Notice of Liability

Corporation: _____ **Date:** _____

Attention: _____

Job title: _____

Address: _____

This is an official and personal Notice of Liability.

Whereas the administration of a medical procedure or medical treatment must be conducted under the advisement of my doctor or my specialist (i.e., virologist, cardiologist, epidemiologist, or otherwise),

Whereas orders or policies brought forth are
- using coercion and/or duress (threat of being fired)
- in contravention the Constitution Act of 1982
- there is denial of human rights.

It is illegal and unlawful for you to insist I 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', or further being tested with emergency use medical procedures; RT-PCR and or "Rapid Antigen Test" as a condition of employment.

Medical Procedures:

RT-PCR Tests:

- In November 2020, a Portuguese court ruled that RT-PCR tests are unreliable.[1]
- On December 14, 2020, the WHO admitted the RT-PCR Test has a 'problem' at high amplifications as it detects dead cells from old viruses, giving a false positive.[2]
- Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted RT-PCR tests are unreliable.[3]
- On April 8, 2021, the Austrian court ruled the RT-PCR was unsuited for COVID testing.[4]
- On April 8, 2021, a German Court ruled against RT-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."[5]
- On May 8, 2021, the Swedish Public Health Agency stopped RT-PCR testing for the same reason.[6]
- 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 RT-PCR test results do not verify infectiousness and were never intended to be used to diagnoserespiratoryillnesses.[7]

07/21/2021: Lab Alert: Changes to CDC RT-PCR for SARS-CoV-2 Testing.

"After December 31, 2021, CDC will withdraw the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time-PCR Diagnostic Panel, the assay first introduced in February 2020 for detection of SARS-CoV-2 only. CDC is providing this advance notice for clinical laboratories to have adequate time to select and implement one of the many FDA-authorized alternatives."[8]

From the FDA: SARS-CoV-2 Reference Panel Comparative Data

"During the early months of the Coronavirus Disease 2019 (COVID-19) pandemic, clinical specimens [of the virus] were not readily available to developers of IVDs [in vitro diagnostics] to detect SARS-CoV-2. Therefore, the FDA authorized IVDs based on available data from contrived samples generated from a range of SARS-CoV-2 material sources (for example, gene specific RNA, synthetic RNA, or whole genome viral RNA) for analytical and clinical performance evaluation. While validation using these

[1]https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/
[2]https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/
[3] https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html
[4]https://greatgameindia.com/austria-court-pcr-test/
[5]https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/
[6]https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/
[7]https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/
[8]https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html

contrived specimens provided a measure of confidence in test performance at the beginning of the pandemic, it is not feasible to precisely compare the performance of various tests that used contrived specimens because each test validated performance using samples derived from different gene specific, synthetic, or genomic nucleic acid sources."[9]

Rapid Antigen Test:

Rapid antigen tests, such as those manufactured by **Abbott, Azure Biotech Inc., Roche, and others** offer results more rapidly and at lower cost, but it is important to note that studies conducted to validate their use gathered data on symptomatic, asymptomatic, and even postmortem patients, all using RT-PCR tests (demonstrably inaccurate as shown above) as a reference standard, generating a very high risk of bias and often do not report the sensitivity and specificity of platforms used, therefore are not sufficient methods to determine infection of SARS-CoV-2.[10][11][12][13][14]

