study_4879371.html?src_src=Health&src_cmp=health-2022-11-24&est=TiMn%2F4fvU0sITqLNuE1nO1%2Bf0xqqdCViox3aZAkXbx1xZ9GD3TTbbSILTWX4QXdw

[128] The Epoch Times, *The COVID Jabbed Are Dying While Fueling Variants* (Jan. 10, 2023), https://www.theepochtimes.com/mkt_app/health/the-covid-jabbed-are-dying-while-fueling-variants_4974363.html?src_src=Health&src_cmp=health-2023-01-11&est=lVICNIIi4eVgX0H%2BmzR8wVoQXMtVUmy%2Ba8rhew4K4%2BgTlGV4kMxMnS9v2FIKRSec

[129] *Id*.

[130] NPR, *Long-Term Studies Of COVID-19 Vaccines Hurt By Placebo Recipients Getting Immunized* (February 19, 2021), https://www.npr.org/sections/health-shots/2021/02/19/969143015/long-term-studies-of-covid-19-vaccines-hurt-by-placebo-recipients-getting-immuni

American public. However, the claim was based on such a small sample size (only 170 cases of COVID-19 out of a total of over 40,000 clinical trial participants)[131] that it could not possibly provide a basis for extrapolating the efficacy of the "vaccine" to hundreds of millions of people.

103. As the "vaccine" does not prevent transmission of the COVID-19 virus, there is no rationale to justify mandating the vaccine to protect others.[132] Knowing this, Fauci nonetheless hailed the "vaccines" as ***the*** weapon that would end the pandemic and the CDC designated "vaccination" the key prevention strategy.

104. The FDA approved the vaccines even though the results of the trials were singularly unimpressive and the number of adverse events reported identified ***more than 500 safety signals*** and showed the vaccines presented a serious risk of severe outcomes and death that greatly outweighed the meager benefits from "vaccination." In Pfizer's review of adverse events reported after the FDA granted EUA for its "vaccine," a staggering 22% of patients had unknown outcomes, 35% were not recovered and 3.7% had died. (Ex. B, 5.3.6 Cumulative Analysis of Post-Authorization Adverse Event Reports, Table 1, p.7) Nonetheless, the Biden Administration pronounced the "vaccines" "safe and effective."

105. The CDC failed to review the VAERS data base for safety signals related to the COVID-19 "vaccines." [133] This is characteristically done for the purpose of comparing the proportion of different types of adverse events reported (PPRs) for the COVID-19 "vaccines" to

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[131] FDA, *Emergency Use Authorization (EUA) for an Unapproved Product Review Memorandum,* Table 6, p. 23, https://www.fda.gov/media/144416/download

[132] *Medical Professionals for Informed Consent v. Bassett*, New York State Supreme Court of Onondaga County, Index No.: 008575/2022, https://childrenshealthdefense.org/wp-content/uploads/2023-1-13-doc-86-decision-and-order.pdf

[133] The Defender, Children's Health Defense, News and Views, *29,031 Deaths, 240,022 Serious Injuries Reported to VAERS, as CDC Admits Not Monitoring System for Safety Signals,* https://childrenshealthdefense.org/defender/covid-vaccine-injuries-vaers-cdc-safety-signals/?eType=EmailBlastContent&eId=44f090bc-faaa-4b36-a715-4cf41dd52f3e

those reported for traditional vaccines. If the data shows an increase in adverse events for the COVID-19 "vaccine" compared to established vaccines, that raises a safety signal which requires further investigation. The CDC also lied about the Pfizer clinical trial results claiming the "vaccine" was 92% effective for those with evidence of prior COVID infection.[134]

The Damning of Safe, Effective Drugs for Off-Label Treatment of COVID-19

106. The decision to use a drug that is FDA approved is committed to the discretion of the treating physician and it is a common and well-established medical practice for physicians to prescribe FDA approved drugs for off-label use. The FDA may not ban an FDA approved drug or advise against the use of a drug for a particular purpose unless explicitly authorized to do so by Congress.

107. With regard to prescribing drugs for off-label use, the FDA has acknowledged that, "[g]ood medical practice and the best interests of the patient require that physicians use legally available drugs * * * according to their best knowledge and judgment."[135]

108. Although ivermectin is FDA approved, is cheap and effective, has been prescribed for decades and has a stellar safety record (safer than acetaminophen), the FDA has made it its mission to effectively ban the use of this and other drugs for off-label treatment (like hydroxychloroquine) by directing the public, health professionals and patients not to use them for prevention or treatment COVID-19.

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[134] Epoch Times, *How the FDA and CDC Are Hiding COVID Jab Dangers*, (Nov. 11, 2022), https://www.theepochtimes.com/health/how-the-fda-and-cdc-are-hiding-covid-jab-dangers_4857221.html?src_src=Health&src_cmp=health-2022-11-11&est=CNd7b7NlwEf4Zc%2FayiZCI2ITSux2v7Wx07T5QN5S8tpCsQBuuKJ2fVvIQN3smFGg

[135] "Off-Label and Investigational Use of Marketed Drugs, Biologics and Medical Devices,"FDA (May 6, 2020) https://www.fda.gov/regulatory-information/search-fda-guidance-documents/label-and-investigational-use-marketed-drugs-biologics-and-medical-devices.

109. As the authority to grant EUA for the "vaccines" is dependent on there being no adequate, approved and available alternative for diagnosing, ***preventing or treating***" COVID-19 [21 U.S.C. §360bbb-3(c)(2)(3)], and as the federal health agencies, and/or their officials and employees have a vested financial interest in the approval, marketing and sale of the "vaccines," there existed an ulterior motive for the FDA, CDC and NIH to deny the efficacy of generic alternatives and access to them.

110. If the public were to know that there were safe, effective, alternative drugs available for treatment of COVID-19, they would be much less inclined to take an ***experimental*** suboptimal, leaky "vaccine" that presents risks of serious adverse events, has a much more dangerous safety profile by far than generic alternatives and has shown to be far more dangerous than other FDA approved vaccines combined over the last 30 years.

111. The availability of safe and effective generic alternatives for prevention and treatment of COVID-19 presented a huge obstacle to the approval and marketing of the "vaccines" and the universal "vaccination" policy of the Biden Administration.

112. The FDA has taken the following unlawful, official, unequivocal action to prohibit or suppress the use of ivermectin:

A. Even though the FDA had admittedly failed to review data to support the use of ivermectin in treatment or prevention of COVID-19, it nonetheless published an article titled, "Why You Should Not Use Ivermectin to Treat or Prevent COVID-19."[136]

B. One of the FDA's Frequently Asked Questions (Ivermectin FAQs) is: "Q. Should I take ivermectin to treat or prevent COVID-19. A. No.[137]

[136] FDA (Dec. 10, 2021) https://www.fda.gov/consumers/consumer-updates/why-you-should-not-use-ivermectin-to-treat-or-prevent-covid-19.

C. On August 21, 2021, the FDA tweeted: "You are not a horse. You are not a cow. Seriously y'all. Stop it." The tweet is titled, "Why You Should Not Use Ivermectin to Treat or Prevent COVID-19" and includes a link to that publication.

D. On December 13, 2021, the FDA sent a letter to the President of the Federation of State Medical Boards and the National Association of Boards of Pharmacy encouraging the banning of ivermectin as a treatment for COVID-19. The letter its intended effect. It stopped physicians from prescribing the drug either out of deference to the FDA and their state medical boards (which deferred to the FDA) or out of fear of revocation of their license to practice medicine and it stopped pharmacies from filling prescriptions for the drug. (A copy of the letter is attached hereto, marked Exhibit E and incorporated by reference as if fully reproduced herein.) In its letter, the FDA claimed that, "currently available data do not show that ivermectin is ***safe or effective*** for the prevention or treatment of COVID-19" and that "as the agency has ***previously explained***, there are many side effects associated with ivermectin * * *" (Emphasis added) However, the safety of ivermectin is beyond dispute. The FDA concluded its letter by falsely claiming that, "Using ivermectin products in preventing or treating COVID-19 may pose risks to patient health or lead to delays in getting effective treatment of COVID-19. Drug products that claim to treat or prevent COVID-19 but are not proven safe and effective for those purposes can place consumers at risk of serious harm."

E. On April 26, 2022, the FDA tweeted: "Hold your horses, y'all. Ivermectin

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[137] FAQ: COVID-19 *and Ivermectin Intended for Animals,* FDA (April 26, 2021) https://fda/animal-veterinary/product-safety-information/faq-covid-19-and-ivermectin-intended-for-animals.

may be trending but it still is not authorized or approved for treatment of COVID-19." The tweet is titled, "Why You Should Not Use Ivermectin to Treat or Prevent COVID-19" and includes a link to that publication.

113. Even though a peer-reviewed study of 88,012 in Brazil found regular use of ivermectin decreased the risk of death from COVID-19 by 92%, the FDA refuses to recognize such observational studies, artificially requiring proof in a randomized clinical trial, an infeasibility for a study of this magnitude.[138] Employing this artifice, the FDA has excluded real-world data from its assessment of the effectiveness of ivermectin, falsely labeled it unsafe and ineffective in treatment of COVID-19 and recommended against its use, effectively damning it and all doctors who dare prescribe the drug. However, observational studies should not be dismissed as they have been shown to be as predictive as Randomized Controlled Trials (RCTs) in assessing safety and efficacy of a drug.[139]

114. The FDA has suppressed, obstructed and/or prevented the use ivermectin, a proven safe and effective intervention in treatment of COVID-19, through unlawful, ultra vires action by officially recommending against its use to the public as well as in correspondence to the Federation of State Medical Boards and the National Association of Boards of Pharmacy.

115. Hydroxychloroquine was likewise killed by the federal health agencies (the FDA, CDC, NIAID and NIH) by, among other things, employing the artifice of administering ***only hydroxychloroquine*** late in the disease process in clinical trials when it had been used successfully (***in conjunction with zinc and azithromycin***) as an ***early treatment*** regimen for

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[138] Blaze Media, *Ivermectin reduces COVID death risk by 92%, peer-reviewed study finds* (Sept. 3, 2022), https://www.theblaze.com/news/ivermectin-covid-treatment-new-study?utm_source=dlvr.it&utm_medium=twitter

[139] Cochrane Library, *Healthcare outcomes assessed with observational study designs compared with those assessed in randomized trials* (29 Apr 2014), https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.MR000034.pub2/full

COVID-19 and had been shown to be effective if administered ***with*** zinc and azithromycin during the ***early stages*** of COVID-19.[140]

116. Fauci, who insisted on RCTs to prove the safety and efficacy of drugs used off-label for treatment of COVID-19, cancelled two NIAID-sponsored ***out-patient trials*** of hydroxychloroquine before they were completed thus quashing what would have been favorable results of these trials given the extraordinary results achieved in front-line medical practice and observational studies.[141]

117. As a result of the FDA's actions and the pronouncements and guidance of the CDC, NIH and NIAID, physicians have been subjected to the revocation, or threatened revocation, of their license to practice medicine for prescribing ivermectin or hydroxychloroquine. On information and belief, it is for this reason that the overwhelming majority of physicians will not prescribe these drugs, hospitals prohibit their use and pharmacies will not fill prescriptions for them off-label in treatment of COVID-19.

118. The FDA, by its actions, has justified EUA of experimental gene therapy drugs for treatment of COVID-19, drugs the government misnames "vaccines," by denying patients access to safe and effective alternatives. It, along with the CDC, NIH and NIAID, has interfered in the physician-patient relationship for the purpose of furthering the Biden Administration's universal vaccination policy, a policy that will not only do nothing to eradicate the virus but will drive mutations that evade the "vaccine."

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[140] NIH, National Library of Medicine, PubMed, *COVID-19 outpatients: early risk-stratified treatment with zinc plus low-dose hydroxychloroquine and azithromycin: a retrospective case series study* (2020 Oct 26), https://pubmed.ncbi.nlm.nih.gov/33122096/

[141] BIOPHARMADIVE, *NIH ends key COVID-19 studies of hydroxychloroquine* (June 22, 2020), https://www.biopharmadive.com/news/nih-hydroxychloroquine-coronavirus-trial-halt/580270/

119. As a direct and proximate result of the FDA's actions and those of the CDC, NIH and NIAID in preventing, obstructing and/or suppressing early treatment therapeutics,[142] patients have been denied access to safe and effective drugs for early treatment of COVID-19 resulting in many unnecessary deaths which have padded the death toll numbers and stoked fear in the American public.[143]

120. Referencing the FDA's article, *"Why You Should Not Use Ivermectin to Treat or Prevent COVID-19,* the AMA, the American Pharmacists Association and the American Society of Health-System Pharmacists issued a joint statement "strongly oppos[ing] the ordering, prescribing or dispensing ivermectin to prevent or treat COVID-19 * * *"[144]

121. The FDA's unprecedented attack on ivermectin—and the doctors that prescribed it and the pharmacies that dispensed it—has influenced judicial rulings as well. Courts have relied on the FDA's pronouncements as persuasive evidence on the effectiveness of the drug and appropriate standards of care. *See: e.g., Smith v. West Chester Hosp.*, No. CV-2021-08-1206, 2021. The FDA's article, "Why You Should Not Use Ivermectin to Treat or Prevent COVID-19," has been considered by courts in determining a "deviation from accepted medical practices," an "essential element" of a claim for medical malpractice and, by implication, a basis

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[142] U.S. Food and Drug Administration, Coronavirus (COVID-9) *update: FDA Revokes Emergency Use Authorization for Chloroquine and Hydroxychloroquine* (June 15, 2020), https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-revokes-emergency-use-authorization-chloroquine-and

[143] Letter from Ron Johnson, U.S. Senator, et al. to Xavier Becerra, Secretary of Health and Human Services, et al., (October 5, 2021) https://www.ronjohnson.senate.gov/2021/10/sen-johnson-leads-colleagues-in-pressing-biden-administration-on-their-failure-to-make-early-treatment-options-available-to-the-american-people

[144] *AMA, APhA, ASHP Statement on Ending Use of Ivermectin to Treat COVID-19,* Am. Med. Ass'n (September 1, 2021) https://ama-assn.org/presscenter/press-releases/ama-apha-ashp-statement-ending-use-ivermectin-treat-covid-19

for disciplinary action against the physician. *D.J.C. for D.A.C. v. Staten Island Univ. Hosp.-Northwell Health,* 157 N.Y.S.3d 667, 673 (N.Y. Sup. Ct. 2021)

122. In addition to the FDA, the NIH has recommended against the use of ivermectin.[145] Banning, obstructing and suppressing use of cheap generic alternative drug treatments that are both safe and effective (like ivermectin) is a money-making proposition for the CDC, NIH, NAID and the officers and employees with patent rights who stand to gain financially with each dose of the "vaccine" or boosters purchased by the government and forced, by hook or crook, upon the American people.

Censorship and the Disinformation Campaign

Manipulation of Data to Induce Fear and Compliance

123. The early projections of the death toll from COVID-19 "built worse case scenarios that would ***never happen*** as a means of spurring leadership into action."[146] (Emphasis added) Although COVID-19 has always presented a ***negligible risk*** to the majority of the people (comparable to the seasonal flu for those under 70 years of age),[147] manipulation of death toll projections and counts and mortality rate (including the failure to recognize the great disparity in mortality rates between those under and over age 70 and those with comorbidities) spurred panic among the American people who have been consistently bombarded with ***disinformation*** over the course of the pandemic for the purpose of overcoming "vaccine hesitancy" and achieving the

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[145] NIH, *COVID-19 Treatment Guidelines* (12-06-22) at p, 364, https://files.covid19treatmentguidelines.nih.gov/guidelines/archive/covid19treatmentguidelines-12-06-2022.pdf

[146] The Lancet, "Revisiting the initial COVID-19 pandemic projections (March 01, 2021): https://www.thelancet.com/journals/lanmic/article/PIIS2666-5247(21)00029-X/fulltext

[147] The BMJ, *Rapid response to: The covid-19 elimination debate needs correct data* (06 October 2020), https://www.bmj.com/content/371/bmj.m3883/rr; The Defender, Children's Health Defense, *Risk of Dying From COVID Always Was 'Miniscule,' Regardless of Age* (11/02/22), https://childrenshealthdefense.org/defender/covid-miniscule-death-risk-cola/?eType=EmailBlastContent&eId=61483b7f-b9d9-4322-bad6-4e9175d7eef2

Biden Administration's goal of "universal vaccination,"[148] the achievement of which would—contrary to the Administration's assertions—do ***nothing*** to eradicate COVID-19.

124. The CDC publishes its COVID Mortality Data which counts anyone who died or were hospitalized ***with*** COVID as a death or hospitalization ***due to*** COVID with the result that both the mortality and hospitalization rate for COVID-19 are greatly exaggerated.[149] Additionally, using Relative Risk Reduction (RRR) ("vaccine" 95% effective) as the basis for gauging the effectiveness of the Pfizer "vaccine" was patently misleading and duped the public and their doctors into believing "vaccination" would prevent infection in 95 out of 100 people vaccinated.[150] "The actual difference in absolute risks of a ***positive test result*** between the vaccinated and the unvaccinated group is 0.84 percent rather than 95 percent, which is what the public assumed."[151] (Emphasis added) Using Absolute Risk Reduction (ARR), only 1 in 199 "vaccinated" people would be protected from infection.

125. This blatant manipulation of data and reporting constituted material misrepresentations of fact and was done for the purpose of overriding ***informed consent*** to

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[148] The Epoch Times, *Prominent CNN Doctor Concedes US Has Been 'Overcounting' COVID-19 Deaths* (Jan. 18, 2023), https://www.theepochtimes.com/mkt_app/prominent-cnn-doctor-concedes-us-has-been-overcounting-covid-19-deaths_4994546.html?src_src=News&src_cmp=breaking-2023-01-19-1&est=iVYNP1Cn%2F2wSIpShT3VdEc5Qg42XuYb%2Bu09dySOx8NkQWoODvsgmrN34PQFhLllW

[149] Ex. C (CHD) Letter at p. 10, ⁋19. "Deaths ***involving*** COVID-19." (Emphasis added) https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Age-in-Years-/3apk-4u4f

[150] Epoch Health, *Doctor Who Promoted COVID Shots on TV Calls for Global Stop to COVID-19 Vaccines: Study*, (Sep 29, 2022); https://www.theepochtimes.com/doctor-who-promoted-covid-shots-on-tv-calls-for-global-stop-to-covid-19-vaccines-study_4762728.html?src_src=Health&src_cmp=health-2022-10-01&est=RXFUsEagNebJxxFXwx%2Bid9IcWEZ4ka9bEIM%2F319bpi7hHjma1L5hjVt7a65W4LvL; NIH National Library of Medicine, *Relative risk reduction: Misinformative measure in clinical trials and COVID-19 vaccine efficacy*, https://pubmed.ncbi.nlm.nih.gov/36785641/

[151] *Id.*

treatment. By misrepresenting the effectiveness of the "vaccines" and the danger posed by the virus, the government used fear and a false promise of redemption to overcome "vaccine" hesitancy and promote its universal "vaccination" policy.

126. Fear is a very powerful weapon in the arsenal of the government propaganda/disinformation machine and, when coupled with material misrepresentations of the safety and efficacy of the "vaccines" from ***trusted*** governmental authorities, cripples the ability of the public and medical professionals alike to provide informed consent to treatment ("vaccination.") "Infectious diseases are a particularly salient source of fear because they are transmissible, imminent, and invisible, and the COVID-19 pandemic has become a source of fear across the world."[152]

127. Network news and most cable outlets have used death toll reporting (based on data from federal health agencies) to champion universal "vaccination" and condemn the "unvaccinated" for the purpose of furthering the Biden Administration's vaccine-centric COVID-19 policy.[153] Biden has publicly praised the "vaccines" ***falsely claiming*** they are the one thing that will eradicate the virus and urges all American to do their "***patriotic duty*** to keep [their] country safe, to ***protect yourself and those around you***, and to honor the memory of all those we have lost."[154] (Emphasis added)

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[152] BMC Medical Research Methodology, *Instruments to measure fear of COVID-19: a diagnostic systematic review*, Ashley Elizabeth Muller, Jan Peter William Himmels & Stijn Van de Velde https://bmcmedresmethodol.biomedcentral.com/articles/10.1186/s12874-021-01262-5

[153] Cato Institute, "*COVID-19 Deaths and Incredible WHO Estimates"* (March 4, 2020) https://www.cato.org/blog/covid-19-deaths-incredible-who-estimates; CNN Health, "*1 of every 500 US residents have died of COVID-19*" (Sept. 16, 2021) https://www.cnn.com/2021/09/15/health/us-coronavirus-wednesday/index.html;

[154] ABC News, *'A defining tragedy': US COVID death toll eclipses 800,000 as winter surge intensifies* (Dec. 14, 2021) https://abcnews.go.com/Health/defining-tragedy-us-covid-death-toll-eclipses-800000/story?id=81629972

128. The damning of the "unvaccinated" as unpatriotic Americans responsible for the loss of life from COVID-19 has been the hallmark of the "universal vaccination" messaging coming from President Biden (who has called the COVID-19 pandemic "a pandemic of the unvaccinated.")[155]

129. In addition to blatantly exaggerating the death toll from COVID, the government has, for the purpose of inducing fear and "persuading" Americans to get "vaccinated," exaggerated the number of Americans infected with COVID. To wit: it has used PCR tests to track the number of COVID cases and made the administration of such tests part of the treatment protocol for ***every*** hospital admission ***knowing*** the tests are inherently unreliable and generate an exaggerated number of false positives and promoted a ***non-peer reviewed study*** that significantly inflated the number of deaths of children fromCOVID-19.[156] The CDC ***manipulated*** the statistics to ***boost*** COVID-19 so that it ranked among the top five causes of death in children.[157]

130. This inflated ranking—bolstered by the knowingly false representation that "vaccination" would prevent transmission of the virus—was then used to promote "vaccination" of children.[158] Comparing the corrected number of deaths (1,088) linked to COVID-19 to the

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[155] CNN (Sept. 24, 2021) https://edition.cnn.com/us/live-news/coronavirus-pandemic-vaccine-updates-09-24-21/h_0f8fab1a204b09d660a23aa3c1e32954

[156] European Uniion Times, *WHO Admits COVID PCR Tests Unreliable but Reported Them Anyway* (December 30, 2020) https://www.eutimes.net/2020/12/who-admits-covid-pcr-tests-unreliable-but-promoted-them-anyway/ ; Brightwork Research & Analysis, *Understanding the PCR Test and How There Was Never a Reliable Test for COVID* (November 5, 2021, updated January 20, 2022) https://www.brightworkresearch.com/understanding-the-pcr-test-and-how-there-was-never-a-reliable-test-for-covid/; The Epoch Times, *Authors Correct Study That Inflated Child COVID-19 Deaths After CDC Officials Promoted It* (July 5, 2022), https://www.theepochtimes.com/authors-correct-study-that-inflated-child-covid-19-deaths-after-cdc-officials-promoted-it_4578012.html

[157] The Epoch Times, *Authors Correct Study That Inflated Child COVID-19 Deaths After CDC Officials Promoted It* (July 5, 2022), https://www.theepochtimes.com/authors-correct-study-that-inflated-child-covid-19-deaths-after-cdc-officials-promoted-it_4578012.html

[158] *Id*.

number of serious adverse events or death reported in VAERS (over 2200 serious adverse events and 54 deaths), suggests there is a much greater risk of harm from the "vaccinations" than death from COVID-19 in children especially since VAERS historically severely underreports the number of vaccine adverse events.[159] "Of the 13,547 U.S. deaths reported in VAERS as of July 1, ***15%*** occurred ***within 24 hours*** of vaccination, ***19%*** occurred ***within 48 hours*** of vaccination and ***58%*** occurred in people who experienced an ***onset of symptoms within 48 hours*** of being vaccinated."[160] (Emphasis added) Also lost in media reporting was the fact that the ***average age of death*** from COVID was ***73 years***.[161]

131. A new study currently undergoing peer review and led by Dr. John Ioannidis, professor of Medicine and Epidemiology at Stanford University, found that the average Infection Fatality Rate (IFR) from COVID-19 is estimated to be just 0.035% for people age 0 – 59 years and 0.095% for people age 0 – 69 years. The IFR for people age 0 – 19 years was found to be just 0.0003%.[162]

132. In addition to manipulating and misrepresenting data, the CDC manipulated the very definition of "vaccine." On May 28, 2021, the CDC reported COVID-19 breakthrough infections.[163] On May 2021, it was highly publicized that nine fully" vaccinated" members of the

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[159] *Id*.; The Defender, *More Than 1.3 Million Adverse Events Following COVID Vaccines Reported to VAERS, CDC Data Show*, (July 8, 2022) https://childrenshealthdefense.org/defender/1-3-million-adverse-events-covid-vaccines-vaers-cdc-data-show/

[160] *Id*.

