NEW MEXICO STANDS UP!

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July 29, 2021

James Peery, Sandia Labs Director
Sandia National Laboratory
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Re: NOTICE TO CEASE AND DESIST ALL FACE MASK, COVID-19 TESTING AND VACCINE MANDATES

Dear James Peery:

Please be advised that the Undersigned Counsel represents a large group of employees at Sandia National Laboratory (hereinafter "SNL"). This letter serves as formal notice to cease and desist all actions related to mandates requiring employees to wear a face mask, submit to COVID-19 tests or be injected with the COVID-19 vaccine as a condition of employment. As more particularly described below, such a mandate is in direct violation of State and Federal Law, and if the dispute escalates or results in a constructive or retaliatory firing or suspension, a lawsuit may be brought against you. You should also be aware that **the Biden administration, through the Safer Federal Workforce Task Force, has stated that federal employees should not be required to be vaccinated**. Vaccination "should generally not be a pre-condition for employees or contractors at executive departments and agencies to work in-person in Federal buildings, on Federal lands, and in other settings as required by their job duties."[1]

This letter is designed to inform you of the law and the related scientific facts and their application to civil liberties, rights and your potential liabilities in mandating face masks, COVID-19 testing and COVID-19 vaccines.

COVID-19 PCR TESTS, FACE MASKS AND COVID-19 VACCINES HAVE NOT BEEN APPROVED BY THE FEDERAL DRUG ADMINISTRATION AND THEREFORE CANNOT BE MANDATORY

COVID-19 PCR tests, face masks and COVID-19 vaccines are authorized by the Federal

[1] https://www.saferfederalworkforce.gov/faq/vaccinations/

drug Administration (FDA), **only under an Emergency Use Authorization** ("EUA"). That means that these Medical products have not been fully tested for effectiveness or risks and **have not received an approval from the FDA**. It is important to understand that the terms of the Emergency Use Authorization for these products includes certain restrictions in their use. These terms are stated in 21 U.S. Code Section 360bbb-3(e)(1)(A) of the Federal Food, Drug, and Cosmetic Act (the "FD&C Act") That law requires that individuals to whom the product is administered are informed, and in pertinent part:

1. **Of the significant known and potential benefits and risks of such use, and of the extent to which such benefits and risks are unknown;** and

2. **Of the option to accept or refuse administration of the product,** of the consequences, if any, of refusing administration of the product, and of the alternatives to the product that are available and of their benefits and risks.

3. Of the consequences, if any, of refusing administration of the product, and of **the alternatives to the product that are available and of their benefits and risks.**

Given the unapproved status of the three vaccines currently in use in the United States, their EUAs state in no uncertain terms that each is "an investigational vaccine not licensed for any indication" and require that all "promotional material relating to the COVID-19 Vaccine clearly and conspicuously ... state that this product has not been approved or licensed by the FDA, but has been authorized for emergency use by FDA".

On August, 2020 at a Centers for Disease Control and Prevention ("CDC") published Meeting of the Advisory Committee on Immunization Practices, the Committee's Executive Secretary and Chief Medical Officer of the National Center for Immunizations and Respiratory Diseases, Dr. Amanda Cohn stated: "I just wanted to add that, just wanted to remind everybody, that under an Emergency Use Authorization, an EUA, **vaccines are not allowed to be mandatory.** So, early in this vaccination phase, individuals will have to be consented and they **won't be able to be mandated."**[2]

Even though the FDA granted emergency use authorizations for the Pfizer, Moderna and J&J vaccines, the clinical trials the FDA will rely upon to ultimately decide whether to approve these vaccines are still underway and are designed to last for approximately two (2) years to collect adequate data to establish if these vaccines are safe and effective enough for the FDA to license. The abbreviated timelines for the emergency use applications and authorizations means there is much the FDA does not know about these products even as it authorizes them for emergency use, including their effectiveness against infection and death from and transmission of SARS-CoV-2.

COVID-19 Vaccine Adverse Events

[2] https://www.cdc.gov/vaccines/videos/low-res/acipaug2020/COVID-19Supply-NextSteps_3_LowRes.mp4 (@1:14:40).