Rapid antigen tests, such as the **Abbott BinaxNOW COVID-19 Ag Card (BinaxNOW),** offer results more rapidly (approximately 15–30 minutes) and at a lower cost than do highly sensitive nucleic acid amplification tests (NAATs) (*1*). Rapid antigen tests have received Food and Drug Administration (FDA) **Emergency Use Authorization (EUA)** for use in **symptomatic persons** (*2*), but data are lacking on test performance in asymptomatic persons to inform expanded screening testing to rapidly identify and isolate infected persons (*3*). To evaluate the performance of the BinaxNOW rapid antigen test, **it was used along with real-time reverse transcription–polymerase chain reaction (RT-PCR) testing** to analyze 3,419 paired specimens collected from persons aged ≥10 years at two community testing sites in Pima County, Arizona, during November 3–17, 2020. Viral culture was performed on 274 of 303 residual real-time RT-PCR specimens with positive results by either test (29 were not available for culture). Compared with real-time RT-PCR testing, the BinaxNOW antigen test had a sensitivity of **64.2% for specimens from symptomatic persons** and **35.8% for specimens from asymptomatic persons**, with near 100% specificity in specimens from both groups. Virus was cultured from 96 of 274 (35.0%) specimens, including 85 (57.8%) of 147 with concordant antigen and real-time RT-PCR positive results, 11 (8.9%) of 124 with false-negative antigen test results, and none of three with false-positive antigen test results. Among specimens positive for viral culture, sensitivity was 92.6% for symptomatic and **78.6% for asymptomatic individuals.** When the pretest probability for receiving positive test results for SARS-CoV-2 is elevated (e.g., in symptomatic persons or in persons with a known COVID-19 exposure), a negative antigen test result should be confirmed by NAAT (*1*). Despite a lower sensitivity to detect infection, rapid antigen tests can be an important tool for screening because of their quick turnaround time, lower costs and resource needs, high specificity, and high positive predictive value (PPV) in settings of high pretest probability. The faster turnaround time of the antigen test can help limit transmission by more rapidly identifying infectious persons for isolation, particularly when used as a component of serial testing strategies.

Abbott Panbio™ COVID-19 Ag Rapid Test Device is an in vitro diagnostic rapid test for the qualitative detection of SARS-CoV-2 antigen (Ag) in human nasal swab specimens from individuals who meet COVID-19 clinical and / or epidemiological criteria. Panbio™ COVID-19 Ag Rapid Test Device is for professional use only and is intended to be used as an aid in the diagnosis of SARS-CoV-2 infection.

The product may be used in any laboratory and non-laboratory environment that meets the requirements specified in the Instructions for Use and local regulation. The test provides preliminary test results. **Negative results don't preclude SARS-CoV-2 infection and they cannot be used as the sole basis for treatment or other management decisions.** Negative results must be combined with clinical observations, patient history, and epidemiological information. **The test is not intended to be used as a donor screening test for SARS-CoV-2.**

[9] https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/sars-cov-2-reference-panel-comparative-data
[10] https://www.cdc.gov/mmwr/volumes/70/wr/mm7003e3.htm
[11] https://wwwnc.cdc.gov/eid/article/27/5/20-4688_article
[12] https://pubmed.ncbi.nlm.nih.gov/33421573/
[13] https://onlinelibrary.wiley.com/doi/10.1002/jmv.26765
[14] https://dam.abbott.com/en-gb/panbio/120007883-v1-Panbio-COVID-19-Ag-Nasal-AsymptomaticSe.pdf

Medical Treatments:

Vaccines:

Legal Definition:

Vaccine: means a specially prepared antigen administered to a person for the purpose of providing immunity.[15]

From US CDC:

Vaccine: A preparation that is used to stimulate the body's immune response against diseases. Vaccines are usually administered through needle injections, but some can be administered by mouth or sprayed into the nose.[16]

From the Government of Canada:

Vaccines are complex biologic products designed to induce a protective immune response effectively and safely. **An ideal vaccine is: safe with minimal adverse effects; effective in providing lifelong protection against disease after a single dose that can be administered at birth;** inexpensive; stable during shipment and storage; and easy to administer. Some vaccines come closer to fulfilling these criteria than others. Although each vaccine has its own benefits and risks, and indications and contraindications, all vaccines offer protection against the disease for which they were created.

Vaccines are classified according to the type of active component (antigen) they contain and are most often categorized in two groups - live attenuated vaccines and non-live vaccines:

- **Live** attenuated vaccines contain whole, weakened bacteria or viruses. Since the agent replicates within the vaccine recipient, the stimulus to the immune system more closely resembles that associated with natural infection, resulting in longer lasting and broader immunity than can be achieved with other vaccine types. Because of the strong immunogenic response, live attenuated vaccines, except those administered orally, typically produce immunity in most recipients with one dose; however, a second dose helps to make sure that almost all vaccine recipients are protected, because some individuals may not respond to the first dose. Live vaccines require careful storage and handling to avoid inadvertent inactivation.
- **Non-live** vaccines contain whole inactivated (killed) bacteria or viruses, their parts, or products secreted by bacteria that are modified to remove their pathogenic effects (toxoids). Non-live vaccines cannot cause the disease they are designed to prevent. Because the immune response to non-live vaccines may be less than that induced by live organisms, they often require adjuvants and multiple doses. The initial doses prime the immune system and are called primary vaccination or the primary series. As protection following primary vaccination diminishes over time, periodic supplemental doses (booster doses) may be required to increase or boost antibody levels.[17]