[161] *Id*.

[162] The Defender, Children's Health Defense, *COVID Wasn't Nearly as Deadly as We Thought, Study Shows,* (10/20/22), https://childrenshealthdefense.org/defender/covid-less-deadly-non-elderly/

[163] CDC, Morbidity and Mortality Weekly Report (MMWR), *COVID-19 Vaccine Breakthrough Infections Reported to CDC — United States, January 1–April 30, 2021* (May 28, 2021, https://www.cdc.gov/mmwr/volumes/70/wr/mm7021e3.htm

New York Yankees organization had breakthrough infections.[164] In August 2021, there were a number of news reports of celebrities who were fully "vaccinated" becoming infected.[165] And, in early September 2021—after it became apparent to the CDC that information was in the public domain that the vaccine ***did not prevent infection or transmission*** of COVID-19—[166]the CDC changed the definition of "vaccine" from its traditional and ordinarily understood meaning.[167]

133. When the "vaccines" were first introduced, the CDC defined "vaccine" as "a product to stimulate a person's immune system to produce immunity to a specific disease." The new definition deleted the word immunity and defined a "vaccine" "as a preparation used to stimulate a body's immune response to a disease." The definition of "vaccination" was also changed from "the act of introducing a vaccine into the body to produce ***immunity***" to "the act of introducing a vaccine into the body to produce ***protection***." (Emphasis added) The obvious purpose was to account for the highly publicized failure of the "vaccines" to produce immunity—and prevent transmission—yet retain use of the word "vaccine" in messaging to the American people—who would interpret it in the traditional, ordinary sense of the word and

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[164] CNN Health, *New York Yankees' breakthrough infections demonstrate the Covid-19 vaccine works. Here's why* (May 21, 2021), https://www.cnn.com/2021/05/20/health/yankees-covid-19-breakthrough-infections/index.html

[165] People, *Hilary Duff Reveals She Contracted a Breakthrough Case of COVID: 'Happy to be Vaxxed'* (Aug. 20, 2021), https://people.com/health/hilary-duff-reveals-she-contracted-a-breakthrough-case-of-covid-happy-to-be-vaxxed/

[166] Miami Herald, *Why did CDC change its definition for 'vaccine'? Agency explains move as skeptics lurk*, https://www.miamiherald.com/news/coronavirus/article254111268.html#storylink=cpy; The Epoch Times, *Emails Confirm Why CDC Changed Definitions of Vaccine, Vaccinated*, (Jul 11, 2022), https://www.theepochtimes.com/emails-confirm-why-cdc-changed-definitions-of-vaccine-vaccinated_4590628.html

[167] CNS News, *CDC's Definition of 'Vaccine' Has Changed Over Time: 'Protection' vs. 'Immunity'* (Jan. 25, 2022) https://www.cnsnews.com/article/national/susan-jones/cdcs-definition-vaccine-has-changed-over-time-protection-vs-immunity; MU Health Care, *What You Need to Know about COVID-19 'Breakthrough Infections'* (September Sept. 13, 2021 updated 07/13/2022), https://www.muhealth.org/our-stories/what-you-need-know-about-covid-19-breakthrough-infections

consider it to be in the same class of proven effective vaccines like the Polio and measles vaccines.

134. Thus, a product that confers neither immunity nor protection was sold to the American people as a "vaccine," a much more attractive characterization of the product than the gene therapy it was. In fact, the head of Bayer's pharmaceutical department acknowledged the "vaccines" are not vaccines, but a gene therapy.[168] "He smugly stated that the drug companies knew the people would reject the vaccine if it was in fact a gene-altering injectable" and postulated 95% of the American people would have rejected it if it had been called what it really is.[169]

135. This change in definition of vaccine was designed to mislead the American people into believing they would be immune from infection from COVID-19 and would not transmit the virus if they were "vaccinated,"[170] was done for the purpose of overcoming "vaccine" hesitancy and facilitating the universal "vaccination" policy of the Biden Administration.

136. For a period of nine months prior to the CDC changing the definition of vaccine in response to the publicity of breakthrough infections, both the CDC and FDA sold the "vaccines" as true vaccines with sterilizing immunity—a misrepresentation that has been engrained on the American psyche, a fact acknowledged by the CDC itself. In response to questions regarding the changing of the definition, the CDC stated "There ***remains the misconception*** that COVID-19 vaccines were designed to prevent infections altogether, leading people to believe the vaccines aren't working as they should when they learn about breakthrough infections among the

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[168] Armstrong Economics, *Bayer Head Admits COVID-19 Vaccine is Gene Therapy*, *https://www.armstrongeconomics.com/world-news/corruption/bayer-head-admits-covid-19-vaccine-is-gene-therapy/*

[169] *Id.*

[170] *Id.*

vaccinated. But the coronavirus vaccines are doing ***exactly*** what they were designed to do, which is to ***prevent severe disease***, including the need for hospitalization, and death * * *" (Emphasis added)[171]

137. Thus, it was high profile breakthrough infections that forced the FDA, CDC, NIH, NIAID, Fauci and others to withdraw the false claim of sterilizing immunity and replace it with the claim that the "vaccines" reduced risk of severe illness, hospitalization and death.[172]

138. Further, the FDA classifies the "vaccines" as "CBER-Regulated Biologics" (therapeutics/treatments) which falls under the "Coronavirus Treatment Acceleration Program."[173] Thus, the "vaccines" meet the criteria for gene therapy technologies under FDA guidelines and CDC statements reflect the CDC considers that the ***vaccines are indeed therapeutics*** of waning efficacy and benefit as the CDC's has retracted the claim that the "vaccines" prevent infection and transmission of the virus and has admitted they wane rapidly in effectiveness.[174]

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[171] *Why did CDC change its definition of 'vaccine'? Agency explains move as skeptics lurk* https://www.miamiherald.com/news/coronavirus/article254111268.html; Read more at: https://www.miamiherald.com/news/coronavirus/article254111268.html#storylink=cpy; *CDC's Definition of Vaccine Has Changed Over Time: 'Protection' vs. 'Immunity'* https://www.cnsnews.com/article/national/susan-jones/cdcs-definition-vaccine-has-changed-over-time-protection-vs-immunity; Real Clear Politics *CDC Director: Vaccines No Longer Prevent You From Spreading Covid* (August 6, 2021) https://www.realclearpolitics.com/video/2021/08/06/cdc_director_vaccines_no_longer_prevent_you_from_spreading_covid.html#!; New York Post, *CDC walks back claim that vaccinated people can't carry COVID-19* (April 2, 2021) https://nypost.com/2021/04/02/cdc-walks-back-claim-that-vaccinated-people-cant-carry-covid/

[172] *Id*.

[173] FDA, *Coronavirus (COVID-19) | CBER-Regulated Biologics*, https://www.fda.gov/vaccinesblood-biologics/industry-biologics/coronavirus-covid-19-cber-regulated-biologics (last visited March 1, 2022); *See also*, FDA, *Coronavirus Treatment Acceleration Program (CTAP)*, https://www.fda.gov/drugs/coronavirus-covid-19-drugs/coronavirus-treatment-accelerationprogram-ctap (last visited March 1, 2022).

[174] Real Clear Politics *CDC Director: Vaccines No Longer Prevent You From Spreading Covid* (August 6, 2021)

139. In addition, although these ***novel, experimental drugs*** were approved under ***EUA***, they have deceptively been marketed as "mature products with well-known safety profiles."[175] The "vaccines" are in fact novel gene therapy products that had never been widely used on the general population—until now. In an SEC filing "[i]n late 2018, Moderna acknowledged that its mRNA products are a ***gene therapy***."[176] (Emphasis added)

140. "Universal vaccination" has been pushed upon the American people as a means to eradicate a virus that simply ***cannot*** be eradicated by "vaccination."[177] Fauci recently co-authored an article in which he asserted respiratory "vaccines" like the ***COVID-19 "vaccine"*** are ***problematic*** to start with and ***likely do not or cannot work.***[178] Further, the current Omicron versions of the virus are akin to a "mild cold or flu-like illness" for the overwhelming majority of people.[179]

141. Not only have the government defendants manipulated data to induce fear and drive the public to get "vaccinated," they have fabricated claims as to the lethality of COVID. For

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https://www.realclearpolitics.com/video/2021/08/06/cdc_director_vaccines_no_longer_prevent_you_from_spreading_covid.html#!; New York Post, *CDC walks back claim that vaccinated people can't carry COVID-19* (April 2, 2021) https://nypost.com/2021/04/02/cdc-walks-back-claim-that-vaccinated-people-cant-carry-covid/

[175] TrialSite News, *FDA Uses Little Girl to Market Moderna and Pfizer Bivalent Booster Jabs—Crosses a Line Yet Again* (Nov. 30, 2022), https://www.trialsitenews.com/a/fda-uses-little-girl-to-market-moderna-and-pfizer-bivalent-booster-jabscrosses-a-line-yet-again-8f2f8b86

[176] *Id*.; The Epoch Times, *Is the Associated Press Lying About Gene Therapy Shots?* (Jan. 12, 2023), https://www.theepochtimes.com/mkt_app/health/is-the-associated-press-lying-about-gene-therapy-shots_4980213.html?src_src=Health&src_cmp=health-2023-01-13&est=5HEYAmqItOfvl7wcUYml44T6T3JyEHgQJ6cm0lkRvT%2Fy5pxNuvP8CVQQVduio4nd

[177] *Id*.

[178] Cell Host and Microbe, *Rethinking next-generation vaccines for coronaviruses, influenza viruses, and other respiratory viruses* (Jan. 11, 2023) https://www.cell.com/cell-host-microbe/fulltext/S1931-3128(22)00572-8

[179] *Id*.

example, without any data whatsoever to support its claim, the CDC warned the public that COVID-19 was one of the top 10 causes of death in children ages 5 -11.[180]

142. Scientific and medical journals have also refused to publish peer reviewed articles authored by doctors and scientists which contradict the ***government science*** and challenge government policies on COVID-19. Even published peer-reviewed articles have been taken down and withdrawn from public view.

143. Regarding safety of the "vaccines," there is a significant underreporting of adverse events as doctors are under enormous pressure ***not*** to attribute vaccine-induced adverse events to the "vaccine."[181] Further, the spike protein in the mRNA injection is cardio-toxic and has been shown to cause heart damage that can go undetected and lead to sudden cardiac death.[182] The "unvaccinated" are not getting myocarditis and a study of 23 million people clearly showed that the more "vaccine" injections a child has, the greater the risk of myocarditis.[183] COVID-19 infection has been shown ***not*** to cause increased risk of myocarditis, so the excess cases of

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[180] The Epoch Times, *How the FDA and CDC Are Hiding COVID Jab Dangers*, (Nov. 11, 2022), https://www.theepochtimes.com/health/how-the-fda-and-cdc-are-hiding-covid-jab-dangers_4857221.html?src_src=Health&src_cmp=health-2022-11-11&est=CNd7b7NlwEf4Zc%2FayiZCI2ITSux2v7Wx07T5QN5S8tpCsQBuuKJ2fVvIQN3smFGg

[181] The Epoch Times, *'Anecdotals' Documentary, A glimpse into the lives of people who have suffered significant adverse reactions* (Jan. 15, 2023), https://www.theepochtimes.com/mkt_app/health/anecdotals-documentary_4986677.html?src_src=Health&src_cmp=health-2023-01-16&est=vI0JYlnyHwBEvJoWVlo3oTMl5OMl9GM8HExY33h2KWXHFovGnSpq2EOsvL32J0RB

[182] CHD.TV, *Death, Destruction + A Legal Win* (Jan. 27, 2023), Dr. Kirk A. Milhoan, M.D,, PhD at 7:30 – 9:04, https://live.childrenshealthdefense.org/chd-tv/shows/friday-roundtable/death-destruction--a-legal-win/

[183] *Id*. at 12:21 – 13:06; MDPI, Journal of Clinical Medicine, *The Incidence of Myocarditis and Pericarditis in Post COVID-19 Unvaccinated Patients—A Large Population-Based Study* (25 Mar 2022), https://www.mdpi.com/2077-0383/11/8/2219

myocarditis since the rollout of the COVID-19 "vaccine" is attributable solely to the "vaccine."[184]

Conspiring with the Media to Censor and Discredit Opposing Views and Information

144. Under the guise of fighting misinformation, the Biden Administration has teamed up with media outlets and social media companies to "fact-check" and censor any information on COVID-19 and ban users from social media sites who spread "misinformation."[185] White House officials are in frequent contact with social media companies and notify them about posts that allegedly spread misinformation (scientific studies and opinions that differ from, undermine or are critical of, the pronouncements and guidance of the federal health agencies)[186] and the great majority of the media have not only refused to provide air time to these experts and their opinions, but, have colluded with the Biden Administration to attack and discredit them. See: *Malone v. WP Company, LLC*[187], a defamation action brought by *Malone*, a vocal critic of government COVID-19 policies, against the *Washington Post* for publication of false statements insinuating Malone is "disreputable," "dishonest," "dangerous," a spreader of "lies and misinformation" and "engages in fraud and disinformation."

145. Social media companies "operate '"the modern public square * * *"' *NetChoice L.L.C., et al. v. Paxton*, No. 21-51178, 11 (5th Cir. 2022) *Packingham v. North Carolina*, 137 S. Ct. 1730, 1737 (2017). Censoring speech on these platforms has a substantial effect on the

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[184] MDPI, Journal of Clinical Medicine, *The Incidence of Myocarditis and Pericarditis in Post COVID-19 Unvaccinated Patients—A Large Population-Based Study* (25 Mar 2022), https://www.mdpi.com/2077-0383/11/8/2219

[185] Newsweek, *Biden Administration's Admission They're Flagging Content to Facebook Sparks Furor* (7/15/21) https://www.newsweek.com/biden-administrations-admission-theyre-flagging-content-facebook-sparks-furor-1610257

[186] *Id.*

[187] https://static1.squarespace.com/static/61910a2d98732d54b73ef8fc/t/62ff8fb8c5c0245654e5f02e/1660915642244/WaPo+Suit+August+19%2C+2922+blanked+personal.pdf

public interest as it inhibits free expression, exacting an injury, not only the speaker '"* * * but society as a whole, which is deprived of an uninhibited marketplace of ideas.'" *Id*. at 11, 12 quoting V*irginia v. Hicks*, 539 U.S. 113, 119 (2003) (citation omitted) This is especially so where, as here, scientific debate, an essential element in the development of sound scientific principles, is stifled on matters affecting serious public health concerns and adversely impacts the long-established principle of informed consent to treatment.

146. The Advisory published by the U.S. Surgeon General in July 2021 "[detailed] steps that tech outlets, private citizens, government and media outlets can take to battle misinformation when they come across it."[188] The Surgeon General issued the Advisory "calling health misinformation an '"urgent threat,'" and [urged] tech and social media platforms to redesign algorithms to reduce misinformation amplification and to bolster their monitoring of it."[189] The Advisory states that, "Misinformation has caused confusion and led people to ***decline COVID-19 vaccines***, reject public health measures such as masking and physical distancing, and use ***unproven treatments***," the obvious reference here being to drugs like ivermectin and hydroxychloroquine which the FDA has effectively damned.[190] (Emphasis added) The Advisory

[188] U.S. Department of Health and Human Services, Office of the U.S. Surgeon General, Confronting Health Misinformation, https://www.hhs.gov/surgeongeneral/priorities/health-misinformation/index.html; https://www.hhs.gov/sites/default/files/surgeon-general-misinformation-advisory.pdf

[189] The Hill, *Surgeon general demands data on COVID-19 misinformation from major tech firms* (03/03/22), https://thehill.com/policy/healthcare/596709-surgeon-general-demands-data-on-covid-19-misinformation-from-major-tech/; *The Hill, Surgeon general issues health misinformation advisory amid vaccination push* (07/15/21), https://thehill.com/policy/healthcare/563139-surgeon-general-issues-advisory-warning-of-health-misinformation-amid/

[190] U.S. Department of Health and Human Services, Office of the U.S. Surgeon General, *Confronting Health Misinformation,* https://www.hhs.gov/surgeongeneral/priorities/health-misinformation/index.html; https://www.hhs.gov/sites/default/files/surgeon-general-misinformation-advisory.pdf.

noted that, "a recent study showed that even brief exposure to COVID-19 vaccine misinformation made people less likely to want a COVID-19 vaccine."

147. The Surgeon General's "guidance" to media outlets states that they should *"[g]ive readers a sense of where the scientific community stands and how strong the available evidence is for different views*," relying on ***federal and state health officials and their anointed spokespersons as the only authoritative and credible sources of information***. (Original emphasis) Thus, federal and state health officials are made ***arbiters of truth*** and any view contrary to the official government position, the media dutifully labels misinformation.

148. The Surgeon General's "guidance" to tech outlets includes the following:

A. Redesigning algorithms to reduce the sharing of "misinformation." (Shadow banning)

B. "**Prioritize early detection of misinformation "super-spreaders" and repeat offenders * * *** and impose clear consequences for accounts that repeatedly violate platform policies"—including banning users from the platform. (Original Emphasis)

C. "**Prioritize protecting health professionals"** and others "from harassment resulting from people believing in misinformation."[191] (Original emphasis)

149. These "guidelines" carried special weight due to the perceived, implicit or explicit threat of revocation of immunity from liability under the Section 230 of the Community Decency Act (47 U.S.C. §230(c)(1) or the specter of antitrust enforcement, regulations and penalties.

150. Jen Psaki made numerous statements calling for censorship and banning of individuals spreading COVID "misinformation" from social media platforms, making it clear the

[191] *Id.*

Biden Administration considered it imperative that these companies take action.[192] "Biden has blamed misinformation for stalling U.S. vaccine rates, and suggested, 'they're killing people,' when asked what his message was to the social networks for allowing misleading claims to spread."[193]

151. The Second Amended Complaint in *Missouri, et al. v. Biden, et al.* sets out ***details of an extensive censorship operation***—one forged by the government using threats of unfavorable action (repeal of Section 230 of the Communications Decency Act (DCA) and anti-trust action)—that rises to the highest levels of government wherein the federal health agencies and major social media companies colluded and/or conspired to suppress any information on COVID-19 that ran contrary to the Biden Administration's narrative, particularly claims involving the lack of efficacy of masking and the safety and efficacy of the "vaccines" which could lead to "vaccine" hesitancy.[194]

152. The social media companies got the message and began working closely with officials in the federal health agencies to censor and suppress so-called "misinformation," ban "misinformation super spreaders" from their platforms and even trained HHS officials/employees, provided them privileged access to censorship tools and reported the results

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[192] Forbes, *Misinformation: The White House And Jen Psaki Didn't Actually Call For Censorship Of Social Media*, (June 17, 2021) https://www.forbes.com/sites/petersuciu/2021/07/16/misinformation-the-white-house-and-jen-psaki-didnt-actually-call-for-censorship-of-social-media/?sh=6156d5f85b39; New York Post, *Psaki calls for censorship of Instagram, Facebook: 'Too much power'* (September 24, 2021) https://nypost.com/2021/09/24/psaki-calls-for-censorship-of-instagram-facebook/; Fox News, *Twitter explodes after Psaki urges Big Tech to unite on bans for 'misinformation' spreaders*, https://www.foxnews.com/media/twitter-psaki-big-tech-unite-bans-misinformation

[193] *Id.*, Forbes, *Misinformation: The White House And Jen Psaki Didn't Actually Call For Censorship Of Social Media*, (June 17, 2021)

[194] *Missouri, et al. v. Biden, et al.*, Case 3:22-cv-01213-TAD-KDM Document 84 Filed 10/06/22 Page 1 of 164 PageID #: 3127, Second Amended Complaint, ⁋⁋10, 248 – 253, 277 – 278, 299, 312 – 316, 341 – 363, 365, 368 – 378, 461, 463, https://nclalegal.org/wp-content/uploads/2022/10/Second-Amended-Complaint-Missouri-v.-Biden.pdf

of their efforts regularly.[195] The methods of censorship include, among other things, permanent or temporary bans, "shadow banning," warning labels on "objectionable" content, the permanent or temporary de-platforming of speakers, removing posts and videos, demonetization, and "deboosting search results to bury the most relevant results * * *"[196]

153. Psaki, in a not so veiled threat to social media companies, implied there could be action taken by the Biden Administration to sponsor legislation to reign in the companies that were allowing the spread of misinformation on COVID-19.[197] In "[h]er further push for censorship," she called misinformation on COVID-19 harmful as it resulted in vaccine hesitancy and recognized the importance of media coverage elevating this problem as a means to reign in the companies without following through on the threat of Congressional action.[198]

154. In March 2022, the Surgeon General followed up with a "notice" to social media companies requesting they provide data relating to COVID-19 "misinformation," stating that '"[t]echnology companies now have an opportunity to be open and transparent with the American people about the misinformation on their platforms * * * This is about protecting the nation's health.'"[199]

155. Fauci directly collaborated with social media platforms to censor and ban public health advocates, censor physicians who reported vaccine failures, injuries and deaths and to

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[195] *Id*. at ⁋⁋252, 253, 343, 365, 480
[196] *Id*. at ⁋473
[197] *Id.*, New York Post, Psaki *calls for censorship of Instagram, Facebook: 'Too much power'*
[198] *Id*.
[199] Judicial Watch, Press Releases, *Judicial Watch Sues Health and Human Services for Surgeon General Office Contact with Big Tech about COVID Vaccines* (Jan. 27, 2023), https://www.judicialwatch.org/jw-sues-hhs/; The Hill, *Surgeon general demands data on COVID-19 misinformation from major tech firms* (03/03/22), https://thehill.com/policy/healthcare/596709-surgeon-general-demands-data-on-covid-19-misinformation-from-major-tech/

silence people who reported their own vaccine injuries.[200] According to the Defender, journalist David Zweig, in his review of The Twitter files, concluded "'Twitter rigged the COVID debate'" by censoring true statements under the guise of misinformation because the statements "'were inconvenient to U.S. [government] policy,"' "'discrediting doctors and other experts who disagreed,"' and "suppressing ordinary users * * *"'[201] The censorship often occurred with direct U.S. government involvement.

