

To: Governor Philip B. Scott

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Montpelier, VT 05609

Phone: 802-828-3333

The Department of Justice recently issued a Statement of Interest brief to support a church's lawsuit against a city for Constitution overreach. The brief stated:

There is no pandemic exception, however, to the fundamental liberties the Constitution safeguards. Indeed, "individual rights secured by the Constitution do not disappear during a public health crisis." These individual rights, including the protections in the Bill of Rights made applicable to the states through the Fourteenth Amendment, are always in force and restrain government action.

You, Philip B Scott, currently acting as Governor in de facto, swore an oath to uphold and support the Constitution of the United States of America and the Constitution of Vermont, and pursuant to your oath, you are required to abide by that oath in the performance of your official duties, yet, by your actions against the People you have violated those Oaths and additionally engaged in myriad instances of incompetence, negligence, dereliction of duty, malfeasance, sedition, insurrection, treason and criminal, unconstitutional behavior rendering you unfit to hold public office.

The following are statements of truth, fact, valid law and evidence

Citations of Law

- 1) It is our assertion that defendant, Philip B. Scott violated your oath of office, additionally you are in violation of Section 802 of the Patriot Act, which clearly defines what a domestic terrorist is. Additionally defendant, Philip B. Scott, is in violation of:
Title 18, U.S.Code, § 241, Conspiracy against Rights; Title 18, U.S.Code, § 242, Deprivation of Rights under Color of Law; Title 18, U.S.Code § 1038, False Information

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and Hoaxes; Title 18, U.S.Code, § 1001, Statements and Entries Generally' Title 18, U.S.Code, § 1503, Influencing or Injuring Officers or Jurors Generally; Title 18, U.S.Code, § 1512B, Engages in Misleading Conduct; Title 18, U.S.Code, § 2071, Concealment, Removal or Mutilation Generally; Title 26, U.S.Code, § 7214, Offenses by Officers and Employees of the United States; Title 42, U.S.Code, § 1983, Civil Rights Action for Deprivation of Rights; Title 42, U.S.Code, § 1985(3), Conspiracy to Interfere with Civil Rights; and Title 42, U.S.Code, § 1986, Actions for Neglect to Prevent. Title 42, Section 2000(A) Prohibition against discrimination.

- 2) The Governor of Vermont is granted Emergency Powers in the event of an "Emergency"; however his emergency powers specify he may not take any actions inconsistent with the the Vermont Constitution see Vermont Statute per your declaration of 3/13/20 citing 20 V.S.A, § 8,9 and 11 and Chapter 29. Chapter 8 states: *These conditions may be activated, as needed, by the jurisdiction that is to receive assistance or upon commencement of exercises or training for mutual aid and continue as long as the exercises or training for mutual aid are in progress, the emergency or disaster remains in effect, or loaned resources remain in the receiving jurisdiction or jurisdictions, whichever is longer. Subsection (8) Upon the declaration of an emergency as authorized in federal legislation that includes the State of Vermont, to cooperate with the President of the United States, the Army, Navy, and Air Force, with other federal departments, agencies, and independent establishments, and other states in matters pertaining to emergency management; and in connection therewith to take such action, **not inconsistent with the Constitution** and laws of the State, that he or she may deem proper to carry into effect any request of the President, the Secretary of Defense, the Secretary of Homeland Security, the Secretary of Health and Human Services, and the Director of the Federal Emergency Management Agency.* (emphasis added)

"No Emergency has Just Cause to Suppress the Constitution(s)" ... or the (Un-A-Lien-able) Rights of the People; 16 AmJur2d., Sec. 98:

"While an emergency cannot create power and no emergency justifies the violation of any of the provisions of the United States Constitution or

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States Constitutions."

Marbury v. Madison : 5 US 137 (1803):

"No provision of the Constitution is designed to be without effect," "Anything that is in conflict is null and void of law", "Clearly, for a secondary law to come in conflict with the supreme Law was illogical, for certainly, the supreme Law would prevail over all other laws and certainly our forefathers had intended that the supreme Law would be the bases of all law and for any law to come in conflict would be null and void of law, it would bare no power to enforce, in would bare no obligation to obey, it would purport to settle as if it had never existed, for unconstitutionality would date from the enactment of such a law, not from the date so branded in an open court of law, no courts are bound to uphold it, and no Citizens are bound to obey it. It operates as a near nullity or a fiction of law."

If any statement, within any law, which is passed, is unconstitutional, the whole law is unconstitutional by Marbury v. Madison.

- 3) In March 2020, U.S. CDC declared COVID-19 an international pandemic;
- 4) On March 13, 2020, Philip B Scott, hereinafter, the defendant, declared the State of Vermont under a State of Emergency due to COVID-19, in order "to monitor and plan for the potential for an outbreak of respiratory illness due to a novel coronavirus"; Although not required in VSA 20 the Emergency Powers Act, you have provided regular updates. Yet, some of these updates continue to create more control, counter to what the statistics state for Vermont and nationwide.
- 5) Philip B Scott's initial declaration was issued on March 13, 2020. Using the stratagem of issuing "supplemental" addendums and directives (33 to date) successively incorporating one another, the 33rd addendum extends the coverage of the initial and supplemental addendums to October 15, 2020, more than 7 months after the initial declaration. None of the Addendums cite any authority, nor has any been found, to authorize apparently limitless numbers of "addendums" declarations or end-to-end contiguous declarations and thereby deceptively, unlawfully and fraudulently circumvent the Constitution of Vermont and the US or legislature's power to create law, albeit in keeping with the Constitution(s).
- 6) Philip B. Scott's Declaration of Emergency, Order NO. 01-20, the succeeding Addendums and the associated Executive Orders, hereinafter: "orders", all purport to

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have the force and effect of law, potentially carrying criminal misdemeanor penalties for violations, yet none of these have any lawful authority since they violate both Constitutions, the people's inherent rights and the due process of law secured therein. The national Constitution guarantees the American people life, liberty and property, which cannot be taken from them except through due process of law. No due process of law was extended to Vermonters when the referenced orders were issued. Due process mandates all aspects and forms of government to uphold constitutionally guaranteed rights, which was violated in the issuance and execution of the above orders. Failure to provide due process renders any orders without lawful jurisdiction and authority to issue such orders. Therefore, the orders are unconstitutional, null and void, without lawful force and effect upon the people. Marbury v. Madison (1803)

- 7) The Governor of the State of Vermont may never violate the unalienable rights of Vermonters even in a state of emergency. In the instance of an emergency wherein the Governor believes the constitutional rights of the people to be too broad, he merely has the right to suggest, but not mandate any behavior injurious to the Constitution. Vermonters may never be subjected to "lockdown" the equivalent of house arrest which violates habeas corpus and the right to face one's accuser and a right to trial.

Vermonters may never, even in a so-called emergency, be prevented from assembling, especially to petition their government. Vermonters may never be prevented from exercising their rights as enumerated in the Vermont Constitution including but not limited to those described in article 1: That all persons are born equally free and independent, and have certain natural, inherent, and unalienable rights, amongst which are the **enjoying** and defending life and **liberty**, acquiring, possessing and protecting property, and **pursuing and obtaining happiness and safety.** *-emphasis mine.* **The meaning of unalienable is: "unable to be taken or given away by the possessor.**

- 8) The defendant has unlawfully assumed authority not delegated to him by the Vermont Constitution, including VSA 20 Emergency Powers act **which prohibits the Governor**

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and the legislature, and indeed every official on Vermont, even the people of Vermont from contradicting the Vermont Constitution **even in an emergency**. The assumption of unconstitutional powers immediately renders the defendant's position vacated, and as well, constitutes a rebellion against the people of Vermont. The affiant further declares that these purposeful violations of the Constitutions are designed to coerce the People of Vermont into unnatural states of submission, achieved through fear, in order mandate unilateral vaccination as per order of what is commonly known as 'big pharma' and other corporate beneficiaries of the defendant's malicious actions. These motives are proven by the emptiness of fact supporting his mandates described below. The defendant's disregard for the Constitutions and the unalienable rights of the people whose rights he swore to protect, gives rise to the affiants declaration of the crime of sedition: *the crime of creating a revolt, disturbance, or violence against lawful civil authority with the intent to cause its overthrow or destruction.* Def. Merriam Webster Since all authority rests in the people, who are the ultimate and definitive power, through whom the limited power of the Governor arises, the defendant's premeditated violation of the people's unalienable rights constitutes sedition rebellion and conspiracy against the peace and civil authority of the people.