COVID-19 'Vaccines' are Gene Therapy

- mRNA "vaccines" created by Moderna and Pfizer are gene therapies. They fulfill all the definitions of gene therapy and none of the definitions for a vaccine. This matters, as you cannot mandate a gene therapy against COVID-19 any more than you can force entire populations to undergo gene therapy for a cancer they do not have and may never be at risk for.
- mRNA contain genetic instructions for making various proteins. mRNA "vaccines" deliver a synthetic version of mRNA into your cells that carry the instruction to produce the SARS-CoV-2 spike protein, the antigen, that then activates your immune system to produce antibodies
- The only one benefiting from an mRNA "vaccine" is the vaccinated individual, since all they are designed to do is **lessen clinical symptoms** associated with the S-1 spike protein. Since you're the only one who will reap a benefit, it makes no sense to demand you accept the risks of the therapy "for the greater good" of your community
- The mRNA "vaccines" do not meet the medical and/or legal definition of a vaccine.
- SARS-CoV-2 has not even been proven to be the cause of COVID-19. So, a gene therapy that instructs your body to produce a SARS-CoV-2 antigen — the viral spike protein — cannot be said to be preventive against COVID-19, as the two have not been shown to be causally linked.

As calls for mandatory COVID-19 vaccination grow around the world, it's becoming ever more crucial to understand what these injections actually are. The mRNA "vaccines" created by Moderna and Pfizer are in fact gene therapies.[18]

[15] https://www.lawinsider.com/dictionary/vaccine
[16] https://www.cdc.gov/vaccines/vac-gen/imz-basics.htm
[17] https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-1-key-immunization-information/page-14-basic-immunology-vaccinology.html
[18] https://undercurrents723949620.wordpress.com/2021/03/16/covid-19-vaccines-are-gene-therapy/

Pfizer-BioNTech

FDA approval of the BioNTech side of the Pfizer gene therapy drug was given BLA approval August 23, 2021 renamed "Comirnaty". In Canada the Pfizer-BioNTech "vaccine" is emergency use (EUA) only and remains experimental. Specifically, according to the schedule of study C4591009, entitled "A Non-Interventional Post-Approval Safety Study of the Pfizer-BioNTech COVID-19 mRNA Vaccine in the United States," results will not be published until 2025. [19]

"In history's largest medical experiment with "vaccines" that have not been approved for use in humans, it is the buyers' responsibility to defend Pfizer for causing harm, leaked documents showed. Pfizer has escaped all liability and is indemnified, arguing that side effects and the long-term effects of the injections are **unknown** – to the company as well. Pfizer thus admits that an insufficiently tested product is being pushed in literally billions of doses on the world market."

Some samples from the confidential agreements

- **The purchaser is aware that the efficacy and long-term effects of the vaccine are unknown and that side effects may occur which are not currently known.**
- The buyer must pay Pfizer for the ordered doses, regardless of how many you use and regardless of whether Pfizer has the preparation approved by the authorities." (This was written before the FDA's emergency approval of the so-called "vaccines").
- The buyer hereby agrees to indemnify, defend and hold Pfizer/BioNTech and their subsidiaries indemnified against all claims, documents, claims, losses, damages, debts, settlements, penalties, fines, costs and expenses.
- The buyer must pay all losses, including and without limitation costs for legal fees and other legal costs.
- Buyer must indemnify Pfizer for claims and all losses and must implement this through statutory or regulatory requirements.
- Pfizer has the right to make necessary adjustments to the agreed number of contracted doses and delivery schedule, based on principles decided by Pfizer. The buyer is obliged to agree to any change.
- **The agreement must be kept secret for ten years**.[20]