156. Dr. Robert Malone a, world renowned and highly credentialed vaccine scientist who was a leading contributor in development of mRNA, the delivery system for the COVID-19 "vaccines," was permanently suspended (banned) from Twitter and LinkedIn for spreading "vaccine" "misinformation" following the "guidelines" of the U.S. Surgeon General and, on information and belief, direction from the White House.[202]

157. Alex Berenson sued Twitter for permanently suspending him from its platform shortly after Biden publicly accused social media companies of killing people by allowing the spread of misinformation.[203] Twitter employees had privately met with Biden's COVID-19 response team four months prior and were asked "one really tough question about why Alex

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[200] Yahoo, *Republicans press Facebook for documents on COVID-19 origins, 'censorship' and Fauci emails*, https://www.yahoo.com/now/republicans-press-facebook-documents-covid-230200549.html; Leopold, NIH FOIA: Anthony Fauci Emails, pp. 2065 – 2068 https://s3.documentcloud.org/documents/20793561/leopold-nih-foia-anthony-fauci-emails.pdf

[201] The Defender, Children's Health Defense, Latest 'Twitter Files' Reveal Biden Officials Colluded With Twitter on Widespread Censorship of Medical Experts (01/03/23), https://childrenshealthdefense.org/defender/twitter-files-biden-officials-collusion-censorship/?eType=EmailBlastContent&eId=93e70c60-5c27-49fe-85b1-69965f630a0c

[202] The Western Journal, *Scientist Behind mRNA Lost His Platform After Twitter Censorship, But Days Later, Speaks to Millions,* (December 31, 2021); The Epoch Times, *LinkedIn Deletes Account of mRNA Vaccine Pioneer Who Questioned Risks of COVID-19 Shots,* Updated July 3, 2021, https://www.theepochtimes.com/linkedin-deletes-account-of-mrna-vaccine-pioneer-who-issued-warning-about-risks_3884669.html

[203] Blaze Media, *Alex Berenson claims Biden administration pressured Twitter to ban him, reveals damning evidence from lawsuit against big tech giant,* (August 13, 2022) https://www.theblaze.com/news/alex-berenson-biden-twitter-ban

Berenson [hadn't] been kicked off the platform" and Andy Slavitt, Senior White House COVID-19 adviser, suggested Berenson was the "epicenter of disinfo."[204]

158. On information and belief, other notable experts, including Dr. Peter McCullough and Robert F. Kennedy, Jr., critical of the Biden Administration's universal "vaccination" policy were also banned from social media at the direction and behest of the government as was Del Bigtree of Informed Consent Action Network (ICAN) and Dr. Naomi Wolf, who has been spearheading a campaign to get information about the Pfizer clinical trials into the public square.[205] (Emphasis added)

159. The New York Post reported on September 29, 2021 that YouTube banned "several prominent anti-vaxxers and will delete all content that suggests approved vaccines are harmful or don't work."[206] YouTube removed Kennedy's Children's Health Defense Fund channel because it contained "anti-vaccine" content.[207] It banned and censored interviews of Dr. Peter McCullough, an out-spoken critic of the "vaccines."[208] McCullough's interview with Joe Rogan

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[204] *Id.*
[205] The Defender, Children's Health Defense, *Latest 'Twitter Files' Reveal Biden Officials Colluded With Twitter on Widespread Censorship of Medical Experts* (01-03-23), https://childrenshealthdefense.org/defender/twitter-files-biden-officials-collusion-censorship/?eType=EmailBlastContent&eId=93e70c60-5c27-49fe-85b1-69965f630a0c; https://childrenshealthdefense.org/defender/twitter-files-military-pentagon-propaganda/?eType=EmailBlastContent&eId=0afb2d60-303d-4b5b-b0b7-1eb81f186f66; The Defender, Children's Health Defense, *White House Colluded With Twitter to Censor RFK, Jr., Emails Reveal* (01/09/23), https://childrenshealthdefense.org/defender/white-house-censorship-twitter-rfk-jr/?eType=EmailBlastContent&eId=e99d81c8-cc8c-4317-89a0-ed933b82629d; https://duckduckgo.com/?q=Naomi+Wolf+deplatformed+from+Twitter&atb=v314-1&ia=web
[206] New York Post, *YouTube bans all anti-vaccine content, not just COVID-19-related*, (September 29, 2021) https://nypost.com/2021/09/29/youtube-bans-all-anti-vax-content-not-just-covid-19-related/
[207] *Id.*
[208] https://duckduckgo.com/?q=Is+Dr.+Peter+McCullough+banned+from+YouTube&atb=v314-1&ia=web

was heavily suppressed and tagged as misinformation on the internet.[209] Facebook, in September 2022, permanently suspended the "Died Suddenly News Group," a group created to report sudden deaths linked to the COVID-19 "vaccine" injection which had amassed a "staggering 300,000 members."[210] This censorship was facilitated by elevating government-approved posts in search queries ("whitelisting"), shadow-banning, flagging or suppressing posts critical of the government's COVID policy and setting up special backdoor portals for the government to rapidly request takedown of posts, among other things.[211]

160. Flaherty, the Director of Digital Strategy at the White House, was in regular contact with social media companies, pushing censorship of any information that would make people "vaccine" hesitant, ***regardless of the truth of the posts***.[212] Facebook in fact assured the Whitehouse it was censoring otherwise true content, content that did not violate its misinformation guidelines.[213]

161. However, in a recent Op-ed in Newsweek, Kevin Bass observed the CDC, FDA and WHO '"repeatedly overstated the evidence and misled the public'" about a wide range of topics

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[209] Great Mountain Publishing, *The Censored Joe Rogan Interview of Dr. Peter McCullough Exposing the COVID-19 Vaccine Conspiracy*, (December 18, 2021) https://greatmountainpublishing.com/2021/12/18/the-censored-joe-rogan-interview-of-dr-peter-mccullough-exposing-the-covid-19-vaccine-conspiracy/

[210] Sense Receptor, *Suspended 'Died Suddenly News' Facebook Group with 300K Members Recreated; Already Has 120K Members Two Weeks In* (October 12, 2022), https://sensereceptornews.com/?p=12898

[211] Lee Fang Twitter post, https://twitter.com/lhfang/status/1587104660355096576; The Western Journal, *America First Legal Reveals Bombshell 'Secret' Twitter-Government Portal Used to 'Violate First Amendment'* (Dec. 7, 2022), https://www.westernjournal.com/cdc-used-backchannel-twitter-control-covid-19-narrative/

[212] The Highwire, *NEW DOCS SHOW WHITE HOUSE DIRECTED COVID-19 CENSORSHIP* Jan. 16, 2023), at 4:33, https://thehighwire.com/videos/new-docs-show-white-house-directed-covid-19-censorship/; The Defender, Children's Health Defense, *White House Colluded With Twitter to Censor RFK, Jr., Emails Reveal* (01/09/23), https://childrenshealthdefense.org/defender/white-house-censorship-twitter-rfk-jr/?eType=EmailBlastContent&eId=e99d81c8-cc8c-4317-89a0-ed933b82629d

[213] Id., the Highwire at 7:30

— including but not limited to natural immunity, the need for school closures, the effectiveness of masks and vaccine safety and effectiveness."[214] Bass asserted the scientific community worked to suppress and disparage fellow scientists with differing points of view and "[t]he government then used the presence of some ***uninformed analyses*** as justification to conspire with Big Tech to '"aggressively suppress'" so-called '"misinformation'" and erase opponents' valid concerns."[215] (Emphasis added)

162. In October 2020, the Lancet, a trusted source of government "science," published an article co-authored by CDC Director Rochelle Walensky which found that there was ***no evidence*** that infection with COVID-19 provided long lasting natural immunity—even though the ***CDC later admitted*** through a FOIA lawsuit it had ***not collected any data on natural immunity***.[216] This article was extensively covered and parroted in the media and those advocating the robustness of natural immunity were pilloried as "misinformation" spreaders. The recent Lancet study "found that immunity acquired from infection was often ***far more robust and consistently waned more slowly*** than the immunity from two doses of an mRNA vaccine."[217] (Emphasis added) Thus, government "science" caught up with the

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[214] The Defender, Children's Health Defense, *'Elite' Scientists Caused Deaths by Misleading Public on COVID, Newsweek Op-ed Author says* (03/30/23), https://childrenshealthdefense.org/defender/elite-scientists-deaths-covid-newsweek/?eType=EmailBlastContent&eId=e9590de3-98d9-4bc2-a56b-13ebab2ed20c; Newsweek, *It's Time for the Scientific Community to Admit We Were Wrong About COVID and It Cost Lives | Opinion* (03/30/23), https://www.newsweek.com/its-time-scientific-community-admit-we-were-wrong-about-coivd-it-cost-lives-opinion-1776630

[215] *Id.*

[216] The Defender, Children's Health Defense, *'Finally' The Lancet Acknowledges Natural Immunity Superior to mRNA COVID Vaccines* (02/17/23), https://childrenshealthdefense.org/defender/covid-infection-natural-immunity-superior/?eType=EmailBlastContent&eId=f1ef843d-7164-47d7-ba5c-dfd8764b2871

[217] *Id.*

"misinformation" spreaders and finally acknowledged the basic, long-established, tried and true precepts of immunology.

163. That the debate over the safety and efficacy of the "vaccines," masking and other government COVID-19 intervention policies is filtering into the mainstream of public discussion—despite the intensive government effort to suppress it—is no surprise, given that real-world data is showing yesterday's so-called "misinformation" spreaders were, in point of fact, the purveyors of "information."

164. Congress appropriated $1 billion to HHS in fiscal year 2021 "to spend on activities 'to ***strengthen vaccine confidence*** * * *'"[218] (Emphasis added) The Biden Administration developed a comprehensive media campaign strategy using these funds to promote COVID-19 "vaccines" which HHS used to fund its COVID-19 Public Education Campaign. In addition to paying for ads, HHS implemented a strategy of earned media outreach using '"trusted messengers and influencers' [to] speak to news organizations to provide 'factual, timely information and steps people can take to ***protect*** themselves, their ***families*** and their ***communities***.'"[219] (Emphasis added) Fauci and other experts were interviewed in "news" segments "to promote vaccination as the best way to protect oneself from serious illness or death from COVID-19."[220]

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[218] Blaze Media, *Exclusive: The federal government paid hundreds of media companies to advertise the COVID vaccines while those same outlets provided positive coverage of the vaccines* (March 3, 2022), https://www.theblaze.com/news/review-the-federal-government-paid-media-companies-to-advertise-for-the-vaccines

[219] *Id*.

[220] *Id*.

165. Almost all corporate media who took advertising dollars from HHS lied about the vaccines and refused to report anything negative about them.[221] The news outlets receiving government advertising dollars almost uniformly provided positive coverage of vaccine safety and efficacy. A Newsmax whistleblower has confirmed that "Newsmax executives agreed to take money from the Biden Administration to push only positive coverage of the * * * vaccines." The author of the article, Emerald Robinson, was told by Newsmax executives to stop any negative coverage of the vaccines citing negative coverage as being "problematic for Newsmax." Guests that might say something negative about the vaccines would not be booked by Newsmax. "*The Biden Administration paid for an outright ban on any negative coverage"* of the vaccines.[222] (Original emphasis)

166. The government conspired with corporate media to discredit any experts which were speaking out against ***government science*** and the wrong-headed policies based on it and actively acted to suppress and silence dissent,[223] a critical component of scientific advancement, by destroying them (making them unemployable, revoking their medical licenses, hospital privileges and cutting off their sources of income.) And, "COVID-19 vaccine manufacturers,

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[221] Emerald Robinson's The Right Way, *Fox News & Newsmax Took Biden Money To Push Deadly COVID Vaccines To Its Viewers*, https://emeralddb3.substack.com/p/fox-news-and-newsmax-took-biden-money?s=r; Blaze Media, Exclusive: *The federal government paid hundreds of media companies to advertise the COVID-19 vaccines while those same outlets provided positive coverage of the vaccines* (March 3, 2022), https://www.theblaze.com/news/review-the-federal-government-paid-media-companies-to-advertise-for-the-vaccines

[222] *Id*.

[223] The High Wire, *NEW DOCS SHOW WHITE HOUSE DIRECTED COVID-19 CENSORSHIP* (Jan. 16, 2023), https://thehighwire.com/videos/new-docs-show-white-house-directed-covid-19-censorship/; The Defender, Children's Health Defense, *Latest 'Twitter Files' Reveal Biden Officials Colluded With Twitter on Widespread Censorship of Medical Experts* (01/03/23), https://childrenshealthdefense.org/defender/twitter-files-biden-officials-collusion-censorship/?eType=EmailBlastContent&eId=93e70c60-5c27-49fe-85b1-69965f630a0c; The Daily Sceptic, *The White House Covid Censorship Machine* (9 January 2023), https://dailysceptic.org/2023/01/09/the-white-house-covid-censorship-machine/

including Pfizer, BioNTech and Moderna, lobbied Twitter and other social media platforms to set moderation rules that would flag purported COVID-19-related ""misinformation,"" according to Lee Fang, who reported on the latest "'Twitter files.'"[224]

167. Proper medicine, proper science depends on the exchange of information. By silencing experts who were challenging ***government science,*** the government and their media partners, were, by definition, force-feeding the American people ***pseudo-science*** for the singular purpose of furthering the government's universal "vaccination" policy.[225] "Without fanfare, the U.S. Centers for Disease Control and Prevention, on August 11, 2022, reversed all its COVID-19 guidelines."[226] Thus, the spreaders of misinformation that had been so effectively and viciously censored, were unceremoniously vindicated. However, federal "vaccine" mandates have not been withdrawn, "vaccine" mandates still exist in the state of Ohio, and the University of Cincinnati still publishes the CDC guidance encouraging young adults at minimal risk of severe illness from COVID-19, to be "vaccinated" and fully boosted: "According to the CDC, up to

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[224] The Defender, Children's Health Defense, *Big Pharma Lobbied Social Media to Flag COVID 'Misinformation,' Latest 'Twitter Files' Reveal* (01/17/23), https://childrenshealthdefense.org/defender/twitter-files-big-pharma-covid/?eType=EmailBlastContent&eId=74df7d9d-72d6-4999-8e99-2e5371c9357b

[225] The Epoch Times, *Big Tech, Media, Governments, Medical Boards Colluded to Suppress COVID Dissent: Study Confirms* (Nov. 7, 2022), https://www.theepochtimes.com/big-tech-media-governments-medical-boards-colluded-to-suppress-covid-dissent-study_4843718.html?src_src=Health&src_cmp=health-2022-11-09&est=YzeDk4RBoWJ6%2BmFCShV%2FHKzs2vwGc4T82%2BFsQSHVtl4mNJX%2F%2BFHZsQb41RrD8AbC

[226] The Epoch Times, *CDC Backtracks on COVID Guidance as Damning Studies Mount* (Aug. 26, 2022), https://www.theepochtimes.com/cdc-backtracks-on-covid-guidance-as-damning-studies-mount_4691002.html?est=R8n2q5Ql%2Bn0d%2F9KTFhX6xJIWRquoEAvPcflKXpA%2Fu01LK0Tw6D3T6P4X32cbSchD; The Epoch Times, *New CDC COVID-19 Guidance Is Agency 'Admitting It Was Wrong': Stanford Epidemiologist* (August 13, 2022, updated August 15, 2022), https://www.theepochtimes.com/new-cdc-covid-19-guidance-is-agency-admitting-it-was-wrong-epidemiologist_4662417.html?est=O%2BIECW4ylMoK7lQXCDquqoz7BYoy6XYgFb0fJyoM8V4vjF60bjZdY%2FQUfIvWG%2BTu

date vaccination, including boosters, is generally the most effective way to protect yourself ***and others*** from COVID-19."[227] (Emphasis added)

Coercion—Another Tool for Manipulating the American People

168. Biden has stated publicly that achieving universal "vaccination" is the policy of his administration and he has, through executive order, implemented that policy by imposing "vaccine" mandates as a condition of employment. The deeply flawed universal "vaccination" policy of the Biden Administration has been fueled by unfounded fear and driven by an extremely successful disinformation campaign against the American people, a campaign designed to overcome "vaccine" hesitancy by ***any*** means.

169. When it became clear the American people were "'vaccine' resistant," Biden, in early September 2021, started rolling out the mandates. Stating our "patience is wearing thin" and that those refusing to get vaccinated "has cost us all," Biden imposed "vaccine" mandates on federal employees, contractors, private businesses employing 100 or more people and certain health care providers that he said would "affect more than 80 million workers" accounting for "two-thirds of the U.S. workforce."[228] By disparaging the character of the "unvaccinated" and making them responsible for COVID deaths, Biden, using the power of his office, applied this blunt-force coercive tactic in an effort to override ***informed consent***.

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[227] UC Cincinnati, Public Health, COVID-19 Vaccination, https://www.uc.edu/publichealth/coronavirus/vaccine.html; The Epoch Times, *'Unethical' and Up to 98 Times Worse Than the Disease: Top Scientists Publish Paradigm-Shifting Study About COVID-19 Boosters for Young Adults* (Sep 10, 2022), https://www.theepochtimes.com/unethical-and-up-to-98-times-worse-than-the-disease-top-scientists-publish-paradigm-shifting-study-about-covid-19-vaccines_4723122.html?est=aIbW6JBlMrqqKASoZjA9M6cSH9WDzDF5SKhU5tRR2CV8TL%2BkEhFECYwwp0vL%2B%2FnN

[228] https://www.nbcnews.com/politics/white-house/biden-announce-additional-vaccine-mandates-he-unveils-new-covid-strategy-n1278735

170. Biden also delivered the message to employers, neighbors, friends and "vaccinated" family members—the "unvaccinated" were dangerous, uncaring, unpatriotic spreaders of the virus and posed a threat to society-at-large. Thus, the "unvaccinated" became the social lepers of our time. They lost jobs and were disinvited to social and family gatherings. They were held up to ridicule and derision. Two classes of citizens were created. The "vaccinated" are the first-class citizens. They were welcomed into society and enjoy all the privileges and immunities of American citizenship. The "unvaccinated" are the second-class citizens. Segregated from many aspects of society and denied the full benefits of American citizenship, they became social outcasts who were denied jobs, education and, in some cases, medical treatment. They were denied admission to restaurants and other public accommodations in some states and cities and restrictions on travel were proposed and/or imposed upon them. They were, in many cases, alienated from their families.

171. After the Supreme Court ruled against Biden's employer mandate, Biden called on states and employers to voluntarily impose the mandate themselves. Saying he was disappointed the Supreme Court chose to "block common sense, life-saving requirements" "grounded ***soundly*** in both the science and the law," Biden vowed to pressure companies to impose "vaccine" mandates. (Emphasis added)[229] However, the "vaccines" were not grounded soundly in the "science." They lacked durability against a rapidly mutating virus, were neither safe nor effective nor did they prevent transmission of the virus—and the government defendants knew that to be the case. Many employers, both public and private, relying on the misrepresentations of Biden and trusted federal health agencies, imposed "vaccine" mandates on their workforce.

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[229] *Id.*

172. The CDC, under its Workplace Vaccination Program, advised employers they could legally mandate COVID-19 "vaccinations" (on information and belief, this guidance has been erased on the website referenced in the footnote here) and offered guidance to employers in "educating" their employees on the benefits of "vaccination."[230] Nowhere was there mentioned the potential risk of severe side-effects and death from the vaccines or their lack of efficacy. And, although COVID-19 presented a minimal risk of severe illness, hospitalization or death in those of working age, the public was conditioned to believe COVID-19 was a deadly menace, a material misrepresentation of fact that fueled fear and spurred compliance.

173. Physicians are being coerced into silence and many are afraid to express any negative views they may have regarding "vaccine" safety and efficacy. The Biden Administration has actively engaged in coercive tactics against physicians who are critical of the "vaccine." Its disinformation campaign has been the impetus behind state medical boards, universities and other private entities to discipline, fire, and remove hospital privileges from physicians who are critical of the" vaccines." Dr. Peter McCullough was fired from Baylor University in February, 2021, threatened by the American Board of Internal Medicine with loss of certification "for spreading COVID misinformation" and Texas A&M College of Medicine, Texas Christian University and University of North Texas Health Science Center School of Medicine also cut ties with McCullough "for ***spreading misinformation***."[231] Other physicians who have dared criticize the vaccines or prescribe drugs off-label for treatment of

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[230] https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/essentialworker/workplace-vaccination-program.html#anchor_1615585395585

[231] Examiner-Enterprise, *Doctor fired for spreading COVID misinformation finds supportive crowd in Bartlesville*, (Published Oct. 6, 2021, Updated Dec. 20, 2021), https://www.examiner-enterprise.com/story/news/2021/10/06/doctor-fired-baylor-spreading-covid-19-misinformation-finds-supportive-crowd-bartlesville/5995698001/

COVID-19 have also been attacked in this way for the purpose of deterring the spread of information that runs counter to the official government narrative and challenges the "science" behind its disinformation campaign. Making examples of physicians critical of ***government science*** has an ***obvious chilling effect*** on physicians across the board in the exercise of their right to freedom of speech.

174. Further, in response to the COVID-19 pandemic, relying on government "guidance," several states and municipalities, under color of their police powers, have imposed "vaccine" and other mandates as a condition to full enjoyment of the privileges and immunities of U.S. citizenship. Fauci, in fact, openly and quite successfully encouraged coercive tactics by universities, private enterprise, schools, hospitals and others in the public and private sector to compel the American people to get "vaccinated."[232] "They're [vaccine mandates] very important," he said. "We're not living in a vacuum as individuals. We're living in a society and ***society needs to be protected***. And you do that by not only protecting yourself, but by ***protecting the people around you*** by getting vaccinated."[233] (Emphasis added) These statements by Fauci, run counter to established science.

175. Although education is not a right guaranteed under the U.S. Constitution, there is a constitutionally protected right to a public education, many state constitutions guarantee the right to a public education and the importance of equal access to education, including higher education, has been widely recognized in the courts. Nonetheless, "more than 500 colleges and universities have mandated "vaccination" to prevent ***transmission*** of the virus following

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[232] Inside Higher Ed, *COVID-19 Round-Up: Fauci Endorses Vaccine Mandates* (Aug. 11, 2021), https://www.insidehighered.com/news/2021/08/11/covid-19-round-fauci-endorses-vaccine-mandates;

[233] VOA, *Fauci Defends Coronavirus Vaccination Mandates* (Oct. 17, 2021), https://www.voanews.com/a/fauci-defends-coronavirus-vaccination-mandates/6274249.html

guidelines published by the CDC. *Klaassen v. The Trustees of Indiana University*, 549 F.Supp.3d 836, 847, note 15 (N.D. Ind. 2021) (vaccination required for full capacity in-person learning without masking or social distancing at institutions of higher education for all students, faculty and staff) The U.S. Department of Education (DOE) and the American College Health Association also recommended mandatory vaccination for return to full capacity, in-person learning) *Id*., notes 14, 16 – 18.

176. Previous CDC guidelines recommended "vaccination" as the key ***prevention*** strategy stating "[a] growing body of evidence shows that people who are up to date with their vaccines are at a substantially reduced risk of severe illness and death compared to unvaccinated people. CDC recommends that ***all*** faculty, staff and students should be vaccinated as soon as possible and remain up to date with their vaccinations, including boosters when eligible."[234] (Emphasis added) This recommendation is telling as the CDC was ***not*** stating "vaccines" prevent ***transmission*** of the virus, only that they ***may*** reduce the severity of COVID-19. Nonetheless, "vaccination" is recommended as the ***key measure to prevent transmission*** of the virus even though it is ***not***, according to the CDC's own guidance, related to prevention at all.

177. The CDC provided guidance on building confidence in the vaccines, increasing access to them by "hosting a mass vaccination clinic" and facilitating access to off campus vaccination sites.[235] The ***disconnect between science and the CDC's guidance*** is obvious. Further, the CDC states it is important, in ***promoting*** "vaccines," to communicate transparently from credible sources of information, chief among which is the CDC itself—according to the CDC. Other credible sources listed by the CDC, the ***self-anointed*** preeminent authority on

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[234] CDC, COVID-19, Guidance for Institutions of Higher Education (IHEs) (Updated February 7, 2022), https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html#anchor_1643908914518

[235] *Id*.

COVID-19 "vaccines," are the Immunization Action Coalition, the National Network for Immunization Information and the Medical Library Association.[236] The CDC directed university administrators to rely on the CDC, to the exclusion of all other sources, in formulating—and ***promoting***—"vaccines" to faculty, staff and students. Establishing the CDC as the sole arbiter of scientific credibility on COVID-19 has been a critical element of the government's smashing success in the disinformation warfare campaign it has conducted against the American people.

178. Under Fauci's "guidance," the "unvaccinated" were denied admission to universities (public and private), fired from their jobs, denied admission to public accommodations, travel and health care[237] and kids were excluded from schools. A California high school went so far as to ban seniors who were "unvaccinated" from walking at their graduation ceremony.[238]

179. The "unvaccinated" were made social pariahs and even excluded from both routine and important family functions. Of course, if everyone is "vaccinated"—which is the government's goal—there is no control group from which to gauge "vaccine-related" injuries and deaths. This policy, if brought to fruition, would cover-up the carnage and death wrought by these experimental drugs all the while the government keeps touting their safety. With no data to gauge safety of these ***experimental drugs***, science would be exactly what the government says it is and, with it having established itself as the only credible source of information (as witnessed by the success of its disinformation campaign), the American people would become totally

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[236] CDC, Vaccines and Immunizations, Finding Credible Vaccine Information, https://www.cdc.gov/vaccines/vac-gen/evalwebs.htm

[237] The Tennessee Conservative, *Vanderbilt Denies Heart Transplant to 7 Month Old Baby Because He Is Not Vaccinated*, *https://tennesseeconservativenews.com/vanderbilt-denies-heart-transplant-to-7-month-old-baby-because-he-is-not-vaccinated/*

[238] Blaze media, *High school punishes seniors not vaccinated against COVID-19 by banning them from attending graduation ceremony*. https://www.theblaze.com/news/high-school-bars-seniors-not-vaccinated-covid-graduation-ceremony

reliant on arbitrary government edicts, edicts based on "***government science***" that cannot be questioned as there would be no data critics could marshal to dispute the government's claims.

