From: _____

_____

_____

To: _____

_____

_____

Date: _____

Vaccine Refusal Declaration

Greetings,

I, _____: _____Family; respectfully require no vaccination be administered to myself or _____ as it would be a violation of my/their personal freedom to be protected from any forced medication or medical procedure; forced medical intervention regardless of good intentions would be a clear violation of article 7 Crimes Against Humanity (Attachment A) & article 8 War Crimes (attachment B), as the coronavirus response has been deemed a war, of the International Criminal Code; any reason or rationale that vaccine administrators are under orders would be as invalid as the excuses put forth by the members of the Third Reich at the conclusion of WWII; attached is a liability notice (see attachment C) placing full responsibility and liability for any and all damages that may occur to a vaccine recipient upon the courts and judicial entities, legislative and parliamentary bodies, monarchs, government ministers, presidents, government and corporate executives, medical practitioners, doctors, coroners, nurses, medical practice managers, hospitals, health maintenance organizations, assisted living facilities, nursing homes, schools, businesses, stores, pharmacies, corporations, law enforcement agencies and entities, sports teams, political groups, restaurants, clubs, associations, churches, farms, cooperatives, owners and employees, anyone who may be involved in the vaccine manufacturing, distributing, promotion, administration, injection, enforcement; see attachment D for evidence regarding the dangers and toxicity for the covid and other vaccines; see attachment E as evidence of overall Covid-19 fraud;

Signed,

International Criminal Code, Articles 7 (select sections)

Article 7 Crimes against humanity 1. For the purpose of this Statute, "crime against humanity" means any of the following acts when committed as part of a widespread or systematic attack directed against any civilian population, with knowledge of the attack:

(k) Other inhumane acts of a similar character intentionally causing great suffering, or serious injury to body or to mental or physical health.

(h) Persecution against any identifiable group or collectivity on political, racial, national, ethnic, cultural, religious, gender as defined in paragraph 3, or other grounds that are universally recognized as impermissible under international law, in connection with any act referred to in this paragraph or any crime within the jurisdiction of the Court;

International Criminal Code, Articles 8 War Crimes (select sections)

Article 8(2) War crimes 1. The Court shall have jurisdiction in respect of war crimes in particular when committed as part of a plan or policy or as part of a large-scale commission of such crimes. 2. For the purpose of this Statute, "war crimes" means: (a) Grave breaches of the Geneva Conventions of 12 August 1949, namely, any of the following acts against persons or

(ii) Torture or inhuman treatment, including biological experiments;

(iii) Wilfully causing great suffering, or serious injury to body or health;

(xvii) Employing poison or poisoned weapons;

(xviii) Employing asphyxiating… devices;

Attachment D, Page 1 – Dangers & Toxicities

(This is a **section of the vaccine package insert from Pfizer-BioNTech Covid-19 vaccine**. There are known risks, as well as unknown risks with this vaccine. If there is a potential of risk, there must be a choice as to whether to take it or not.)

https://www.fda.gov/media/144413/download

FACT SHEET FOR HEALTHCARE PROVIDERS ADMINISTERING VACCINE (VACCINATION PROVIDERS) EMERGENCY USE AUTHORIZATION (EUA) OF THE PFIZER-BIONTECH COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19)

…

Contraindications Do not administer Pfizer-BioNTech COVID-19 Vaccine to individuals with known history of a severe allergic reaction (e.g., anaphylaxis) to any component of the Pfizer-BioNTech COVID-19 Vaccine (see Full EUA Prescribing Information).

Warnings Appropriate medical treatment used to manage immediate allergic reactions must be immediately available in the event an acute anaphylactic reaction occurs following administration of Pfizer-BioNTech COVID-19 Vaccine.

Monitor Pfizer-BioNTech COVID-19 Vaccine recipients for the occurrence of immediate adverse reactions according to the Centers for Disease Control and Prevention guidelines (https://www.cdc.gov/vaccines/covid-19/clinicalconsiderations/managing-anaphylaxis.html).