- 9) Both the state and national Constitutions grant Law making powers to the Legislature only; rule making by the Executive is a violation of the Separation of Powers Act.; The State of Vermont Senate Committee for Health and Welfare under Virginia Lyons, acting as Chair, and Richard Westman, acting as Vice-chair; the Senate Committee on Economic Development, Housing & General Affairs, under Michael Sirotkin, acting as Chair, and Alison Clarakson, acting Vice-chair; and, all members of said committees, have all violated their oath to God to uphold the VT and U.S. Constitution, and additionally they have unconstitutionally abdicated and abandoned their legislative authority to prevent Executive violations of the Constitution by failing to act to suspend, the Executive's illegal and unlawful Covid mandates. In so doing, pursuant to oaths taken, the entities cited in this paragraph including the defendant and the entire legislature abandoned its sworn duties to the Vermont people; thereby invoking the

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self-executing **Sections 3 and 4 of the 14th Amendment of the Us Constitution:**

Section 3. *No person shall be a Senator or Representative in Congress, or elector of President and Vice-President, or hold any office, civil or military, under the United States, or under any State, who, having previously taken an oath, as a member of Congress, or as an officer of the United States, or as a member of any State legislature, or as an executive or judicial officer of any State, to support the Constitution of the United States, shall have engaged in insurrection or rebellion against the same, or given aid or comfort to the enemies thereof.*

- 10) However, despite the above-stated factual, lawful positions, your unconstitutional actions, as described throughout this Affidavit/Declaration of Truth, clearly demonstrate how you have violated all of the above lawful positions, the Constitutions, your oath of office, and acted against the public by violating trust and committing sedition. Pursuant to your unlawful and unconstitutional actions, you have invoked the self-executing Sections 3 & 4 of the 14th Amendment to the national Constitution, thereby have lawfully vacated your office and forfeited all benefits thereof, including salary and pension. Please note that, as stated above and below, if you fail to specifically rebut, in kind, any of the charges, claims and positions set forth in this Affidavit/Declaration, then, you tacitly admit to them, and these admissions will be lawfully used against you. The following paragraphs and others throughout which have harmed me and others:

Regarding Masks Mandates:

- 11) " Masks give a powerful sense of anonymity to the killer, and dehumanize the victim. Thus preventing empathy, and empowering aggression, violence, and murder. In city after city, across America, there have been more murders so far this year, than all of last year. And masks are one of the major reasons why this is happening. " " We all understand that people will say things online that they would never say face-to-face. **And masks create a similar sense of anonymity for the aggressor, empowering face-to-face violence and hostility across our nation. Doctors tell us that masks contribute to acne, anxiety, depression and heart disease. Dentists**

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tell us that masks are causing gum disease and other dental problems. I cannot speak to these medical pros-and-cons of masks. But I can state, without hesitation, that having our entire population wearing masks, is one of the most physically and psychologically harmful things we can do. There can be no doubt that it will lead our nation into even deeper depths of violence, death, despair, and heartache. This has already resulted in an erosion of emotional wellbeing, and an explosion of violent crime. And it is something that we can stop, right now, in order to save lives.” Excerpted from the book On Killing The Psychological Cost of Learning to Kill in War and Society, by Lt. Col. Dave Grossman. With over half-a-million copies sold, in seven languages, On Killing is a “perennial bestseller” and Google Scholar says it has been cited over 2,900 times in academic research. It is truly one of the major scholarly works of our time. (*emphasis added*)

[://www.linkedin.com/content-guest/article/masks-can-murder-lt-col-dave-grossman/?fbclid=IwAR2IsV2aSwva1UvgAT0FWF1G9ibJIFE0hu_85W0aFK0f3L0LV7RUHBfUsTY](https://www.linkedin.com/content-guest/article/masks-can-murder-lt-col-dave-grossman/?fbclid=IwAR2IsV2aSwva1UvgAT0FWF1G9ibJIFE0hu_85W0aFK0f3L0LV7RUHBfUsTY)

- 12) While the defendant's mask mandates allow for the exemption of use by individuals, his orders have had the effect of making businesses aggressive and threatening those who claim the exemption, thereby imperiling Vermonters without masks in their attempts to conduct essential trade business. To the affiants knowledge, no serious attempt by the defendant has been made to inform the businesses that:
- a) They will not be fined to allow non masked exempt user in their places of business.
 - b) Businesses have no lawful authority to question the exemption of the non masked shopper.
 - c) Businesses that discriminate against exempt non masked Vermonters are in violation of the 1964 civil rights act, discrimination for any medical reason whatsoever is unlawful.
 - d) The defendant has so encouraged businesses to behave upon a false premise that non masked persons are falsely presumed by businesses and unwitting Vermonters to be **guilty of a crime** of infecting others nearby.

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- e) Vermonters in their exemption are not protected in their unalienable liberty to provide for themselves safely and are indeed subjected to unwarranted threats, emotional harm and unwarranted shame based on a falsehood perpetrated by Philip B Scott, the defendant.
 - f) Communities across Vermont have been grossly and maliciously misled by the defendant, regarding the efficacy of the masks, additionally the defendant has ample access to the tests and information regarding mask ineffectiveness in stopping a micro-particulate virus, moreover, the defendant has an obligatory duty to be wholly informed thereabout.
 - g) The defendant has wholly ignored the major reality of mask's ineffectiveness to stop microparticulate virus, and it must be contemplated that Philip B Scott has a private motive to do so, and that he is a bad actor in a larger plan to **physically and psychologically harm the people of Vermont (and the world)** and to 'prove' to Vermonters by the visual presence of masks that the alleged pandemic is gravely dangerous, thereby emotionally manipulating the people to readily accept a vaccine mandate and accept limitations of travel and business based on the administration of a vaccine despite the fact that a mandated vaccine is tacitly frivolous given 99.8% of Americans will survive Covid 19 even using the most incorrect assessment of covid deaths available (including deaths presumed by covid and deaths wholly by another unrelated cause).
 - H) The CDC has admitted that only 6% of all deaths named as covid deaths were caused by covid alone. In Vermont only 22 of the 58 deaths with the median age of 72 were "confirmed Covid 19", This means that over 99.9999% of Vermonters will survive Covid 19. A more egregious and malicious case of crying wolf could hardly be contemplated. While this affiant will leave many details aside, suffice it to say that details and evidence exists to describe the action of malice by the defendant as a small cog in an organized crime of immense proportions.
- 13) Forcing Healthy people to act sick or purposely making people sick is actually a mental illness called ***"Munchausen Syndrome by Proxy." Forcefully masking, testing, separating, and quarantining healthy people is not only damaging to their***

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physical and psychological health, it is also a HUMAN RIGHTS VIOLATION AND A CRIME. Philip B Scott, by and through his mask dictates, even while he has carefully worded them to include exemptions to protect himself, displays the Munchausen Syndrome, and has engaged in crimes against humanity.

14) The defendant knew, or should have been fully cognizant of the following:

a) The most recent CDC study of masks, published May 2020, states:

The latest CDC study that reviewed 14 randomized controlled trials appeared in the Emerging Infectious Diseases journal published by the CDC. The abstract reads, “Although mechanistic studies support the potential effect of hand hygiene or face masks, **evidence from 14 randomized controlled trials of these measures did not support a substantial effect on transmission of laboratory-confirmed influenza.**” To summarize, the latest CDC review of 14 Random

Controlled Trials all showed the same results - **masks provided no substantial benefit in preventing Influenza transmission.** <https://dx.doi.org/10.3201/eid2605.190994> ; (emphasis added)

Xiao, J., Shiu, E., Gao, H., Wong, J. Y., Fong, M. W., Ryu, S....Cowling, B. J. (2020). Non-pharmaceutical Measures for Pandemic Influenza in Non-healthcare Settings—Personal Protective and Environmental Measures. *Emerging Infectious Diseases*, 26(5), 967-975

b) The National Center for Biotechnology Information published a study on April 22, 2015, "A cluster randomized trial of cloth masks compared with medical masks in healthcare workers" concluded that cloth masks **increase** the possibility of infection. (emphasis added)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4420971>

c) Even with the obviation of aforementioned information, the defendant issued a subsequent order: “Effective Friday, August 1, 2020, the

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amendment requires all Vermonters to wear masks or cloth facial coverings any time it is not possible to maintain a physical distance of at least six feet with others from outside their household.”

- d) Additionally: Dr. Fauci stated back in a 60 minutes interview on 3/8/20 that "There's no reason to be walking around in a mask. While masks may block some droplets, they do not provide the level of protection people think they do. Wearing a mask may also have unintended consequences: People who wear masks tend to touch their face more often to adjust them, which can spread germs from their hands." Fauci stated this at the height of the virus, yet advocated for mask mandates a full six months after the start of the “emergency”. This describes a intentional toying with the public, to create mass confusion and societal discord, imitated by the defendant.

<https://www.cbsnews.com/news/preventing-coronavirus-facemask-60-minutes-2020-03-08/>

- e) IN fact the mask mandate with exemptions is harmful in both a physical and emotional and is absurd in its assertion that it is protective. A NY post article reflects the false narrative that the defendant has hyped to frighten and coerce Vermont people into a false belief that masks actually prevent the spread. The italics show what is importantly left out of the article.