180. Government endorsed mandates are designed to encroach on individual freedom, exact a deprivation of the rights guaranteed citizens of this country under the U.S. Constitution, and deprive them of common, well-established privileges and immunities of American citizenship (including, the right to access public accommodations (restaurants), public transportation, employment, operate a business, college education, worship, concert-going,[239]the right to refuse medical treatment.) Ostracization from society and alienation from one's family are strong instruments of coercion that are naturally considered by individuals in evaluating the risks and benefits of the "vaccine"—an evaluation that is further tainted by the false and deceptive advertising of the "vaccines" as "safe and effective" and the concealment of the risks of the "vaccines." Taken together, the actions of the government utterly vitiate and override ***informed consent***. Consent obtained through coercion and deception is not ***informed consent.***

Advertising and "Public Service" Messaging

181. The government used the artifice of labeling opposing points of view "misinformation" or "disinformation" to successfully wrest control the narrative. From the beginning of the COVID-19 pandemic, the DHS initiated a propaganda campaign targeting COVID disinformation, "defined as information deliberately created to mislead, harm, or manipulate a person, social group, organization, or country."[240] Very early in the pandemic, the Cybersecurity and Infrastructure Security Agency (CISA) posted "Toolkits" on its website

[239] https://duckduckgo.com/?q=COVID-19+vaccination+mandated+for+concert-goers&atb=v314-1&ia=web

[240] DAILY**CLOUT**, *Department of Homeland Security CISA U.S. Government Office of Medical Censorship and Propaganda*, Peter A. McCullough, MD MPH (Nov. 14, 2022), https://dailyclout.io/department-of-homeland-security-cisa/

designed for use by "state, local and tribal authorities" to censor contrary opinions on COVID-19 and the government's response to the virus. "These Toolkit resources are designed to help State, local, tribal and territorial (SLTT) officials bring awareness to misinformation, disinformation, and conspiracy theories appearing online related to COVID-19's origin, scale, government response, prevention and treatment." Each product was designed to be tailored with local government websites and logos. The COVID-19 "Toolkit" includes graphics "THE HEALTH OF OUR NATION DEPENDS ON TRUSTED INFORMATION" and "WE'RE IN THIS TOGETHER," both of which have been posted on Facebook and Twitter and impress upon the reader the importance of relying on only "trusted" sources of information. The "Toolkits" direct users to "use images, talking points and documents to deliver" the following message: there is only one trusted source of information—state and local health agencies, which almost uniformly rely ***exclusively*** on the CDC for their information.)[241]

182. In this way, CISA recruited an army of individual users to communicate the government message. Consistent with this message, Fauci equated criticism of him to criticism of science.[242] Government control of information was key to enabling the economic and social coercion that has been visited upon the "unvaccinated" in this country.

183. Using its ***preeminent status*** as ***the*** only authoritative and trusted source of information on COVID-19, HHS, through its public service advertising campaign, has falsely represented the "vaccines" to be "safe and effective." The government-sponsored ads contain no ***warnings, caveats or disclaimer*** even though the CDC has acknowledged substantial risks of

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[241] *Id.*

[242] New York Post, *Fauci says attacks on him are 'attacks on science'* (June 9, 2021), https://nypost.com/2021/06/09/fauci-says-attacks-on-him-are-attacks-on-science/

serious side effects from the "vaccines" (myocarditis and pericarditis, syncope, altered immunocompetence, limitation of effectiveness.)

184. Although administrators are instructed to provide Fact Sheets to patients prior to inoculation, the deceptive marketing that led the patients to come in for "vaccination" in the first place, coupled with government, employer and other private sector actions designed to force "vaccination" as a condition to full access to the privileges and immunities of citizenship, overrides, vitiates, overrides and/or impairs one's ability to give ***informed consent*** to treatment.

185. As part of its ad campaign, HHS has targeted children ages 5 and older for "vaccination" all the while ***knowing*** healthy children are at near zero risk of serious illness, hospitalization or death from COVID-19[243]and would derive no significant benefit from the "vaccine;" that "vaccination" would expose them to serious risk of dangerous, life-threatening side effects and death; the "vaccine" prevents neither infection nor transmission of the virus nor is there scientifically reliable evidence that it even reduces the risk of hospitalization or death.

186. The COVID-19 "vaccine" interferes with a child's ***innate immune system training*** which negatively affects the ability to ward off a wide range of pathogens. No healthy child should be given the "vaccine" and government PSA's that outrageously lay claim to the lethality of COVID-19 in children and push the false claim that "vaccines" will protect their family and community constitute a clear and present danger to the health of our children. Tellingly, the

[243] PMC Pub Med Central (NIH National Library of Medicine National Center for Biotechnology Information at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8437699/ "Why are we vaccinating children against COVID-19? (RETRACTED); and, The Defender, Children's Health Defense, *The Evidence Is Clear: Healthy Children Simply Don't Need COVID Vaccines* (6/15/22), https://childrenshealthdefense.org/defender/children-covid-vaccines-eua-fda/?eType=EmailBlastContent&eId=099e94ca-b9d9-4b34-8fea-0cc0122b8af2

CDC has conducted no analysis of its own data to support its claim of lethality of COVID-19 in children.[244]

187. Shortly after EUA was issued for the Pfizer and Moderna "vaccines," in March of 2021, the Ad Council launched "It's Up to You" ad campaign[245]and aired its first COVID-19 "vaccine" "public service" advertisement. The ad closes with the COVID-19 "vaccines" are here and claims that getting "vaccinated" will soon allow a return to normal (you will soon be able to visit your grandmother/gather as a family.) In a brief spot at the end of the ad it refers viewers to GetVaccineAnswers.org, a COVID Collaborative/Ad Council/National Advisory Council website which was developed with and vetted by the CDC for the latest information on COVID-19 "vaccines." Although the "vaccines" do not prevent transmission of the virus and cannot be used to achieve herd immunity, the Ad Council nonetheless touted the COVID-19 vaccines as having the "potential to transform life as we know it today and save hundreds of thousands of lives—but they can only be successful if millions of Americans recognize the urgency, safety and vital importance of getting vaccinated."[246]

188. On February 18, 2021, The Ad Council announced it had partnered with "Business Roundtable, CDC Foundation, de Beaumont Foundation and Robert Wood Johnson Foundation" to form Health Action Alliance (HAA) to "strengthen and accelerate the business community's response to COVID-19" by convincing employers to mandate vaccination for their employees.[247]

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[244] ICAN, *CDC CANNOT PROVIDE AN INSTANCE OF A SINGLE CONFIRMED COVID-19 DEATH IN A CHILD YOUNGER THAN 16* (March 29, 2022), https://icandecide.org/press-release/cdc-cannot-provide-an-instance-of-a-single-confirmed-covid-19-death-in-a-child-younger-than-16/

[245] https://www.adcouncil.org/our-impact/covid-vaccine/our-covid-19-vaccine-retrospective

[246] The Ad Council, Health and Wellness, COVID-19 Vaccine Education https://www.adcouncil.org/campaign/vaccine-education

[247] The Ad Council, The History of our COVID-19 Vaccine Education Initiative, https://www.adcouncil.org/our-impact/covid-vaccine/our-covid-19-vaccine-retrospective

In its guidance to employers, the HAA falsely states, "Employer-instituted ***vaccine requirements*** have been ***proven*** to be effective. Thousands of employers representing millions of workers have required those workers to get vaccinated and have routinely achieved vaccination rates of 95 percent or higher with minimal disruption to the workforce."[248] (Emphasis added) The HAA website advises employers that "medical experts" advise that, "to move beyond the pandemic phase of COVID-19 and into a 'new normal,' * * * and "to prevent another wave from future variants, to get back to our lives and back to business with certainty and confidence * * * we must encourage all Americans to keep their vaccinations up to date and continue the practices that have helped ***prevent the spread of the disease***."[249] (Emphasis added) These false representations based on "***government science***" have been instrumental in enlisting support from private employers to coerce Americans into getting "vaccinated."

189. On May 13, 2021, three days after the Pfizer "vaccine" was approved for ages 12 – 15, the Ad Council, based on its research that "approximately 55% of young adults are unsure about COVID-19 vaccinations or disagree that the benefits outweigh the risks," directed its "public service" advertisements ***directly at these young people*** and announced a new partnership effort with social media and digital companies to convince them to get "vaccinated."[250]

190. On September 21, 2021, the Ad Council insidiously targeted parents who were hesitant to have their 12 – 17-year-old children "vaccinated," launching its "Do It For Me" public service" messaging campaign.[251]

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[248] Health Action Alliance, Quick Start Guide, Strengthening Workplace Vaccination and Safety in Response to COVID-19 (Updated April 14, 2022), https://www.healthaction.org/quick-start-guide

[249] *Id*.

[250] The Ad Council, The History of our COVID-19 Vaccine Education Initiative, https://www.adcouncil.org/our-impact/covid-vaccine/our-covid-19-vaccine-retrospective

[251] *Id*.

191. On June 28, 2022, just days after FDA approval of "vaccines" for children ages 6 months and older, the Sesame Workshop, "in collaboration with the Ad Council and the COVID Collaborative's Vaccine Education Initiative launched a new public service advertisement featuring Elmo and his dad, Louie."[252] The ad, which contains ***no disclaimer, caveats or warnings***, produced in partnership with the CDC and the American Academy of Pediatrics (AAP), falsely claims that Elmo getting "vaccinated" is the "best way to keep him ***and*** his whole neighborhood safe and healthy!"[253] (Emphasis added) In the ad, the Sesame Workshop falsely claims the "vaccines" are "***proven*** to reduce the chances of serious illness and hospitalization from COVID-19." (Emphasis added) It falsely implies that children are at risk for severe COVID symptoms, hospitalization and death. Viewers are then encouraged to talk with their pediatrician and visit GetVaccineAnswers.org for the latest information on the COVID-19 vaccines."[254] Sesame Workshop communicated that same deceptive message (vaccines are the best way to keep children ***and*** their "neighbors" safe and healthy) targeting children ages 6 – 12 and their parents shortly after vaccines were approved for that age group, using Big Bird and Granny Bird.[255] "Elmo and Louie have also starred in other PSA's for the '"It's Up To You"' Education Initiative."[256] The Sesame Workshop's own press release does ***not*** claim the "vaccines" prevent transmission of the virus,[257] which means it knows that getting your child "vaccinated" will not protect the "neighborhood" as claimed in its ad.

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[252] Sesame Workshop https://www.sesameworkshop.org/press-room/press-releases/sesame-streets-elmo-and-his-dad-louie-star-new-psa-informing-parents
[253] *Id*.
[254] *Id*.
[255] *Id*.; https://www.youtube.com/watch?v=ybWqeMIdYac
[256] Sesame Workshop https://www.sesameworkshop.org/press-room/press-releases/sesame-streets-elmo-and-his-dad-louie-star-new-psa-informing-parents
[257] *Id*.

192. Advertising and "public service" messaging have touted the "vaccines" as vaccines in the traditional sense (ie. that the "vaccines" would prevent infection from and transmission of COVID-19) and millions of Americans have been "vaccinated" and had their children "vaccinated" in reliance on this misrepresentation. Initially, due to the advertising for the "vaccines" and the pronouncements and "public service" messaging by government agencies like the FDA, CDC and Fauci, the American people were led to believe that one "vaccination" would provide immunity from COVID—it would prevent infection and transmission of the virus and thus perform in the manner ordinarily expected for a vaccine.[258]

193. On July 21, 2021 Biden actually proclaimed the "vaccines" would prevent infection from COVID-19: "You're not going to get COVID if you have these vaccinations."[259]

194. And, "[b]y March 2021, as part of the Biden administration's emergency countermeasure efforts involving COVID-19 vaccines, the administration handed out nearly $10 billion in money to influential groups across American society such as ***physician societies*** to ***advocate and aggressively promote*** the vaccines across low-income and underserved communities as part of the COVID-19 response. The targeted cohort would include pregnant women and their gestating babies * * * COVID-19 vaccine promotional campaign included the launching of '***"COVID-19 Community Corps"'***, a nationwide grassroots network of local ***voices people know and trust to encourage Americans to get vaccinated***."[260] (Emphasis added)

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[258] CNN Health, *HHS vaccination ads use a new tactic to increase COVID-19 vaccination rates: fear* (October 6, 2021) https://www.cnn.com/2021/10/06/health/hhs-vaccination-ads-fear/index.html

[259] https://www.politifact.com/factchecks/2021/jul/22/joe-biden/biden-exaggerates-efficacy-covid-19-vaccines/ ("it is rare for people who are fully vaccinated to get COVID-19, but it does happen")

[260] Trial Site News, *Did Biden Administration Pay Physician Networks to Push COVID-19 Vaccine Prematurely?* (Feb. 17, 2023), https://www.trialsitenews.com/a/did-biden-administration-pay-physician-networks-to-push-covid-19-vaccine-prematurely-bcf50597

195. In addition to the buying support for the "vaccines" from the medical community, HHS conducted direct advertising. The first set of HHS "vaccine" ads which debuted in April, 2021, sent a getting back to normal message: They "featured heartwarming scenes of friends hugging and children together on sleepovers, with upbeat music playing in the background." "Go on, live as you want, feel the sunlight on your face * * * After a year of saying no, imagine how good saying yes is going to feel."[261]

196. As a result of their research into how to break "vaccine hesitancy," HHS determined instilling fear in the American public would spur "vaccinations." Their new ads, produced by HHS as a part of a $250 million Public Education Campaign which debuted on October 6, 2021, feature testimonials from three COVID-19 survivors to "show in stark terms the real-life consequences of not getting vaccinated." [262] Public opinion experts praised the new ads, saying it was time to take an approach that "uses death and misery."[263]

197. The "vaccines," however, did not stand up to the representations made as to their performance and characteristics in the advertisements sponsored and created by HHS. Not only were they not necessary, they were neither safe nor effective. They did not prevent transmission of the virus nor infection. They could not bring you back to normal and they could not save you from dying from COVID-19 or, for that matter, avoiding serious illness or hospitalization.

198. For example, the New York Times reported on June 8, 2022 that the most vaccinated regions in the world and the United States are reporting the highest current case counts of COVID-19 suggesting that efficacy of the vaccine becomes negative (increases the

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[261] https://www.youtube.com/watch?v=ehdCtHOx50g
[262] *Id.*
[263] *Id.*

likelihood of infection) after several months.[264] There is no reliable scientific evidence that the "vaccines" prevent serious illness or death in children.[265]

199. The government disinformation campaign, in conjunction with its private partners like the Ad Council and Health Action Alliance, has resulted in many Americans still belaboring under the misimpression the COVID-19 "vaccines" provide immunity and prevent transmission of the virus. The labeling of these ***experimental gene therapy drugs*** as "vaccines" contributes in no small part to this misimpression ."[266]

200. Advertising "safe and effective," whether by the pharmaceutical companies or the government (the prime driver behind this fraud on the American public) and its private partners through their "public service" advertising and official pronouncements, taints any information that may be disseminated to a person ***after*** he/she arrives for injection of the "vaccine."

201. Many PSAs are the product of a collaborative effort of the Ads Council, the COVID Collaborative (NIH), the National Advisory Council, and the CDC (with the creation of the website getvaccineanswers.org.)[267]

202. And, now that "vaccines" have been approved for children, the Sesame Workshop has been busy targeting both parents and their children with false information on the safety and efficacy of the "vaccines" representing that the benefits of getting vaccinated outweigh any risks of harm from the "vaccines." The ads speak in generalizations touting the importance of getting

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[264] "Coronavirus in the U.S.: Latest Map and Case Count," *New York Times*, updated Jun. 8, 2022, https://www nytimes.com/interactive/2021/us/covid-cases.html; "Coronavirus World Map: Tracking the Global Outbreak," *New York Times*, updated Jun. 8, 2022, https://www nytimes.com/interactive/2021/world/covid-cases.html.

[265] Rui Wang, Jiahui Chen, Yuta Hozumi et al., "Emerging Vaccine-Breakthrough SARS-CoV-2 Variants," *ACS Infect Dis.* 8, no. 3 (2022), www.doi.org/10.1021/acsinfecdis.1c00557.

[266] Dr. Peter Bach; https://covid.cdc.gov/covid-data-tracker/#vaccine-effectiveness https: ("* * * confusion about "bullet proof immunity could lead to Americans refusing to wear a mask after getting the jabs.")

[267] https://getvaccineanswers.org/about

vaccinated, the safety of the "vaccines" and refer the viewer or listener to https://getvaccineanswers.org/#questions, a COVID Collaborative/Ad Council National Advisory Council website which was developed with and vetted by the CDC. None of the ads contain disclaimers, caveats or warnings even though COVID-19 "vaccines" are "98 times more deadly than flu vaccines."[268] This CDC-vetted and approved website touts "safe and effective", encourages "vaccination" of children ages 5 years and older, makes the following misrepresentations: (1) "[v]accines are safe–much safer than getting COVID-19;" (2) "'vaccines" are ***safe for children*** and adults;" (3) scientists "found no serious safety concerns" in the clinical trials that were conducted; (4) getting children vaccinated "can help keep them * * * [f]rom getting really sick if they get COVID-19," keep them " [i]n school or daycare" and [s]afely participating in sports, playdates and other group activities and, (5) a COVID-19 "vaccine" is like other vaccines in terms of risk and the benefits of the "vaccine" outweigh the risks of not being "vaccinated."[269]

203. A peer-reviewed study published in the BMJ Journal of Medical Ethics concluded that the risk of harm from the COVID-19 booster outweighed any potential benefits of the "vaccine" in people ages 18 – 29.[270] In April 2022, Dr. Paul Offit, a member of the FDA's advisory board, in an article published in the New England Journal of Medicine "called on the

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[268] TrialSite News, *COVID-19 Vaccinations 98 Times More Deadly Than Flu Vaccines (According to VAERS reports)* (August 28, 2021) Archived at: https://web.archive.org/web/20210913051243/https://trialsitenews.com/covid-19-vaccinations-98-times-more-deadly-than-flu-vaccines-according-to-vaers-reports/

[269] The Ad Council Website getvaccineanswers.org

[270] The Defender, Children's Health Defense, *COVID Booster Mandates for Young Adults Will Cause 'Net Harm,' BMJ Study Says* (12/09/22), https://childrenshealthdefense.org/defender/covid-booster-mandates-young-adults/?eType=EmailBlastContent&eId=7e04f082-cdea-4912-95e1-1798118bd098; BMJ Journal of Medical Ethics, *COVID-19 vaccine boosters for young adults: a risk benefit assessment and ethical analysis of mandate policies at universities,* https://jme.bmj.com/content/early/2022/12/05/jme-2022-108449

CDC to conduct a risk – benefit analysis of the vaccines for young people." The CDC has not yet conducted the study.[271] The authors of the BMJ article "added that the mandates aren't based on updated, age-stratified risk-benefit assessment and that expected harms don't outweigh the public health benefits '"given the modest and transient effectiveness of vaccines against transmission."'"[272] "Last year an FDA advisory committee voted overwhelmingly against boosting the general population, including healthy young adults, but the Biden administration and the CDC overruled this recommendation."[273] "Despite evolving data about young people's low risk for severe COVID-19 and high risk of mRNA vaccine adverse effects, the CDC recently launched a new grant, offering $1.5 million in research funds for colleges to study how to ***increase COVID-19 vaccination uptake*** among students."[274] (Emphasis added)

204. However, the HHS-sponsored ad campaign targeting children for "vaccination," two 60 seconds spots titled "Oath" and "Trust," makes no reference to getvaccineanswers.org, contains no disclaimers, caveats or warnings and misrepresents the danger to children from COVID-19.[275]

A. The ad features the President of the American Medical Association (AMA), Board Chair, American Academy of Family Physicians, President, American Nurses Association and the President, American Academy of Pediatrics. The message: "It's important for ***all*** children to get a COVID vaccine" (implying it is important for your child's health and well-being), because they all know "millions of cases of COVID have

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[271] *Id.*
[272] *Id.*
[273] *Id.*
[274] *Id.*
[275] yahoo!news, CBS News, *"We trust the COVID vaccine," heads of top medical groups say in ads targeting parents* (March 17, 2022), https://news.yahoo.com/trust-covid-vaccine-heads-top-130322644.html

been in kids" (implying it is dangerous for children) and "it's clear you can ***trust*** the COVID vaccine for yourself and your kids or your grandkids" (the "vaccine" is safe and effective.)[276] (Emphasis added)

B. Another ad states: "Like you, there's nothing more important to me than keeping our kids safe. What's not safe is getting COVID," the group says in the ad.[277] Other ads convey the same false representation on the safety and efficacy of the "vaccines" for children and the importance of getting your child "vaccinated."[278]

205. One obvious problem with the advertising is that ***all of the vaccines are experimental*** ("Serious and unexpected side effects may occur. The possible side effects of the vaccine are ***still being studied in clinical trials***.")[279] (Emphasis added) They have not been on the market long enough to judge the long-term side-effects like cancer, damage to reproductive health, birth defects and damage to organs, veins and arteries. This information is nowhere to be seen in the ads as it is obvious, in the case of the ads targeting children, that the ads might as well not be run.

206. Ads containing informed consent disclosures would understandably increase vaccine hesitancy and defeat the Biden Administration's goal of universal vaccination. That is why they are conspicuously missing from the "public service" advertisements.

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[276] *Id.*
[277] CBS News *"We trust the COVID vaccine" heads of top medical groups say in ads targeting parents*, https://www.cbsnews.com/news/we-trust-the-covid-vaccine-say-heads-of-top-medical-groups-in-plea-to-parents/
[278] Sesame Workshop https://www.sesameworkshop.org/press-room/press-releases/sesame-streets-elmo-and-his-dad-louie-star-new-psa-informing-parents; https://www.youtube.com/watch?v=4sR1qFk9zNY
[279] FDA.gov, *FACT SHEET FOR RECIPIENTS AND CAREGIVERS ABOUT THE PFIZER-BIONTECH COVID-19 VACCINE AND THE PFIZER-BIONTECH COVID-19 VACCINE, BIVALENT (ORIGINAL AND OMICRON BA.4/BA.5) TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) FOR USE IN INDIVIDUALS 5 THROUGH 11 YEARS OF AGE*, https://www.fda.gov/media/153717/download

207. The advertising is directly connected to government "messaging" that is not supported by scientific data. The ads make no mention of risks in the body of the ads and greatly exaggerate the benefits of getting "vaccinated." The ads targeting children are particularly deceptive as there is no reference to the website getanswers.org or to the CDC informational site (which itself is skewed to minimize risks and overemphasize benefits.)

208. ***Top*** on the list of a google search for Cincinnati public school COVID-19 "vaccination" policy is a CDC ad[280]:

COVID Vaccine Information - Get the Facts on the Vaccines

The best way to slow the emergence of COVID variants is to get vaccinated. Safety is CDC's top priority, and vaccination is the safest way to help build protection.

Vaccine: 6 mos.+ Eligible · Vaccine Ingredient List

The ad is a bald-faced lie. The "vaccines" prevent neither infection nor transmission of the virus, are dangerous, lead to mutations of the virus, quickly wane in effectiveness and render recipients more susceptible to infection, serious illness, hospitalization and death.

209. These advertisements are "bait" advertising. The advertisements are designed to "create a false impression as to the grade [or] quality" of the "vaccine" and to secure first contact with the consumer through deception. Although vaccine administrators are required to provide recipients with a written disclosure of the known potential risks and benefits, the pump has already been primed through deceptive advertising and public service messaging. The negative information required to be communicated at the time of injection is the switch to the advertising bait. People are likely to disregard the risks communicated to them after being told the "vaccines" are "safe and effective" and that doctors and nurses trust the vaccine for their children

[280] https://duckduckgo.com/?q=Cincinnati+public+school+COVID+19+vaccination+policy&atb=v314-1&ia=web

and grandchildren, believing they pose no real danger to their health or that of their children's and that they will greatly benefit from the "vaccine."