Immunocompromised persons, including individuals receiving immunosuppressant therapy, may have a diminished immune response to the Pfizer-BioNTech COVID-19 Vaccine. Pfizer-BioNTech COVID-19 Vaccine may not protect all vaccine recipients.

Adverse Reactions Adverse Reactions in Clinical Trials Adverse reactions following the Pfizer-BioNTech COVID-19 Vaccine that have been reported in clinical trials include injection site pain, fatigue, headache, muscle pain, chills, joint pain, fever, injection site swelling, injection site redness, nausea, malaise, and lymphadenopathy (see Full EUA Prescribing Information).

Adverse Reactions in Post Authorization Experience Severe allergic reactions, including anaphylaxis, and other hypersensitivity reactions (e.g., rash, pruritus, urticaria, angioedema) have been reported following administration of the Pfizer-BioNTech COVID-19 Vaccine during mass vaccination outside of clinical trials.

Additional adverse reactions, some of which may be serious, may become apparent with more widespread use of the Pfizer-BioNTech COVID-19 Vaccine.

…

Attachment D, Page 2 – Dangers & Toxicities

4. The vaccination provider is responsible for mandatory reporting of the following to the Vaccine Adverse Event Reporting System (VAERS): • vaccine administration errors whether or not associated with an adverse event, • serious adverse events* (irrespective of attribution to vaccination), • cases of Multisystem Inflammatory Syndrome (MIS) in adults and children, and • cases of COVID-19 that result in hospitalization or death. Complete and submit reports to VAERS online at https://vaers.hhs.gov/reportevent.html. For further assistance with reporting to VAERS call 1-800-822-7967. The reports should include the words "Pfizer-BioNTech COVID-19 Vaccine EUA" in the description section of the report.

…

From Dose 1 through 30 days after Dose 2, reports of lymphadenopathy were imbalanced with notably more cases in the Pfizer-BioNTech COVID-19 Vaccine group (64) vs. the placebo group (6), which is plausibly related to vaccination. Throughout the safety follow-up period to date, Bell's palsy (facial paralysis) was reported by four participants in the Pfizer-BioNTech COVID-19 Vaccine group. Onset of facial paralysis was Day 37 after Dose 1 (participant did not receive Dose 2) and Days 3, 9, and 48 after Dose 2. No cases of Bell's palsy were reported in the placebo group. Currently available information is insufficient to determine a causal relationship with the vaccine.

…

6.2 Post Authorization Experience

The following adverse reactions have been identified during post authorization use of Pfizer-BioNTech COVID-19 Vaccine. Because these reactions are reported voluntarily, it is not always possible to reliably estimate their frequency or establish a causal relationship to vaccine exposure. Immune System Disorders: severe allergic reactions, including anaphylaxis, and other hypersensitivity reactions (e.g., rash, pruritus, urticaria, angioedema)

There are obviously risks as some are state in the vaccine package insert shown above. If there is a potential of risk, there must be a choice as to whether to take it or not.

Attachment D, Page 3 – Dangers & Toxicities

This page shows the results from the VAERS system listed previously in the vaccine package insert. We can clearly see that many people have died from the vaccine itself.

From the 2/26/2021 release of VAERS data:

Found 1,075 cases where Vaccine is COVID19 and Symptom is Death

http://www.medalerts.org/vaersdb/findfield.php

If there is a potential of risk, there must be a choice as to whether to take it or not.

Attachment D, Page 4 – Dangers & Toxicities

CDC: More than 5,000 COVID-19 vaccine recipients have reportedly suffered "health impact event"

DATED: DECEMBER 30, 2020 BY SHARYL ATTKISSON

- Moderna reports significantly higher risk of common side effects
- 5,052 vaccine recipients suffered a "health impact event" as of Dec. 19
- CDC defines **"health impact event" as one that renders a patient "unable to perform normal daily activities, unable to work, required care from doctor or health care professional"**
- That's a rate of about 2.3% of vaccine recipients
- CDC says a severe allergic reaction, anaphylaxis, was reported in 6 patients
- Both vaccines are effective at reducing the risk of symptomatic COVID-19 for at least 14 days (Moderna) or more than two months (Pfizer-BioNTech)
- It's impossible to know how effective the vaccines are beyond the number of days they've been given to humans. It's also impossible to know this soon what are the potential long term side effects, if any.

