

From: [REDACTED]
Sent: Friday, August 27, 2021 4:33 PM
To: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: notice of Liability
Attachments: Vaccine-Notice-of-Liability BJM 23 AUG 21.pdf

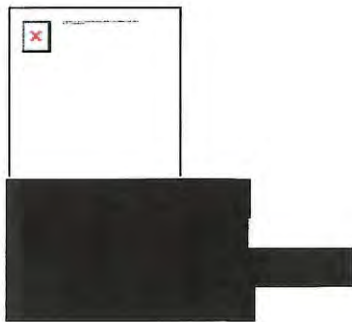
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Please read this entire document and send me a receipt of delivery along with an acknowledgement that the entire document has been read and fully understood.


[REDACTED]

***RECEPTION IS IN TO ANSWER CALLS ON MONDAYS AND THURSDAYS ONLY FROM 9:30AM - 2:00PM*. EMAILS WILL BE CHECKED REGULARLY THROUGHOUT THE WEEK.**

If I haven't answered your email in your expected timeframe, please know that I have read it and am formulating a thoughtful response for you :)



This is Exhibit "I" referred to in the
Affidavit of Rebecca Hill
affirmed before me at Vancouver
in the Province of British Columbia
this 24th day of May 2022


.....
A Commissioner for taking Affidavits
Within the Province of British Columbia

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%. ²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print)

August 23, 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan

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

This is your official and personal Notice of Liability.

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

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

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

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

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

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

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

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

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



August 23, 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: MLA: Hon. Adrian Dix

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

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

¹ <https://www.bitchute.com/video/nOeq0BxXfZ4f>

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

¹² [https://media.tehn.org/medialibrary/2011/04/BJMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tehn.org/medialibrary/2011/04/BJMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

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

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

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Duty of persons undertaking acts dangerous to life

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

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

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of
 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that; even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

- **Canadian Charter of Rights and Freedoms**³⁷ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁸ (2005)
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³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>

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

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

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

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.


Name (print)


Signature

Aug 24/21
Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

**“Vaccine” Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

¹ <https://www.bitchute.com/video/nQgg0BxXfZ4f>

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

¹² [https://media.tghn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethoneews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

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Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.


Name (print)


Signature

Sept 11, 2021
Date

Source: Action Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**



On Notice To: Stephen Brown Deputy of Health

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

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

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

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

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

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

Whereas:

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

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

¹² [https://media.tghn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

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

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

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

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

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

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7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccinimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
- (b) an offence punishable on summary conviction.

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.


Name (print)


Signature

Aug 30, 2021
Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

From: [REDACTED]

Sent: October 21, 2021 7:38 PM

To: Dix.MLA, Adrian LASS:EX <Adrian.Dix.MLA@leg.bc.ca>; Henry, Bonnie HLTH:EX <Bonnie.Henry@gov.bc.ca>; OfficeofthePremier, Office PREM:EX <Premier@gov.bc.ca>; Minister, HLTH HLTH:EX <HLTH.Minister@gov.bc.ca>; Horgan.MLA, John LASS:EX <John.Horgan.MLA@leg.bc.ca>

Subject: Official Notice of Liability

Importance: High

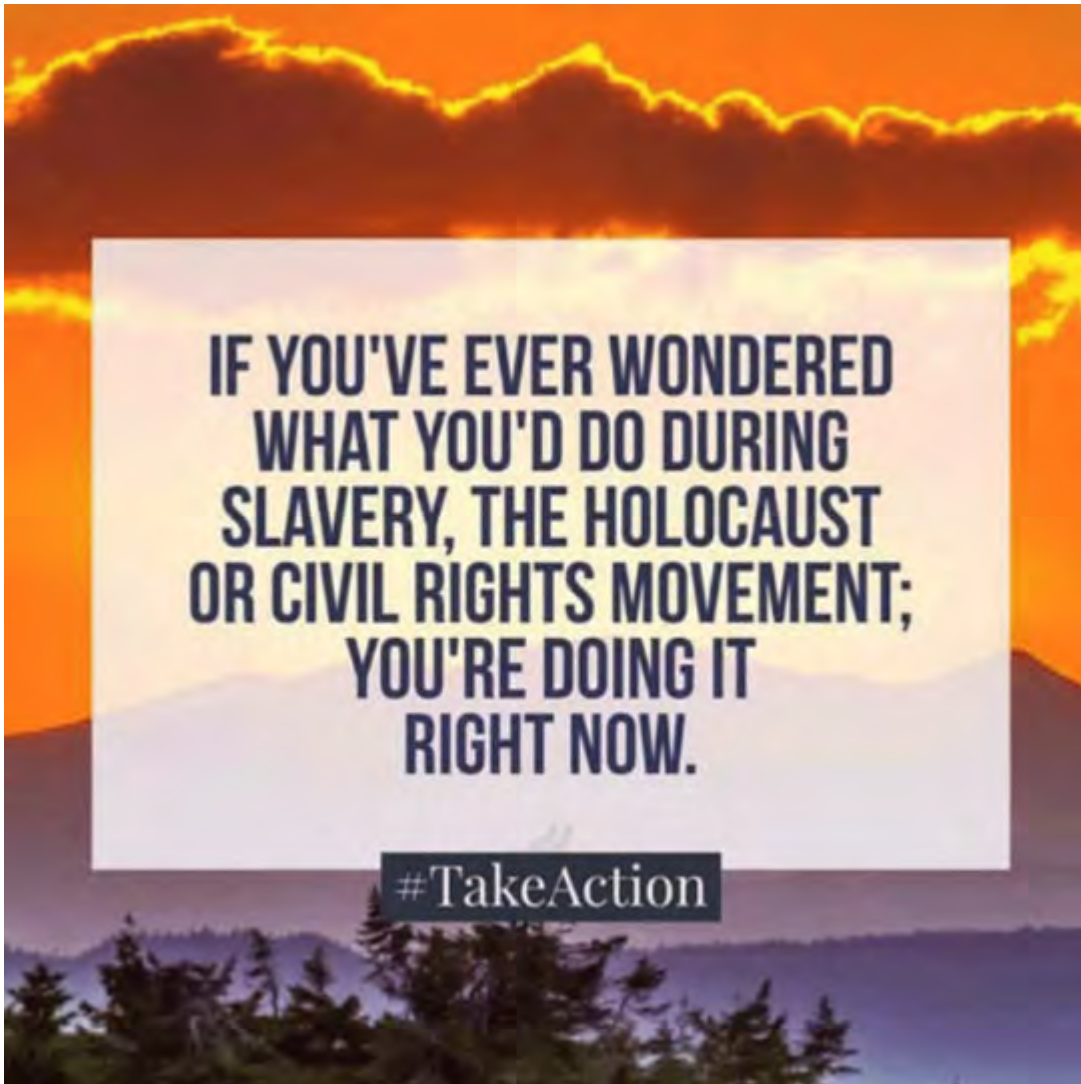
[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Hi,

Please see the attached notice of liability for the unlawful mandating of experimental covid 19 gene therapy.