[https://nypost.com/2020/08/09/scientists-tested-14-types-of-masks-in-preventing-spread-](https://nypost.com/2020/08/09/scientists-tested-14-types-of-masks-in-preventing-spread-of-covid-19/)

[of-covid-19/](https://nypost.com/2020/08/09/scientists-tested-14-types-of-masks-in-preventing-spread-of-covid-19/)

Bandannas, gaiters and knitted masks are some of the least effective face coverings for preventing the spread of coronavirus, according to a new study. Researchers at Duke University made the discovery while testing 14 different types of masks, according to the study published Friday. N95 masks, often used by health care professionals, worked best to stop the transmission of respiratory droplets during regular speech. ***(Notice the study is not claiming N95 stopped the minute spray of the virus, but only large respiratory droplets)*** Other good performers at stopping leakage ***(leakage =large respiratory drops only)*** were three-layer surgical masks

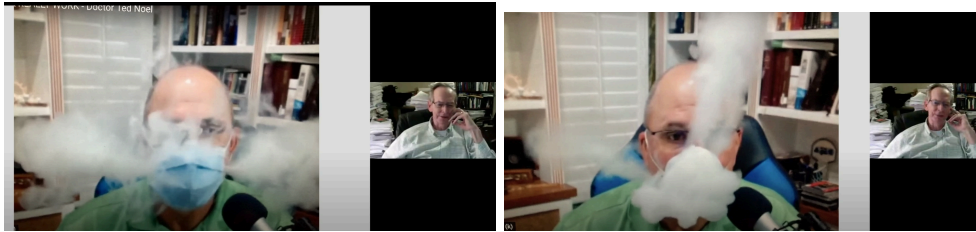
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and cotton masks, which can be made at home, the researchers with Duke's physics department found. But while bandannas and knitted face coverings may be a unique look, they did not offer much protection, according to the study. The scientists also discovered that neck fleeces, or neck gaiters, often worn by runners, were the least effective and actually allowed more respiratory droplets to escape than not wearing a mask at all. That's because they were shown to break down larger droplets into smaller particles, allowing them to slip out the sides of the covering more easily. "We were extremely surprised to find that the number of particles measured with the fleece actually exceeded the number of particles measured without wearing any mask," Martin Fischer, one of the study's authors, told CNN "We want to emphasize that we really encourage people to wear masks, but we want them to wear masks that actually work." ***(Here must be noted the patent absurdity of this statement. NONE of the masks prevent the spread of the microscopic corona.)*** To test the masks, the scientists made use of a black box outfitted with a laser and a cellphone camera. Someone wearing a face mask would speak in the direction of the laser beam inside the box. Then the amount of respiratory droplets scattered by the beam were recorded by the camera in the back of the box. A computer algorithm counted the droplets seen in the video to determine how many had leaked through. The researchers said this was a low-cost, effective method to test which face coverings worked and which didn't. "This is a very powerful visual tool to raise awareness that very simple masks, like these homemade cotton masks, do really well to stop the majority of these respiratory droplets," Fischer told CNN. ***(The press takes us for fools, since it fails to state that NONE of the masks stop this alleged virus, which is why the article never says masks do)*** *(comments and emphasis added by affiant.)*

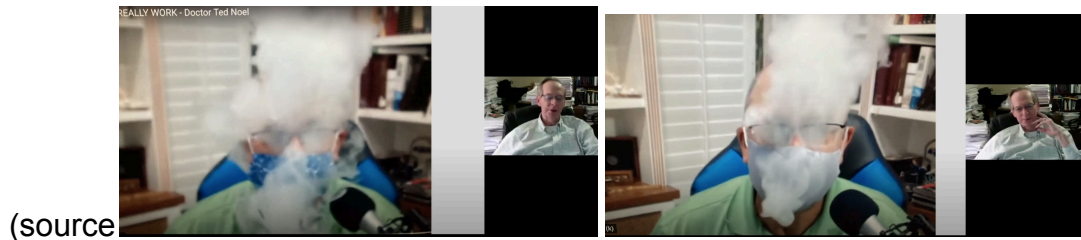
- f) A World Health Organization statement on June 5 of: ADVICE ON THE USE OF MASKS IN THE CONTEXT OF COVID-19 "There is limited evidence that wearing a medical mask by healthy individuals in

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households, in particular those who share a house with a sick person, or among attendees of mass gatherings may be beneficial as a measure preventing transmission...At present, there is no direct evidence...on the effectiveness of universal masking of healthy people in the community to prevent infection with respiratory viruses, including COVID-19."

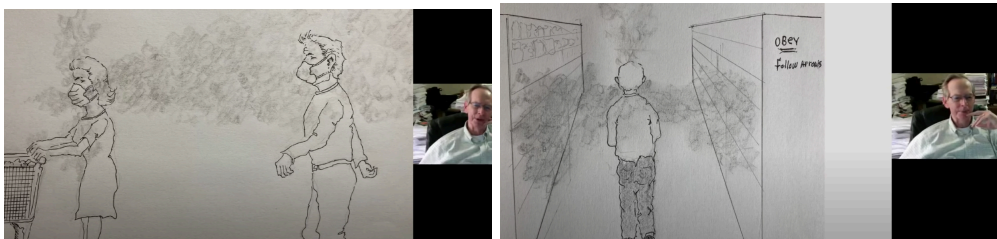


visual description using vapor to demonstrate the ineffectiveness of masks



The Great American Mask Rip off, Dr Blaylock

since it is now known that the minute airborne particles can float up to 30 feet, and that the masks keep none of that from escaping, the truth is that each shopper, masked or not, is spreading their viral matter everywhere no matter what, portrayed by the drawings by Dr Blaylock below.



On Harms of Masks

- 15) Dr. Russell Blaylock is a nationally recognized, board-certified neurosurgeon, health practitioner, author, and lecturer. He attended the Louisiana State University School of

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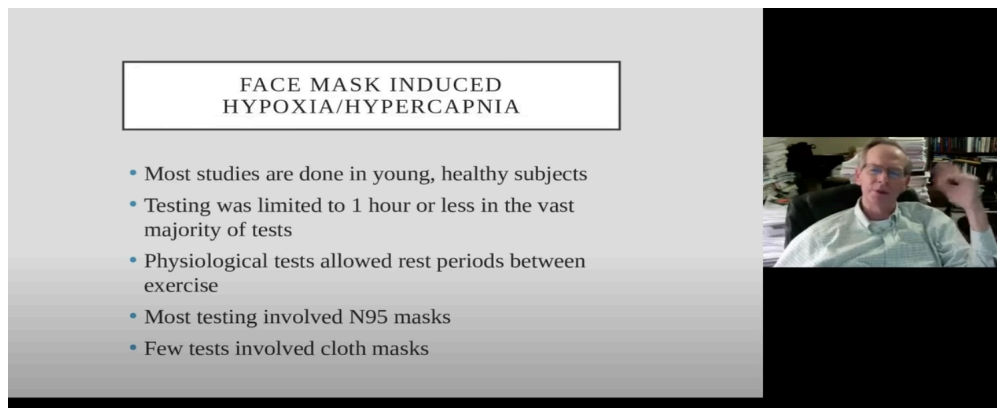
Medicine in New Orleans and completed his internship and neurosurgical residency at the Medical University of South Carolina in Charleston, S.C.. Dr. Russell Blaylock warns that not only do face masks fail to protect the healthy from getting sick, but they also create serious health risks to the wearer.