Effectiveness

Pfizer-BioNTech: Pfizer studies found effectiveness for two months.

Moderna: Moderna studies found effectiveness (reduced risk) of confirmed coronavirus for at least 14 days after the second dose (as of December 17).

CDC notes that "observed outcome of vaccine efficacy at two months does not directly inform vaccine efficacy for any duration longer than two months." In other words, there is no way to know whether the vaccine is effective for any period longer than the time period it has been given to patients.

CDC information on Pfizer vaccine: https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-19/05-COVID-CLARK.pdf

FDA information on Moderna vaccine: https://www.fda.gov/media/144638/download

https://sharylattkisson.com/2020/12/cdc-more-than-5000-covid-19-vaccine-recipients-have-reportedly-suffered-health-impact-event/

If there is a potential of risk, there must be a choice as to whether to take it or not.

Attachment D, Page 5 – Dangers & Toxicities

Northeast Ohio school district cancels class over COVID-19 vaccine reactions

Health officials say don't be discouraged by vaccine side-effects

by: Dave Nethers **Posted: Feb 8, 2021 / 06:01 PM EST / Updated: Feb 8, 2021 / 06:58 PM EST**

NAVARRE, Ohio (WJW)– **Two days after employees were given their first round of COVID-19 vaccinations,** the Fairless Local School District canceled classes, **attributing it to many developing side effects and becoming ill.**

https://fox8.com/news/coronavirus/fairless-local-schools-cancels-class-over-covid-19-vaccine-reactions/

If there is a potential of risk, there must be a choice as to whether to take it or not.

Two sisters at Villa Hills monastery die from COVID-19 after 28 test positive

by Brad Underwood, WKRC Sunday, February 7th 2021

VILLA HILLS, Ky. (WKRC) - A COVID-19 outbreak at a Northern Kentucky monastery claimed the lives of two nuns as more than two dozen other sisters tested positive.

The question is: How did the coronavirus get in? During the pandemic, the sisters of St. Walburg closed the monastery to visitors and held no religious services in the hopes of staying healthy. Until last week, that was the case. "We were very shocked by it because we've been extremely closed-down. We have not gone anywhere to speak of, and we haven't had visitors," said Sub Prioress Nancy Kordenbrock. Twenty-eight of the 35 sisters tested positive and, sadly, two of them have passed away.

"Both of them are elderly and had some health issues and were not able to compete with COVID," said Kordenbrock. Sr. Charles Wolking and Sr. Rita Bilz were both in their 90s and both were important women at the monastery. Thankfully, the other sisters did get antibody infusions at St. Elizabeth Hospital. Their symptoms vary and one sister remains hospitalized. "Currently in ICU, but we think she will be moved from there. She's doing so much better. She had serious respiratory issues. Another sister had been in the hospital but came home," said Kordenbrock.

The outbreak comes just two days after the sisters got their first COVID-19 vaccine shot.

"This is actually way more common than you might think," said Dr. Steven Feagins. Dr. Feagins is the Hamilton County public health director. He says, in cases like this, the vaccine's effect isn't lessened; it just delays getting the second dose…

If there is a potential of risk, there must be a choice as to whether to take it or not.

Attachment D, Page 7 – Dangers & Toxicities

Nurses Suffer 'Extreme Reaction' to Pfizer Covid Vaccine Despite No History of Allergic Reactions

December 17, 2020 https://www.thesun.co.uk/news/13499208/nurses-extreme-reaction-pfizer-covid-vaccine-no-history-allergies/

If there is a potential of risk, there must be a choice as to whether to take it or not.