210. ***Informed consent is corrupted by the deceptive advertising that precedes it.*** The government knows this. It seeks to substitute its judgment for that of the American people and its efforts reek of parens patriae, an anathema to ***informed consent***. The vitiating or overriding of ***informed consent*** to treatment is in fact the underlying goal of the "public service" advertising campaign and other government efforts to coerce and deceive the American public into submitting to COVID-19 "vaccinations." ***Informed consent*** requires adequate patient comprehension of the risk and includes the right to refuse treatment.[281] Obscuring risks—which is what the advertising is designed to to—will likely result in "truly informed consent" being obviated.[282]

211. The Pfizer Comirnaty, the only "vaccine" approved by the FDA, while manufactured in the U.S., has never been available for distribution in the U.S. This means the only "vaccines" available are approved under EUA. Manufacturers have immunity from liability for drugs approved under EUA but are subject to liability for FDA approved drugs.[283] The "vaccines" approved under EUA are marketed as if they are FDA approved—except that no disclaimers, caveats or warnings are required in the advertisements, including those that are mandated under the EUA statute.

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[281] NIH National Library of Medicine, PubMed.gov, *Informed consent disclosure to vaccine trial subjects of risk of Covid-19 vaccines worsening clinical disease,* https://pubmed.ncbi.nlm.nih.gov/33113270/

[282] *Id*.

[283] FDA News Release, (October 29, 2021) at https://www.fda.gov/news-events/press-announcements/fda-authorizes-pfizer-biontech-covid-19-vaccine-emergency-use-children-5-through-11-years-age

212. On November 3 and November 7, 2022, Dr. Peter Marks, the head of the FDA released two promotional videos titled, "Why should I get the updated COVID-19 vaccine now?" and "Why should I get my child an updated COVID-19 vaccine?" in which he recommended "vaccination" and boosting with the new bivalent booster for parents and children.[284] The videos violated the EUA as neither video contains the disclaimer required by the FDA under the EUA approval letters issued to both Pfizer and Moderna.[285] Both approval letters[286] require that "all * * * advertising and promotional material relating to use of the ["vaccines"] ***clearly and conspicuously*** shall state:

> This product has not been approved or licensed by FDA, but has been authorized for emergency use by FDA, under an EUA to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals [5 years of age and older for Pfizer and 6 years and older for Moderna]; and
>
> The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

213. In a November 28, 2022 tweet, in an obvious effort to manipulate families, the FDA used a little girl sitting in a car seat giving "the stink eye" to the "unvaccinated" under the heading "You're Not Boosted Yet?" and "declaring, "No one like the side eye! UpdateYourAntibodies and get boosted today."[287]

214. Fauci recommended virtually all people age 12 years and older get the bivalent booster even though a CDC study published on November 22, 2022 showed the "vaccines,"

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[284] YouTube https://www.youtube.com/watch?v=5kL9PIyru1w; https://www.youtube.com/watch?v=XW5Ts0wtbGY

[285] FDA Pfizer

[286] Ex. C at pp. 26 and 27; Ex. D at pp. 11 and 12.

[287] TrialSite News, *FDA Uses Little Girl to Market Moderna and Pfizer Bivalent Booster Jabs—Crosses a Line Yet Again* (Nov. 30, 2022), https://www.trialsitenews.com/a/fda-uses-little-girl-to-market-moderna-and-pfizer-bivalent-booster-jabscrosses-a-line-yet-again-8f2f8b86

which rapidly wane in effectiveness, provided poor protection against symptomatic infection (protection against infection among the fully "vaccinated" was estimated to be just 43% for people aged 18 – 49 years, 25% for ages 50 – 64 and a mere 19% for those 65 and older,)[288] the boosters were never tested on humans, not tested for prevention of severe symptoms, hospitalization and death nor for the proven risk of immune imprinting (where your immune system is locked into a response to the original virus.) Additionally, safety of the boosters was never addressed by the CDC study.[289]

215. Recommending the taking of an experimental drug (gene therapy) knowing it has poor efficacy and wanes quickly in effectiveness without any analysis of its safety is evidence of an extreme recklessness and utter disregard for the health and safety of the American people. Yet, at his final press conference on November 22, 2022, Fauci implored the American people, "* * * for your own safety, for that of your family get your updated COVID-19 shot as soon as you are eligible."[290] The implications of this false messaging reverberate throughout our body politic and tears at the social fabric of our nation, dividing families—separating parents from children, grandparents from grandchildren and brothers and sisters—as the vaxxed shun the "unvaccinated" under the false belief that the "unvaccinated" pose a threat to their safety and the safety of their children.

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[288] The Epoch Times, *New COVID-19 Vaccine Boosters Perform Poorly Against Symptomatic Infection: CDC Study* (Nov. 22, 2022), https://www.theepochtimes.com/new-covid-19-vaccine-boosters-perform-poorly-against-symptomatic-infection-cdc-study_4879371.html?src_src=Health&src_cmp=health-2022-11-24&est=TiMn%2F4fvU0sITqLNuE1nO1%2Bf0xqqdCViox3aZAkXbx1xZ9GD3TTbbSILTWX4QXdw

[289] *Id*.

[290] NBC News, *In final White House briefing, Fauci urges Americans to get updated Covid booster,* (Nov. 22, 2022), https://www.nbcnews.com/politics/white-house/final-white-house-briefing-fauci-urges-americans-get-updated-covid-boo-rcna58363

216. Pfizer, using FDA approval of its Comirnaty COVID-19 "vaccine," slyly advertises its COVID-19 "vaccines" (including the BioNTech approved under EUA) Direct-to-Consumer (DTC).[291] The first Pfizer ads never mention the word "vaccine" or "COVID-19" but just showed people congregating (getting back to normal) without masks and without fear.[292] The Pfizer ads did not have to reference "vaccine" effectiveness or safety—or the necessity of everyone getting "vaccinated" as a precondition to returning to normal—because the groundwork molding public perception had been laid by HHS advertising and PSAs and government press releases, pronouncements and guidance.[293] This allowed the Pfizer ads to piggy-back off the government messaging.

217. The Pfizer ads were inherently deceptive for three reasons: (1) The Comirnaty "vaccine" has ***never*** been available for distribution in the U.S. So, Pfizer knew it was really marketing its EUA approved "vaccines" ***as if FDA-approved*** without required warnings, disclaimers or caveats; (2) The ads implied getting "vaccinated" would protect you from infection and, thus, transmission of the virus, something even the "vaccine" clinical trials run by Pfizer failed to show. Further, contrary to the representations made or implied in the ads, "vaccine" failure and lack of efficacy has been established by real world data (including data collected and published by the CDC) and foundational principles of immunology dispel the notion that any "vaccine" is effective against a coronavirus ; and, (3) The representation that ***everyone*** getting "vaccinated" was ***necessary*** for a "return to normal" is patently false as data has reaffirmed the principle that natural immunity is far better and longer lasting than any

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[291] Fierce Pharma, *Pfizer offers a soft sell with a strong message on vaccines in first COVID ad* (Jan. 13, 2022), https://www.fiercepharma.com/marketing/pfizer-offers-a-soft-sell-a-strong-message-vaccines

[292] *Id.*

[293] Quartz, *Why is Pfizer advertising a vaccine that gets plenty of free promotion?* (Sept. 18, 2021), https://qz.com/2059769/pfizer-is-planning-to-advertise-its-covid-19-vaccine-comirnaty

immunity that may be conferred by a "vaccine," children are a near zero risk of developing serious illness or dying from COVID-19 and, even people under 70 are at an insignificant risk of serious illness or death from the virus.

218. Pfizer's "Don't Miss Your Shot" ad features an NBA star talking about how he immediately got his COVID-19 "vaccine" because of he loves the game and it's important he be on the basketball court (in close contact with others), implying that the "vaccine" is safe (even though we have seen a record number of athletes suffer cardiac arrest and die on the field of play), necessary (even though risk of death or serious illness for children and young adults is insignificant), and will prevent infection and transmission of the virus (a representation that has been proven to be patently false.)[294] Pfizer is never mentioned by name in the body of the ad, however, the reference to "vaccination" conveys a message as to the necessity and safety and effectiveness of ***all*** "vaccines"—including Pfizer's.[295]

219. Pfizer is now marketing the ineffective—and dangerous—bivalent booster (to "help protect yourself") both to seniors and young Americans without warnings, disclaimers or caveats and with full government approval.[296] It was FDA approval of the Pfizer Comirnaty "vaccine" for COVID-19 at "warp speed" that has opened the door to such deceptive advertising, advertising that craftily includes all EUA-approved "vaccines" under the umbrella of full FDA

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[294] Fierce Pharma, *Pfizer offers a soft sell with a strong message on vaccines in first COVID ad* (Jan. 13, 2022), https://www.fiercepharma.com/marketing/pfizer-offers-a-soft-sell-a-strong-message-vaccines

[295] *Id*.

[296] Fierce Pharma, *Pfizer, targeting a younger demographic, enlists yet another celeb for its latest COVID vaccine ad* (Feb. 16, 2023), https://www.fiercepharma.com/marketing/pfizer-targeting-younger-demographic-enlists-yet-another-celeb-its-latest-covid-vaccine

approval. The Pfizer ***bivalent booster*** is ***only approved under EUA*** and was foisted on the American people without the benefit of any clinical trials based on a study of eight (8) mice.[297]

220. The ineffectiveness of the "vaccines" at preventing infection or transmission of COVID-19 has begun to be acknowledged by the judiciary as well as early proponents of the "vaccines." The New York Supreme Court, County of Richmond, set aside the New York City "Vaccine" Mandate for sanitation workers, finding that the COVID-19 "vaccines" prevented neither infection nor transmission of the virus. *Garvey, et al. v. The City of New York, et al.*, Index #85163/2022, Decision and Order (10/24/22).[298] And, Bill Gates, a once strong proponent of the "vaccines," has admitted they do not stop infection or transmission of the virus[299] as has Fauci.[300]

STANDING

221. As a direct and proximate result of the government's disinformation campaign and its far-reaching and intensive efforts to force the COVID-19 "vaccines" upon the entire population of this country down to every man, woman and six-month-old child, plaintiffs, in addition to suffering the personal deprivations and injuries set forth ⁋⁋1- 9 of this Complaint, have the Sword of Damocles hanging over their heads. As Justice Thurgood Marshall cannily explained, "the value of a sword of Damocles is that it hangs—not that it drops." *Arnett v.*

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[297] Trial Site News, *Is Pfizer Breaking Federal Laws with Latest Bivalent Booster Vax Advert Starring Charlie Puth?* (Feb. 18, 2023), https://www.trialsitenews.com/a/is-pfizer-breaking-federal-laws-with-latest-bivalent-booster-vax-advert-starring-charlie-puth-88d421d6

[298] https://www.nycourts.gov/Reporter/3dseries/2022/2022_22335.htm

[299] The Defender, Children's Health Defense, *Bill Gates — After Reaping Huge Profits Selling BioNTech Shares — Trashes Effectiveness of COVID Vaccines* (01/27/23) https://childrenshealthdefense.org/defender/bill-gates-profits-biontech-effectiveness-covid-vaccines/?eType=EmailBlastContent&eId=b10ab12a-9145-457a-a009-beb7a8ae8a07

[300] Cell Host and Microbe, *Rethinking next-generation vaccines for coronaviruses, influenza viruses, and other respiratory viruses* (Jan. 11, 2023) https://www.cell.com/cell-host-microbe/fulltext/S1931-3128(22)00572-8

Kennedy, 416 U.S. 134, 231 (1974) (Marshall, J., dissenting). The government's disinformation campaign has been the driving force behind "vaccine" and mask mandates in both the public and private sector and the illegal banning and suppression of safe and effective drugs for treatment of COVID-19.

222. The government's disinformation campaign endangers plaintiffs' health and welfare and that of their families and vitiates or overrides, or imminently threatens to vitiate or override, their rights to informed consent to medical treatment and bodily integrity and autonomy and the right to direct the education and upbringing of their children (which includes the care and management of their children) by interfering with their right to control medical decisions for themselves and their children. It also unconstitutionally abridges plaintiff's free speech rights by, among other things, depriving them of information and opinions untainted by government labels wrongfully disparaging the content of social media posts critical of the government's COVID-19 policies or the outright banning of such content or the speakers that post such content.

223. The government has intentionally acted to place ***restrictions*** upon doctors in prescribing safe and effective generic drugs off-label for treatment of COVID-19 in order to further its universal vaccination policy and ***force*** the use of the deadly remdesivir as the ***only*** early antiviral treatment for COVID-19. The NIH treatment guidelines for COVID-19 have consistently recommended using remdesivir and against the use of ivermectin and hydroxychloroquine and the FDA has reinforced this guidance through the damning of these generic drugs. The vast majority of physicians and hospitals throughout the country have, on information and belief, ***steadfastly followed government guidance*** for treatment of COVID-19

and denied patients access to such generic drugs for off-label use resulting in hundreds of thousands of unnecessary deaths and threatening the loss of more lives.

224. The extensive obstacles erected by the government to deny access to safe and effective generic drug treatments unnecessarily burdens plaintiffs' rights to informed consent to treatment and bodily integrity and interferes in the physician/patient relationship. The absence of insurance coverage and the extraordinarily high price for these generic drugs exacts a further penalty on plaintiffs—and others who desire access to them—for leaving the care of their government-complaint PCP. Further, on information and belief, the high price of generic drugs for off-label treatment of COVID-19 results from an artificial, government-induced scarcity of prescribers and suppliers (pharmacies) facilitated by highly successful government efforts disparaging the safety and effectiveness of such drugs.

225. By insinuating itself into the physician/patient relationship, the government not only interferes in plaintiffs' relationship with their physician but endangers their health and welfare and that of their children, family members and others who may become infected with COVID-19 who will have to search out physicians and pharmacies in hopes of securing these safe and effective early treatments. This results in a built-in delay in treatment which can result in undue injury and harm as early intervention in treatment of COVID-19 presents a far better prognosis for recovery.

226. Additionally, the government disinformation campaign threatens to dry up any sources for alternative treatments as physicians who prescribe these drugs are under ***constant threat*** of disciplinary action including revocation of their license to practice. On information and belief, pharmacists who fill prescriptions for these drugs are also under ***constant threat*** of disciplinary action.

227. The government, by encouraging or inducing state medical and pharmaceutical boards to prohibit access to these drugs, effectively imposed restrictions on off-label use and erected obstacles to access for the purpose of justifying its EUA for the "vaccines" and steering people to get "vaccinated."

228. The NIH Treatment Guidelines for COVID-19 have, on information and belief, been adopted by all hospitals in this state. This has resulted in implementation of a deadly hospital treatment protocol (following NIH Treatment Guidelines and Recommendations) that is ***killing patients*** (in 2021 and 2022, ***hospital treatment*** for COVID was ***primary cause of death*** among all age cohorts.)[301] By ***limiting*** early antiviral treatments (patients with COVID and those who require conventional oxygen but do not have rapidly increasing oxygen needs and systemic inflammation) to remdesivir and ***prohibiting*** off label use of other ***FDA approved*** antivirals like hydroxychloroquine and ivermectin, hospitals are ***forcing patients*** to submit to a toxic treatment protocol that places their lives at imminent risk of harm. The very existence of this protocol for treatment of COVID-19 creates an imminent risk to the health and welfare of plaintiffs, their children and loved-ones and their fellow countrymen.

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[301] NIH, *COVID-19 Treatment Guidelines* (Updated December 1, 2022) at pp. 34, 53, 63, 74, 367, https://files.covid19treatmentguidelines.nih.gov/guidelines/archive/covid19treatmentguidelines-12-01-2022.pdf; NIH, *COVID-19 Treatment Guidelines* (Updated December 6, 2022) at pp.50, 51, 349, 364, https://files.covid19treatmentguidelines.nih.gov/guidelines/archive/covid19treatmentguidelines-12-06-2022.pdf; Epoch Times, *Sudden Death: The No. 1 Cause of Death for Under 65s in 2021*, https://www.theepochtimes.com/mkt_app/health/sudden-death-the-no-1-cause-of-death-for-under-65s-in-2021_4966680.html?src_src=Health&src_cmp=health-2023-01-07&est=vyaNcZxtvAncGI%2BfYxeNuVU%2B1rPnzHC7XN24GFaMrUiPnxUfaX1TiNi%2BFqRCRuuj; The Defender, Children's Health Defense, *Risk of Dying From COVID Always Was 'Miniscule,' Regardless of Age* (11/02/22, https://childrenshealthdefense.org/defender/covid-miniscule-death-risk-cola/?eType=EmailBlastContent&eId=61483b7f-b9d9-4322-bad6-4e9175d7eef2

229. Given plaintiffs' knowledge of the widespread, dangerous and deadly hospital treatment protocol in this state, plaintiffs, like many others, will avoid hospitalization for COVID-19 at nearly any cost.

230. Plaintiff Roe, as a result of the fatal series of strokes his father-in-law suffered shortly after receiving a blood transfusion, is aware of the danger of developing blood clots from transfusion of "vaccinated" donor's blood. "Human Blood and Immunoglobulin G (IgG) from Covid19 Jab induced Blood Clot victims are confirmed by Australian researchers to be dangerous to the unjabbed."[302] Every "vaccination" increases the risk of adverse outcomes for "unvaccinated" patients who may require blood transfusions and thus presents an imminent risk of harm to the health and welfare of both plaintiffs and their fellow Americans.

231. With every advertisement of the "vaccines," ***false government messaging*** is reinforced and the Sword of Damocles is lowered. The cumulative effect of these ads exacts a constitutional deprivation of the right to bodily integrity as it ***vitiates*** or ***overrides***, or imminently threatens to vitiate or override, informed consent to treatment either by deceiving the "vaccine" recipient or deceiving the employer or other person or entity with control over the livelihood, education, or enjoyment of privileges and immunities of citizenship or full access to society. These advertisements also reinforce the division among families borne out of the government messaging vilifying the "unvaccinated" and portraying them as carriers of a deadly disease.

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[302] DailyClout, Pfizer Documents Analysis, *Red Cross Australia Refuses to Protect You, Australian researchers have proven that Blood from Covid19 Jabbees is a Clear and Present Danger of Clotting Injury and Death, but Red Cross Blood Bank will not provide untainted Blood to prevent VITT*, by Geoff Pain, PhD (January 12, 2023), https://dailyclout.io/red-cross-australia-refuses-to-protect-you/; citing Nature.com, *NETosis and thrombosis in vaccine-induced immune thrombotic thrombocytopenia* (05 September 2022) https://www.nature.com/articles/s41467-022-32946-1

232. Further, Public Service Advertisements (PSAs) sponsored by the government or in which the government has collaborated with private entities, represent an intrusion into the constitutional right of every American to direct the education and upbringing of their children which directly impacts parents in the exercise of medical decision-making for their children. The threat to parental rights has been greatly accelerated with the CDC's inclusion of the ***experimental*** COVID-19 "vaccines" on the Childhood Immunization Schedule and the FDA's granting EUA of the bivalent booster for children 6 months of age and older.[303] Pediatricians will recommend COVID-19 "vaccines" and boosters for children and it is reasonably foreseeable that many, if not all, states will eventually adopt the CDC's recommendations.

233. With the imprimatur of federal health agencies, COVID-19 "vaccines" granted ***EUA*** will be ***normalized*** and will continue to be marketed to parents of children as young as six months but now bolstered even further by the government's official seal of approval. By including the EUA COVID-19 "vaccines" on the Childhood Immunization Schedule the government, ***without any scientific basis***, has ***profoundly declared*** the "vaccines" are "safe and effective" ***and*** necessary for everyone. With this action, the government has sent a clear and unmistakable message to parents, a message that provides additional reasons (coercion) to get their child "vaccinated": Failure to get your child "vaccinated" will threaten your child's access

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[303] The Defender, *'Child Abuse on a Massive Scale': CDC Advisers Recommend Adding COVID Vaccines to Childhood Schedule* (Updated 11/30/22), https://childrenshealthdefense.org/defender/childhood-covid-vaccine-schedule/?eType=EmailBlastContent&eId=d00ea2b9-61c1-464c-a072-cc7b9e0cdd1a; *'Tragic': CDC Adds Original COVID mRNA Vaccine to Childhood Schedule Despite Known Harms* (02/10/23), https://childrenshealthdefense.org/defender/cdc-covid-mrna-vaccine-childhood-schedule/?eType=EmailBlastContent&eId=2cbc918a-8bc7-47ce-af80-70306725676d ; U.S. Food and Drug Administration, FDA News Release, *Coronavirus (COVID-19) Update: FDA Authorizes Updated (Bivalent) COVID-19 Vaccines for Children Down to 6 Months of Age* (Dec. 8, 2022), https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-updated-bivalent-covid-19-vaccines-children-down-6-months

to education, daycare and preschool, participation in extracurricular activities at school, employment opportunities and other privileges and immunities of citizenship and may result in their ostracization from society.

234. Following CDC Guidance and government messaging, states and localities have denied access to education and employment based on "vaccination" status and many private sector employers have imposed "vaccine" mandates, a phenomenon which is most likely to remain unabated as the government, having control of the information highway, continues to pound home its "public service" message, all to the great detriment of plaintiffs and their fellow citizens.

235. The "unvaccinated" have been made targets of hate and discrimination due to "widespread ***misunderstandings*** about, and ***overstated benefits of, COVID-19 "vaccines," false claims*** over societal risks posed by the unvaccinated, misleading or plainly false media or state ***propaganda, coercion*** to insure higher rates of COVID-19 vaccination, institutional mandates, the desire for ingroup identity as explained by social identity theory (Scheepers and Derks 2016.)"[304] (Emphasis added) In addition to other forms of discrimination, this has manifested itself in decisions made in child custody cases.[305]

236. The rift many of the plaintiffs have experienced in their families is directly attributable to the government disinformation campaign and the vilification of the "unvaccinated" by government officials, including Biden.[306] The government disinformation

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[304] The Defender, *How Are the Unvaccinated Doing? Survey Says: Healthy but Unjustly Treated*, 08/30/22, https://childrenshealthdefense.org/defender/unvaccinated-covid-misinformation-discrimination/?eType=EmailBlastContent&eId=b19fc3d4-5af4-4d42-954a-8ae46fe57d89

[305] https://duckduckgo.com/?q=vaccination+and+child+custody+cases&atb=v314-1&ia=web

[306] Medical X press, *Polarization after COVID-19: Global study reveals that the unvaccinated face prejudice in most countries* (Dec. 8, 2022), https://medicalxpress.com/news/2022-12-polarization-covid-global-reveals-unvaccinated.html

campaign has been so successful, it has torn at the social fabric of this nation. It has torn apart friendships. It has torn apart families, the foundation of our society and body politic. Friends have been excluded from social gatherings and family members have been excluded from family gatherings based on "vaccination" status. Brothers and sisters have been alienated from each other, parents have been alienated from their adult children and grandparents have been prohibited from seeing their grandchildren. The government misconduct alleged herein exacts a dear cost and undermines public policy, all to the detriment of plaintiffs and their fellow citizens.

237. With every "vaccine" ad, with every announcement of the federal health agencies on the safety and efficacy of the "vaccines," with every guidance issued, the noose of tyranny is tightening around the necks of plaintiffs who have been vilified and targeted by the government as a threat to public health and welfare. The "unvaccinated" in this country live under a constant and imminent threat. They are victims of discrimination who, in addition to suffering irreparable injury to their family ties, have been, or are in imminent danger of being, denied access to society-at-large, denied the ability to provide for their family, to better themselves and pursue the American dream based on their "vaccination" status. The ads, in conjunction with the aforesaid actions of the government set forth herein, provide the foundation for imposition "vaccine" mandates and medical tyranny against all Americans.

238. The universal "vaccination' policy of the Biden Administration, its demonization of the "unvaccinated" and its enlistment of illicit, coercive, and fraudulent measures to force "vaccination" upon the American people has resulted in wrongful denial of fundamental privileges and immunities of American citizenship to the "unvaccinated." Plaintiffs reasonably fear that, if left unchecked, the government will continue to deny, and encourage, induce and recommend denial of fundamental privileges and immunities of American citizenship to the

"unvaccinated," will continue to encourage, induce and recommend state and local governmental entities and the private sector implement or continue "vaccine" mandates in employment, to condition access to society-at-large on "vaccination" status and will expand its reach into more aspects of their lives and those of their fellow countrymen.