<https://www.technocracy.news/blaylock-face-masks-pose-serious-risks-to-the-healthy/#:~:text=Russell%20Blaylock%2C%20author%20of%20The%20Blaylock%20Wellness%20Report,residency%20at%20the%20Medical%20University%20of%20South%20Carolina.>

Dr Blaylock, in the video called: The Great American Mask Rip Off demonstrates beyond any doubt the inefficacy of masks to prevent the spread of viruses.

what follows are screen shots from his talk, self explanatory.

screenshot 1)

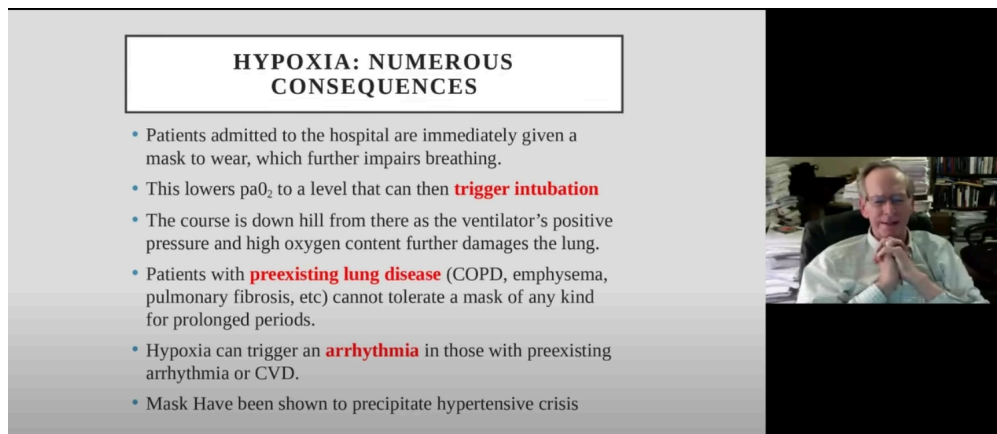


FACE MASK INDUCED
HYPOXIA/HYPERCAPNIA

- Most studies are done in young, healthy subjects
- Testing was limited to 1 hour or less in the vast majority of tests
- Physiological tests allowed rest periods between exercise
- Most testing involved N95 masks
- Few tests involved cloth masks

The screenshot shows a presentation slide with a title box and a bulleted list. To the right of the slide is a video inset showing Dr. Russell Blaylock speaking.

screenshot 2)



HYPOXIA: NUMEROUS
CONSEQUENCES

- Patients admitted to the hospital are immediately given a mask to wear, which further impairs breathing.
- This lowers paO_2 to a level that can then **trigger intubation**
- The course is down hill from there as the ventilator's positive pressure and high oxygen content further damages the lung.
- Patients with **preexisting lung disease** (COPD, emphysema, pulmonary fibrosis, etc) cannot tolerate a mask of any kind for prolonged periods.
- Hypoxia can trigger an **arrhythmia** in those with preexisting arrhythmia or CVD.
- Mask Have been shown to precipitate hypertensive crisis


The screenshot shows a presentation slide with a title box and a bulleted list. To the right of the slide is a video inset showing Dr. Russell Blaylock speaking.

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screenshot 3)

HOW IT MIGHT HAPPEN


- Mask hypoxia can cause shortness-of-breath, anxiety and panic attacks
- The person at home with a moderate infection has been told to go to the ER if they develop shortness-of-breath
- Once in the hospital a mask is placed on their face, which could further worsen their S.O.B. especially when combined with hospital anxiety
- Once moved to the ICU, they are again given a mask. When their pO₂ reaches the level of 92 to 90% they become candidates for intubation.
- Patients on ventilators have a 50% to >90% mortality.



screenshot 4)

FACE DIAPERS

- Mask contamination occurs rather rapidly, especially if the person has a cold. Accumulation of moisture occurs early.
- This contamination can include **bacteria, viruses and fungi**
- These organisms are also inhaled and, in an immune compromised person, can result in **pneumonia**
 - **#1 Staph pneumonia**
 - **#2 H Influenza Type B**
 - **Co-infection 2 bacteria**
 - **Virus + bacteria (common with influenza)**



15 cont) Dr Blaylock's expertise is echoed by multiples of practicing expert doctors all across the world, it is exceptionally vapid to suggest that the defendant as executive of all of Vermont could not avail himself of any of this abundant expertise. Moreover, the affiant is treated with disdain by community members that the defendant has willfully perpetrated a false fear of contagion from anyone unmasked.

16) More on this:
OSHA, NIOSH and CDC do not allow any workers wearing N-95 medical masks

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or other masks comprised of cloth to enter a CDC BioSafety Level 3 or 4 Research Lab that studies VIRUSES – SIMPLY NOT ALLOWED BY LAW (OSHA); N-95 medical masks and other cloth type masks designated by Governor Scott and Dr. Levine, et al do not qualify for use in CDC Bio-Safety Level 3 or 4 labs, designed to handle contagious VIRUSES, such as the alleged COVID-19;

17)

And...:

The Code of Federal Regulations (CFR) via Occupational and Safety Health Act (OSHA) laws require the use of masks and respirators that have been fit tested and approved by the Mine Safety and Health Administration (MSHA) and NIOSH. Testing procedures are described in 29 CFR 1910.134 Appendix A. Approval numbers are clearly written on all approved respiratory equipment. To wit, NONE of the masks designated as mandatory by Governor Scott or Dr. Levine meet any OSHA federal regulatory standards:

18)

And:

Another study in 2015 published in BMJ Journals titled: A Cluster Randomized Trial of Cloth Masks Compared with Medical Masks in Healthcare Workers, found: "The rates of all infection outcomes were highest in the cloth mask arm...Penetration of cloth masks by particles was almost 97%, and medical masks 44%...The results caution against the use of cloth masks. This is an important finding to inform occupational health and safety...Moisture retention, reuse of cloth masks and poor filtration may result in increased risk of infection."

19)

It cannot be logically stated that the defendant issued his August 1, 2020 mandates without the benefit of any of this expertise.

20)

In an abundance of clarity, the affiant reemphasizes:

- a) Legally, people do not have to disclose their medical conditions. It violates ADA and HIPPA privacy laws to ask the medical reason why someone cannot wear a mask. The fine for violating ADA is up to \$75,000 for the first violation and \$150,000 for subsequent

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violations. FOR confirmation Contact the Department of Justice
ADA Violation Information: 800-551-0300. Yet, regardless of
this law, people are harassed and prevented from entering
businesses essential and otherwise simply because the Governor
has misled and misappropriated power and directed businesses to
follow suit.

- b) Businesses preventing admission by people who claim exemption from mask use are committing a crime. DEPRIVATION OF RIGHTS UNDER COLOR OF LAW TITLE 18, U.S.Code, § 242 makes it a crime for a person acting under color of any law to willfully deprive a person of a right or privilege protected by the Constitution or laws of the United States. Also the Civil rights act of 1964. <https://www.justice.gov/crt/deprivation-rights-under-color-law>

- 21) An April study published in Nature studied 111 participants for RESPIRATORY VIRUS SHEDDING IN EXHALED BREATH AND EFFICACY OF FACE MASKS and found, "Among the samples collected without a face mask, **we found that the majority of participants with influenza virus and coronavirus infection did not shed detectable virus in respiratory droplets or aerosols...**For those who did shed virus in respiratory droplets or aerosols, viral load in both tended to be low. The major limitation of our study was the large proportion of participants with undetectable viral shedding in exhaled breath for each of the viruses studied...we could have increased the sampling duration beyond 30min. to increase the viral shedding being captured."*-emphasis added*

In Summary, on Mask Mandates

- 22) In summary, these studies prove that symptomatic people DO NOT shed the virus easily, or barely at all. Therefore, the argument of asymptomatic people spreading the virus, the whole argument that the mask mandates are predicated on, does not hold up.

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Because of this illegal and absolutely unwarranted mandate issued by the defendant people in Vermont have been harassed, accosted, threatened with arrest and terrorized. And to top it all off, the Centers for Disease Control and Prevention (CDC) has admitted that the organization has deceived the public throughout the entire coronavirus pandemic, backtracking on their claim that COVID-19 is an airborne virus.

It should be noted here that the USA PATRIOT ACT of 2001 § 802: Definition of Domestic Terrorism Acts that "appear to be intended-to intimidate or coerce a civilian population" are acts of domestic terrorism.

See: <https://www.congress.gov/bill/107th-congress/house-bill/3162/text/enr> , and, <https://www.congress.gov/107/plaws/publ56/PLAW-107publ56.pdf>

Pandemic False Narrative and lack of actual Emergency

Vermont background and statistics

23) According to the CDC website link that lists the Annual Mortality Rate by State for Flu & Pneumonia, in 2018 Vermont had 87 deaths;

https://www.cdc.gov/nchs/pressroom/sosmap/flu_pneumonia_mortality/flu_pneumonia.htm

Vermont COVID Deaths

- 24)
- a) The population of Vermont is approximately 624,000 (2019).
 - b) There have been 58 claimed Covid-19 deaths, thus the death rate for Vermont is .00009, or conversely the survival rate of Covid 19 for Vermonters is 99.99991.
 - c) Of the 58 deaths, 55 occurred in March through May (13 in March, 34 in April, and 8 in May) and there was one death each in June, July, and August. Of the 58 deaths, at least 32 occurred in nursing homes, at least 11 in Burlington Health & Rehab, which had been ranked by regulators as one of Vermont's worst nursing homes in 2019, and at least another 21

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deaths occurred at Birchwood Terrace. It is vital to recognize that, according to the Journal of the American Geriatric Society, the median life expectancy in a nursing home is 5 months. A 93 year old man in Ludlow accounted for another geriatric death, and one death of the 58 was a NY resident who came to a VT hospital.

- d) The median and average age of the succumbed was 72, all elders.
- e) From the Vermont Department of Health Vital Statistics System on 9/20/2020 here are a few official causes of death for the 36 additional individuals who did **not** test positive for COVID-19, yet were claimed, to have passed from COVID-19.