It is disgraceful that you would even try to implement such tyrannical measures especially on an already suffering healthcare system. You clearly DO NOT CARE about the people of this province or you would not be doing such things. If you cared you would not be putting our system into a tailspin where people will get poor care or die. My husband's appointment he has been waiting over a year for was cancelled today because of your policies which have created major staffing shortages. You are terrible people who should not be allowed to be leaders.

You should all be ashamed of yourselves for what you are doing at this moment in time. None of you will be remembered for the good things you did (if any), only for the lives that were lost because of the unlawful policies YOU implemented. You are not following science, you only care about lining your own pockets with money. You're as bad as the Nazi's how can you not see that what you are doing is wrong and is history repeating itself. I hope you are all tried for your crimes and spend the rest of your life in prison. I look forward to being able to testify at each of your trials. You are on the wrong side of history.





Regards,

[REDACTED]

Registered Nurse

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To:

John Horgan + Bonnie Henry +
Adrian Dix.

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

This is your official and personal Notice of Liability.

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

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

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

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

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

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

¹ <https://www.bitchute.com/video/nOgg0BxXfZ4f>

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

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

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5. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including but not limited to, death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁶, and antibody-dependent enhancement leading to death; this includes in children ages 12-17 years old¹⁷.

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

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

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

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

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Under the Risk Management plan section of the Summary Basis of Decision²⁰, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

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

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

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

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

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

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

²⁰ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²¹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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

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

²⁴ <http://vaxoutcomes.com/thelatestreport/>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

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

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

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

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

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

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

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

Your actions may further constitute breach of trust and deception.

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

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

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

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

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

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

It is a further violation of the Canadian Criminal Code,³² to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

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

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

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

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

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

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

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

- **Canadian Charter of Rights and Freedoms**³⁶ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁷ (2005)
- **Nuremberg Code**³⁸ (1947)
- **Helsinki Declaration**³⁹ (1964, Revised 2013) Article 25, 26

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

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

Name (print):

[Redacted Name]

Signature:

[Redacted Signature]

RN

Date:

OCT. 21/21

Source: **action4canada.com**

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

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

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

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

⁴⁰ <https://www.bitchute.com/video/W5qSPiv1onXt/>

197
"Vaccine" Notice of Liability
Elected/Appointed Officials

On Notice To: Premier John Horgan

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

¹ <https://www.bitchute.com/video/nQ8pBAXZ5H/>

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

³ <https://academic.oup.com/aid/advance-article/doi/10.1093/aid/aa1391/5912601>

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

⁵ <https://antigen-testwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quantities-unlawful-quest-for-litigation>

⁶ <https://proteomix.com/who-mullis-admits-covid-19-pcr-test-has-a-problem>

⁷ <https://canadavoice.org/2021/02/16/bc-health-officer-admits-pcr-tests-are-unreliable.html>

⁸ <https://www.zeitschrift.at.at/2021/04/08/german-court-pcr-test>

⁹ <https://www.nytimes.com/2021/05/08/health/coronavirus-sweden-pcr-test.html>

¹⁰ <https://www.nytimes.com/2021/05/08/health/coronavirus-sweden-pcr-test.html>

¹¹ <https://www.cbc.ca/news/indigenous/manitoba-court-pcr-test-results-do-not-verify-infectiousness-1.5912601>

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

Whereas:

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

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

¹² <https://media.bmj.com/bmj/2011/04/04/bmj.n07070.vOLUME.314-The-Nuremberg-Code.pdf>

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

¹⁴ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-vaccine-moderna-health-canada.pdf>

¹⁵ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-vaccine-moderna-health-canada.pdf>

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²⁰ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-vaccine-moderna-health-canada.pdf>

²¹ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-vaccine-moderna-health-canada.pdf>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

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9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

²² <https://www.cbc.ca/news/health/covid-19-minors-1.5844444>

²³ <https://www.canada.ca/en/health-canada/media/2021/05/summary-basis-of-decision-covid-19-vaccine-moderna-health-canada.pdf>

²⁴ <https://www.canadadialogue.com/doc/full/10-1088-14760584-2020-1800463>

²⁵ <https://www.foxnews.com/2021/05/21/cdc-death-toll-following-experimental-covid-injections-now-at-4803-more-than-23-years-recorded-cases-deaths-according-reports/>

²⁶ <https://www.bbc.com/news/health-55444444>

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200
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³² <https://laws-lois.justice.gc.ca/eng/acts/c-45/9/page-1.html>

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-45/page-5.html#docCont>

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

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Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. *Hopp* also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts³⁵ lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

³³ <https://www.scc-csc.ca/judgments-decisions/doc/2013/2013-04-30.html?result=1>

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³⁵ <https://www.scc-csc.ca/judgments-decisions/doc/2013/2013-04-30.html?result=1>

³⁶ <https://www.scc-csc.ca/judgments-decisions/doc/2013/2013-04-30.html?result=1>

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

[REDACTED]

Name (print)

August 23, 2021

Date

Source: Action Canada.com

¹ <https://www.actioncanada.com/2021/08/23/who-vaccines-are-not-a-medical-procedure/>
² <https://www.actioncanada.com/2021/08/23/who-vaccines-are-not-a-medical-procedure/>

From: [REDACTED]
Sent: Tuesday, August 24, 2021 10:51 AM
To: Horgan.MLA, John LASS:EX; OfficeofthePremier, Office PREM:EX
Cc: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Attn: John Horgan - Notice of Liability re: vaccine passports
Attachments: Signed-Vaccine-Notice-of-Liability-John-Horgan.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

John Horgan,

Find attached my signed Notice of Liability regarding my objection with your policies and coercion of the general public to be vaccinated against covid-19.

In addition, you should reconsider your recent decision to require a vaccine passport for all BC residents to participate in certain activities (i.e. attend sporting events, eat at a restaurant). I see this as discriminatory against unvaccinated, medically unable to be vaccinated and previously infected persons. Your own science shows that vaccinated people are contracting and transmitting covid-19 in the general public (see Israel case data too). Their transmission rate may be less than that of unvaccinated persons but it is still not zero %. You will be creating a false sense of security for the vaccinated while continuing the fear and divisiveness within or communities that does no one any good. Again, review this policy thru the discriminatory lens and retract it.