UK REQUIRES RESCUSCITATION EQUIPMENT AT VACCINE ADMINISTRATION SITES: PROOF THE VACCINES HAVE DANGEROUS SIDE EFFECTS

UK Issues Allergy Warning About Pfizer Covid-19 Vaccine After Patients Fall Ill
By Lee Brown December 9, 2020

Two people who were jabbed with Pfizer's recently approved coronavirus vaccine in the UK had to be treated for serious adverse reactions — leading to warnings that those with "significant" allergies may not be able to get it.

The unidentified duo — both staff in the UK's National Health Service (NHS) — needed treatment for an "anaphylactoid reaction" Tuesday after they were among the first in the world to get the shot.

They both had serious reactions, but recovered after treatment, the NHS said.

The pair both had a history of allergic responses, and each carried an adrenaline shot — sometimes called EpiPens — used to save people from potentially fatal reactions.

The Medicines and Healthcare products Regulatory Agency (MHRA) immediately issued precautionary advice against vaccinating anyone with a history of "significant" allergic reactions to medicines, food or vaccines.

The medical regulator also said vaccinations should be carried out only in facilities that have resuscitation equipment…

https://nypost.com/2020/12/09/uk-issues-warning-about-pfizers-covid-19-vaccine/

If there is a potential of risk, there must be a choice as to whether to take it or not.

FACTS THAT HAVE BEEN UNCOVERED SO FAR
"Crimes Against Humanity": The German Corona Investigation.
"The PCR TEST Pandemic"

By Reiner Fuellmich
Global Research, October 07, 2020
Dr. Reiner Fuellmich 3 October 2020

Reiner Fuellmich is admitted to the Bar in Germany and in California for 26 years. *"I have been practicing law primarily as a trial lawyer against fraudulent corporations such as Deutsche Bank, formerly one of the world's largest and most respected banks, today one of the most toxic criminal organizations in the world; VW, one of the world's largest and most respected car manufacturers, today notorious for its giant diesel fraud; and Kuehne and Nagel, the world's largest shipping company. We're suing them in a multi-million-dollar bribery case. The German Corona Investigative Committee has taken testimony from a large number of international scientists and experts since July 10, 2020."*

Conclusions are the following:

- **The corona crisis must be renamed the "Corona Scandal"**
- It is:
  - The biggest tort case ever
  - **The greatest crime against humanity ever committed**
- Those responsible must be:
  - **Criminally prosecuted for crimes against humanity**
  - Sued for civil damages
- Deaths
  - **There is no excess mortality in any country**
  - **Corona virus mortality equals seasonal flu, despite news reports otherwise**
  - 94% of deaths in Bergamo were caused by transferring sick patients to nursing homes where they infected old people with weak immune systems
  - Doctors and hospitals worldwide were paid to declare deceased as victims of Covid-19
  - Autopsies showed:
    - Fatalities almost all caused by serious pre-existing conditions
    - Almost all deaths were very old people
    - Sweden (no lockdown) and Britain (strict lockdown) have comparable disease and mortality statistics
  - US states with and without lockdowns have comparable disease and mortality statistics

Attachment E, Page 2 – Fraud

- Health
  - Hospitals - some face bankruptcy
  - Populations have T-cell immunity from previous influenza waves
  - Herd immunity needs only 15-25% population infection and is already achieved
  - Only when a person has symptoms can an infection be contagious
- Tests:
  - **Many scientists call this a PCR-test pandemic, not a corona pandemic**
  - **Very healthy and non-infectious people may test positive**
  - **Likelihood of false-positives is 89-94% or near certainty**
  - Prof. Drosten developed his PCR test from an old SARS virus without ever having seen the real Wuhan virus from China
  - The PCR test is not based on scientific facts with respect to infections
  - **PCR tests are useless for the detection of infections**
  - **A positive PCR test does not mean an infection is present or that an intact virus has been found**
  - Amplification of samples over 35 cycles is unreliable but WHO recommended 45 cycles