The reports to the VAERS (Vaccine Adverse Events Reporting System) database alone, should alarm anyone. As of July 9, 2021, VAERS reported 463,456 adverse events, including 10,991 deaths, from the COVID-19 vaccines.[3] Some of the nonfatal adverse events are quite serious including: myocarditis, miscarriage, irregular vaginal bleeding, blood clotting disorders, strokes, vascular damage and autoimmune disease. In addition, the CDC is behind on their reporting. The actual numbers are higher than those just cited. In addition, it has always been stated by VAERs that only a small percentage of adverse events from vaccines are actually reported.

In a June 2021 online interview, Dr. Peter McCullough, Vice Chief of Internal Medicine at Baylor University, who has testified before Congress on COVID-19 issues revealed that there were whistleblowers at the CDC and the Centers for Medicare and Medicaid Services who provided information that supported an estimate of at least **50,000 deaths** so far as a result of the COVID-19 vaccines in the USA.[4]

Because big tech web platforms and mainstream media are banning, censoring and canceling anyone who suggests that these vaccines have toxic propensities or are harming people, you probably may not be aware that scientists and healthcare professionals all over the world are sounding the alarm and frantically appealing to the FDA to halt the vaccines. Fifty-seven top scientists and doctors primarily from Central and South America are calling for an immediate end to all vaccine COVID-19 programs.[5] Other physician-scientist groups have made similar calls, among them: Canadian Physicians, Israeli People's Committee, Frontline COVID- 19 Critical Care Alliance, World Doctors Alliance, Doctors 4 Covid Ethics, and America's Frontline Doctors. These are healthcare professionals in the field who are seeing the catastrophic and deadly results of the rushed vaccines, as well as reputed professors of science and medicine, including the physician with the greatest number of COVID-19 scientific citations worldwide.

An article prepared by The Weston A Price Foundation on February 11, 2021, C*ovid-19 Injections: What The Officials Are Saying*[6]*,* took numerous excerpts from well known organizations, people, doctors and officials to demonstrate the risks and unknowns associated with COVID-19 Vaccines. The following are a few quotes from the article about the vaccines (internal citations omitted):

> **Newsweek, asking Dr. Anthony Fauci,** head of the U.S. National Institute of Allergy and Infectious Diseases, whether people who get a Covid-19 vaccine could still pass on SARS-CoV-2 to others: "That's a good question. We don't know that yet. We do not know if the vaccines that prevent clinical disease also prevent infection."
>
> **FDA:** Most vaccines that protect from viral illnesses also reduce transmission of the virus that causes the disease by those who are vaccinated. While it is hoped this will be the case, the scientific community does not yet know if the Pfizer-

[3] https://www.openvaers.com/covid-data
[4] https://www.bitchute.com/video/rKP61hruGxIt/ (@ 18:36 and thereafter).
[5] https://en-volve.com/2021/05/08/57-top-scientists-and-doctors-release-shocking-study-on-covid-vaccines-and-demand-immediate-stop-to-all-vaccinations/
[6] https://www.westonaprice.org/covid-19-injections-what-the-officials-are-saying/.

BioNTech COVID-19 Vaccine will reduce such transmission [emphasis added].
NIH: "COVID-19 vaccines designed to elicit neutralizing antibodies may sensitize vaccine recipients to more severe disease than if they were not vaccinated."

NHS (National Health Service of the U.K.) as reported in The Guardian: Those "with a history of a significant allergic reaction to a vaccine, medicine or food" should not be given the COVID-19 vaccine developed by U.S. pharmaceutical giant Pfizer and Germany's BioNTech.

WHO: Pregnant women (unless they are at high risk of exposure to the COVID virus), people under age 18, and individuals with a history of severe allergic reaction to any component of the vaccine should not take Moderna's or Pfizer-BioNTech's COVID-19 vaccines.

Microbiology & Infectious Diseases, January 2021, veteran immunologist J. Bart Classen: "RNA-based COVID vaccines have the potential to cause more disease than the epidemic of COVID-19."

Spike Proteins

The unique MRNA technology employed by the COVID-19 vaccines is unlike traditional vaccines. Tal Zaks, chief medical officer of Moderna, likened it to "hacking the human software." The vaccine manufacturers initially said the spike proteins, which the vaccines essentially trick your body into creating, would not circulate freely through the body. As it turns out they do and they create real problems. They accumulate in a number of tissues, such as the spleen, bone marrow, liver, adrenal glands and ovaries. They fuse with receptors on our blood platelets, and with cells lining our blood vessels. They can cause platelets to clump leading to clotting, bleeding, and heart inflammation. Many European countries have suspended use of the Aztra Zeneca vaccine for those reasons. It has been estimated that as much as 80% of women in their third trimester of pregnancy who have been vaccinated have had miscarriages.