Sincerely,

[REDACTED]

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://aethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

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

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

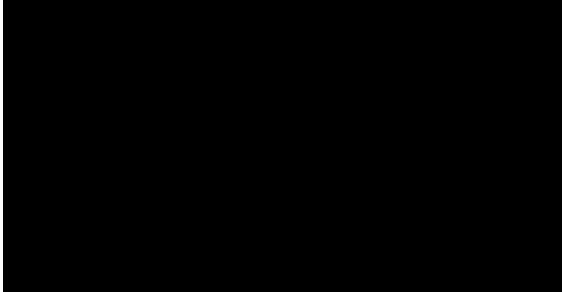
³⁹ <http://www.cirp.org/library/ethics/nuremberg>

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In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name



Signature

August 23, 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Bonnie Henry and Adrian Dix

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.
2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
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6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

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

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Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

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11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

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³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or councils in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

 Name (print)

August 25, 2021

 Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan,
Dr. Bonnie Henry
Adrian Dix

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

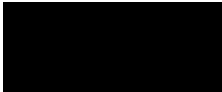
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All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



Name (print)

August 25, 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: Premier John Horgan

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

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

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All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



Name (print)

August 24,
2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

MINISTER'S OFFICE HEALTH			
#			
DRAFT <input type="checkbox"/>	NOV - 3 2021	REPLY DIRECT <input type="checkbox"/>	
REPLY <input type="checkbox"/>		FILE <input type="checkbox"/>	
FYI <input type="checkbox"/>			
REMARKS			
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH		
<input type="checkbox"/> INFO REQUEST	<input type="checkbox"/> BRIEFING NOTE		

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

This is your official and personal Notice of Liability.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

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

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

Under the Risk Management plan section of the Summary Basis of Decision²⁰, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

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

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

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

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

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

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

²⁰ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²¹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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

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

²⁴ <http://vaxoutcomes.com/thelatestreport/>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

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

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

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

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

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

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

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

Your actions may further constitute breach of trust and deception.

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

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

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

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

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

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

It is a further violation of the Canadian Criminal Code,³² to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

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

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

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

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

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

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

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

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

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

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

Name (print):

[Redacted]

Signature:

[Redacted]

Date:

October 29, 2021

Source: action4canada.com

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

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

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

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

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

**"Vaccine" Notice of Liability
Elected/Appointed Officials #**

MINISTER'S OFFICE HEALTH	
DRAFT <input type="checkbox"/>	REPLY DIRECT <input type="checkbox"/>
REPLY <input type="checkbox"/>	AUG 09 2021 <input type="checkbox"/>
FYI <input type="checkbox"/>	FILE <input type="checkbox"/>
REMARKS _____	
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE

On Notice To: ADRIAN DIX

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

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It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

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³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

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

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

[Redacted Name]

Name (print)

[Redacted Signature]

Signature

Aug 4, 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

From: [REDACTED]
Sent: Wednesday, August 25, 2021 2:15 PM
To: Horgan.MLA, John LASS:EX; OfficeofthePremier, Office PREM:EX; Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: ATTN: John Horgan - notice of liability re: vaccine passports
Attachments: Send!!!.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

YOU CAN NOT DO THIS. I have been a guinea pig in this health system my ENTIRE LIFE!!! My body my choice!!! OUR HEALTH SYSTEM HAS COMPLETELY RUINED ME!!!! My body can NOT physically handle this 'vaccine'
I have a half paralyzed nervous system already from an EXPERIMENTAL brain surgery THAT I WAS COERCED INTO GETTING FOR MY OWN HEALTH!!!!!! THEY PARALYZED MY VAGUS NERVE, MY THROAT, MY VOCAL CORD AND HAVE RUINED MY LIFE! I HAVE HEALED MY BIDY THE LAST 5 years WITH EXTENSIVE NATURAL TREATMENTS.
MY. BODY. MY CHOICE.
HOW DARE YOU LIE THIS ENTIRE TIME. HOW DARE YOU.

Sent from my iPhone

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

Whereas:

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

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³² <https://laws.justice.gc.ca/eng/acts/c-45/9/page-1.html>

³³ <https://laws.justice.gc.ca/eng/acts/c-45/page-5.html#docCont>

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Causing bodily harm by criminal negligence

Sec. 221: Every person who by criminal negligence causes bodily harm to another person is guilty of

- (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. *Hopp* also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts³⁵ lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

³³ <https://www.scc-csc.ca/judicial-justice-judiciaire/decisions-decisions/2013/2013-04-30.html?result=1>

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print) 

August 23, 2021

Date

Source: Action Canada.com

⁴⁰ <https://www.actioncanada.com/wp-content/uploads/2019/04/Declaration-of-Dr-John-Lund.pdf>

⁴¹ <https://www.actioncanada.com/wp-content/uploads/2019/04/Declaration-of-Dr-John-Lund.pdf>

**“Vaccine” Notice of Liability
Elected/Appointed Officials**

On Notice To: Adrian Dix

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. **Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.**^{30 31}

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

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

²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethnews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the *Criminal Code of Canada*,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, *supra*; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

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

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

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

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

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

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

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In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

[Redacted]

Name (print)

[Redacted]

Signature

Sept 11 / 21

Date

Source: Action-Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: Mike Farnworth

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

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

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

Whereas:

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¹⁶ https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

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²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>

²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁷ <http://vaxoutcomes.com/thelatestreport/>

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³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>

³¹ <https://alethoews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivised the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The *Act* also confirms that every person who conspires or attempts to commit, **is an accessory after the fact**, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

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

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

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

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

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print)


Signature

Date

Sept 30/2021

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

From: [REDACTED]
Sent: Wednesday, August 25, 2021 12:49 PM
To: OfficeofthePremier, Office PREM:EX
Cc: Minister, HLTH HLTH:EX; Henry, Bonnie HLTH:EX
Subject: Attn: John Horgan - Notice of Liability re: vaccine passports
Attachments: Vaccine-Notice-of-Liability-Elected-Officials.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

Dear John Horgan,

In light of the announcement made in BC on the 23rd August 2021 regarding vax passports, please find attached a Notice of Liability to you, Premier John Horgan.

Your actions in light of this 'mandate' constitute breach of trust and massive deception to us, the population that you promised to serve. Your actions will one day be tried under the Crimes Against Humanity and War Crimes Act of Canada.

We understand that you and your families may be personally threatened and we will continue to work hard to save, not only ourselves, but you and your families. The alternative is to walk with our arms open wide into a monstrous system of oppression and centralized control that WILL enslave us and our children (and that's not the worst of it).

All tyrannical regimes were set up using the following: (1) Mass Fear, (2) Emergency Government Measures, (3) Divide and Conquer Tactics, and (4) Moral Indignation/Moral Justification Sentiments. Prove to us how humans in positions of power today are now fundamentally different from ALL rulers in the past. I have Volumes of evidence that prove that this is Not true.

I pray for your salvation.