- Illegality:
  - The German government locked down, imposed social-distancing/ mask-wearing on the basis of a single opinion – similar to the US.
  - The lockdown was imposed when the virus was already retreating
  - The lockdowns were based on non-existent infections
  - Former president of the German federal constitutional court doubted the constitutionality of the corona measures
  - Former UK supreme court judge Lord Sumption concluded there was no factual basis for panic and no legal basis for corona measures
  - German RKI (CDC equivalent) recommended no autopsies be performed
  - Corona measures have no sufficient factual or legal basis, are unconstitutional and must be repealed immediately
  - No serious scientist gives any validity to the infamous Neil Ferguson's false computer models warning of millions of deaths
  - **Mainstream media completely failed to report the true facts of the so-called pandemic**
  - **Democracy is in danger of being replaced by fascist totalitarian models**
  - Drosten (of PCR test), Tedros of WHO, and others have committed crimes against humanity as defined in the International Criminal Code

- Politicians can avoid going down with the charlatans and criminals by starting the long overdue public scientific discussion

- Conspiracy:
  - **Politicians and mainstream media deliberately drove populations to panic**
  - Children were calculatedly made to feel responsible "for the painful tortured death of their parents and grandparents if they do not follow Corona rules"
  - The hopeless PCR test is used to create fear and not to diagnose
  - There can be no talk of a second wave
- Injury and damage:
  - **Evidence of gigantic health and economic damage to populations**
  - Anti-corona measures have:
    - Killed innumerable people
    - Destroyed countless companies and individuals worldwide
  - Children are being taken away from their parents
  - Children are traumatized en-masse
  - **Bankruptcies are expected in small- and medium-sized businesses**
- Redress:
  - A class action lawsuit must be filed in the USA or Canada, with all affected parties worldwide having the opportunity to join
  - Companies and self-employed people must be compensated for damages

Attachment E, Page 4 – Fraud

The Forbidden COVID-19 Chronicles January 25, 2021

An Analysis of the Pfizer COVID-19 Vaccine Trial Data (No safety has been proven)

The following analysis of the Pfizer COVID-19 trial data was prepared by a physician who asked to remain anonymous since physicians who speak out about vaccine safety or efficacy are often targeted by medical boards and other government agencies for investigation. After reviewing the article titled "Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine,"1 it is clear to me that both the design and the results of the study are highly flawed. First, according to the paper, "Pfizer was responsible for the design and conduct of the trial, data collection, data analysis, data interpretation, and the writing of the manuscript." This is a clear conflict of interest, as Pfizer, the make of this vaccine, stands to benefit from positive trial results. It would have been much better to have independent researchers funded by non-conflicted sources conducting this trial. In consideration of the amount of money the government has invested in COVID-19 response, it is somewhat mind-boggling to figure out why this was not done. But there's more – lots more.

The trial was designed to investigate safety and efficacy for a vaccine administered in two doses 21 days apart. The paper states that data was gathered for 37,706 participants for at least two months after the second dose was given. But the researchers report that participants were screened between July 27, 2020 and November 14, 2020. Based on this information, one can presume that the last participants on the study were enrolled the first two weeks of November. Since the vaccine was administered in two doses 21 days apart, the second dose for the last patients enrolled would have been administered in early December. This means that two months of safety data could not have been gathered after the second dose since the paper was published on December 31 2020. Furthermore, the paper states that the cut-off date for data collection was October 9 2020. Assuming that all patients were screened, randomized, and received the first dose on July 27, 2020, which was clearly not the case, the second dose would have been administered three weeks later on August 17, 2020. It would have taken until October 17 to collect two months of safety data for the last patients given the second dose. Therefore it would be impossible to include all of the follow-up data in view of the cutoff date of October 9. Thus, the claim of two months of safety data for 37,706 participants is false, and even more egregious if one assumes that the 37,706 participants were enrolled in a normal fashion over a period of months, rather than all being enrolled and give the first dose on the same date - July 27, 2020.

The study reported that 59% and 52% of younger vaccine recipients reported fatigue and headache, respectively, after the second dose. In older vaccine recipients, the numbers reported were 51% and 39%, respectively.