239. The government's intermeddling in the physician/patient relationship has interfered with plaintiffs' free speech rights as state medical and pharmaceutical boards discipline doctors and pharmacists who dare prescribe proven safe and effective drugs off label for treatment of COVID-19 (thus eliminating discussion of these drugs in treatment decisions,) who criticize the safety and effectiveness of the "vaccines" or the government response to COVID-19 and the media censors such speech, in collaboration, combination and/or conspiracy with the government. *Conant v. Walters*, 309 F.3d 629, 635 (9th Cir. 2002) The restraint on "professional speech" of physicians, resulting from unlawful government interference in the physician-patient relationship, deprives not only physicians of their right to freedom of speech, but their patients as well. *Id.* at 634, 635 ("In the marketplace of ideas, few questions are more deserving of free-speech protection than whether regulations affecting health and welfare are sound public policy * * * To hold that physicians are barred from communicating to patients sincere medical judgments would disable patients from understanding their own situations well enough to participate in the debate")

240. We know the COVID-19 virus mutates rapidly, and different variants have been met with the sound of government alarms and a wave of disinformation calling on people to get "vaccinated" and boosted. However, sound, established principles of immunology indicate that, the more people that are "vaccinated," the greater the threat that the COVID-19 virus will mutate into a much deadlier, "vaccine"-resistant strain. The implementation of a "***sub-optimal non-***

sterilizing, non-neutralizing vaccine in the midst of ongoing infection (where there is massive infectious pressure) is not just driving more infectious variants, but also the selection of more virulent variants placing the lives of plaintiffs and their fellow citizens at risk.[307] The government's universal vaccination policy thus endangers the health and safety of all Americans, including plaintiffs and their families. Further, the "vaccines" could lead to pathogenic priming making the "vaccinated" (including those upon whom "vaccination" is forced) more susceptible to reinfection, severe illness, hospitalization or death upon contact with a wild virus.

241. Although education is not a right guaranteed under the U.S. Constitution, many state constitutions guarantee the right to a public education and the importance of equal access to education has been widely recognized in the courts. Nonetheless, "more than 500 colleges and universities, including Ohio State University[308] and other universities and colleges throughout the state of Ohio, have mandated "vaccination" to ***prevent transmission*** of the virus ***following guidelines published by the CDC***. *Klaassen v. The Trustees of Indiana University*, 549 F.Supp.3d 836, 847, note 15 (N.D. Ind. 2021) (vaccination required for full capacity in-person learning without masking or social distancing at institutions of higher education for all students, faculty and staff) The U.S. Department of Education (DOE) and the American College Health Association also recommended mandatory vaccination for return to full capacity, in-person learning) Id., notes 14, 16 – 18.

242. Ohio State University (OSU) offers a prime example of the deceptive nature of the government's disinformation campaign. OSU engages in an obvious sleight of hand with its COVID policy. It requires "vaccination" with an FDA approved COVID-19 "vaccine" (the

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[307] Brownstone Institute, Paul Elias Alexander, *61 Efficacy Studies That Rebuke Vaccine Mandates* (Oct. 28, 2021), https://brownstone.org/articles/16-studies-on-vaccine-efficacy/
[308] OSU.EDU Safety and Health Buckeyes, *COVID-19 Vaccine Requirement*

Comirnaty) which is ***not available*** in the U.S. but will accept a "vaccine" that has received EUA from the FDA. The choice presented is illusory. OSU knows that the only FDA approved "vaccine" is nowhere to be found in the United States and that it is ***forcing students, faculty and staff to get "vaccinated" with an experimental drug***, a "vaccine" approved only under the ***EUA statute*** which ***expressly provides for the right to refuse treatment***. 21 U.S. Code § 360bbb–3(e)(1)(A)(ii)(III). The COVID-19 "vaccine" is falsely advertised as "safe and effective" on the OSU website: "Safe and effective COVID-19 vaccines are the ***best way to protect*** yourself and ***your loved ones***" (Emphasis added) But see: 21 CFR Sec. 312.6(b) ("The label or labeling of an investigational new drug * * * shall not represent that the investigational new drug is safe or effective for the purposes for which it is being investigated.") OSU's "vaccine" mandate is based on a material ***misrepresentation of scientific fact*** and it bootstraps the EUA products to the Pfizer Comirnaty implicitly giving them the same official stamp of approval.[309] All "vaccines" (including the Comirnaty) are experimental gene therapies and their approval by the FDA was fraudulent and/or fraudulently induced (data from the clinical trials and post-marketing experience (Ex. B) showing "vaccine" failure and ineffectiveness and a full nine (9) pages of adverse events of special interest—information which the FDA and Pfizer concealed and only provided after they were forced by court order to make available to the public.

243. The CDC's guidance and recommendations have tremendous influence over the policies of private employers and public institutions as its guidance and recommendations are perceived to be authoritatively based on science—and thus a safe-haven and protection against liability—and are often reflexively and automatically implemented as policy. Further, the government's endorsement of discrimination against the "unvaccinated" amidst the

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[309] *Id.*;

disinformation warfare it is waging against the American people, and its guidance to, and encouragement and inducement of, the private sector and state and local governments to implement discriminatory policies designed to punish those who refuse the "vaccine," has jeopardized plaintiffs' health and welfare, or imminently threatens to do so. The specter of reintroduction of "vaccine" mandates presents an imminent threat to plaintiffs, their children and grandchildren. ***Unless*** the government stranglehold on information is broken and people are honestly and fully informed of the necessity for and the risks and benefits of the "vaccines," the threat will only become more immediate and the prospects of "vaccine" mandates even more likely. Government control of the narrative ensures government control over the person as evidenced by the widespread reliance upon, and adoption of, faulty government guidance.

244. The government disinformation campaign places plaintiffs' health and welfare at risk.

A. Mandating people submit to injection of an experimental drug (COVID-19 "vaccines") under threat of termination of employment requires them to choose between loss of their livelihood, their ability to provide for themselves and their families, and a very real risk to their health and welfare. Faced with the Hobbesian choice of losing the ability to provide for themselves and their families or gambling with their health by injection of an experimental "vaccine," plaintiffs reasonably fear the outcome of either choice. The same goes for imposition of "vaccine" mandates conditioning access to education.

B. Since the rollout of the "vaccines," there has been an unusual number of sudden deaths. German health insurance data shows sudden deaths increased 400% on rollout of the "vaccines."[310]

C. There has been an anomalous, off-the-chart increase in all-cause mortality since the rollout of the "vaccines"[311] and a recent study published in BMC Infectious Diseases, a peer-reviewed journal, estimated the death toll from the "vaccines" in 2021 to be somewhere between 217,330 and 332,608.[312]

D. There is a serious risk of side-effects (adverse events) associated with the "vaccines."

E. Real world data—as well as admissions by the government defendants—show the "vaccines" are not effective in preventing either infection or transmission of the virus, nor are they necessary for the general population—especially children and younger adults.

F. Reliable and authoritative sources have questioned the necessity for, and the safety and efficacy of, the "vaccines."

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[310] Gateway Pundit, *German Data Analyst Reveals Data from Health Insurance Shows 4 Times Increase in Sudden Deaths Following COVID Vaccine Rollouts* (Dec. 13, 2022), https://www.thegatewaypundit.com/2022/12/german-data-analyst-reveals-data-health-insurance-shows-increase-sudden-deaths-following-covid-vaccine-rollouts/

[311] news.com.au, *Excess deaths in 2022 'incredibly high' at 13 per cent*, (Dec. 8, 2022), https://www.news.com.au/lifestyle/health/health-problems/excess-deaths-in-2022-incredibly-high-at-13-per-cent/news-story/2a33dfeeb7476765da4e237c59f59bf7; Rumble, *Ed Dowd & Josh Stirling Testify to a 40% increase in excess mortality: Senator Johnson's Covid-19 Vaccine Roundtable* (Dec. 8, 2022), https://rumble.com/v1znzrq-40-increase-in-excess-mortality-senator-johnsons-covid-19-vaccine-roundtabl.html

[312] The Epoch Times, *More Than 217,000 Americans Killed by the COVID Jab: Survey Estimate* (Feb. 7, 2023), https://www.theepochtimes.com/health/more-than-217000-americans-killed-by-the-covid-jab-survey-estimate_5040245.html?src_src=Health&src_cmp=health-2023-02-08&est=KC0PbTQ%2F7cjxlQlUlDe20NeyrVQXkWAi0wAkrWiZlQKQBwzH%2Bp109pKLgmJFbvT%2F

G. The COVID-19 virus mutates faster than the "vaccines" can be updated, rendering boosters worthless.[313]

H. Many major air carriers imposed "vaccine" mandates on their pilots per FAA guidance. Recently the FAA quietly raised by a full 50% the acceptable indicator (ECG) (tolerance) of heart health for pilots, meaning the FAA finds more health conditions acceptable and is accommodating pilots who have suffered cardiac injury.[314] "Former FAA safety inspector Stephen Carbone called the new guidelines '"nothing short of safety sacrilege'" and an '"assault on aviation safety,'" adding, '"I can't highlight enough how dangerous this is and how irresponsible.'"[315] According to pilot Greg Pearson, who was ***forced*** to get the "vaccine" due to an employer mandate and travel restrictions imposed by the states of Hawaii and California and who suffered atrial fibrillation shortly after receiving the shot, a number of pilots are suffering cardiac and other issues post-COVID-19 "vaccination," including 25 year old pilots, but they are afraid to come forward "out of fear of retribution." According to Pearson, "There are guys going to work with crushing pains in their chest and their heads."[316] This greatly increases the risk of air disasters and unnecessarily endangers the lives all Americans. The CDC, NIH and FAA have suppressed this information.[317]

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[313] The Defender, Children's Health Defense, *WSJ Slams Vaccine Makers, Federal Agencies for Pushing Boosters, as FDA Concedes Data Are 'Complicated'* (01/23/23), https://childrenshealthdefense.org/defender/wsj-covid-booster-fda/?eType=EmailBlastContent&eId=2efa1676-5877-4ffb-87d1-9b6547b008f4

[314] The Defender, Children's Health Defense, *Did COVID Vaccine Injuries Influence FAA's Revision of EKG Test Limits for Pilots?* (01/24/23), https://childrenshealthdefense.org/defender/faa-pilots-ekg-test-limit-covid-vaccine-injuries/?eType=EmailBlastContent&eId=62476a32-91a6-48c7-a6e4-880a5a406ad5

[315] *Id.*

[316] https://twitter.com/RealAmVoice/status/1473051068061806594

[317] *Id.*

I. Further, real world data shows the more COVID-19 shots you get, the higher your risk of contracting COVID-19 and ending up in the hospital and, "[o]ver the past year, researchers have been warning that the COVID-19 jabs appear to be dysregulating and actually destroying people's immune systems, leaving them vulnerable not only to COVID-19 but also other infections."[318]

J. The "unvaccinated" have been discriminated against in the provision of medical care (Candice Owens[319] and transplant candidates),[320] and have been so vilified that shapers of public opinion have advocated denial of medical care to the "unvaccinated" and some doctors have refused care. There is an imminent risk that all plaintiffs (and their fellow Americans) will be turned down for surgery, denied medical care or otherwise be discriminated against because they are "unvaccinated."

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[318] The Defender, Children's Health Defense, *Africa Didn't Follow WHO's Pandemic Script. Guess What Happened?* (01/24/23), https://childrenshealthdefense.org/defender/africa-covid-pandemic-cola/?eType=EmailBlastContent&eId=62476a32-91a6-48c7-a6e4-880a5a406ad5

[319] Yahoo! News, *Candace Owens denied service at COVID test site for spreading misinformation* (Sept. 2, 2021), https://news.yahoo.com/candace-owens-denied-covid-test-131543892.html?guccounter=1&guce_referrer=aHR0cHM6Ly9kdWNrZHVja2dvLmNvbS8&guce_referrer_sig=AQAAAHwUrf8pdaxKUxXWIfboQqQyG2gq3WsZsA_0iRLCiPpZoAKzLJOTmkfmPMcxzSPnwIqtJM7kGKe3AzFQYOEFOmBmrTovZGXar4eZ0p9zs6NYbUDj9nH9oy7Adt_4XL392TpyZFqyuKaFoAN9YV2ziI3lyZhEIEATa3hjuiUqDe-L

[320] 3WKYC Studios, *3News Investigates: Controversial COVID-19 vaccination requirements for transplant donors, recipients at Cleveland Clinic* (Updated April 15, 2022) *https://www.wkyc.com/article/news/investigations/3news-investigates-covid-19-vaccination-requirements-transplant-donors-recipients-cleveland-clinic/95-b1253d72-732c-4140-aaef-3cd2a72b098b;* AMA, *No COVID-19 vaccination, no care? Why that's the wrong path* (Sept. 21, 2021), https://www.ama-assn.org/delivering-care/ethics/no-covid-19-vaccination-no-care-why-s-wrong-path; Yahoo! *News, Medical ethicists criticize doctors refusing to treat the unvaccinated* (Sept. 24, 2021), https://news.yahoo.com/medical-ethicists-criticize-doctors-refusing-to-treat-the-unvaccinated-202958236.html; The Defender, *Teen Denied Kidney Transplant Because She's Not Vaccinated for COVID, Say Parents + More* (12/12/22), https://childrenshealthdefense.org/defender/covid-nw-teen-denied-kidney-transplant-not-vaccinated/?eType=EmailBlastContent&eId=639c143b-7748-4e96-a274-4b0c3823e7e3

K. Pfizer's own clinical trial documents indicate that its mRNA vaccine ingredient that instructs for spike protein can be transferred from a "vaccinated" person to another person by skin-to-skin contact, inhalation, and by sexual intercourse through exchange of bodily fluids, causing an "unvaccinated" person to be environmentally exposed to the vaccine. This is known as shedding and the Pfizer documents reveal that it is a real concern.[321]

L. For these and other reasons, it is reasonably foreseeable that plaintiffs' health and welfare—and that of their children and grandchildren—are under imminent threat of harm due to "vaccine" mandates that have been imposed nationwide and discrimination against the "unvaccinated" that restricts their mobility in employment, their access to education and society-at-large and denies them full rights of citizenship.

245. The government-sponsored advertising campaigns (PSAs), government collaboration with social media and print and broadcast media to censor and ban anyone from the public town square—including well-credentialed experts—critical of the government response to COVID-19, or who question the necessity for, or the safety and efficacy of, the "vaccines" has created a ***hostile living environment*** for plaintiffs, one that impacts, or threatens to impact, their free speech rights, their employment and personal and familial relationships and imminently threatens to override their informed consent to treatment for COVID-19. The government has squelched scientific debate, guided discriminatory employment policies, divided families and deprived Americans of the privileges and immunities of citizenship.

246. Plaintiffs are adversely affected by the government's universal "vaccination" policy, its unscientific mask mandates and the disinformation campaign it has waged against the

[321] Daily Clout, *Report 18: Vaccine 'Shedding': Can This Be Real After All?* (May 13, 2022), https://dailyclout.io/vaccine-shedding-can-this-be-real-after-all/

American people.[322] Further, the consequences of repeated injection of an experimental drug are not known.

247. The rollout of the bivalent booster, the CDC's addition of the experimental (EUA) COVID-19 "vaccine" to the Childhood Immunization Schedule and the granting of EUA for children aged 6 months or older, indirectly impacts plaintiffs by affirming the safety and efficacy of the "vaccines" and is a clarion call to stop the government-created madness infused into our body politic.

CLAIMS FOR INJUNCTIVE AND DECLARATORY RELIEF

COUNT I
(Violation of the APA)

248. Plaintiffs hereby reallege and incorporate all preceding allegations of this complaint by reference as if fully reproduced herein.

249. The FDA is possessed of no statutory authority to prohibit, direct or advise against the use of FDA approved drugs off-label, yet it has done so. Further, 21 U.S.C. §396 provides, in pertinent part, that nothing in the statute "shall be construed to limit or interfere with the authority of the health care practitioner to prescribe any legally marketed device * * *" Courts have interpreted this to include prescribing or administering drugs. *See: Markland v. Insys Therapeutics, Inc.*, 758 F. App'x 777, 780 (11th Cir. 2018) *U.S. ex rel King v. Solvay Pharms, Inc.*, 871 F.3d 318, 328 (5th Cir. 2017), *U.S. ex rel Nathan v. Takeda Pharms, N.Am., Inc.*, 707 F.3d 451, 454 n.2 (4th Cir. 2013); *United States v. Coronia*, 703 F.3d 149, 167 (2nd Cir. 2012); *United States v. Muoghalu*, 662 F.3d 908, 911 (7th Cir. 2011); *Smith v. C.R. Bard, Inc.*, 730 F.Supp.2d 783, 803 (M.D. Tenn. 2010) The decision to use an FDA approved drug is within the

[322] The Brownstone Institute, Paul Elias Alexander, *Extensive Efficacy Studies that Rebuke Vaccine Mandates* (Oct. 28, 2021), https://brownstone.org/articles/16-studies-on-vaccine-efficacy/

sole province of the physician-patient relationship and is to be decided by the patient in consultation with his physician.

250. The FDA unlawfully interfered in the physician/patient relationship by banning ivermectin for off-label use in treatment of COVID-19 and by advising against its use.

251. The aforesaid actions of the FDA have effectively denied plaintiffs timely access to safe and effective drugs (antivirals) in treatment of COVID-19 as their PCP's, in compliance with FDA instructions, guidance and pronouncements and that of state medical and pharmaceutical boards ***following FDA "guidance,"*** refuse to prescribe the drugs. Further, as the FDA has encouraged and induced state medical and pharmaceutical boards to bring disciplinary action against physicians who fail to follow FDA "guidance" and prescribe these drugs, plaintiffs' access to these drugs is imminently threatened thereby.

252. The FDA has unlawfully taken formal and unmistakable action to prohibit the use of ivermectin or has otherwise interfered in the use of this drug in treatment of COVID-19. There is no statute authorizing the FDA to do this or to direct or advise against using off-label drugs for a particular condition, the prescribing of which is common practice in the medical community.

253. FDA regulations confirm the principle that the agency cannot interfere with the practice of medicine or in the off-label use of FDA-approved drugs. See: 21 C.F.R. § 312.2(d) ("This part does not apply to the use in the practice of medicine for an ***unlabeled indication*** of a new drug product approved under part 314 or of a licensed biological product.") (Emphasis added)

254. A "non-statutory review action" may be brought challenge "ultra vires" conduct of a federal agency as it is the judiciary that decides whether a federal official has acted in excess of

his statutory authority. *Chamber of Com. of U.S. v. Reich*, 74 F.3d 1322,1327–28 (D.C. Cir. 1996)

255. Judicial review of final agency actions is authorized under the APA (5 U.S.C. § 704) and requires courts to "hold unlawful and set aside agency action, findings, and conclusions found to be. . . arbitrary" or "capricious." Statements by a federal agency can qualify as actions subject to review under the APA. *Avoyelles Sportsmen's League, Inc.v. Marsh*, 715 F.2d 897, 908 (5th Cir. 1983).

256. It is not necessary that the agency action have legally binding effect to render it final agency action under the APA. Statements made by the FDA and other federal health agencies are routinely and customarily relied on by health care practitioners and the public to establish the standard of care. The statements made by the FDA damning the use of ivermectin have had their intended result (interfering in the practice of medicine) and constitute final, unambiguous agency action reviewable under the APA.

257. Agency actions are "arbitrary" or "capricious" under the APA if the agency fails to engage in "reasoned decision-making." *Allentown Mack Sales &Serv., Inc. v. NLRB*, 522 U.S. 359,374 (1998) (internal quotation omitted). This necessarily requires that "[n]ot only must an agency's decreed result be within the scope of its lawful authority, but the process by which it reaches that result must be logical and rational." *Id*. "* * * the agency must examine the relevant data and articulate a satisfactory explanation for its action including a '"rational connection between the facts found and the choice made.'" *Motor Vehicle Mfrs. Ass'n of U.S., Inc.v. State Farm Mut. Auto. Ins. Co.*, 463 U.S. 29, 43 (1983).

258. The FDA did not provide adequate justification for taking official positions on the use of ivermectin to treat COVID-19. The FDA refused to consider real world data and

observational studies showing the safety and effectiveness of ivermectin. There have been a number of studies, including randomized controlled trials (RTCs) that have proven ivermectin effective and it has a stellar track record of safety. The FDA thus ignored scientific evidence that showed ivermectin to be an effective prophylactic or early or acute treatment for COVID-19.[323] The FDA has in fact admitted it was acting without considering the relevant evidence. ("The FDA has not reviewed data to support use of ivermectin in COVID-19 patients to treat or to prevent COVID-19.")

259. The FDA acted in a formal, perfunctory and unequivocal fashion to prevent and/or interfere with a patient's right to, in consultation with their physician, elect to use ivermectin to treat COVID-19. The FDA's decision-making was not reasoned. Therefore its actions may only be considered to be both arbitrary and capricious.

260. Further, agency action that is not in accordance with law must be declared unlawful and set aside. 5 U.S.C. § 706(2)(A) The FDA may not " * * * limit or interfere with the authority of a health care practitioner to prescribe or administer * * *" drugs approved by the FDA for human use. 21 U.S.C.§ 396. The FDA, abusing its public trust, in contravention of this statutory mandate, deliberately interfered in the practice of medicine by directing and advising against the use of ivermectin.

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[323] Epoch Times, *The Truth About Ivermectin Medical miracle or notorious lynchpin of misinformation?* (Nov. 21, 2022), https://www.theepochtimes.com/health/ivermectin-overview_4854366.html?src_src=Health&src_cmp=health-2022-11-23&est=OGWrKu76x5lqj9FMjrpmQp%2B2oyfIIaGgx4afQ6Kd9hLIlz5Tya3tc4NkipcqCd6e; The Epoch Times, *Ivermectin Is Safe and Effective: The Evidence* (Dec. 25, 2022), https://www.theepochtimes.com/health/ivermectin-is-safe-and-effective-the-evidence_4944960.html?src_src=Health&src_cmp=health-2022-12-26&est=Os2rFjkP0xfFVKDhrfLXcQQe21EeAVPsk%2BSHKyc29r2aMGZJevobDGR8GTDvrZQU

261. Without specific statutory authority, the FDA is generally prohibited from giving medical advice about how approved drugs should be used off-label. Congress has clearly ***not*** given the FDA that authority, but rather has ***restricted*** the authority of the FDA and ***explicitly*** prohibited it from limiting or interfering " * * * with the authority of a health care practitioner to prescribe or administer" drugs approved for human use. 21 U.S.C.§ 396 The limitations on the power of the FDA clearly signify the congressional determination that the practice of medicine is best left to the physician and is a matter regulated by the state. The FDA acted in excess of its statutory authority and abused its public trust improperly and unlawfully exerting its influence upon state medical and pharmaceutical boards to deny patients access to ivermectin and to discipline those health care practitioners who dare prescribe it.

262. Under a false imprimatur of authority the FDA effectively prohibited, interfered with or obstructed the use of ivermectin and in so doing, unlawfully interfered in the physician/patient relationship. On September 1, 2021, the American Medical Association (AMA), American Pharmacists Association (APhA) and American Society of Health System Pharmacists (ASHP), citing FDA and CDC advisories against the use of ivermectin, issued a joint "statement on ending the use of ivermectin to treat COVID-19" stating they "**strongly oppose the ordering, prescribing, or dispensing of ivermectin to prevent or treat COVID-19 outside of a clinical trial**."[324] (Original Emphasis) There is "substantial evidence of a causal relationship between the government policy" embodied in the statements and pronouncements of the FDA and the conduct of the Ohio state medical and pharmaceutical boards, "leaving little doubt as to causation and the likelihood of redress." *Physicians Assoc. v. U.S.D.H.S.*, 489 F.3d

[324] AMA, Press Releases, *AMA, APhA, ASHP statement on ending use of ivermectin to treat COVID-19* (Sept. 1, 2021), https://www.ama-assn.org/press-center/press-releases/ama-apha-ashp-statement-ending-use-ivermectin-treat-covid-19

1267, 1275 (D.C. Cir. 2007) (quoting *National Wrestling Coaches Ass'n v. Dep't of Educ.*, 366 F.3d 930, 941 (D.C. Cir. 2004 For, if the FDA withdrew its statements and acknowledged the numerous studies showing the safety and effectiveness of ivermectin in treatment of COVID-19, state medical and pharmaceutical boards would follow suit (just as they did when the FDA damned this drug) and physicians would be free to prescribe this drug and pharmacists free to fill prescriptions for it without being threatened with disciplinary action (including license revocation.)