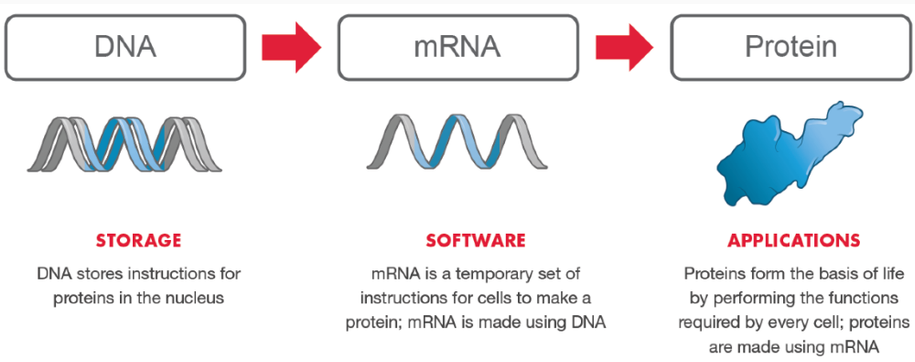
Moderna:

Moderna claims their "vaccine" acts as an operating system:[21]

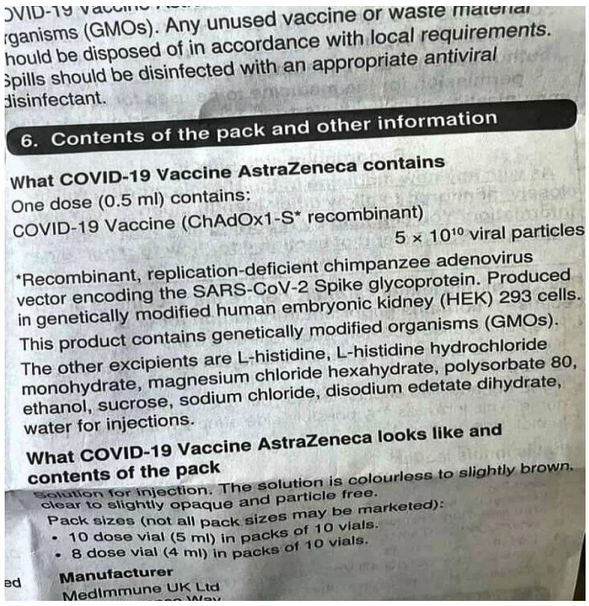
Our Operating System

Recognizing the broad potential of mRNA science, we set out to create an mRNA technology platform that functions very much like an operating system on a computer. It is designed so that it can plug and play interchangeably with different programs. In our case, the "program" or "app" is our mRNA drug - the unique mRNA sequence that codes for a protein.

We have a dedicated team of several hundred scientists and engineers solely focused on advancing Moderna's platform technology. They are organized around key disciplines and work in an integrated fashion to advance knowledge surrounding mRNA science and solve for challenges that are unique to mRNA drug development. Some of these disciplines include mRNA biology, chemistry, formulation & delivery, bioinformatics and protein engineering.



[19] https://www.fda.gov/media/151710/download
[20] https://freewestmedia.com/2021/08/08/bomshell-leak-countries-that-buy-pfizers-vaccine-undertake-to-break-the-law/
[21] https://www.modernatx.com/mrna-technology/mrna-platform-enabling-drug-discovery-development



AstraZeneca:

As you can see in the attached photo; the ingredients contained in the AZ "vaccine" are "Recombinant, replication-deficient Chimpanzee adenovirus vector encoding the SARS-CoV-2 Spike glycoprotein, produced in modified Human embryonic (aborted fetus) kidney (HEK) 293 cells."

The SARS-CoV-2 Spike Glycoprotein DOES NOT come from a diseased human being, which is why it must be combined with aborted human fetus kidney cells, so when injected into human beings it tricks the body to believe it came from human cells.