Regards, [REDACTED]

"To see in front of one's own nose is a constant struggle" -- George Orwell

"The world is a dangerous place, not because of those who do evil, but because of those who look on and do nothing" - Albert Einstein

"Go with the crowd and lose your soul. Go with your soul and lose the crowd" -- anonymous

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: John Horgan

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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 (a) an indictable offence and liable to imprisonment for a term of not more than 10 years; or,
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Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³⁵ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

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Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivised the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

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

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.



Name (print)



Signature

25 August 2021

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiy1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**



On Notice To: Stephen Brown

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

This is your official and personal Notice of Liability.

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivising, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a "vaccine".

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

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

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

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

¹ <https://www.bitchute.com/video/nQg0BxXfZ4f>

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

¹² [https://media.tghn.org/medialibrary/2011/04/BMJ No 7070 Volume 313 The Nuremberg Code.pdf](https://media.tghn.org/medialibrary/2011/04/BMJ%20No%207070%20Volume%20313%20The%20Nuremberg%20Code.pdf)

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

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

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

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

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

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²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: "use in paediatric (age 0-18)", "use in pregnant and breastfeeding women", "long-term safety", "long-term efficacy" including "real-world use", "safety and immunogenicity in subjects with immune-suppression", and concomitant administration of non-COVID vaccines."

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)." In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, "The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA)."²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.
11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

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

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

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

In conclusion, administration of vaccinations is defined as a "medical procedure". The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating, facilitating, incentivising, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

Name (print)

Signature

Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiv1onXt/>

**"Vaccine" Notice of Liability
Elected/Appointed Officials**

On Notice To: _____

Adrian Dix

MINISTER'S OFFICE HEALTH			
# _____			
DRAFT <input type="checkbox"/>	NOV 18 2021		<input type="checkbox"/> REPLY DIRECT
REPLY <input type="checkbox"/>			<input type="checkbox"/> FILE
FYI <input type="checkbox"/>			
REMARKS _____			
<input type="checkbox"/> PHONE CALL	<input checked="" type="checkbox"/> BATCH		
<input type="checkbox"/> MTG REQ/EVENT	<input type="checkbox"/> BRIEFING NOTE		

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

This is your official and personal Notice of Liability.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

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

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

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

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

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

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

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

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

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

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

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

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

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

Under the Risk Management plan section of the Summary Basis of Decision²⁰, it includes a statement based on clinical and non-clinical studies that "one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease)". In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

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

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

On September 17, 2021, VAERS data release for the period December 14, 2020 to September 10, 2021, showed 701,561 adverse events reports following COVID-19 injections, including 14,925 deaths and 91,523 serious injuries. Of that total, 19,827 adverse injury reports were among 12–17-year old's with 19 reported deaths and included 488 reports of myocarditis from the Pfizer jab and 106 reports of blood clotting disorders, again from the Pfizer injection²⁵.

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

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

10. **Safe and effective treatments and preventive measures already exist for COVID-19 yet the government is prohibiting their use^{27 28}.**

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

²⁰ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²¹ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>

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

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

²⁴ <http://vaxoutcomes.com/thelatestreport/>

²⁵ <https://childrenshealthdefense.org/defender/vaers-cdc-covid-deaths-vaccine-injuries/>

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

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

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

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

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

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

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

Your actions may further constitute breach of trust and deception.

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

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

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

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

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

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

It is a further violation of the Canadian Criminal Code,³² to endanger the life of another person. Sections 216, 217, 217.1 and 221.

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

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

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

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

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

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

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

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

- **Canadian Charter of Rights and Freedoms**³⁶ (1982) Section 2a, 2b, 7, 8, 9, 15.
- **Universal Declaration on Bioethics and Human Rights**³⁷ (2005)
- **Nuremberg Code**³⁸ (1947)
- **Helsinki Declaration**³⁹ (1964, Revised 2013) Article 25, 26

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

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

Name (print): _____

Signature: _____

Date: _____

Source: action4canada.com

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

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

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

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

⁴⁰ <https://www.bitchute.com/video/W5qSPivlonXU/>

Dix

Room 337 Parliament Building.
Victoria BC

V8V 1X4.

From: [REDACTED]
Sent: Saturday, September 4, 2021 2:11 PM
To: Kennedy.Stewart@vancouver.ca; Henry, Bonnie HLTH:EX; pcqo@vch.ca; OfficeofthePremier, Office PREM:EX; cbcnewsvancouver@cbc.ca
Cc: christinesorensen@bcnu.org; CFLN@protonmail.com; Horgan.MLA, John LASS:EX; pcqoffice@fraserhealth.ca; hcinfo.infosc@canada.ca; Health, HLTH HLTH:EX; Farnworth.MLA, Mike LASS:EX; Singh.MLA, Rachna LASS:EX; admininfo@bccdc.ca
Subject: NOTICE of Liability You are not listening
Attachments: VGH-BC Health authority.pdf; Vaccine-Notice-of-Liability-Elected-Officials VGH.pdf

[EXTERNAL] This email came from an external source. Only open attachments or links that you are expecting from a known sender.

"Vancouver mayor tells demonstrators to 'stay the hell home'; premier slams 'harassment' of health-care workers?"

<https://www.cbc.ca/news/canada/british-columbia/vaccine-passport-protest-1.6161817>

TO:
 Mayor Kennedy Stewart and council of Vancouver, Executive Team of VGH Vancouver General Hospital, Bonnie Henry Health Authority of BC, Vivian Eliopoulos Vancouver Coastal Health Authority Leadership Executive, Fraser Health Authority, Rachna Singh Surrey-Green Timbers/Surrey Community College/Surrey Memorial Hospital, BC Ministry of Health, Provincial Health Services Authority, **Minister of Public Safety and Solicitor General**, Health Canada Patty Hajdu, CBC Fake News

NOTE:
 Nurses are caregivers. They are telling you there is "no care left in the fake pharma system".

They are telling you that the experimental so-called "vaccine" is causing adverse side effects to healthy people.

These are 5,000 concerned citizens trying to convey the truth about what they are witnessing to the risk to the blind followers of poison experimental so-called vaccines peddling hope porn and death.

Masks do not stop viruses. The false positive PCR test does not detect Covid, it detects dead cells and records DNA.

Healthy people have 95% natural immunity. Double vaccinated people have 40% reduced immunity, which diminishes with each booster, which in this case is not a vaccine. It is a weaponized chemical agent pushed by drug companies. Natural cures and treatments are being blocked from use in Canada suddenly by the Health Canada big pharma globalist agenda.

Here is the typical response from the media brainwashed CBC follower : The eyes cannot see what the heart cannot feel.

"Nancy van der Meulen

2 days ago

This wasn't a peaceful protest.

This was an angry mob attacking health care workers.

What is wrong with these people?"

CONCLUSION:

mRNA spike protein, luciferase, graphene oxide, propylene glycol is not a vaccine, these are poison chemicals.

People Are not Sick of Covid, We Are Sick of Lies:

Why are you administering poison to humans?