263. Plaintiffs will continue to suffer irreparable injury from denial or obstruction of access to a safe and effective drug in treatment of COVID-19 unless the FDA is enjoined to correct its false, ultra vires, messaging to the Federation of State Medical Boards, the National Association of Boards of Pharmacy and the public in the form and manner requested herein.

COUNT II
(Denial of the Right to Bodily Integrity—Vitiating or Overriding Informed Consent to Treatment—Government Defendants)

264. Plaintiffs hereby reallege and incorporate all preceding allegations of this complaint by reference as if fully reproduced herein.

265. The right to reject any form of unwanted physical contact is a fundamental right implicit in the Liberty Clause of U.S. Constitution Amend. 14, Section 1 which prohibits states from depriving "any person of life, liberty or property without due process of law." The U.S. Supreme Court has recognized a "general liberty interest in refusing medical treatment." *Cruzan v. Dir., Mo. Dep't of Health*, 497 U.S. 261, 278, 110 S. Ct. 2841, 2851, 111 L.Ed.2d 224, 242 (1990) It has also recognized that the forcible injection of medication into a nonconsenting person's body represents a substantial interference with that person's liberty. *Washington v.Harper*, 494 U.S. 210, 229, 110 S. Ct. 1028, 1041, 108 L.Ed.2d 178, 203 (1990 ***Informed***

consent is a critical element of the right to refuse medical treatment and without it, any injection is, by definition, a forcible assault upon bodily integrity and autonomy and unconstitutionally infringes upon individual liberty. There can be no more basic right in a free society than the right to determine what shall be done with one's own body.

266. The Nuremberg Code addresses the moral, ethical and legal requirements for medical experimentation on human subjects and sets forth the international norm for informed consent. The first foundational element is ***voluntary consent*** which "* * * means that the person involved should * * * be so situated as to be able to exercise free power of choice, ***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 to make an understanding and enlightened decision." (Emphasis added)

267. 21 U.S.C. §360bbb-3(e)(1)(A)(ii) partially codifies the requirement of informed consent and ***mandates*** that recipients of the "vaccines" approved under EUA be notified, among other things, that the "vaccines" have been authorized for emergency use, of their "significant known and potential benefits and risks," of the "extent to which such benefits and risks are unknown" of "the ***option to * * * refuse*** administration" of the "vaccines" and "of the "***alternatives*** that * * * are available * * * and of their benefits and risks." (Emphasis added) The informed consent mandates of this statute have been purposely undermined and overridden by the conduct of the government alleged herein which has: (1) falsely represented that recipients (especially children) will derive a benefit from the injection; (2) falsely represented (greatly exaggerated) the benefits of the injection for the general population (including children) (3) not only failed to disclose known and potential risks but actively concealed those risks; (4)

forced "vaccinations upon the general population, made fraudulent and deceitful representations regarding the performance characteristics, benefits and risks of "vaccination," applied duress and overreaching or other underhanded form of constraint or coercion to overcome "vaccine" hesitancy and take away the option to refuse the injection; and, (5) unlawfully injected itself into the physician/patient relationship to wrest away alternative drug therapies from consideration by either physician or patient.

268. The government has made representations to the American people to induce them to repose ***trust*** in the federal health agencies and, ***trust*** they have reposed, as witnessed by the wholesale adoption of the guidance and recommendations of those agencies at the local level (state and county health agencies, universities and state and local governments, medical and pharmaceutical boards, hospitals, physician groups and physicians) and throughout the private sector.

269. The government has, however, ***abused the trust of the American people*** and used its power and authority to secure a virtual ***monopoly*** on dissemination of information concerning COVID-19 and the "vaccines." In furtherance of its campaign of fraud, coercion and duress, the government has manipulated the media and slyly disarmed its critics, on information and belief, destroying, or attempting to destroy, their reputations and inflicting financial harm or ruin, and has otherwise engaged in ***disinformation warfare*** against the American people to ***defeat*** their right to ***informed consent***.

270. The government threatened social media companies with adverse government action to control access to the public square for the purpose of manipulating the American people to submit themselves and their children to "vaccination" for COVID-19 without valid or informed consent —and to submit to ineffective masking and other failed government

interventions as well. By conspiring and/or colluding with social media companies to ban highly credentialed and, in some cases, world-renowned experts, and censor experts, information and opinions critical of the "vaccines" (including attachment of "misinformation" labels to information and opinions critical of the government response to COVID-19) the government elevated itself to the position of being the ***only authoritative source*** on COVID-19 and abused that power to force its misnamed "vaccine" injection upon the American people.

271. The government also, along with Pfizer, effectively bribed media companies to broadcast only positive coverage of the "vaccines" by paying substantial sums for "advertising."[325] "[N]early the entire corporate media took money from the Biden Administration to push the vaccines to their audiences without disclosing it."[326] "Brought to you by Pfizer" has inundated the airwaves.[327] As a result, critics of the "vaccines" were denied coverage and airtime as negative coverage of the "vaccines" became taboo. In this way, government captured control the narrative.

272. The aforesaid conduct of the government defendants was engaged in for the ***express purpose*** of vitiating or overriding informed consent to treatment in violation of the Liberty Clause (U.S. Constitution, Amend. 14) and the very statute under which EUAs for the "vaccines" were granted. [21 U.S.C. §360bbb-3(e)(1)(A)(ii)] *See also: Cruzan ex rel. Cruzan v. Director, Missouri Department of Health,* 497 U.S. 261, 278 (1990)

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[325] Emerald Robinson's The Right Way, *Fox News & Newsmax Took Biden Money To Push Deadly COVID Vaccines To Its Viewers* (May 5, 2022), https://emeralddb3.substack.com/p/fox-news-and-newsmax-took-biden-money

[326] *Id.*; See also: The Blaze, *Exclusive: The federal government paid hundreds of media companies to advertise the COVID-19 vaccines while those same outlets provided positive coverage of the vaccines* (March 3, 2022), https://www.theblaze.com/news/review-the-federal-government-paid-media-companies-to-advertise-for-the-vaccines

[327] https://rumble.com/v26v0fg-brought-to-you-by-pfizer.html; https://www.banned.video/watch?id=616f5fef0d954a07248804ff

273. The government, abusing its position of ***trust***, engages in false and deceptive messaging for the purpose of inducing the American people to rely thereon and the American people have justifiably relied on its misrepresentations to their great damage and detriment suffering an infringement on their constitutional rights and a threat to their health and welfare.

274. In addition to controlling the media narrative, the government, through the ultra vires action of the FDA, also abused its position of ***trust*** to exert undue and improper influence upon state medical and pharmaceutical boards to unlawfully insert itself into the physician/patient relationship. The government welcomes, encourages and supports the intimidation of physicians critical of the government's "universal vaccination" policy or proponents of alternative safe and effective treatments (ivermectin and hydroxychloroquine) through threats of disciplinary action by state medical boards as an effective way to crush dissent and combat "vaccine" hesitancy. It has abused the ***trust*** reposed in it and exerted its power and authority to create an environment of fear within the medical community— and among the American people—to force compliance with its policy goal of universal "vaccination." People are "tagged and bagged" for injection of the "vaccine" and the hands of their physicians are tied behind their backs.

275. The COVID-19 Treatment Guidelines of the NIH and the illegal, ultra vires action of the FDA have steered the American people to get "vaccinated" by suppressing and obstructing access to safe and effective treatments for COVID-19 all for the purpose of overriding or vitiating informed consent to treatment.

276. The government's disinformation campaign was calculated to have a profound impact on the practice of medicine and has resulted in hundreds of thousands of unnecessary

deaths as most doctors followed the government's treatment guidelines (no treatment) or were intimidated and, in many cases, prohibited, from prescribing life-saving drugs.

277. The result of this government intervention has been to deprive people (including plaintiffs) of the ability to secure safe, effective and timely (early) treatment for COVID-19 and subjected them to a deadly hospital treatment protocol (following NIH treatment guidelines) against their will.

278. A patient's right to informed consent to treatment not only includes the right to refuse treatment but also includes the right to choose, after consultation with their physician, among different treatment options, and without interference by outside forces that unlawfully limit those options. Restrictions placed upon doctors, hospitals and pharmacies throughout this state—and every other state in the union—that prohibit, suppress or obstruct patient access to ivermectin or hydroxychloroquine or any other generic, FDA-approved drug for off-label treatment of COVID-19 unlawfully interfere in the physician-patient relationship and endanger plaintiffs' health and welfare and that of their families and fellow citizens.

279. By prohibiting PCPs from ***discussing*** or ***prescribing*** alternative treatments with their patients (under threat of revocation of their license to practice medicine) and providing them "cover" with government guidance, the right to informed consent to treatment and bodily integrity and autonomy has been impaired, vitiated or overridden by government fiat.

280. The application of duress and the taking away of a patient's free speech rights to influence a patient's decision to consent to a medical procedure vitiates and/or overrides informed consent rendering the consent invalid.

281. The government, having established itself as the ***sole arbiter of scien***ce, uses its lordly and very powerful position to disseminate propaganda and disinformation ***masquerading***

as science. At the government's powerful prodding, the practice of medicine morphed from science-based to the realm of the political, all to the great detriment of the American people.

282. The "safe and effective" messaging has been, and continues to be, parroted by employers, educational institutions, physicians and others and has been so oft repeated and amplified that it has become embedded in public discourse and relied upon by many. This messaging has been used to justify the imposition of mandates and other forms of discrimination against, and adverse treatment of, the "unvaccinated" and, it is so engrained on the American psyche, it presents an imminent threat to the constitutional rights of plaintiffs and others similarly situated. These false representations were calculated to influence a person's decision to consent to "vaccination," to overcome "vaccine" hesitancy and buoy the government's universal "vaccination" policy. However, the use of false representations to encourage and induce "vaccine" mandates and to otherwise influence a person's decision to consent to a medical procedure vitiates and/or overrides informed consent rendering the consent invalid.

283. Using its ***trusted status*** to wrest control of the narrative, the government has insinuated itself into the lives of the American people through ***every conceivable means*** at its disposal for the ***express purpose*** of vitiating or overriding informed consent to treatment. The government has engaged in tactics to limit and conceal information, censor speech, mislead the American people on the benefits of, and risks associated with, the "vaccines," falsely portray the vaccines as "safe and effective," greatly exaggerate the threat of COVID-19 (by inflating both the number of cases and the death toll through statistical manipulation and deadly early treatment guidelines (no treatment)), damn proven safe and effective drugs for off-label use in treatment of COVID-19 and coerce physicians into refusing to discuss these drugs with their patients—or

prescribe them—and pharmacies into refusing to dispense them all for the express purpose of overriding or vitiating informed consent to treatment.

284. The extraordinary amount of coercion meted out, sponsored, encouraged, induced and recommended by the government has in fact vitiated or overridden informed consent to treatment and has exacted a constitutional deprivation of rights guaranteed plaintiffs and their fellow citizens under the Liberty Clause or imminently threatens to do so.

285. At the beginning of the pandemic, ***trusted*** government agencies and spokespersons announced incredibly exaggerated death toll estimates, manipulated cases and death toll statistics and padded those statistics by issuing ***trusted*** treatment guidelines (no treatment) which deprived patients of safe and effective early treatments (ivermectin and hydroxychloroquine) all for the purpose of engendering fear in the American populace and widespread acceptance of the ***"vaccines"*** as the ***only option*** to avoid infection and stop transmission of the virus. Universal "vaccination" we were told by our ***trusted*** government officials, would give us herd immunity and defeat the "deadly menace" known as COVID-19.[328] However, the government knew this representation to be false when made.

286. The fraudulent representations made by the government respecting the danger COVID-19 presents to the general population—and their amplification in the media—have in fact induced fear and panic and drove demand for the experimental gene therapies mislabeled "vaccines" just as the government intended.

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[328] Johns Hopkins, Bloomberg School of Public Health, *What Is Herd Immunity and How Can We Achieve It With Covid-19* (April 16, 2021), https://publichealth.jhu.edu/2020/what-is-herd-immunity-and-how-can-we-achieve-it-with-covid-19; CBS News, *Inside the $250 million effort to convince Americans the coronavirus vaccines are safe* (Dec. 23, 2020), https://www.cbsnews.com/news/covid-vaccine-safety-250-million-dollar-marketing-campaign/

287. The initial declaration of a public health emergency and the renewals thereof—while they served the purpose of ginning up fear and paving the way for mass inoculation of the American public with an experimental gene therapy drug—were ***not*** justified by the data. The Secretary of HHS knew or should have known that COVID-19 did not, nor does it now, present a substantial risk to the ***general population*** of the U.S. as the death rate from COVID-19 was, and remains, comparable to the traditional flu among Americans under 70 years of age, current variants are more akin to the common cold, safe and effective alternative treatments (like ivermectin and hydroxychloroquine) have been available and, importantly, the "vaccines" were ***never*** tested for, nor found to prevent, transmission of the virus, nor do they prevent infection. You cannot protect others by getting "vaccinated" and even universal "vaccination" will not achieve herd immunity.

288. The granting of EUA for COVID-19 "vaccines" for children as young as 6 mos. of age and the adding of COVID-19 "vaccines" to the Childhood Immunization Schedule by the CDC is particularly troubling as children are at a statistically near zero risk of developing severe illness from COVID-19 and the known and potential risks of serious, life-altering adverse events among pediatric patients are significant and substantial.[329] Nonetheless, the American Academy of Pediatrics, following CDC guidelines, recommends "vaccination" of children as young as 6 months and, as a result, so do pediatricians who are financially incentivized, ethically justified and presumptively shielded from liability in recommending and administering the "vaccine."

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[329] *'Tragic': CDC Adds Original COVID mRNA Vaccine to Childhood Schedule Despite Known Harms* (02/10/23), https://childrenshealthdefense.org/defender/cdc-covid-mrna-vaccine-childhood-schedule/?eType=EmailBlastContent&eId=2cbc918a-8bc7-47ce-af80-70306725676d DailyClout, *Report 54: Infants and Children Under 12 Given the Pfizer mRNA COVID "Vaccine" Seven Months BEFORE Pediatric Approval. 71% of Adverse Event Cases Classified as Serious* (Jan. 31, 2023), https://dailyclout.io/report-54-infants-and-children-under-12-given-the-pfizer-mrna-covid-vaccine-seven-months-before-pediatric-approval-71-suffered-serious-adverse-events/

289. The American people also relied upon the fraudulent representations made by the government and "vaccine" manufacturer Pfizer respecting the results of "vaccine" clinical trials and the "safe and effective" messaging that followed (official pronouncements, press releases, guidance and treatment recommendations, advertisements) and flocked to get "vaccinated," believing the "vaccines" would protect them from getting infected with COVID-19 and that universal "vaccination" would stop transmission of the "deadly" virus.

290. The wrongful damning of the "unvaccinated" by the President, the White House and officials within the federal health agencies and their ***false representations*** that the "unvaccinated" are a threat to the health and welfare of the citizens of this country has created a ***hostile living environment*** for the "unvaccinated" (including plaintiffs) that has justified discrimination against them and their adverse treatment—denying them access to employment, education, medical care and society-at-large. Declaring the pandemic a pandemic of the "unvaccinated" and misrepresenting that the COVID-19 "vaccines" prevent infection and transmission of the virus, the official government narrative vilifying the "unvaccinated" has also torn at the social fabric of this nation dividing families, alienating family members and ending friendships.

291. Family and personal relationships have been irreparably tainted or torn asunder and cannot be mended so long as the government remains empowered to censor speech and manipulate the American public through its extensive disinformation campaign, a campaign that has rooted government propaganda as fact throughout the body politic. The government messaging is calculated to "influence" a person's decision to consent to "vaccination" by placing the "unvaccinated" under such duress as to obtain their capitulation to the experimental gene therapy injection. The application of duress to influence a person's decision to consent to a

medical procedure—especially an experimental one—vitiates and/or overrides informed consent, rendering the consent invalid.

292. The coordinated, conspirative, collaborative, fraudulent and coercive tactics used by the government to force "vaccination" and masking upon the general population of this and other states—including children as young as 6 months of age—violates the unconstitutional conditions doctrine and, as such, requires strict scrutiny of the government's universal "vaccination" program (messaging, guidance and recommendations) and its guidance respecting mask mandates (which, on information and belief, is followed ***without question*** by the vast majority state and local authorities and medical providers across the country.) Thus, the government bears the burden of proving the safety, efficacy and necessity of such government mandates and interventions and that less restrictive alternatives are not available.

293. The government's use of coercion to force unwanted medical procedures upon the American people—and their children—gives rise to the most vital of liberty interests and this is especially so when the procedure is new and experimental, the health risks are serious, deadly or unknown, there is no necessity for the procedure ("vaccination") and benefits are fleeting and insignificant at best. The long history and tradition of an Americans' right to reject unwanted physical contact and unwanted medical procedures, considered in conjunction with the internationally accepted Nuremberg principles (which set the standard for informed consent), establishes that the right to reject COVID-19 injections is a fundamental right under the Liberty Clause.

294. The right to refuse medical treatment—especially when the treatment is an experimental drug—is rendered meaningless if the choice is influenced by force, fraud, deceit, duress or other underhanded tactic. The government, however, has purposely insinuated each of

these elements into the decision to get "vaccinated" in a concerted effort to vitiate or override informed consent, a necessary casualty of the government's mission to overcome "vaccine" hesitancy and further its universal "vaccination" policy.

295. The government's manipulation of the American people through propaganda and disinformation is particularly insidious as it recommended, induced, encouraged and incentivized private employers and schools and universities to vitiate or override a person's right to refuse injection of an "experimental" gene therapy drug (the COVID-19 "vaccines") through mandates that exacted a deprivation one's right to informed consent and bodily integrity or autonomy. Denying employment and educational opportunities to the "unvaccinated" is an ***extremely coercive*** measure that places the "unvaccinated" under ***extreme duress*** to "consent" to the injection. In this circumstance "consent" is neither informed nor valid.

296. Further, the restrictive and deadly hospital protocol for treatment of COVID-19 is a direct and proximate result of government guidance from the NIH, CDC and FDA, financial incentives to follow government treatment guidelines (PCR testing, treatment with government approved drugs like remdesivir and ventilators) the Public Service Advertisements (PSA) sponsored by the HHS and the Ad Council, statements made by Fauci and government/media censorship of speakers, opinions and information as to the benefits of ivermectin, hydroxychloroquine and other drugs in off-label treatment of COVID-19.[330]

297. On information and belief, hospitals perceive reliance on government guidance and recommendations to be a shield against liability and, for this and other reasons (such as the

[330] See: FDA Letter to Federation of State Medical Boards dated December 13, 2021 (attached hereto as Exhibit E and incorporated by reference as if fully reproduced herein) CMS.gov, Centers for Medicare & Medicaid Services, *New COVID-19 Treatments Add-On Payment (NCTAP)*, https://www.cms.gov/medicare/covid-19/new-covid-19-treatments-add-payment-nctap

financial incentives for following NIH Treatment Guidelines), have prohibited the administration of alternative treatments—even at the request of the patient or their family members.

298. The disinformation campaign is the vehicle through which the government has been able to successfully manipulate state institutions and other public and private sector entities to mandate "vaccination" and thus vitiate or override informed consent after the government's efforts to do so directly were struck down on constitutional grounds. Employers and others imposing "vaccine" and mask mandates need only point to guidance and recommendations of the federal health agencies which they perceive to be a shield against liability and justification for their actions. They can lay claim to being both patriotic and socially responsible in implementing a work-site health policy requiring administration of an FDA-approved "vaccine" (the Pfizer Comirnaty)—a calculated sleight of hand as, in point of fact, only "vaccines" approved under EUA are available and "only 4% of Pfizer [BioNTech] lots were '"equivalent/interchangeable"' with Comirnaty.[331] In the process of doing the government's bidding, they are placing unconstitutional conditions on the exercise of the right to informed consent and bodily integrity, placing their employees under extreme duress to "consent" to "vaccination," subverting the very federal statute that authorized EUA for the "vaccines," and discriminating against their employees with absolutely no scientific basis to do so.

299. In addition to misrepresenting the dangers of COVID-19 in print and broadcast media, the ***government guidance*** issued to the American people, their employers, and Institutions of Higher Education (IHE), guidance for grades K – 12, preschools and daycares by the CDC contain ***misrepresentations of material fact*** concerning the benefits of the "vaccines," the risks associated therewith and the necessity thereof.

[331] Daily Clout, *Report 31: Pfizer-BioNTech "Equivalent" Half Truths or a "Lot" of Lies?* (June 29, 2022), https://dailyclout.io/pfizer-biontech-equivalent-half-truths-or-a-lot-of-lies/

300. The CDC, knowing the "vaccines" were never tested for their ability to prevent transmission and that they cannot and do not work against coronaviruses, has ***falsely represented*** in its guidance that "vaccination" is the "key prevention strategy" for the ***express purpose*** of encouraging and inducing employers to mandate "vaccination" as a condition of employment and universities to mandate "vaccination" as a condition of enrollment or in-class learning, thus penalizing Americans—and discriminating against them—for the purpose of forcing capitulation to "vaccination" under threat of job loss or loss of educational opportunities.

301. The threats to employment, denying access to education, the vilifying of the "unvaccinated" and their portrayal as a threat to the health and well-being of the "vaccinated" are all calculated to vitiate or override informed consent to treatment.

302. Forced "vaccination" is not even rationally related to a legitimate governmental interest, let alone does it further a compelling governmental interest. The COVID19 "vaccines" do not prevent transmission of the virus to others, do not prevent infection, there is no emergency justifying the use of an experimental gene therapy drug upon the general population—other than the one the government has contrived—nor is there any scientifically reliable evidence authoritatively establishing they have any positive impact on hospitalization or death.[332]

303. Pfizer's own trial data shows the shots have no benefit in reducing one's risk of hospitalization and/or death as "[t]he absolute risk reduction is so minute as to be inconsequential."[333] Nonetheless, the government persists in pursuing its universal "vaccination" policy for ***all*** Americans (including children 6 months of age and those at near zero risk of

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[332] The Epoch Times, *More Than 217,000 Americans Killed by the COVID Jab: Survey Estimate* (Feb. 7, 2023), https://www.theepochtimes.com/health/more-than-217000-americans-killed-by-the-covid-jab-survey-estimate_5040245.html?src_src=Health&src_cmp=health-2023-02-08&est=KC0PbTQ%2F7cjxlQlUlDe20NeyrVQXkWAi0wAkrWiZlQKQBwzH%2Bp109pKLgmJFbvT%2F

[333] *Id.*

developing serious illness) in violation of both the statutory mandates and constitutional rights of the American people and continues to deceive, coerce and cajole the American people into getting "vaccinated" using its ***trusted status*** as the ***preeminent and sole authority*** on COVID-19. As a direct and proximate result of the government's nefarious actions, "vaccinations" have become a condition of entitlement to full access to society and the privileges and immunities of American citizenship.

304. In the current government-controlled environment, the "unvaccinated" are social lepers who are denied—or in imminent danger of being denied, if the government is not ordered to cease its attack upon the American people—the enjoyment of the privileges and immunities of American citizenship based solely on their "vaccination" status in disparagement of our heritage as a nation and in contravention of public policy.

305. Consent obtained through fraud, coercion, duress (i.e. loss of employment or being barred from higher education, alienated from friends and family, being barred from restaurants, public transit and accommodations) or abuse of power, or by incomplete or false information, or other underhanded tactic is invalid.