- Several passed from pneumonia including a 95yo -
- Adult failure to thrive - 94yo
- Brain hemorrhage - 72yo
- Complete heart block - 91yo
- Loculated Pleural Effusion/heart failure - 87yo
- Diabetic Ketoacidosis - 43yo

- 25) KNOWING this information, the defendant WILLFULLY withheld the truth from the public and continued to state the “death rate count” at 58, when, in fact it is 22. This lowers Vermont’s covid death rate down to .00004. This conscious deception to manipulate Vermonters into genuine stress and fear of natural humane contact with one another constitutes an act of domestic terrorism.
- 26) Flattening the curve refers to the goal of slowing the rate of infections to a point that doesn’t overwhelm local hospitals and health care providers.
Executive Order EO-01-20 (dated March 13th), Declaration of State of Emergency in Response to COVID-19 and National Guard Call Out declaring a State of Emergency in Vermont in response to the COVID-19 Pandemic and ordering initial mitigation provisions to slow the spread of the virus.

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The defendant stated in this Emergency Order, “if no mitigation steps are taken, COVID-19 would likely spread in Vermont at a rate similar to the rate of spread in other states and countries, *and the number of persons requiring medical care could exceed locally available resources.*”

- 27) Also stated by the defendant in this very same Emergency Order: “***We now know that while most individuals affected by COVID-19 will experience mild flu-like symptoms***, some individuals, especially those who are elderly or already have severe underlying chronic health conditions will have more serious symptoms and require hospitalization.” *-emphasis added*
- 28) Room was made at hospitals, stopping much needed surgeries by ill patients, employees were laid off, none of which was needed. It was to flatten the curve. The curve was flattened by April, and yet no change in the defendant’s mandates. While it could be potentially innocent of the defendant to overreact to the false predictions of a pandemic that was going to claim 3.4% of Vermonter’s lives (over 19 thousand) with draconian measures, once it was undeniably and abundantly clear that those numbers were never going to remotely manifest, it must be for a very different reason that the defendant’s mandates continued.
- 29) There are 1,468 hospital beds in Vermont. Of these, 300 are designated as COVID beds and 800 are designated surge capacity. According to The COVID Tracking Project published by The Atlantic, Vermont’s single day peak hospitalizations was 77 on April 11th. (Oddly, the day prior there were 33 hospitalizations and the day following there were 34.) Typical daily COVID hospitalizations over the months ranged from 10 - 35. The state spent \$3M on 112 ventilators to bring the total available in Vermont to 265. According to The COVID Tracking Project, at no time between March 6 and September 18 were any COVID patients put on a ventilator. In fact, during this period, only two COVID patients even required ICU beds, and that occurred for just three days from May 5 - 7. Temporary medical facilities are reimbursable under FEMA’s COVID Major Disaster Declaration. VTDigger reported on March 22nd, that officials were planning to construct eight temporary surge sites at auditoriums, hotels, field houses, and colleges, each with space for 50 patients. In early April, the Vermont National Guard constructed a 400-bed medical surge facility at the Champlain Valley Expo in Essex Junction.

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- 30) Given the fact that Vermont already had 300 COVID hospital beds available, and that the peak hospitalization capped at a one day high of 77 patients, it is likely that these facilities saw little, if any use.
- 31) Mandates for masks, came on August 1, clearly after the curve had already been flattened when hospitalizations and deaths had all but ended
- 32) Vermont averages a little more than 6,000 deaths annually, or about 502 deaths per month. As of August 19, 2020 Vermont had 4,348 deaths, for an average of 114 per week. Source, the CDC. In 2018 the Vermont Department of Health reported 647 deaths from chronic lower respiratory diseases, many of these preventable by improved indoor air quality. That is 53 deaths on average per month, and yet, over the past nine months, when we have 58 covid deaths a number that comes to just 6.4 monthly Covid 19 Vermont deaths.
- 33) Returning to the fact that of these 58 covid deaths only 22 are actually confirmed to have Covid, this means that only 2.4 Vermonters, at a median age of 72 years of age, died of Covid 19 over the nine months. For 2.4 deaths a month this defendant, Philip B Scott, stopped Vermont's economy and ordered everyone under house arrest, and continued those orders when he knew the terrible consequences of his orders far outweighed the Covid 19 risk to Vermonters. It defies common sense, defies all logical explanations and certainly defies the VT and U.S. Constitution.
- 34) When asked in September when the emergency and the mandates would be over, the defendant stated: **"When a vaccine arrives"**. This brings the defendant's motives into focus; he is motivated by the vaccine industry. Remember, a vaccine shouldn't be needed for a virus that does not have a significant risk to the population, a virus that 99.99994% of the population survives.

COVID Testing

- 35) The metrics for determination of a COVID state of emergency clearly indicate that Vermont is not now and never was during the past six months in a state of emergency. But what about the growing number of cases? Let's examine both the test itself and the way the test results have been counted and reported. There has been an extraordinary amount of negligence and deceit on the part of state and national government health

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officials, the mainstream narrative as well as the World Health Organization (WHO) regarding every aspect of COVID testing.

a) The Inherent Flaw of the PCR Test

Dr. Kary Mullis developed PCR technology in the 1990s and won a Nobel prize for his efforts. According to James Herer, who wrote a Health People article entitled Coronavirus: The Truth about PCR Test Kit from the Inventor and Other Experts, “PCR, simply put, is a thermal cycling method that is used to make up to billions of copies of a specific DNA sample, making it large enough to study. PCR is an indispensable tool with a broad variety of applications including biomedical research and criminal forensics.”

b) However, Dr. Mullis was adamant that PCR cannot be used to diagnose infectious diseases. According to Jason Hommel, a researcher and author, “The problem is the [PCR] test is known not to work.” He went on to say, “any minute contaminations in the sample will also be amplified leading to potentially gross errors of discovery.

c) Conclusion: The most widely used tool for detecting COVID cases is inherently flawed and unsuitable for the task, causing tens of thousands of cases or more of false results.

d) Inherent to the design of PCR technology is the amplification factor, which may vary widely from one test manufacturer to another and from one lab analysis to another, resulting in wildly skewed test results.

e) The New York Times recently published: “The standard tests are diagnosing huge numbers of people who may be carrying relatively insignificant amounts of the virus.”

f) According to Pam Popper of The Wellness Forum, in a single day, 22 Florida laboratories reported 100% of their COVID-19 tests as positive, which is statistically impossible.

g) NBC News reported on September 9 that coronavirus testing at a laboratory in Boston was suspended after investigators discovered nearly 400 false positive test results.

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- h) When a Florida Department of Health report indicated that Orlando Health had a 98% positivity rate, FOX35 News investigated and found that according to a hospital representative, their actual positivity rate was 9.4%.

The Inherent Deceit in Publishing Test Results

-
- i) The embarrassingly misguided decision to use PCR technology to diagnose COVID-19 is compounded by the brazenly illegitimate methods used to count and report COVID-19 positive tests. Recall that Dr. Birx on several occasions stated that the CDC would use the most liberal method possible to count COVID deaths. Consider also that a number of states, including Vermont, were discovered counting multiple positive tests of one patient as multiple positive cases; i.e., when someone, after an initial positive result, was retested, sometimes multiple times, and received additional positive test results, each test result was being counted as a separate case. While one could try to brush aside this form of misreporting as an innocent but incompetent error, it is much harder to brush aside the positive test results of people who were never tested at all. Numerous reports from all over the country cite people who signed up for a COVID test, but after seeing the long waiting lines decided to go home. Nonetheless, shortly afterwards, many of them received letters indicating that they had tested positive. The most bizarre case was of a woman in Tennessee who died in February, but whose family received a letter addressed to her indicating that she had tested positive in June, from beyond the grave. The prize for the largest scale “error” in reporting is taken by TRICARE, which, according to an article on Military.com, sent out letters to over 600,000 patients of that military healthcare system, inviting them, erroneously identified as COVID-19 survivors, to donate blood for research on the disease.

j) COVID-Positive Without a Test

If the test method and reporting debacles aren’t bad enough, consider this. According to a chart on the CDC website that illustrates the more than

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one dozen ways to be considered positive, a person does not even have to be tested to be presumed COVID-positive. For example, it is sufficient to live in a high transmission zone, attend a public gathering of more than 10 people, and have the sniffles. It started with **death counts** and the manipulation of death certificates - people who had died of one thing, but who also had tested positive were counted as a COVID death and people who had died without any testing at all, could be “presumed” to be a COVID death; and now the CDC has provided a “toolbox” to local and state health officials to create whatever **case number** scenarios they deem necessary to maintain their stranglehold on a fearful and largely compliant populace.