Why are you not listening?

Please see the attached documents

This is to be forwarded to all Members, Agents, Affiliates and Associates, Employees of Provincial Service Bodies, Vancouver General Hospital, BC Nurses Union, All Associates in British Columbia and Their Employees, Bonnie Henry, Fraser Health, All Provincial and Regional Health Authorities Administering said Procedures Provincial and Federal Governments and their allegiances, Health Canada, (As listed in Appendix below)

YOU ARE BEING PUT ON NOTICE!
September 01, 2021

LEGAL PREMISE:

Before You Attempt to Implement Any Restrictions Regarding the so called Covid Virus or Fake Vaccine, You Should Understand The Crime in which You Are Participating.

Take Time to Explore These LINKS Below: There is Hope For You Yet

“Vaccine” and/or Vaccine Passport Notice of Liability To BC Health Authorities

Re: COVID-19 injections recommended, encouraged, advertised, mandated, facilitated, or incentivized in any way by you to the public. Restriction of Individual

Human Rights.

On Notice To: _____**Bonnie Henry**_____

And All Parties Named Herein As Per Appendix Below
This is your official and personal Notice of Liability.

As a person involved in public oversight for your organization and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by recommending, advertising, incentivizing, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to any restrictions under the experimental medical treatment for COVID-19, namely requiring the wearing of masks to enter a place of business, being injected with one of the experimental gene therapies commonly referred to as a “vaccine”, or the requirement of so called freedom of movement passports to do business.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹ In fact these manufactured claims have been egregiously inflated by uninformed individuals acting in positions of public spectre and private stewardship.

The False Positive PCR DNA Test

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

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

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵

On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶.

February 16, 2021, Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷.

On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.⁹”

On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸.

On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason.¹⁰

On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

VAERS Ignoring the Evidence of Adverse Effects Reporting System, Suffered from the Experimental Vaccine

The risks far outweigh the benefits and prove to exacerbate and infect further

As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.

On Mar 16, 2021 It was reported that more than a dozen countries mostly European, including Poland and Germany, Italy, France, Spain, Sweden, Latvia, Luxembourg, Cyprus, Portugal, Slovenia, Indonesia, Ireland, Bulgaria, Congo, Thailand, Romania, Iceland, Denmark, Austria, Norway, and the Netherlands have suspended AstraZeneca's COVID-19 experimental vaccine due to adverse reactions, developing "mystery" blood clots in recipients. 12

On August 26, 2021 Japan Suspends 1.63 Million Doses Of Moderna's COVID-19 Vaccine Over Contamination 13

On July 13, 2021 Seattle Times published an article titled **"What to know about blood clots, anaphylaxis and other COVID-19 vaccine fears"** 14

On August 26, Using lies and deception, the American FDA criminal drug organization in coercion with the NIH, CDC, Pfizer-BioNTech, Moderna, AstraZeneca and other Pharmaceutical Manufacturers, gave unlawful permission to use experimental chemical agents as weapons onto an unconsenting public under fake emergency measures. Health Canada takes its model from this same group of criminal pharmaceutical drug organizations. (For those who cannot think or investigate for themselves, this is not a good thing, but the opposite of truth) 15

U.K. and U.S. have advised people who have allergies to any component of a COVID vaccine not to receive experimental mRNA so called “Covid Vaccine”, containing undisclosed ingredients, therefore NOT MEETING CRITERIA for open transparent or INFORMED CONSENT. 25 (section Whereas:)

On April 5, 2021 a long practising physician in Lytton BC, bringing adverse reactions in his patients to AstraZeneca so called vaccine, had his license revoked for asking how to deal with this unprecedented anomaly after contacting BC Chief Health Officer Bonnie Henry with concerns as to patient safety after so called vaccine. Dr. Hoffe had his hospital visitation privileges removed, so that he was not able to follow his practice and care for his patients. His practice and the whole town of Lytton has since been (conveniently) devastated by wildfires. See Letter of Concern to Bonnie Henry 16

As of June 23rd, 2021 it has come to light that a Portugal court ruling revealed that only 0.9% of ‘verified cases’ died of COVID, numbering 152, not the 17,000 deaths that have been claimed 17

On August 16, 2021 Action4Canada and the Constitutional Rights Centre have filed a statement of Claim for the BC/ Federal legal action in evidence against unwarranted Covid measures. *Please note what a legal civil action against you will look like. 18

- 1 <https://www.bitchute.com/video/nQgg0BxXfZ4f>
- 2 <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>
- 3 <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>
- 4 <https://cormandrostenreview.com/report/>
- 5 <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>
- 6 <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>
- 7 <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>
- 8 <https://greatgameindia.com/austria-court-pcr-test/>
- 9 <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>
- 10 <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>
- 11 <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>
- 12 <https://www.aljazeera.com/news/2021/3/15/which-countries-have-halted-use-of-astrazenecas-covid-vaccine>
- 13 <https://www.npr.org/2021/08/26/1031208526/japan-suspends-1-63-million-doses-of-moderna-covid-19-vaccine-over-contamination>
- 14 <https://www.seattletimes.com/nation-world/what-to-know-about-blood-clots-anaphylaxis-and-other-covid-19-vaccine-fears/>
- 15 <https://www.fda.gov/emergency-preparedness-and->

response/coronavirus-disease-2019-covid-19/covid-19-vaccines

16 [https://assets-global.website-files.com/](https://assets-global.website-files.com/606d3dece4ec3c3866cc798a/60a601ccd6eac8d0fc8a311e_53%20Health%20Impact%20News%202021%20Canadian%20Doctor%20Defies%20Gag%20Order%20and%20Tells%20the%20Public.pdf)

606d3dece4ec3c3866cc798a/

60a601ccd6eac8d0fc8a311e_53%20Health%20Impact%20News%202021%20Canadian%20Doctor%20Defies%20Gag%20Order%20and%20Tells%20the%20Public.pdf

17 [https://americasfrontlinedoctors.org/frontlinenews/](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

[lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

[not-17000-claimed/](https://americasfrontlinedoctors.org/frontlinenews/lisbon-court-rules-only-0-9-of-verified-cases-died-of-covid-numbering-152-not-17000-claimed/)

18 [https://action4canada.com/wp-content/uploads/](https://action4canada.com/wp-content/uploads/21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf)

[21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf](https://action4canada.com/wp-content/uploads/21.08.17-FILED-Notice-of-Civil-Claim-Action4Canada.pdf)

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

Suppression of Common Effective Therapeutics

HQC plants being destroyed by mysterious events.

Restriction by Health Authorities under Big Pharma to allow distribution of Ivermectin or Hydroxychloroquine in Canada and the US.

Ivermectin shows instant results in improvement of symptoms from conditions said to be Covid. Doctors have safely and successfully administered such cures, whereas those not given this option have died due to untreated complications.