THAT YOU ARE GIVING EMPLOYEES THE OPTION TO WEAR A MASK AND BE TESTED REGULARLY RATHER THAN BE VACCINATED IS NOT A SOLUTION AND VIOLATES THEIR RIGHTS

Face Masks for COVID-19 are Approved for Emergency Use Only

Masks, like the PCR tests and vaccines, have not gone through full FDA approval processes as a medical device which will protect one from getting COVID-19. They are approved for Emergency Use only. According to 21 U.S.Code § 360bbb–3 "Authorization for medical products for use in emergencies," medical products (including face masks) which have been granted Emergency Use Authorization may not be mandated. This provision specifically requires that the recipient be informed of the right to accept or refuse the product.

Face Masks are Ineffective

It has been well-known for many years in the medical community that face masks (surgical or otherwise) are not effective in filtering viruses due to the extremely small size of viruses and the relatively porous filtration media that are used in such masks. Studies examining the efficacy of masks are cited below:

1. "While there is some experimental evidence that masks should be able to reduce infectiousness under controlled conditions, there is less evidence on whether this translates to effectiveness in natural settings. There is little evidence to support the effectiveness of face masks to reduce the risk of infection." Cowling, B. et al. (2010) "Face masks to prevent transmission of influenza virus: A systematic review," Epidemiology and Infection, 138(4), 449-456.[7]

2. "None of the studies established a conclusive relationship between mask/respirator use and protection against influenza infection." bin-Reza et al. (2012) "The use of masks and respirators to prevent transmission of influenza: a systematic review of the scientific evidence," Influenza and Other Respiratory Viruses 6(4), 257–267.[8]

3. "There were no statistically significant differences in preventing laboratory-confirmed influenza, laboratory-confirmed respiratory viral infections, laboratory-confirmed respiratory infection, and influenza-like illness using N95 respirators and surgical masks." Long, Y. et al. (2020) "Effectiveness of N95 respirators versus surgical masks against influenza: A systematic review and meta-analysis," J Evid Based Med. 2020; 1-9.[9]

4. Bundgaardet al 2020 is the only Randomized Controlled Trial that has examined SARS-CoV-2 infections in masked vs. non-masked civilian populations. 4,862 participants completed the study (2,392 masked; 2,470 non-masked), and the study concluded that there was no statistically significant difference in SARS-CoV-2 infection rates between the masked (1.8%) and non-masked (2.1%) study cohorts.[10]

<u>Face Masks Can Cause Physical Harm</u>

According to Dr. Margareta Griesz-Brisson MD, PhD, who is a Neurophysiologist with a PhD in Pharmacology, "The reinhalation of our exhaled air will without a doubt create oxygen deficiency and a flooding of carbon dioxide. We know that the human brain is very sensitive to oxygen deprivation… Oxygen deficiency inhibits the development of the brain, and the damage that has taken place as a result cannot be reversed… Consciously and purposely induced oxygen deficiency is an absolutely deliberate health hazard, and an absolute medical contraindication."[11]

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[7] https://www.cambridge.org/core/journals/epidemiology-and-infection/article/face-masks-to-prevent-transmission-of-influenza-virus-a-systematic-%20review/64D368496EBDE0AFCC6639CCC9D8BC05
[8] https://onlinelibrary.wiley.com/doi/epdf/10.1111/j.1750-2659.2011.00307.x
[9] https://onlinelibrary.wiley.com/doi/epdf/10.1111/jebm.12381
[10] https://www.acpjournals.org/doi/10.7326/M20-6817
[11] "German Neurologist Warns Against Wearing Facemasks: 'Oxygen Deprivation Causes Permanent Neurological Damage,'" Griesz-Brisson, Margareta, Sign of the Times, October 2020
https://www.sott.net/article/442455-German-Neurologist-Warns-Against-Wearing-Facemasks-Oxygen-Deprivation-Causes-Permanent-