- k) An August 29, 2020 NYT article reported - [NY TIMES: Up to 90% Who Have Tested COVID-Positive in USA Wrongly Diagnosed](#).
- l) In September 2020, CDC released a report acknowledging that 94% of COVID-19 deaths listed by CDC for the USA had other underlying medical conditions;
- m) [<https://www.webmd.com/lung/news/20200901/covid-19-primary-not-only-cause-94-percent-of-deaths>]
Sept 1, 2020 - About 94% of people who have died from COVID-19 in the U.S. also had other contributing conditions listed on the death certificates, according to new CDC data].
- n) In March 2020, Italy announced that 99% of their reported COVID-19 deaths suffered additionally from other underlying medical conditions (<https://www.bloomberg.com/news/articles/2020-03-18/99-of-those-who-died-from-virus-had-other-illness-italy-says>)
- o) The “National File” (nationalfile.com), an online journal published the following article on September 6, 2020 – **“World Bank Records Show COVID-19 Test Kits Exported In 2017, 2018”**: How can this be?
- p) The World Bank website has an active record for “COVID-19 Diagnostic Test Instruments and apparatus (902780) exports by country in 2018” even though the WHO did not name Coronavirus “COVID-19” until February 2020 amid this year’s outbreak. There is also a record for

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COVID-19 tests exported in 2017.

(<https://nationalfile.com/world-bank-records-covid-19-test-kits-exported-in-2018/>).

- q) **Test kits made specifically pertaining to an alleged virus that did not yet exist is blatant fraud which indicates a pre-planned agenda involving this alleged virus.** These cited World Bank and CDC records undermine the entire official CDC narrative surrounding the alleged 2019-2020 “discovery” of COVID-19. **THE DEFENDANT IS SIMPLY ONE CRIMINAL AMONGST THEM.**

What actually is being tested, is it really Covid -19?

- 37) Jon Rappaport: *The Smoking Gun: Where is the coronavirus? The CDC says it isn't available.* The CDC document is titled, “[CDC 2019-Novel Coronavirus \(2019-nCoV\) Real-Time RT-PCR Diagnostic Panel.](#)” It is dated July 13, 2020. Buried deep in the document, on page 39, in a section titled, “Performance Characteristics,” we have this: “**Since no quantified virus isolates of the 2019-nCoV are currently available, assays [diagnostic tests] designed for detection of the 2019-nCoV RNA were tested with characterized stocks of in vitro transcribed full length RNA...**”

The key phrase there is: “Since no quantified virus isolates of the 2019-nCoV are currently available...” Every object that exists can be quantified, which is to say, measured. The use of the term “quantified” in that phrase means: the CDC has no measurable amount of the virus, because it is unavailable. THE CDC HAS NO VIRUS. A further tip-off is the use of the word ‘isolates.’ This means NO ISOLATED VIRUS IS AVAILABLE. Another way to put it: NO ONE HAS AN ISOLATED SPECIMEN OF THE COVID-19 VIRUS. _THEREFORE, NO ONE HAS PROVED THAT IT EXISTS. As if this were not enough of a revelation to shock the world, the CDC goes on to say they are presenting a diagnostic PCR test to detect the virus-that-hasn't-been-isolated...and the test is looking for RNA which is PRESUMED to come from the virus that hasn't been proved to exist.

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And using this test, the CDC and every other public health agency in the world are counting COVID cases and deaths...and governments have instituted lockdowns and economic devastation using those case and death numbers as justification.

- 37) From page 39 of the aforementioned CDC report:

The analytical sensitivity of the rRT-PCR assays contained in the CDC 2019 Novel Coronavirus (2019- nCoV) Real-Time RT-PCR Diagnostic Panel were determined in Limit of Detection studies. **Since no quantified virus isolates of the 2019-nCoV are currently available**, assays designed for detection of the 2019-nCoV RNA were tested with characterized stocks of in vitro transcribed full length RNA (N gene; GenBank accession: MN908947.2) of known titer (RNA copies/μL) spiked into a diluent consisting of a suspension of human A549 cells and viral transport medium (VTM) **to mimic clinical specimen.** *-emphasis added*

Suicides:

- 38) Yahoo news August 5, 2020: **“CDC director seeing more suicides, drug overdoses than COVID deaths ...”**
[\[https://news.yahoo.com/cdc-director-seeing-more-suicides-023823567.html\]](https://news.yahoo.com/cdc-director-seeing-more-suicides-023823567.html)

_This suggests the likelihood of a direct causal relationship between the draconian, unconstitutional violations of the people’s secured rights and the orders issued by Scott and other public officials in America.

- 39) Vermont Department of Health states that in 2017 there were 1,098 hospital visits and 112 deaths. In 2018 there were 200 hospitalizations, 823 emergency department visits and 118 deaths. As of October 2, 2020 there have been 82 deaths, an average of 9 deaths per month over 9 months. In speaking with Caitlin at the VT Department of Health, suicide statistics department, she stated that 46 death certificates are pending. It takes 8 weeks to get completed death certificates. If those 46 are deemed suicides, that brings the total to 128. That’s an average of 14 per month. Even if no additional suicides happen, this number is the highest in years. **If that trend continues Vermont could end 2020 with up to 170 suicides.**

Nursing Homes:

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- 40) According to the Journal of the American Geriatrics Society (JAGS), the median length of stay in a nursing home before death is about 5 months. Clearly, our highest priority for nursing homes and assisted living residents is to bring them love, kindness, and joy as much as possible. This is achieved not only through nursing home staff, it must also include interaction with children, grandchildren, close family and friends.
- a) According to www.healthvermont.gov, the Department of Disabilities, Aging, & Independent Living issued COVID related guidelines to Vermont's long term care facilities on June 12th of this year. These guidelines, as manifested in the policies of the majority of Vermont's assisted living facilities, provide only outdoor visitation while maintaining distances from 6-8' or more between residents and their loved ones. Visitors are required to be masked, residents are encouraged to be masked, and visits are limited to one per resident per day. Physical contact is strictly forbidden, and must be overseen by a staff member to ensure compliance with guidelines. Visitors and our elderly loved ones have to sit outside in the heat, damp, or cold. Many are hard of hearing and the increased difficulty in speaking and being understood at a distance through masks make the visit nearly impossible to enjoy for all parties involved. Or, visitors sit outside and speak via a two way speaker to their loved one through a window. Technology is not easy for 80+ year olds to understand, and communicating this way is nearly impossible. With the coming of winter, how will these visits even continue? Does the defendant expect a 70 year old to visit their 90 year old mother and sit outside in 0 degree temperatures trying to communicate?
- b) The forbidding of any physical contact means no hugs from children, no sweet sticky kisses from grandchildren, and no hand holding with a lifelong friend. These are the cornerstones of mental well being among the human species. Some Vermonters have not had physical contact with their mothers in almost 9 months. Yet, the care workers can go out with their families, have social lives, even perform at local events and head back to work on a Monday, they can hold the elders' hand, but the 70 year old offspring cannot.
- 41) The defendant is guilty of criminal elder abuse by and through the unreasonable

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and constitutionally violating mandates. Elderly in nursing homes and assisted living facilities are so fed up with this they are starting to rebel, and rightfully so. This is the end of their life and they have a constitutional right to choose how to live it.

- 42) These are crimes committed by the defendant against the humanity of Vermonters.
- 43) Dr. Levine has stated in a recent press conference that nursing homes and assisted living facilities will (most likely) not be opened to family and friends until a vaccine has arrived. Defendant Philip B Scott has made similar references.
- 44) Upon one such statement, the affiant arranged to meet with the defendant, since he stated publicly that he 'needed more information' before a decision regarding vaccine mandates would be made. A group was organized of Vermonters each with specific knowledge and warnings against mandating vaccines. The group told the defendant through his secretary that they would meet at the drop of a hat, at his convenience online, just to make certain the defendant was aware of specific dangers of the proposed vaccine. From early to late August, for 3 weeks the defendant ignored the request, then outright refused.
- 45) The affiant reminds the defendant that petitioning the government is a right.

Vaccines

- 46) The defendant knows, or should be aware of the fact that vaccines in fact do harm people and that Congress, in 1986 removed liability, so that the industry could continue to profit. They set up a vaccine injury fund, and to date that fund has paid out over 4 billion dollars in an extremely cumbersome manner. The harm to the public is, of course, that the injuries are always kept private, and the public is not aware of them in the same way they would be if suits and class actions were made public. Additionally, the prevention of legal suits also (conveniently) prevents the proof of harm.