For all four of the COVID-19 treatments currently being approved under 'Emergency Use Authorization', the Government of Canada clearly states that all studies regarding the safety, efficacy, effects, and long-term effectiveness are still ongoing in each of the Product Monographs. [22][23][24][25]

Canadian National Report on Immunization, 1996, Volume: 23S4 - May 1997

Immunization in Canada

Unlike some countries, immunization is not mandatory in Canada; it cannot be made mandatory because of the Canadian Constitution.[26]

Dr. Byram Bridle, a founding member of the Canadian Covid Care Alliance and a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, details harms of the experimental treatments in a new peer reviewed scientifically published research study[27] 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;

Dr. McCullough, a Cardiologist and Professor of Medicine at Texas A&M, came to the 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;"[28]

[22] https://covid-vaccine.canada.ca/info/pdf/astrazeneca-covid-19-vaccine-pm-en.pdf
[23] https://covid-vaccine.canada.ca/info/pdf/pfizer-biontech-covid-19-vaccine-pm1-en.pdf
[24] https://covid-vaccine.canada.ca/info/pdf/covid-19-vaccine-moderna-pm-en.pdf
[25] https://covid-vaccine.canada.ca/info/pdf/janssen-covid-19-vaccine-pm-en.pdf
[26] https://publications.gc.ca/collections/collection_2016/aspc-phac/HP3-1-23-S4-eng.pdf
[27] https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge
[28] https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/

Informed Consent

Supreme Court of Canada rulings on "Informed Consent":

Yule v. Parmley, 1945[29] R. v. M., 1994 [30]
Hopp v. Lepp, 1980[31] R. v. Ewanchuk, 1999[32]
Hughes v. Reibl, 1980[33]

In all Supreme Court of Canada rulings, medical treatments or procedures are administered by properly licensed physicians with their patients, and with priority on the patient's informed consent.

More specifically; Hughes v. Reibl replaced Hopp v. Lepp where "What a reasonable physician would disclose" with "What a reasonable patient would want to know." Physicians in Canada are bound by these Supreme Court decisions.

Elements of consent: Your expressed, informed and explicit consent (voluntary) must be obtained prior to treatment. Without consent it is considered assault under the Criminal Code of Canada. Consent given under fear or duress is not consent. **Section 265(1)(3)** of the **Criminal Code of Canada** defines (1) assault and defines (3) consent:

265 (1) A person commits an assault when

- (a) without the consent of another person, he applies force intentionally to that other person, directly or indirectly;
- (b) he attempts or threatens, by an act or a gesture, to apply force to another person, if he has, or causes that other person to believe on reasonable grounds that he has, present ability to effect his purpose; or
- (c) while openly wearing or carrying a weapon or an imitation thereof, he accosts or impedes another person or begs.

Consent

265 (3) For the purposes of this section, no consent is obtained where the complainant submits or does not resist by reason of

- (a) the application of force to the complainant or to a person other than the complainant;
- (b) threats or fear of the application of force to the complainant or to a person other than the complainant;
- (c) fraud; or
- (d) the exercise of authority.[34]

Consolidated Health Care Consent Act, 1996

Consent to Treatment

No treatment without consent

10 (1) A health practitioner who proposes a treatment for a person shall not administer the treatment, and shall take reasonable steps to ensure that it is not administered, unless,

(a) he or she is of the opinion that the person is capable with respect to the treatment, and the person has given consent; or

(b) he or she is of the opinion that the person is incapable with respect to the treatment, and the person's substitute decision-maker has given consent on the person's behalf in accordance with this Act. 1996, c. 2, Sched. A, s. 10 (1).

Elements of consent

11 (1) The following are the elements required for consent to treatment:

1. The consent must relate to the treatment.
2. The consent must be informed.
3. The consent must be given voluntarily.

[29] https://www.canlii.org/en/bc/bcca/doc/1945/1945canlii277/1945canlii277.html?autocompleteStr=yule&autocompletePos=5
[30] https://www.canlii.org/en/ca/scc/doc/1994/1994canlii77/1994canlii77.html?autocompleteStr=23385&autocompletePos=1
[31] https://www.canlii.org/en/ca/scc/doc/1980/1980canlii14/1980canlii14.html?autocompleteStr=hopp&autocompletePos=1
[32] https://www.canlii.org/en/ca/scc/doc/1999/1999canlii711/1999canlii711.html?autocompleteStr=26493&autocompletePos=1
[33] https://www.canlii.org/fr/ca/csc/doc/1980/1980canlii23/1980canlii23.html?resultIndex=1
[34] https://www.canlii.org/en/ca/laws/stat/rsc-1985-c-c-46/latest/rsc-1985-c-c-46.html?searchUrlHash=AAAAAQANY3JpbWluYWwgY29kZQAAAAAB&resultIndex=1