Multiple studies have shown that mask wearing negatively impacts health. A review of 44 studies and 65 publications (that was published in the April 2021 International Journal of Environmental Research and Public Health) concluded that "mask-related changes in respiratory physiology can have an adverse effect on the wearer's blood gases sub-clinically and in some cases also clinically manifest and, therefore, have a negative effect on the basis of all aerobic life, external and internal respiration, with an influence on a wide variety of organ systems and metabolic processes with physical, psychological and social consequences for the individual human being." The specific negative effects from mask-wearing included increase in blood carbon dioxide, decrease in blood oxygen saturation, increase in heart rate, increase in blood pressure, shortness of breath and difficulty breathing, headache, dizziness, exhaustion, and skin lesions.[12]

PCR Tests are Approved for Emergency Use Only

The PCR test is highly unreliable for detecting the virus and, in the absence of a medical evaluation of the patient, cannot be used to diagnose a COVID-19 case. The following provides just a brief overview of certain problems with the use of this test in the current environment.

Although the CDC has expanded the testing net to include almost anyone that has come in contact with others,[13] the FDA's instructions for the Real-Time RT-PCR Diagnostic Panel state that t**he intended use is for testing specimens "collected from individuals suspected of COVID-19 by their healthcare provider."**[14] **It was not intended for indiscriminate mass screening of the general populatio**n. **The PCR test is not suitable as a diagnostic tool**. The inventor of the PCR test, Kary Mullis, Ph.D., who won a Nobel Prize in chemistry for the invention in 1993, developed the test as for use in laboratory research, and said that the test was never designed to diagnose disease.[15] That is because, while COVID-19 PCR tests identify the presence of viral fragments in DNA, the tests do not provide accurate information about the presence of infectious, live virus as opposed to non-infectious (dead) viral fragments.[16] These limitations are essentially repeated in the FDA's instruction manual for the test: "Detection of viral RNA may not indicate the presence of infectious virus or that 2019-nCoV is the causative agent for clinical symptoms."

It is well-known that the "positive" results from the high amplification cycles used in the PCR test are essentially meaningless. The CDC's own calculations suggest that it is extremely difficult to detect any live virus in a sample above a threshold of 33 cycles.[17] Dr. Anthony Fauci

Neurological-Damage

[12] "Is a Mask That Covers the Mouth and Nose Free from Undesirable Side Effects in Everyday Use and Free of Potential Hazards?" Kisielinksi et al., International Journal of Environmental Research and Public Health, April 2021, https://www.mdpi.com/1660-4601/18/8/4344/htm

[13] https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html

[14] https://www.fda.gov/media/134922/download

[15] "Kary Mullis Explains Why His PCR Test Is Not a Diagnostic Test,." YouTube, 2020, https://www.facebook.com/2265648160428062/videos/236908234248154

[16] "The Inventor Kary Mullis, of method used to test for COVID-19 said it can't be used in virus detection," Australian National Review, August 1, 2020, https://australiannationalreview.com/health/the-inventor-kary-mullis-of-method-used-to-test-for-covid-19-said-it-cant-be-used-in-virus-detection/

[17] Duration of Isolation and Precautions for Adults with COVID-19, CDC, October 19, 2020,

has said that PCR is useless and unreliable for diagnosing COVID-19 when run at 35 cycles or higher.[18] There is evidence that PCR tests using 35 cycles and above yield 97% false positives.[19] The WHO issued a recent warning about high cycle thresholds leading to false positives.[20]

Since most PCR tests used today perform 37 or more cycles, the number of reported "cases" of COVID-19 is likely vastly overstated.[21] The requirement that employees submit to PCR tests is both unlawful and essentially meaningless from a medical standpoint.

Ethylene Oxide and the Need for Consent to be Tested

The nasal swabs often used with PCR testing are treated with Ethylene Oxide, a well known carcinogen.[22] "The acute (short-term) effects of ethylene oxide in humans consist mainly of central nervous system depression and irritation of the eyes and mucous membranes. Chronic (long-term) exposure to ethylene oxide in humans can cause irritation of the eyes, skin, nose, throat, and lungs, and damage to the brain and nervous system. There also is some evidence linking ethylene oxide exposure to reproductive effects. EPA has concluded that ethylene oxide is carcinogenic to humans by the inhalation route of exposure. Evidence in humans indicates that exposure to ethylene oxide increases the risk of lymphoid cancer and, for females, breast cancer.[23]