Ventilators kill people with respiratory conditions that are being claimed to be “Covid caused or Covid related”. To the point of those dying from unrelated circumstances are being assigned on false death certificates to have “died of Covid”.

Refusal to take into account comorbidities from Covid reactions exacerbates oxytosis, “cell death” and related to the so called vaccine, in patient being mistreated with ventilators.

Oxytosis, “cell death” and blood clots related to spike protein in the so called vaccine, which is in fact an mRNA bio-weapon, laced with questionable “secret” ingredients such as graphene oxide poison, luciferase DNA disruptor, hijacks our auto immune system in to overreaction and therefore attacking and compromising our own biome.

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the

nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected; and the effects upon his/her health or person which may possibly come from participation in the experiment.

2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.

3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada ¹⁴ ¹⁵ ¹⁶ is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.

4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.

5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸

6. Numerous doctors, scientists, and medical experts are

issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell's Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

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

- 12 https://media.tghn.org/medialibrary/2011/04/BMJ_No_7070_Volume_313_The_Nuremberg_Code.pdf
- 13 <https://clinicaltrials.gov/ct2/show/NCT04368728?term=NCT04368728&draw=2&rank=1>
- 14 <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf>
- 15 <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/applications.html>
- 16 https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine
- 17 <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>
- 18 <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>
- 19 <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>
- 20 <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>
- 21 <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with

the SARS-CoV-2 virus is 99.997%.²² In spite of these facts, the government and well-meaning businesses are pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

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

– *Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.*

– *The report specifically states, “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety*

concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA).²⁴

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

– It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

– On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

– Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths

*it's pulled off the market.*²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.

11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

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

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

24 <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>against-covid-19/

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

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

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

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

29 <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing->

unprecedented-numbers-of-injection-related-deaths/
 30 <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>
 31 <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin->

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivized the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

As for children, they have been exposed to unprecedented

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

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

Further to this, suggestions/recommendations from you that people take COVID-19 injections are being made without adequate training and credentials that would qualify you to make ‘medical’ decisions or recommendations for other people. These recommendations/suggestions have also been made in complete contradiction to statements, recommendations, and findings of qualified medical practitioners, many of which are listed in this document. Among these ‘qualified’ individuals are those who have made clear certain medical consequences that have resulted from the receiving of COVID-19 injections, meaning recommendation from ‘medically unqualified’ people such as yourself, have

placed pressure on the public to receive an injection that might (according to medical specialists) jeopardize their health by harming or even killing them.

Your actions may further constitute breach of trust and deception.

Under the **Crimes Against Humanity and War Crimes Act of Canada**³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in the place of its commission, constitutes a crime against humanity according to customary international law, conventional international law, or by virtue of its being criminal according to the general principles of law are recognized by the community of nations, whether or not it constitutes a contravention of the law in force at the time and in the place of its commission. The Act also confirms that every person who conspires or attempts to commit, is an accessory after the fact, in relation to, or counsels in relation to, a crime against humanity, is guilty of an offence and liable to imprisonment for life.

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years,

or an offence punishable on summary conviction.

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

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

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

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

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

Sec. 217.1: Everyone who undertakes, or has the authority, to direct how another person does work or

performs a task is under a legal duty to take reasonable steps to prevent bodily harm to that person, or any other person, arising from that work or task.

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote."

Hopp v Lepp, *supra*; Bryan v Hicks, 1995 CanLII 172 (BCCA); British Columbia Women's Hospital Center, 2013 SCC 30.36

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivized the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

- 35 <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>
- 36 <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>
- 37 <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>
- 38 <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>
- 39 <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO and Health Canada and its affiliates, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending, encouraging, advertising, mandating,

facilitating, incentivizing, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.

_____ Name (print)
 _____ Signature
 _____ September 04, 2021 _____ Date

Citizen of Canada

<https://vaccinechoicecanada.com>
 Member of Action4Canada
<https://action4canada.com>
 Supporter Canadian Frontline Nurses

APPENDIX: Forward NOTICE

CC: Many

BCC: Health Canada, Public Health Authorities, Boards of Trade, Regional Chambers of Commerce, Local Businesses, MLAs and MPS, BC Government, Government of Canada

See Email Directed To The Following Parties:

Kennedy.Stewart@vancouver.ca,
 bonnie.henry@gov.bc.ca, pcqo@vch.ca, premier
 <premier@gov.bc.ca>, cbcnewsvancouver@cbc.ca,
 christinesorensen@bcnu.org,
 CFLN@PROTONMAIL.COM, john.horgan.mla@leg.bc.ca,

pcqoffice@fraserhealth.ca, hcinfo.infosc@canada.ca,
hlth.health@gov.bc.ca, mike.farnworth.mla@leg.bc.ca,
rachna.singh.MLA@leg.bc.ca, admininfo@bccdc.ca

NOTICE OF LIABILITY

“Vaccine” Notice of Liability Elected/Appointed Officials

On Notice To: ____All Government Leaders Workers, Health Officials and Agencies____

This is your official and personal Notice of Liability.

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

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

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

In November 2020, a Portuguese court ruled that PCR tests are unreliable.⁵ On December 14, 2020, the World Health Organization (WHO) admitted the PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive⁶. February 16, 2021, BC

On April 8, 2021, a German Court ruled against PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹ On May 8, 2021, the Swedish Public Health Agency stopped PCR Testing for the same reason

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

As a person involved in public oversight and/or decision making, you are NOT a qualified medical professional and, therefore, you are unlawfully practising medicine by

recommending, advertising, incentivizing, mandating, facilitating and/or using coercion or undue influence, to insist the public submit to the experimental medical treatment for COVID-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”.

On April 8, 2021, the Austrian court ruled the PCR was unsuited for COVID testing⁸.

Health Officer, Bonnie Henry, admitted PCR tests are unreliable⁷.

Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a

¹⁰. On May 10th, 2021, trial before the Court of Queen's Bench in Manitoba, that PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

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

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

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

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

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

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

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

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

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

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

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

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

Whereas:

1. The Nuremberg Code,¹² to which Canada is a signatory, states that it is essential before performing medical experiments on human beings, there is voluntary informed consent. It also confirms, a person involved should have legal capacity to give consent, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him/her to make an understanding and enlightened decision. This requires, before the acceptance of an affirmative decision by the experimental subject, that there should be made known to him/her the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonable to be expected;

and the effects upon his/her health or person which may possibly come from participation in the experiment.