4. The consent must not be obtained through misrepresentation or fraud. 1996, c. 2, Sched. A, s. 11 (1).

Informed consent

(2) A consent to treatment is informed if, before giving it,

(a) the person received the information about the matters set out in subsection (3) that a reasonable person in the same circumstances would require in order to make a decision about the treatment; and

(b) the person received responses to his or her requests for additional information about those matters. 1996, c. 2, Sched. A, s. 11 (2).[35]

As an employer, by law you cannot mandate any medical procedures i.e., RT-PCR test or Rapid Antigen Test or medical treatments i.e., experimental vaccines. Only a patient's physician can administer medical treatments or medical procedures with the patient's "informed consent". At this time no physician would be able to give his/her patient required disclosure sufficient for informed consent because the vaccine companies 'vaccines are still experimental and have not completed their trials, hence these companies do not have a complete list of adverse effects for these experimental vaccines.

Vaccination is voluntary in Canada. The federal and provincial governments have made it clear that getting the COVID-19 injections will not be mandatory. Employers are infringing on human rights and putting themselves personally at risk of a civil tort and/or criminal charges, and potential imprisonment, by attempting to impose these experimental medical treatments upon their employees. Canadian law has long recognized that individuals have the right to control what happens to their bodies.

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

The Constitution Act, 1982

Vaccination is voluntary in Canada. The federal and provincial governments have made it clear that getting the COVID-19 injections will not be mandatory. Employers are infringing on human rights and putting themselves personally at risk of a civil tort and/or criminal liability, and potential imprisonment, by attempting to impose this experimental medical treatment upon their employees. Canadian law has long recognized that individuals have the right to control what happens to theirbodies.

(i) Private corporations

Private corporations are entirely creatures of statute; they have no power or authority that does not derive from the legislation that created them. The Charter does not apply to them, however, because legislatures have not entrusted them to implement specific governmental policies. "[W]hile the legislation creating corporations is subject to the Charter, corporations themselves are not part of 'government' for the **purposes of section 32 of the Charter"**[36]

Canadian Constitution(1982) Section: 52.-(1) 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.

No corporation or person or group of persons is above the law in Canada.

Further, Sections 7, 15(1) and 26 of the Constitution act, 1982:

7. 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.

15(1). Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.

26. The guarantee in this Charter of certain rights and freedoms shall not be construed as denying the existence of any other rights or freedoms that exist in Canada.

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations…mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."[37]

[35] https://www.canlii.org/en/on/laws/stat/so-1996-c-2-sch-a/187335/so-1996-c-2-sch-a.html
[36] https://www.justice.gc.ca/eng/csj-sjc/rfc-dlc/ccrf-ccdl/check/art321.html
[37] http://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/

The **International Covenant on Economic, Social and Cultural Rights**, entered into force in Canada on January 3, 1976;[38]

The States Parties to the present Covenant,

Considering that, in accordance with the principles proclaimed in the Charter of the United Nations, recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world,

Recognizing that these rights derive from the inherent dignity of the human person,

Recognizing that, in accordance with the Universal Declaration of Human Rights, the ideal of free human beings enjoying freedom from fear and want can only be achieved if conditions are created whereby everyone may enjoy his economic, social and cultural rights, as well as his civil and political rights,

Considering the obligation of States under the Charter of the United Nations to promote universal respect for, and observance of, human rights and freedoms,

Realizing that the individual, having duties to other individuals and to the community to which he belongs, is under a responsibility to strive for the promotion and observance of the rights recognized in the present Covenant.

The **International Covenant on Civil and Political Rights**, adopted by Canada on March 23, 1976,[39] specifically:

Article 4

1. In time of public emergency which threatens the life of the nation and the existence of which is officially proclaimed, the State Parties to the present Covenant may take measures derogating from their obligations under the present Covenant to the extent strictly required by the exigencies of the situation, provided that such measures are not inconsistent with their other obligations under international law and do not involve discrimination solely on the grounds of race, colour, sex, language, religion or social origin.