306. Unless the government is enjoined to discontinue its encouragement and inducement of discrimination against the "unvaccinated" and withdraw and discontinue its false and deceptive messaging in the form of official pronouncements, press releases, statements to the media, recommendations, guidance and advertisements, comply with it statutory mandates and fulfill its constitutional duty to the American people, the government will continue to cause irreparable injury to plaintiffs and the body politic, for which there is no adequate remedy at law, by suppressing and obstructing access to alternative drug treatments and vitiating or overriding

and/or imminently threatening to vitiate or override informed consent to treatment (the "vaccine" injection) and the right to bodily integrity or autonomy.

307. Plaintiffs have been irreparably injured by the government's extremely successful disinformation campaign and are in imminent danger of continued and further deprivations of their constitutional rights unless the government, Pfizer and the Ad Council and those acting in concert with them are enjoined from advertising the "vaccines" for children and further enjoined from advertising them to the general population as "safe and effective" without appropriate warnings, disclaimers and caveats (including those required under the EUA statute).

308. Plaintiffs and their children are imminently threatened with irreparable injury unless the government is enjoined from imposing—or recommending the imposition of—mask mandates (conditioning access to education, health care or society-at-large) upon the general population (healthy, asymptomatic individuals) as an intervention against COVID-19, as such mandates have no basis in science, masks retard childhood development, expose children and others to highly and statistically significant and harmful levels of CO2 (more than 6 times the maximum acceptable level while sitting still with no physical exertion), contain carcinogenic particles increasing the risk of cancer, may increase the likelihood of infection and the severity of COVID-19, and wearing a mask is potentially harmful to anyone's health as one study out of Kansas has shown a significantly higher case fatality rate from COVID-19 where mask mandates were imposed.[334]

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[334] American Institute for Economic Research, Paul Elias Alexander, *Masking: A Careful Review of the Evidence* (Feb. 11, 2021) https://www.aier.org/article/masking-a-careful-review-of-the-evidence/; Brownstone Institute, Paul Elias Alexander, *More than 170 Comparative Studies and Articles on Mask Ineffectiveness and Harms* (Dec. 20, 2021), https://brownstone.org/articles/studies-and-articles-on-mask-ineffectiveness-and-harms/; msn Mediaite, *NYT Op-Ed Covers Explosive Study Finding Mask Mandates Useless: 'Will Any Lessons Be Learned?'* (02/23/23), https://www.msn.com/en-us/news/politics/nyt-op-ed-covers-

309. The public interest would be furthered by the issuance of preliminary and permanent injunctive relief requested herein and no harm can befall the government from enjoining it to honor its public trust and disengage from actions designed to vitiate or override the right to informed consent to treatment and bodily integrity.

COUNT III
(Deprivation of the First Amendment Right to Freedom of Speech)

310. Plaintiffs hereby reallege and incorporate all preceding allegations of this Complaint by reference as if fully reproduced herein.

311. The First Amendment to the U.S. Constitution prohibits the government from making laws abridging freedom of speech or the press as does the Ohio Constitution (Art.1 §11) which guarantees "[e]very citizen the right to freely speak write, and publish his sentiments on all subjects, being responsible for the abuse of the right."

312. The government has, through its disinformation campaign, effectively prohibited, prevented, burdened, and/or infringed upon, the exercise of First Amendment rights of PCPs to ***discuss*** the use of safe, effective generic drugs (like ivermectin and hydroxychloroquine) for treatment of COVID-19 with their patients as well as the benefits and risks of "vaccination." The deprivation of a physician's free speech rights necessarily exacts a deprivation of free

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explosive-study-finding-mask-mandates-useless-will-any-lessons-be-learned/ar-AA17Rei9; NIH, National Library of Medicine, *Carbon dioxide rises beyond acceptable safety levels in children under nose and mouth covering: Results of an experimental measurement study in healthy children* (published online May 28, 2022), https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9142210/; Children's Health Defense, The Defender, *Scientists Studied 12 Masks — Every One Contained This Cancer-Causing Compound*, (11/03/22), https://childrenshealthdefense.org/defender/masks-titanium-dioxide-cancer-cola/?eType=EmailBlastContent&eId=641909cb-d821-489b-9548-caa812049528; Children's Health Defense, The Defender, *New Studies Deliver Harsh Verdicts on Mask Mandates, Vaccine Mandates for U.S. Cities* (02/24/23), https://childrenshealthdefense.org/defender/covid-mask-vaccine-mandates-cities/?eType=EmailBlastContent&eId=6bb97304-0d25-45ff-8502-8bad6a85ae8a

speech rights of their patients. *Conant v. Walters*, 309 F.3d 629 (9th Cir. 2002) "The First Amendment also protects the right to receive others' thoughts, messages, and viewpoints freely, in a free flow of public discourse. '"[W]here a speaker exists …, the protection afforded is to the communication, to its source and to its recipients both.'" [*Id*. ¶109 quoting *Va. State Bd. of Pharmacy v. Va. Citizens Consumer Council*, 425 U.S. 748, 756 (1976)]

313. And, '"[i]f there is any fixed star in our constitutional constellation, it is that no official, high or petty, can prescribe what shall be orthodox in politics, nationalism, religion, or other matters of opinion.'" *Missouri et al. v. Biden, et al.*, No. 3:22-cv-01213-TAD-KDM , Second Amended Complaint ¶98, quoting *W. Va. State Bd. of Educ. v. Barnette*, 319 U.S. 624, 642 (1943)[335]

314. It is '"axiomatic'" that the government may not '"induce, encourage, or promote private persons to accomplish what it is constitutionally forbidden to accomplish.'" [*Id*. ¶113, quoting *Norwood v. Harrison*, 413 U.S. 455, 465 (1973) (quotations omitted). The government may not coerce or induce a private actor to take action to censor speech in which it may not itself engage. [*Id*. ¶114, citing *Knight First Amendment Institute*, 141 S. Ct. at 1226 (Thomas, J., concurring) The government may not accomplish indirectly that which it is prohibited from accomplishing directly. [*Id*.] Use of threats, intimidation, disinformation, fraud, duress, coercion and/or the conferring of financial benefits (bribes) upon private actors done for the purpose of suppressing, banning, censoring or otherwise infringing upon speech critical of government policy or actions and to further an illegitimate, unlawful and/or unconstitutional government policy (to vitiate, override or impair informed consent to medical treatment) violates the First Amendment.

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[335] https://nclalegal.org/wp-content/uploads/2022/10/Second-Amended-Complaint-Missouri-v.-Biden.pdf

315. The government has abused its power to create a monopoly on "science" which has allowed it to hold itself out as the sole and preeminent authority on science and the arbiter of truth. Using the imprimatur of federal health agencies—and their ***trusted status*** as benefactors of public health—the government has created a virtual ***monopoly on medical speech*** and scientific debate ("science" is what the government says it is) and imposed an orthodoxy on speech that allows it to ***moderate and control both speakers and content*** in both the public square and in communications among private individuals (including physicians and their patients.) The government's use of threats against social media companies to censor unwanted content of social media posts (i.e., content that goes against the official government narrative,) and ban the speakers that post it is well-documented. *Id*., ¶¶203 – 253 This government censorship of disfavored speech and speakers constitutes a prior restraint on speech. *Houston Cmty. Coll. Sys. v. Wilson,* 142 S. Ct. 1253, 1259 (2022)

316. The government has abused its self-ordained power not only to restrict access to information but to actively disseminate disinformation in the marketplace of ideas. In this way, the government has cut off debate—and the exchange of ideas and information—resulting in impairment of both plaintiffs' credibility and their ability to express their opinion and share information with their fellow Americans.

317. Individual speech is often tainted by "misinformation" labels on social media platforms and in print and broadcast media as well. This affects not only the credibility of plaintiffs' sources, but, as a logical corollary, plaintiffs' credibility as well. However, much of the "misinformation" the government censored indirectly through private actors has been found to be accurate "information"—and eventually admitted by the government to be so. For example, the government declarations that the COVID-19 gene therapy injections (intentionally

mis-labeled "vaccines") would remain in the injection site, prevent transmission of the virus and protect the community, were "safe and effective" ***and*** necessary for the entire population, have either been unceremoniously withdrawn, disproven or seriously questioned by scientific studies ***and*** government data. The precepts of the Great Barrington Declaration whose authors, signatories and principles were originally mocked and attacked by government officials have been silently and belatedly acknowledged as correct by the CDC which has finally admitted that the harms associated with the mass lockdowns it championed outweighed any benefits (studies have shown ***zero benefits*** from the lockdowns.)

318. On information and belief, e***very*** opinion expressed by experts critical of the government's response to COVID-19 (lockdowns, social distancing, masking and "vaccinations") has either been proven correct by scientific studies, data or unpublicized government admissions or has been shown to have substantial support in science and thus be worthy of serious consideration in the marketplace of ideas.

319. Twitter, YouTube and Facebook all censored speakers, opinions, studies and scientific data critical of the efficacy of face masks. *Missouri et al. v. Biden, et al.*, No. 3:22-cv-01213-TAD-KDM , Second Amended Complaint, supra at ⁋⁋148 – 156, 158, 159.[336] And, COVID-19 "misinformation" was proclaimed to be a "domestic terror threat" by DHS. [*Id*. at ⁋300]

320. Plaintiffs' contribution to the marketplace of ideas has been intentionally obstructed and undermined by the government which has emasculated and/or deprived plaintiffs of the opportunity, through the expression of their ideas and sharing of information, to contribute to the debate on COVID-19, a topic of great public interest and one having profound implications for

[336] https://nclalegal.org/wp-content/uploads/2022/10/Second-Amended-Complaint-Missouri-v.-Biden.pdf

our body politic. This has resulted in a deprivation of, and infringement upon, plaintiffs' First Amendment right.

321. Further, government censorship of views and speakers critical of the government's response to COVID-19 (including, but not limited to, the necessity for, and safety and efficacy of, "vaccines," the appropriateness of "vaccine" mandates, mask recommendations and mandates, and the safety and effectiveness of ivermectin and hydroxychloroquine) has further infringed upon plaintiffs' free speech rights by depriving the American public of access to scientific data, studies and expert opinions relating to the appropriateness of the government's response to COVID-19.

322. On information and belief, the government has even prevented peer-reviewed articles from being published because they undermine or seriously question its COVID-19 policies. The great majority of published articles that contain information and findings critical of, or which question, the government response to COVID-19 nonetheless conclude the benefits of government intervention outweigh the risks of harm. On information and belief, many scientists and physicians that publish articles relating to government policies are greatly influenced by government largesse, being dependent upon government funding and grants for their research. On information and belief, in addition to providing financial incentives for scientists and physicians to publish articles supportive of government policy, the government has fostered an environment of fear within the medical and scientific community by attacking the reputation of, and attempting to destroy, those who speak out against its official narrative, either directly or through loyal government surrogates.

323. The deplatforming of plaintiff Roe from Twitter was a direct result of the government monopoly on "science" and its collusion with Twitter to censor speech critical of the

government's COVID-19 policy, including speech which was perceived to contribute to "vaccine" hesitancy. The deplatforming of Roe resulted in a deprivation of his right to free speech.

324. As early as May 3, 2021, CNN reported that DHS planned to ***partner*** with private entities (social media companies) "to monitor disfavored speech online."[337] "The purpose of these '"partnerships'" was to evade legal, constitutional, and ethical problems with DHS's direct surveillance of online speech." [*Id*. at ⁋⁋276 - 277]

325. The physician/patient relationship has been irreparably injured by the publication of government disinformation as control over health care and parenting decisions (masking, "vaccination" and treatment with generic safe and effective anti-viral drugs such as ivermectin and hydroxychloroquine) has been, or is in imminent danger of being, wrested from the hands of the individual and their physicians.

326. Such government interference with plaintiffs' free speech rights is per se unconstitutional and violative of both the U.S. and Ohio constitutions. This court has inherent power to declare such government practices illegal and unconstitutional and enter judgment against the government, the private entities named as parties herein and all acting in concert with them, enjoining, restraining and abating such practices.

327. The public interest would be furthered by the issuance of preliminary and permanent injunctive relief requested herein enjoining what is irreparable harm from a continuing constitutional violation. No harm can befall the government from enjoining it to honor its public trust and disengage from actions designed to censor speech for the purpose of

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[337] CNN.com, *Biden team may partner with private firms to monitor extremist chatter online* (May 3, 2021), https://www.cnn.com/2021/05/03/politics/dhs-partner-private-firms-surveil-suspected-domesticterrorists/index.html.

vitiating or overriding the right to informed consent to treatment and bodily integrity and autonomy.

COUNT IV
(DECLARATORY JUDGMENT—All Defendants)

328. Plaintiffs hereby reallege and incorporate all preceding allegations of this Complaint by reference as if fully reproduced herein.

329. Under 28 U.S.C. §2201(a), plaintiffs are entitled to a judgment declaring the aforesaid collective actions of the defendants in conspiring to force "vaccination" on the American people by means of deception, misrepresentation, fraud, duress, coercion, abuse of the public trust and censorship unconstitutional and unlawful; declaring, the FDA unlawfully interfered in the physician/patient relationship; and declaring the CDC acted arbitrarily and capriciously and without scientific justification in issuing rules and guidance respecting mask mandates (which were imposed wholesale nationwide in transportation, entertainment, schools, hospitals, physician offices and other public and private facilities) and in adding experimental COVID-19 "vaccines" to the Childhood Immunization Schedule and, in so doing, abused the public trust and infringed on the liberty of the American people by depriving them of the right to informed consent to treatment and bodily integrity and autonomy in violation of the Liberty Clause of the 14th Amendment to the U.S. Constitution.

PRAYER FOR RELIEF

WHEREFORE, plaintiffs pray this court order the following relief:

Under Count I of this Complaint, that this court enter judgment holding the FDA acted unlawfully in banning, suppressing or obstructing the use of ivermectin in treatment of COVID-19 by issuing directives against its use and disparaging its safety and effectiveness as a treatment for COVID-19 and further, that this court issue an injunction against the FDA requiring it to

withdraw its guidance and official pronouncements portraying ivermectin to be ineffective and dangerous if used in treatment of COVID-19 and order the following specific relief:.

(1) That the FDA be enjoined to scrub any pronouncements it made on Twitter, its website, or other media platforms directing or recommending against the use of ivermectin in treatment of COVID-19 and/or disparaging ivermectin as a safe and effective prophylactic or treatment for COVID-19;

(2) That the FDA be enjoined to retract its letter to the Federation of State Medical Boards and the National Association of Boards of Pharmacy and send a letter to each of these entities specifically retracting its earlier guidance and/or directive or recommendation and admitting its earlier guidance, pronouncements and/or directives were wrong and that they unlawfully interfered in the physician/patient relationship and further informing these entities that Randomized Controlled Trials (RCTs), observational studies and real world data indicate that ivermectin is a safe and effective prophylactic and treatment for COVID-19;

(3) That the FDA be enjoined to correct any pronouncements it made on Twitter, its website or other media platforms by posting a retraction of its earlier guidance and/or directive or recommendation, admitting its earlier guidance, pronouncements and/or directives were wrong and unlawfully interfered in the physician/patient relationship and further stating that Randomized Controlled Trials (RCTs), observational studies and real world data indicate that ivermectin is a safe and effective prophylactic and treatment for COVID-19;

(4) That the FDA be enjoined to sponsor advertisements over major print and broadcast media and social media at least once weekly for a period of three (3) consecutive months retracting its earlier guidance and/or directive against the use of ivermectin in treatment of COVID-19 and admitting its earlier guidance, pronouncements and/or directives were wrong and

unlawfully interfered in the physician/patient relationship and further stating that Randomized Controlled Trials (RCTs), observational studies and real world data indicate that ivermectin is a safe and effective prophylactic and treatment for COVID-19;

(5) That the FDA be enjoined to retract its article "Why You Should Not Use Ivermectin to Treat or Prevent COVID-19"and any other information posted by it on its website or social media that disparages the use of ivermectin or other drugs (such as hydroxychloroquine) off-label for treatment of COVID-19.

Under Count II of this complaint that this court enter judgment against the government Defendants and Pfizer holding that they engaged in a conspiracy to vitiate and override informed consent to treatment and violate the right of plaintiffs and the American people to bodily integrity and autonomy through misrepresentation of the benefits and risks of the "vaccine," false and deceptive advertising, fraud, duress and coercion and that this court enjoin the defendants to do the following:

(1) That this court issue an injunction against all named defendants and those acting in concert with them, including, but not limited to, the Ad Council, COVID Collaborative and Sesame Workshop, enjoining all advertisements that target children and their parents to get their children "vaccinated" against COVID-19;

(2) Alternatively that this court issue an injunction against all named defendants and those acting in concert with them, including, but not limited to, the Ad Council, COVID Collaborative and Sesame Workshop, enjoining them to include the following information in any advertisement or "public service" announcement or advertisement that targets children and/or their parents to get their children "vaccinated" against COVID-19:

a. That the "vaccine" and any boosters are experimental, have been authorized

for emergency use only and are not FDA-approved;

b. That healthy children are at near zero risk of developing severe illness from COVID-19;

c. That the "vaccine" and any boosters do not prevent infection or transmission of the COVID-19 virus and the "vaccine" does not stay in the injection site;

d. That any efficacy of the "vaccine" and any boosters wane in a short period of time and additional boosters will be frequently required; and

e. List known adverse events of special interest (AESI), including, but not limited to, myocarditis and pericarditis, and state that the long-term effect on a child's health cannot be determined;

f. The right to refuse the "vaccine."

(3) That this court enjoin defendants and all those acting in concert with them (including the Ad Council, the COVID Collaborative and Sesame Workshop) to include the following warnings, disclaimers and caveats in any "public service" advertisement or other advertisements for the COVID-19 "vaccines" to the general public (adults and children):

a. That the "vaccine" and boosters have been authorized for emergency use only, are experimental and are not FDA-approved;

b. That the "vaccine" and boosters do not prevent infection or transmission of the COVID-19 virus and do not remain in the injection site;

c. That any efficacy of the "vaccine" and boosters wane over a short period of time and additional boosters will be required;

d. List known adverse events of special interest (AESI), including, but not

limited to, myocarditis and pericarditis, and state that the long-term effect on health cannot be determined;

e. "Vaccines" and boosters are potentially harmful to gestating, pregnant or lactating women and are not recommended;

f. The right to refuse the "vaccine."

(4) That this court enjoin the CDC to retract its guidance to employers and universities recommending "vaccination" as a key prevention strategy and that it be enjoined to issue new guidance on "vaccines" and boosters in conformity with (3)(a) – (f) above and, further, that it be enjoined to remove the COVID-19 "vaccines" (experimental drugs) from the Childhood Immunization Schedule;

(5) That this court enjoin the NIH to revise its treatment recommendations in conformity with the relief requested under Count I of this Complaint and specifically, that it retract is recommendation against the use of ivermectin and hydroxychloroquine and affirmatively acknowledge the use of those drugs off-label have been shown to be effective for treatment of COVID-19;

(6) That this court enjoin the U.S. government, its agencies and officers, including the U.S. Surgeon General, to retract its "guidance" to media and social media companies for censorship and banning of scientists, physicians and others who question "vaccine" safety and efficacy, the government's response to COVID-19 or the safety and effectiveness of off-label treatments for COVID-19 and/or their utility as a prophylactic in prevention of infection from COVID-19 and that it enjoin the U.S. government defendants to retract and correct their earlier guidance respecting COVID-19 "misinformation" and inform and provide guidance to the media and social media companies that the "vaccine" and boosters are not proven to be "safe and

effective," that natural immunity is superior to any "vaccine"-induced immunity, that ivermectin and hydroxychloroquine have been proven safe and effective as both a prophylactic against contracting the virus and in treatment of the virus, that the risk of serious illness, hospitalization or death from COVID-19 is near zero for healthy children and young adults and comparable to the traditional flu virus for those under age 70, that herd immunity will never be achieved through mass "vaccination" of the American public, that masking asymptomatic, healthy people (mask mandates) has not been shown to be effective in preventing the transmission of the virus and presents a serious risk of harm—especially to children—and that "vaccination" may increase the risk of serious illness, hospitalization or death; and that it publish new guidance to all media and social media companies to which it has sent prior "guidance" setting out disclaimers, warnings and caveats in conformity with (3)(a) – (f) above; and, further, that this court enjoin the U.S. government, its agencies or officers, from all future contacts with the media and social media companies relating to content moderation, censorship or banning of information related to COVID-19 (including, but not limited to, "vaccine" safety and effectiveness, the lack of necessity of "vaccination" for those under age 70 years—and especially for young adults and children—the safety and efficacy of alternative drugs like ivermectin and hydroxychloroquine for off-label treatment of COVID-19, the superiority of natural immunity, and increased risk of serious illness, hospitalization or death for the "vaccinated");

(7) That this court enjoin the U.S. government and those agencies of the government which it finds to have provided false and unscientific guidance to the media, including HHS, to advertise the truth about the "vaccines" in conformity with (3)(a) – (f) and (6) above at least once weekly in major print and broadcast media and on major social media platforms (including, but not limited to Facebook, YouTube, Twitter, and Google) for a period of three (3) consecutive

months and that HHS sponsor public service advertisements through the Ad Council, COVID Collaborative and Sesame Workshop containing the same content and for the same duration and frequency;

Under Count III of this Complaint, that this court issue judgment against the U.S. government holding that it, through its agencies and officers, engaged in a conspiracy with print and broadcast media and social media platforms to censor speech critical of the government narrative on COVID-19 in violation of the 1st Amendment to the U.S. Constitution and that it enjoin the government to do, or refrain from doing, the following:

(1) Prohibit the government from engaging in any activity to encourage, induce or direct the media to censor speech critical of its response to COVID-19;

(2) Prohibit the U.S. government and any of its agencies, officers or employees from engaging in any activity to encourage, induce or direct social media platforms to affix "misinformation" labels that target speech critical of the government's response to COVID-19;

(3) Order the government defendants to inform social media companies in writing of the terms of this injunction and the findings and holding of this court regarding the false and scientifically unreliable guidance, recommendations and pronouncements of federal health agencies, their officers and employees that were communicated to, and relied upon by, social media platforms to censor or ban speech or affix "misinformation" labels to those posts that were not removed.

Under Count IV of this Complaint, that the court issue the following declaratory judgment relief:

(1) judgment declaring the collective actions of the defendants in

conspiring to force "vaccination" on the American people by means of deception, misrepresentation, fraud, duress, coercion, abuse of the public trust and censorship unconstitutional and unlawful as infringing upon the rights to informed consent to treatment and bodily integrity and autonomy in violation of the Liberty Clause of the 14th Amendment to the U.S. Constitution;

(2) judgment declaring the FDA unlawfully interfered in the physician/patient relationship by its guidance, recommendations and pronouncements resulting in the suppression, obstruction or banning of ivermectin as an off-label treatment for COVID-19 and further declaring that patients, in consultation with their physicians, have a right of access to drugs off-label for treatment of COVID-19, including ivermectin and hydroxychloroquine;

(3) judgment declaring the CDC rules, recommendations, and guidance respecting mask mandates, being based on false representations and running counter to reliable scientific studies on the efficacy of masks in preventing airborne transmission of a coronavirus, exact, or threaten to exact, in combination with other unlawful conduct of the government, a deprivation of the constitutional rights to informed consent to treatment and bodily integrity and autonomy in violation of the Liberty Clause of the 14th Amendment to the U.S. Constitution;

(4) judgment declaring the addition of the experimental COVID-19 "vaccines" to the Childhood Immunization Schedule by the CDC exacts, or threatens to exact, in combination with other unlawful conduct of the government, a deprivation of the constitutional rights to informed consent to treatment and bodily integrity and autonomy in violation of the Liberty Clause of the 14th Amendment to the U.S. Constitution;

Reasonable attorneys fees, expenses and costs, including an award of fees, expenses and costs under the Equal Access to Justice Act (28 U.S.C. §2412), and for such other and further relief as may be just and equitable.

RESPECTFULLY SUBMITTED,

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EXHIBITS LIST

Exhibit	Description
A	August 23, 2021 FDA Approval Letter (Pfizer)
B	Pfizer's 5.3.6 Cumulative Analysis of Post Authorization Adverse Events Reports
C	Children's Health Defense letter sent via email to Dr. Califf, Dr. Walensky, Sec. Becerra, Dr. Marks and VRBPAC members dated June 10, 2022
D	BNT162b2 2.7.4 Summary of Clinical Safety, Table 16
E	FDA Letter to Federation of State Medical Boards dated December 13, 2021