2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹³ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada ^{14 15 16} is using as the basis for approval under the interim order, therefore, fully informed consent is not possible.
4. Most vaccines are trialed for at least 5-10 years,¹⁷ and COVID-19 treatments have been in trials for less than a year.
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement, resulting in severe illness and deaths in animal models.¹⁸
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart¹⁹, and antibody dependent enhancement leading to death. This includes children ages 12-17 years old.²⁰

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

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

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

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

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

¹⁶ https://www.pfizer.com/news/hot-topics/the_facts_about_pfizer_and_biontech_s_covid_19_vaccine

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

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

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

²⁰ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/> ²¹ <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors who have been infected with the SARS-CoV-2 virus is 99.997%. ²² In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death.

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

Under the Risk Management plan section of the Summary Basis of Decision,²³ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.

The report specifically states, “The possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including the WHO, the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA).²⁴”

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁵

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁶ compounded by several months delay in uploading the adverse events to the VAERS database.²⁷

On May 21, 2021, VAERS data release showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old's more than tripled in one week.²⁸

Dr. McCullough, a highly cited COVID-19 medical specialist, came to the stunning conclusion that the government was "...scrubbing unprecedented numbers of injection-related-deaths." He further added, "...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it's pulled off the market."²⁹

10. Canada's Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported.

11. Safe and effective treatments and preventive measures exist for COVID-19, apart from the experimental shots, yet the government is prohibiting their use.^{30 31}

- ²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>
- ²² <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>
- ²³ <https://action4canada.com/wp-content/uploads/Summary-Basis-of-Decision-COVID-19-Vaccine-Moderna-Health-Canada.pdf> ²⁴
- ²⁴ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463> against-covid-19/
- ²⁵ <https://vaccineimpact.com/2021/CDC-death-toll-following-experimental-Ovid-injections-now-at-4863-more-than-23-previous-years-of-recorded-vaccine-deaths-according-to-avers/>
- ²⁶ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/
- ²⁷ <http://vaxoutcomes.com/thelatestreport/>
- ²⁸ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>
- ²⁹ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>
- ³⁰ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine?>
- ³¹ <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Messaging from individuals including yourself, has placed pressure on the public to receive injections in exchange for the loosening of implemented lockdowns, restrictions, and infringements of various freedoms. This includes an inability to make income or see family members as a result of these restrictions, which adversely affects people's ability to meet basic needs and care for themselves and their families. You have incentivized the receiving of injections, measuring the public's compliance against the degree, prevalence and severity of lockdowns and restrictions. This is a form of coercion as it makes clear specific consequences of non-compliance, which includes continued difficulty to make income, to maintain businesses, to maintain living standards and meet personal/familial responsibilities due to the continuation of these lockdowns and restrictions. This has also impacted the medical and care home system where family members have been unable to see other family members in the care of these systems, due to the nature of lockdown measures.

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

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

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

Your actions may further constitute breach of trust and deception.

Under the *Crimes Against Humanity and War Crimes Act of Canada*³², a crime against humanity means, among other things, murder, any other inhumane act or omission that is committed against any civilian population or any identifiable group and that, at the time and in

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

Under sections 265 and 266 of the Criminal Code of Canada,³³ a person commits an assault when, without the consent of another person, he applies force intentionally to that other person, directly or indirectly. Everyone who commits an assault is guilty of an indictable offence and liable to imprisonment for a term not exceeding five years, or an offence punishable on summary conviction.

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

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

³³ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-57.html#docCont> ³⁴ <https://laws-lois.justice.gc.ca/eng/acts/c-46/page-51.html#docCont>

Duty of persons undertaking acts dangerous to life

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

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

Duty of persons undertaking acts

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

Duty of persons directing work

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

Causing bodily harm by criminal negligence

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

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

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, Even if Remote." *Hopp v Lepp*, supra; *Bryan v Hicks*, 1995 CanLII 172 (BCCA); *British Columbia Women's Hospital Center*, 2013 SCC 30.³⁶

Vaccination is voluntary in Canada, yet, as already mentioned in this document, some federal, provincial, municipal officials have incentivized the taking of COVID-19 injections, even suggesting that lockdowns and lockdown measures will not end until enough of the population has received these injections. This is despite the negative impacts' lockdowns have had on the health and well-being of the citizenry. Officials are not only infringing on human rights, they are putting themselves personally at risk of a civil lawsuit for damages and potential imprisonment by attempting to impose this experimental medical treatment on citizens, including minors. Canadian law has long recognized that individuals have the right to control what happens to their bodies, law which is being directly infringed upon by these officials.

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

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

- ³⁵ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>
- ³⁶ <https://www.canlii.org/en/ca/scc/doc/2013/2013scc30/2013scc30.html?resultIndex=1>
- ³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>
- ³⁸ <https://en.unesco.org/themes/ethics-science-and-technology/bioethics-and-human-rights>
- ³⁹ <http://www.cirp.org/library/ethics/nuremberg>

All Canadian law, contrary to misinformation spread by the WHO, does not allow for “implied consent.” The Mature Minor doctrine cannot override the wishes and consent of the parents outside of the emergency threat of imminent harm or death. Vaccinations do not fall under the Mature Minor doctrine⁴¹.

In conclusion, administration of vaccinations is defined as a “medical procedure”. The courts have established jurisprudence on Informed Consent requirements.

Therefore, you have no authority or jurisdiction to prescribe medical treatments and you must cease and desist or be held personally, civilly, and criminally liable for any injuries or deaths that may occur as a result of recommending,

encouraging, advertising, mandating, facilitating, incentivizing, coercing, or administering these experimental injections to members of the public, including myself, and/or including minors.


_____ Name (print)
 _____ Signature
 _____ September 04, 2021 _____ Date

Source: Action4Canada.com

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

⁴¹ <https://www.bitchute.com/video/W5qSPiY1onXt/>

This is Exhibit "J" referred to in the Affidavit of Rebecca Hill affirmed before me at Vancouver in the Province of British Columbia this 24th day of May 2022


A Commissioner for taking Affidavits
Within the Province of British Columbia

Attn:

Euan McAskile

RE: Threat to use an experimental COVID-19 injection, mask or testing as a condition of employment

There are no provisions in any orders of any health minister, doctor, or provincial legislation, that can, nor pretend that any measures can, override Charter or other pre-Charter constitutional rights.

All Statutes, Orders, By-laws, and Acts must be consistent with the Constitution...or they are of no force or effect.

Section 52(1) of the **Constitution Act, 1982**: The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.

According to the Public Health Agency of Canada, Canadian National Report on Immunization, 1996:

"Vaccines are not mandatory in Canada and they cannot be made mandatory because of the Canadian Constitution."

If the Federal Government had invoked the **Federal Emergencies Act**, which it has not, even that Emergencies Act states:

AND WHEREAS the Governor in Council, in taking such special temporary measures, would be subject to the Canadian Charter of Rights and Freedoms and the Canadian Bill of Rights and must have regard to the International Covenant on Civil and Political Rights, particularly with respect to those fundamental rights that are not to be limited or abridged even in a national emergency.