2. No derogation from Articles 6, 7, 8 (paragraphs 1 and 2), 11, 15, 16 and 18 may be made under this provision.

Article 5

1. Nothing in the present Covenant may be interpreted as implying for any State, group or person any right to engage in any activity or perform any act aimed at the destruction of any of the rights and freedoms recognized herein or at their limitation to a greater extent than is provided for in the present Covenant.

2. There shall be no restriction upon or derogation from any of the fundamental human rights recognized or existing in any State Party to the present Covenant pursuant to law, conventions, regulations or custom on the pretext that the present Covenant does not recognize such rights or that it recognizes them to a lesser extent.

Article 6

1. **Every human being has the inherent right to life**. This right shall be protected by law. No one shall be arbitrarily deprived of his/her life.

Article 7

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment. In particular, **no one shall be subjected without his/her free consent to medical or scientific experimentation.**

[38] https://www.ohchr.org/en/professionalinterest/pages/cescr.aspx
[39] https://www.ohchr.org/en/professionalinterest/pages/ccpr.aspx

United Nations Universal Declaration of Human Rights[40]

Article 1

All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

Article 2

Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status. Furthermore, no distinction shall be made on the basis of the political, jurisdictional or international status of the country or territory to which a person belongs, whether it be independent, trust, non-self-governing or under any other limitation of sovereignty.

Article 3

Everyone has the right to life, liberty and security of person.

Article 8

Everyone has the right to an effective remedy by the competent national tribunals for acts violating the fundamental rights granted him by the constitution or by law.

Article 17

1. Everyone has the right to own property alone as well as in association with others.
2. No one shall be arbitrarily deprived of his property.

Article 18

Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief, and freedom, either alone or in community with others and in public or private, to manifest his religion or belief in teaching, practice, worship and observance.

Article 19

Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers.

Article 23

1. **Everyone has the right to work**, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.
2. Everyone, without any discrimination, has the right to equal pay for equal work.
3. Everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity, and supplemented, if necessary, by other means of social protection.
4. Everyone has the right to form and to join trade unions for the protection of his interests.

Article 25

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.
2. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

Article 26

1. **Everyone has the right to education.** Education shall be free, at least in the elementary and fundamental stages. Elementary education shall be compulsory. Technical and professional education shall be made generally available and higher education shall be equally accessible to all on the basis of merit.
2. Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms. It shall promote understanding, tolerance and friendship among all nations, racial or religious groups, and shall further the activities of the United Nations for the maintenance of peace.
3. Parents have a prior right to choose the kind of education that shall be given to their children.

[40] https://www.un.org/en/about-us/universal-declaration-of-human-rights

By terminating an employee for not partaking in an experimental medical treatment or medical procedure that has insufficient data and evidence for consent to be informed will expose the employer to a claim of wrongful dismissal.

Furthermore, if any employee is influenced, pressured, coerced, or otherwise placed under duress to receive the injection, and suffers any adverse consequences as a result of the injection, the employer, its directors, officers, and those in positions of responsibility over the health and/or safety of their employees will be opening themselves up to personal civil tort, and/or criminal charges.

Additionally, administration of vaccines is defined as a “medical treatment”, the recommendation to receive an injection is defined as “medical advice” and testing is a “medical procedure”. As you are neither my doctor or specialist, this is unauthorized practice of medicine, an indictable offence.

I am declining participation in the COVID-19 experimental gene therapy, due to the above examples of how there is insufficient data and evidence for my consent to be informed. If coercion or discrimination set on by you or any under your responsibility continues, if my human right to life, liberty, and security is not respected, or deprived of in any way, if financial injury, loss of my personal income, and/or my ability to provide food and shelter for my family is hindered as a result of your unlawful and illegal policy, I hereby notify you that you will be held personally liable.

Criminal Code of Canada:

Ignorance of the law

19 Ignorance of the law by a person who commits an offence is not an excuse for committing that offence.

- R.S., c. C-34, s. 19

Now with the knowledge of the laws here in Canada you can make an informed decision as to mandatory (illegal and unlawful) or voluntary (legal and lawful), the ball is in your court, govern yourself accordingly.

I require all further correspondence regarding this or any company policies that are related to medical treatments or medical procedures to be in writing.

Name: _____

Job Title: _____

Signature: _____