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- 47) It is no wonder that the biggest lobby in DC is the pharmaceutical industry. Likely it is a very big factor in the defendants unconstitutional activity, what with Leahy's senatorial seat vacating in the near future, the industry likes to tie these things up and make certain a 'friend' is in place. The defendant, by his actions and his complete violations of the Vermont and US Constitution and continued orders just to wait for a vaccine is blatantly describing a special relationship with that industry. While this is educated conjecture by the affiant, further discovery will show the financial benefits the defendant received (s) and expects.
- 48) The defendant, with his accomplices, Dr Levine, have already begun to contemplate vaccine mandates for the flu shot. The health commissioners report on vaccine does not take into account the harms that will come to some from the flu shots
- 49) The defendant implies that this Covid 19 vaccine will be mandatory for all health care workers, nursing homes and assisted living residents, employers, employees, educational system employees, students and the general public. Since 1986 the government has been complicit allowing vaccine manufacturers to kill and maim individuals without any consequences, leaving the burden of compensation on the backs of those who did not perpetrate any harm, the taxpaying public.
- 50) From the vaccine injury table, the potential injuries from the flu vaccination are listed. As described below, anaphylaxis is the first listed, with it a possibility of death within 4 hours. In a justly constitutional world, no person elected or appointed, under no assumption of authority shall have the right to subject another or their offspring, against their will or prevent employment or participation in education for a flu shot that could in a horrid game of russian roulette, leave a percentage in their grave, or gravely ill.

<https://www.hrsa.gov/sites/default/files/vaccinecompensation/vaccineinjurytable.pdf>

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XIV. Seasonal influenza vaccines	A. Anaphylaxis	≤4 hours.
	B. Shoulder Injury Related to Vaccine Administration	≤48 hours.
	C. Vasovagal syncope	≤1 hour.
	D. Guillain-Barré Syndrome	3-42 days (not less than 3 days and not more than 42 days).

51) The defendant agrees that numbers of the following vaccine ingredients can harm, kill or maim:

- aluminum hydroxide,
- human diploid cells,
- hydrolized gelatin, (originating from aborted human fetal tissue),
- aluminum phosphate,
- ammonium sulfate,
- squalene,
- amphotericin B,
- latex,
- animal tissues,
- pig blood,
- mercury (thimerosal),
- horse blood,
- monosodium glutamate (MSG),
- rabbit brain,
- neomycin, neomycin sulfate,
- dog kidney,
- phenol red indicator,
- monkey kidney,
- phenoxyethanol (antifreeze),
- chick embryo,
- potassium diphosphate,
- chicken egg,
- potassium monophosphate,
- duck egg,
- polymyxin B, polysorbate 20,
- calf (bovine) serum,
- polysorbate 80.,
- betapropiolactone,

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- porcine (pig) pancreatic,
- fetal bovine serum,
- hydrolysate of casein,
- formaldehyde,
- residual MRC5 proteins,
- formalin, gelatin,
- sorbitol, sucrose,
- glycerol,
- tri(n)butylphosphate, VERO cells,
- sheep blood.
- retroviruses and/or carcinogenic or other forms of infectious mycoplasmic agents

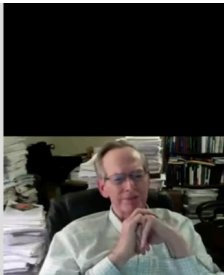
52) More on Vaccines:

Dr Blaylock The Great American Mask Rip Off (next page)

screenshot 1)

VACCINES: WHAT THEY DIDN'T KNOW AND DID

- Glyphosate found in most vaccines-25X higher in MMR II vaccine
- Hib vaccine increases risk of infection for 2 weeks after injection
- Nasal flu vaccine—several deaths in children
- Mycoplasma, bacteria, viral fragments as contaminants
- Squalene, Hg, aluminum abnormal brain development
- Macrophagic Myofasciitis from aluminum-containing vaccines
- Explosion of autoimmune diseases (Schoenfeld syndrome)



screenshot 2)

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VACCINES: WHAT THEY DIDN'T KNOW AND DID

- Flu vaccine in pregnant women—400% increased miscarriage
- 20-year study of flu vaccines among elderly—no reduction in hospitalizations, pneumonia or deaths despite increase vaccine rates from 15% to 65% over period of study.
- Vaccinating school children for flu to reduce community infection rates—actually increased hospitalization rates in both children and adults living in same house.
- Aluminum dose given to 2 yr olds for vaccine schedule—50-fold higher than FDA safety level for an adult



Screenshot 3)

MESSANGER RNA VACCINES: NEW KID ON THE BLOCK

- **Safety Concerns:**
 - Systemic inflammation
 - Biodistribution and persistent immune reactivity
 - Stimulation of auto-immune reactive AB
 - Toxic effect of non-native nucleotides and delivery system
 - IFN type I autoimmunity
 - Edema caused by naked extracellular RNA
 - Hypercoagulation



screenshot 4)

MESSANGER RNA VACCINES: NEW KID ON THE BLOCK

- **Safety Concerns:**
 - Systemic inflammation
 - Biodistribution and persistent immune reactivity
 - Stimulation of auto-immune reactive AB
 - Toxic effect of non-native nucleotides and delivery system
 - IFN type I autoimmunity
 - Edema caused by naked extracellular RNA
 - Hypercoagulation



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53) see the following regarding harm from the

Covid 19 vaccination trials:

Children's Health Defense Puts a Face to Transverse Myelitis OCTOBER 08, 2020

By Children's Health Defense Team

"Last month the world watched the media duck and dodge the seriousness of transverse myelitis, after it was learned that a volunteer in the AstraZeneca COVID-19 vaccine clinical trials developed the disorder.

Transverse myelitis, which is caused when the spinal cord becomes inflamed, is characterized by neurological dysfunction that causes loss of feeling and mobility.

If a demyelinating disease-causing vaccine ends up being approved for COVID-19, it won't be America's first dance with this type of vaccine injury.

Watch the video:<https://youtu.be/RoWRrtazgN8> to the end to see the story of Colton Berrett, a once healthy, active 13-year-old boy, whose life was changed forever after being diagnosed with transverse myelitis shortly after receiving the Gardasil vaccine."

54) It cannot truthfully or honestly be stated that Vermonters will not be safe until a Covid 19 vaccination arrives.

55) It cannot truthfully be said or maintained that a Covid 19 vaccination is necessary for herd immunity or for ongoing public health given that at least in Vermont 99.99994% of the people will recover from Sars Cov2, never mind that a covid virus has not to date been isolated.

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- 56) The defendant should be aware of the Nuremberg principles, which state that the people may not be used as subjects in grand experiments against their will and that the Vermont Constitution states, once again: **That all persons are born equally free and independent, and have certain natural, inherent, and unalienable rights**, amongst which are the enjoying and defending life and liberty, acquiring, possessing and protecting property, and pursuing and **obtaining** happiness and **safety**; *-emphasis added*

In Conclusion

WHEREAS, on April 25, 2003, the CDC sought to patent the “Coronavirus Isolated from Humans” in violation of 35 U.S.C. §101 which prohibits patenting nature; and,

WHEREAS, in addition to their attempt to patent the coronavirus associated with Severe Acute Respiratory Syndrome (SARS), they received patent rights to the detection and the manufacturing of a kit to measure fragments of the virus and their awarded claims were granted on August 17, 2010 in U.S. Patent 7,776,521 (the “Patent”); and,

WHEREAS, on October 13, 2015, Richard A. Rothschild received a patent for: “A method is provided for acquiring and transmitting biometric data (e.g., vital signs) of a user, where the data is analyzed to determine whether the user is suffering from a viral infection, such as COVID-19.” ;and

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US2020279585 (A1)

Bibliografische gegevens: US2020279585 (A1) — 2020-09-03

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System and Method for Testing for COVID-19

Rechter muisklik om favoriet te maken US2020279585 (A1) - System and Method for Testing for COVID-19

Uitvinder(s): ROTHSCCHILD RICHARD A [GB] ± (Rothschild, Richard A)

Aanvrager(s): ROTHSCCHILD RICHARD A [GB] ± (Rothschild Richard A)

1. System and Method for Testing for COVID-19

Uitvinder: ROTHSCCHILD RICHARD A [GB]

Aanvrager: ROTHSCCHILD RICHARD A [GB]

CPC: G06K2009/00892 G06K9/00892 G11B27/031

IPC: G06K9/00 G11B27/031 G11B27/10

Publicatie: US2020279585 (A1) 2020-09-03

Prioriteitsdatum: 2015-10-13

SILVIEW.media

WHEREAS, on May 17, 2020 Richard A. Rothschild filed another patent for the continuation-in-part of the original COVID-19 patent application on October 13, 2015, updated again in 2016, 2017, and 2019; and

US 20200279585A1

(19) **United States**

(12) **Patent Application Publication**

(10) Pub. No.: **US 2020/0279585 A1**

(43) Pub. Date: **Sep. 3, 2020**

(54) **SYSTEM AND METHOD FOR TESTING FOR COVID-19**

(71) Applicant: **Richard A. Rothschild**, London (GB)

(72) Inventor: **Richard A. Rothschild**, London (GB)

(21) Appl. No.: **16/876,114**

(22) Filed: **May 17, 2020**

Related U.S. Application Data

(63) Continuation-in-part of application No. 16/704,844, filed on Dec. 5, 2019, which is a continuation of application No. 16/273,141, filed on Feb. 11, 2019, now Pat. No. 10,522,188, which is a continuation of application No. 15/495,485, filed on Apr. 24, 2017, now Pat. No. 10,242,713, which is a continuation of application No. 15/293,211, filed on Oct. 13, 2016, now abandoned.