Employment is 100% guaranteed and protected under Section 7 of The Canadian Charter of Rights and Freedoms:

"Everyone has the right to life, liberty, and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice."

Consent to Medical Treatment and Testing

In Canada, a doctrine of informed consent regarding any medical treatment has become part of Canadian Federal law. According to Supreme Court rulings, no Canadian citizen is required to take any medical treatment without informed consent, which includes the right to refuse such treatment¹.

¹ https://bottomlineresearch.ca/pdf/informed_consent.pdf

The Genetic Non-Discrimination Act, Bill S- 201, states that it is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both².

Extortion; committing tort; privacy violations; willful misconduct; assault and battery; and acting in bad faith are serious indictable criminal code offences. Interfering with someone's right to gainful employment, or essential and non-essential services, is a further violation of the Constitution and Charter of Rights and Freedoms.

I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the COVID-19 injection, testing, mask or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act, Order or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms.

It is the duty of every Canadian citizen to uphold the law and respect the Constitution and Charter Rights. You have been duly warned.

Name: _____

Signed: _____

Date: 12 / 10 / 2021

² <https://laws-lois.justice.gc.ca/eng/acts/G-2.5/index.html>

Attn: ADAM MCKINNON

RE: Threat to use an experimental injection as a term of employment

There are no provisions in any orders of any health minister, doctor, or provincial legislation, that can, nor pretend that any measures can, override Charter or other pre-Charter constitutional rights.

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I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the injection or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms. You have been duly warned."

Name: _____

Signed: _____

Date: 9 / 11 / 2021

Attn: DAVID GILBERT

RE: Threat to use an experimental injection as a term of employment

There are no provisions in any orders of any health minister, doctor, or provincial legislation, that can, nor pretend that any measures can, override Charter or other pre-Charter constitutional rights.

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"Extortion, committing tort, privacy violations, wilful misconduct and acting in bad faith are serious indictable criminal code offences. Interfering with someone's right to gainful employment or essential, or non-essential services, is a further violation of the Constitution and Charter of Rights and Freedoms.

I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the injection or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms. You have been duly warned."

Name: _____

Signed: _____

Date: _____

9 / 11 / 2021

Attn: HEATHER HOUSE

RE: Threat to use an experimental injection as a term of employment

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Name: _____

Signed: _____

Date: _____

9 / 11 / 2021

Attn: TONJA JOYCE

RE: Threat to use an experimental injection as a term of employment

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Consent to Medical Treatment and Testing

In Canada, a doctrine of informed consent regarding any medical treatment has become part of Canadian Federal law. According to Supreme Court rulings, no Canadian citizen is required to take any medical treatment without informed consent, which includes the right to refuse such treatment. https://bottomlineresearch.ca/pdf/informed_consent.pdf

The Genetic Non-Discrimination Act, Bill S- 201, states that it is an indictable offence to force anyone to take a DNA/RNA test or deny any service, employment, or education opportunity to anyone who refuses to take such a test. The punishment is a fine not exceeding \$1,000,000 or imprisonment for a term not exceeding five years, or both. (<https://laws-lois.justice.gc.ca/eng/acts/G-2.5/index.html>)

"Extortion, committing tort, privacy violations, wilful misconduct and acting in bad faith are serious indictable criminal code offences. Interfering with someone's right to gainful employment or essential, or non-essential services, is a further violation of the Constitution and Charter of Rights and Freedoms.

I am writing to advise you that if you persist in interfering with my guaranteed rights by supporting or enforcing the injection or any other medical treatment, under threat of losing my employment or being suspended without pay, I will hold you personally liable for any loss of income, damages and/or any injury I suffer as a result of your actions. You are personally not protected under any Act or Statute that is in violation of the Canadian Rule of Law, Constitution and Charter of Rights and Freedoms. You have been duly warned."

Name: _____

Signed: _____

Date: 9 / 11 / 2021

324 Constitutional Rights Centre Inc. Centre De Droit Constitutionnel Inc.

CONSTITUTIONALRIGHTSCENTRE.CA



Rocco Galati

@roccogalatilaw

This is Exhibit "K" referred to in the Affidavit of Rebecca Hill affirmed before me at Vancouver in the Province of British Columbia this 24th day of May 2022

.....
A Commissioner for taking Affidavits
Within the Province of British Columbia

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Rocco Galati @roccogalatilaw · Mar 3

Who would have thought that of all the Tyrannical -isms to plague and persecute the masses, from fascism, colonialism, communism, to imperialism, the most enveloping and pervasive, at the masses' request, would be Covidism.

538

1.7K

4.4K



Rocco Galati @roccogalatilaw · Sep 1

Electronic Tattoos.



CP24 @CP24 · Sep 1

#BREAKING: Proof of vaccination will be required at gyms and movie theatres, and will be needed to dine indoors at restaurants under Ontario's new vaccine certification program, government sources confirm to CTV News Toronto.
cp24.com/news/proof-of-...

207

454

1K





Rocco Galati @roccogalatilaw · Aug 28

Please view press conference video on BC Court challenge.



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Constitutional Rights Law Centre - Canada

The Constitutional Rights Centre's sole mission is the protection, defence, enforcement, and enhancement of constitutional rights in ...

98

667

1.2K



Rocco Galati @roccogalatilaw · Aug 28

Attached is the Statement of Claim (Notice of Civil Liability) filed in BC Supreme Court covering a comprehensive challenge to Covid measures. Currently working on injunction on "Vaccine passports" in BC.

constitutionalrightscentre.ca/20CRC16/wp-con...

340

1.9K

4K





Rocco Galati @roccogalatilaw · Aug 23

Re-posting of our March 8th, 2020 video outlining your rights to decline a vaccine in the employment context. This analysis equally applies to the University and College context with respect to the contract governing educational/academic services.



youtube.com

Your Rights to decline a Vaccine in the context of ...

Your Rights to decline a Vaccine in the context of
EmploymentPlease subscribe to our ...

122

1.4K

2.2K



Rocco Galati @roccogalatilaw · Aug 14

This is what desperation of a failing agenda brings. Tyrannical hate-speech. Canada is no different.



147

947

2.2K





Rocco Galati @roccogalatilaw · Aug 14

More government hate speech. **327** predicted, anyone critical of Covid-19 measures will be branded a "terrorist threat". Another fascist move that shows that they are loosing the battle on their agenda. My mother: "If you wanna make God laugh, make a big f----- plan".



Trish Wood @WoodReporting · Aug 14

Another move to criminalize and smear C-19 heretics.
twitter.com/ConceptualJame...



63



365



920



Rocco Galati @roccogalatilaw · Aug 10

Watch our expert panel discussing School re-opening Court application with: Robert Kennedy, Jr., Prof. Byram Bridle, Amina Sherazee, Dr. Palmer, and more.



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35



327



620