Adverse events in the intervention (vaccine) group were over two times the number reported in the placebo group. Fever was reported by 16% of younger vaccine recipients and by 11% of older vaccine recipients. This is significant because fever is listed one of the symptoms used to confirm a Covid-19 infection.

Attachment E, Page 5 – Fraud

This begs the question: were some vaccine recipients who reported fever not included as confirmed cases because the fever was determined to be caused by the vaccine? If so, how many of these cases were there? Knowing the answers to these questions could lead one to question the reported 95% effectiveness of the vaccine. In the Discussion section of the paper, the authors concluded that a two-dose regimen of the vaccine, given 21 days apart, was found to be safe and 95% effective against Covid-19. However, the reported safety primary end points were as followed: "The primary end points of this trial were solicited, specific local or systemic adverse events and use of antipyretic or pain medication within 7 days after the receipt of each dose of vaccine or placebo, as prompted by and recorded in an electronic diary in a subset of participants (the reactogenicity subset), and unsolicited adverse events (those reported by the participants without prompts from the electronic diary) through 1 month after the second dose and unsolicited serious adverse events through 6 months after the second dose." Based on the primary safety end points, the safety of this vaccine cannot be determined until six months after the second dose. If all participants received their second dose by August 17, 2020, no conclusions about safety can be made until after February 17, 2021. Presuming that there were participants who received their second dose in November and perhaps December, no conclusions about safety can be made until May or June of 2021. Since this paper was published on December 31, 2020, and presumably written prior to this date, it is clear that no conclusions could be drawn concerning a primary safety end point. Therefore, the authors incorrectly stated that a two-dose regimen of the vaccine was found to be safe based on their own criteria. Of course, since the study was paid for and conducted by Pfizer, the maker of the vaccine, the question of whether or not a COVID-19 vaccine is even necessary was not addressed. But this is a fair question to ask. According to the CDC and the FDA, there is a 99.99% survival rate for most people infected with Covid-19 and at least a 94.6% survival rate for all people infected. **This survival rate indicates that the vaccine is likely not needed**. The Pfizer study actually demonstrates this, since none of the 162 confirmed cases diagnosed in the 21,728 placebo participants died from Covid-19. Considering the fact that vaccine recipients experienced more side effects and more serious side effects than placebo recipients, the vaccine is causing harm with little chance of benefit. This is simply not logical.

Concerning potential harms, the FDA's Vaccines and Related Biological Products Advisory Committee reported 22 possible adverse events from COVID-19 vaccines. (2) These included death, acute myocardial infarction, stroke, paralysis, myelitis, and disseminated intravascular coagulation. **How is it logical to give people a vaccine that can cause death, heart attacks, strokes, and paralysis to prevent a disease from which the vast majority of the population recovers without complications?** While we are told repeatedly to "trust the science" this hardly stands up to scientific scrutiny.

1 Polack FP, Thomas SJ, Kitchin N et al for the C4591001 Clinical Trial Group. "Safety and Efficacy of the BNT162b2 COVID-19 Vaccine." NEJM 2020 Dec;383:2603-2615

2 https://www.fda.gov/media/143557/download

https://wellnessforumhealth.com/wp-content/uploads/2021/02/Forbidden-Newsletter-Article-012521.pdf

Attachment E, Page 6 – Fraud

UK GOVERNMNET DOWNGRADES CORONAVIRUS AS NO LONGER HIGHLY DANGEROUS

STATUS OF COVID-19

As of March 19, 2020 … The British government has **downgraded the coronavirus** from being an acute infectious disease with a high case fatality rate. After reviewing the data, they have come to their senses. Moreover, a study released by **Oxford finds** that perhaps 50% of those in the UK have the virus and the overwhelming number experience it like the normal flu and have little symptoms. The study suggests that **fewer than one in a thousand** of those infected with COVID-19 become ill enough to need hospitalization. So why the hysteria?

https://www.armstrongeconomics.com/international-news/politics/uk-government-downgrade-coronavirus-as-no-longer-highly-dangerous/