(60) Provisional application No. 62/240,783, filed on Oct. 13, 2015.

(52) U.S. Cl. **G11B 27/10** (2013.01); **G11B 27/031** (2013.01); **G06K 9/00892** (2013.01); **G06K 2009/00939** (2013.01); **H04N 9/8205** (2013.01); **G11B 27/102** (2013.01); **G16H 40/63** (2018.01); **H04N 5/76** (2013.01)

(57) **ABSTRACT**

A method is provided for acquiring and transmitting biometric data (e.g., vital signs) of a user, where the data is analyzed to determine whether the user is suffering from a viral infection, such as COVID-19. The method includes using a pulse oximeter to acquire at least pulse and blood oxygen saturation percentage, which is transmitted wirelessly to a smartphone. To ensure that the data is accurate, an accelerometer within the smartphone is used to measure movement of the smartphone and/or the user. Once accurate data is acquired, it is uploaded to the cloud (or host), where it is used to determine the user's health status.

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WHEREAS, CDC, NIAID and their Conspiring Associates variously conducted descriptive, diagnostic, therapeutic, and, Gain of Function research on coronavirus and such research would have required the use or infringement of the Patent at U.S. taxpayer expense in various grants including, but not limited to, U19 AI109761; R01 AI 108197; R01 AI132178; P30 DK065988; U19 AI109680, and other grants; and

WHEREAS, in September of 2019, Dr. Anthony Fauci of the NIAID and Dr. Chris Elias, President, Global Development Program for the Bill and Melinda Gates Foundation, USA in their capacity as member of the World Health Organization's Global Preparedness Monitoring Board in their capacities as agents of NIAID and Conspiring Associates mandated that "the United Nations (including WHO) conducts at least two system-wide training and simulation exercises, including one for covering the deliberate release of a lethal respiratory pathogen;" and,

WHEREAS, on or about January 21, 2020, the U.S. reported its first case of coronavirus in Washington thought to be linked to what foreign sources had described as a "new" coronavirus; and,

WHEREAS, on January 31, 2020, HHS Secretary Alex M. Azar II, relying on information provided by foreign sources, declared a Public Health Emergency for the United States; and,

WHEREAS, on February 4, 2020, the United States Food and Drug Administration granted the CDC Emergency Use Authorization for a kit to detect coronavirus infection for which they provided no public notice regarding the establishment of an Institutional Review Board "with the concurrence of a licensed physician who is a member of or consultant to the IRB and is not otherwise participating in the clinical investigation" as required under 21 C.F.R. §50.24; and,

WHEREAS, on February 10, 2020, Dr. Anthony Fauci and Conspiring Associates were reported to discuss the financial benefit of the public becoming more committed to supporting research on coronaviruses in the article entitled, "Fluctuating funding and flagging interest hurt coronavirus research, leaving crucial knowledge gaps," in STAT; and,

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WHEREAS, in contravention to established, peer-reviewed medical science, the CDC, NIAID, and Conspiring Associates promulgated a national clinical epidemiologic experiment using “social distancing” and “face mask wearing” in a healthy population without establishing any clinical trial outcomes, without empaneling an Institutional Review Board, defining “informed consent”, and without reviewing the ethics of such experiment in contravention to the Declaration of Helsinki and 21 C.F.R. §50.20 ff, and provided guidance to Governors of the 50 states of the United States to carry out said experiment without any independently considered ethical review board finding; and,

WHEREAS, according to the International Committee on Taxonomy of Viruses’ (ICTV) Coronaviridae Study Group (CSG) publication on March 2, 2020, the preliminary data suggesting that there was sufficient variation to determine this as a novel virus vs. a mutation of known coronaviruses was not based on established scientific principles but was responsive to the World Health Organization’s prior unfounded declaration of novelty of both the virus and a new disease; and,

WHEREAS, there could be no independent verification of the epidemiologic models predicting dire infection and mortality rates as the underlying models and data were not published, and when sought, were reportedly corrupted so as to make their examination impossible; and,

WHEREAS, in violation of State law, no medical or scientific evidence was provided to establish causal links between the SARS CoV-2 and the symptoms of COVID-19 relying instead on foreign government hearsay and conjecture to conflate association with causation; and,

WHEREAS, based on the recommendation of the CDC, NIAID and the Conspiring Associates, no State official reviewed for accuracy or veracity any of the causal statements made in the Declaration of Emergency which contain false, misleading, and terror inducing statements; and,

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WHEREAS, in violation of well-established legal precedent from *Jew Ho v. Williamson*, 103 F. 10, 26 (C.C.N.D. Cal. 1900) and subsequent public health law, arbitrary and capricious rules were insinuated on part of the population that were not applied generally resulting in the unlawful confinement of a healthy population with no basis in science; and,

WHEREAS the CDC and its affiliated organizations have routinely conflated infection endpoints from RT-PCR and serology; have repeatedly reported data from flawed or unsubstantiated models projecting morbidity and mortality data for the inducement of terror in the general population in violation of §802 of the Patriot Act's prohibition of Domestic Terrorism and, through this action, have sought to coerce a population and influence a government:

WHEREAS Philip B Scott, David Zuckerman, Dr. Mark Levine and TJ Donovan imposed *ultra vires* executive orders that deprive the People of their natural rights, without due process, by their actions which attempted to unilaterally suspend constitutionally guaranteed rights.

WHEREAS Neither defendant Philip B Scott or David Zuckerman has any lawful authority to suspend or attempt to suspend constitutionally guaranteed rights, whether by "mandate" or "suggestion". This constitutes warring against the Constitutions by those acting as government officers who have sworn oaths to uphold the Constitutions; and

WHEREAS Philip B Scott and David Zuckerman did not deprive themselves of their pay while they imposed draconian lockdown measures preventing their constituents from working and/or operating their businesses, which constitutes economic violence perpetrated upon the people by those holding office in the people's servant government. This is an egregious violation of the people's constitutionally secured rights to earn a living, unlawfully imposed upon them without due process of law. Any action which denies due process renders the action without lawful jurisdiction, without lawful authority, therefore null and void and of no lawful force and effect upon the people;

WHEREAS Neither Philip B Scott, acting as de facto governor, nor David Zuckerman, acting de facto as Lt. governor, has been transparent in their respective actions. Both have failed to disclose and/or have disclosed only minimal data or methodology used to create the modeling

AFFIDAVIT/DECLARATION OF TRUTH

that purportedly “justifies” their extreme actions committed under the guise of an alleged “pandemic”, which the ongoing data and statistics reveal is not a “pandemic” at all. Given that emerging facts debunk the existence of an alleged “pandemic”, then, the State of Emergency declaration should have been rescinded and all orders and actions conducted and imposed thereunder terminated.

WHEREAS: Specifically, mandatory lock down and mask wearing declarations in response to COVID-19 are not warranted; not supported by the latest science; are an egregious overreach of power; and, a blatant violation of both Legislative and Executive powers, as well as, the Un-A-Lien-able Rights of the People;

A list of some, but not all, of your malfeasance includes violations of the following U.S. legal code:

- 18 U.S.C. § 241 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 241. Conspiracy against rights
- 18 U.S.C. § 242 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 242. Deprivation of rights under color of Law
- 18 U.S.C. § 245 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 245. Federally protected activities
- 18 U.S.C. § 1031- U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1031. Major fraud against the United States
- 18 U.S.C. § 1038 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1038. False information and hoaxes
- 18 U.S.C. § 1341- U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1341. Frauds and swindles

AFFIDAVIT/DECLARATION OF TRUTH

- 18 U.S.C. § 1342 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1342.
Fictitious name or address
- 18 U.S.C. § 1621 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1621.
Perjury Generally.
- 18 U.S.C. § 1962 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1962.
Prohibited activities
- 42 U.S.C. § 1962 - U.S. Code - Unannotated Title 42. The Public Health and Welfare § 1962.
- 42 U.S.C. § 1983 - U.S. Code - Unannotated Title 42. The Public Health and Welfare § 1983.
Civil action for deprivation of rights
- 42 U.S.C. § 1985 - Unannotated Title 42. The Public Health and Welfare § 1985. Conspiracy
to interfere with civil rights
- 42 U.S.C. § 1986 - U.S. Code - Unannotated Title 42. The Public Health and Welfare § 1986.
Action for Neglect to Prevent
- 42 U.S.C. § 3617 - U.S. Code - Unannotated Title 42. The Public Health and Welfare § 3617.
Interference, coercion, or intimidation