While it may be that once or twice being tested using the ethylene oxide treated nose swabs poses limited risks, since you are planning weekly or twice weekly testing you are asking your employees to put themselves at risk for serious harm. Thus, it should be no surprise that the CDC has stated on their website "**It is unethical and illegal to test someone who does not want to be tested, including students whose parents or guardians do not want them to be tested.**"[24] As of May 2021, that text has been removed from the CDC's website and replaced with this: "**Testing should not be conducted without informed consent from the individual being tested** (if an adult) or the individual's parent or guardian (if a minor). **Informed consent requires disclosure, understanding, and free choice** and is necessary for teachers and staff (who are employees of a school) and students' families **to act independently and make choices according to their values, goals, and preferences.**"[25]

One more reason to consider when it comes to the requiring of testing is that asymptomatic transmission is very rare. The WHO has admitted this[26] and recent research published by the

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https://web.archive.org/web/20200719025659/https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html
[18] COVID-19 with Dr. Anthony Fauci," This Week in Virology, (July 16, 2020), https://www.youtube.com/watch?v=a_Vy6fgaBPE&feature=youtu.be&t=260
[19] Jaafar R, Aherfi S, Wurtz N et al. "Correlation Between 3790 Quantitative Polymerase Chain Reaction-Positive Samples and Positive Cell Cultures, Including 1941 Severe Acute Respiratory Syndrome Coronavirus 2 Isolates." Clin Infect Dis 2020 Sep; https://doi.org/10.1093/cid/ciaa1491
[20] https://www.who.int/docs/default-source/medicines/regulatory-updates/covid-19/24th-who-regulatory-update-on-covid-19_11dec2020.pdf?sfvrsn=1df78a5_3
[21] https://www.msn.com/en-us/health/medical/experts-us-covid-19-positivity-rate-high-due-to-too-sensitive-tests/ar-BB18wE8B
[22] https://www.gasdetection.com/gas-detection-knowledge-base/interesting-applications/covid-19-swabs-ethylene-oxide-and-warehouses/
[23] From the EPA website: https://www.epa.gov/sites/production/files/2016-09/documents/ethylene-oxide.pdf
[24] CDC denounces 'unethical and illegal' mandatory coronavirus testing in schools https://www.politico.com/news/2020/10/15/cdc-mandatory-school-testing-429667
[25] https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html
[26] https://www.cnn.com/2020/06/08/health/coronavirus-asymptomatic-spread-who-bn/index.html

CDC has supported this fact.[27] So it extremely unlikely an employee who comes to work without symptoms but who have COVID-19 will transmit it to anyone. Since presumably employees *with* symptoms do not come to work, there is no purpose served in testing employees.

Any attempt to coerce anyone to take a PCR test (or any other test under an EUA) is a violation of federal law and the conditions under which the PCR test test has been authorized for use. The law is clear, experimental medical procedures cannot be mandated. Thus, 21 U.S. Code § 360bbb–3, Section (e)(1)(A) does not permit you to coerce an employee to accept such a test on penalty of termination or suspension or other sanctions.

NOT ONLY SNL BUT INDIVIDUAL EMPLOYEES WHO ARE INVOLVED IN REQUIRING USE OF UNAPPROVED MEDICAL PRODUCTS, CAN BE LIABLE

Under the 2005 PREP Act enacted by Congress, pharmaceutical companies that manufacture EUA vaccines are shielded from liability related to injuries and damages caused by their experimental agents. However, any employer who mandates experimental vaccines on any human being is not protected from liability for any resulting harm. The Dept. of Labor had previously stated that an adverse reaction to the vaccine when required by an employer is a workplace injury for workmen's compensation purposes. The fact that OSHA recently revised its reporting guidelines such that employers are not required to record adverse reactions,[28] **does not remove liability from an employer for harm suffered by an employee due to an employer mandated COVID-19 vaccine.**

Although the EEOC said that "employers may mandate COVID-19 vaccinations", this was a statement totally outside their jurisdiction and is simply an opinion. It has no legal weight whatsoever. The EEOC is an agency tasked with fighting discrimination in the workplace and elsewhere, has no medical expertise and has no special authority to make pronouncements on the law apart from perhaps as it applies to discrimination. Its statement that employers may mandate vaccination is incorrect. In fact, the EEOC states that "It is beyond the EEOC's jurisdiction to discuss the legal implications of EUA or the FDA approach."[29] As noted above, those EUAs require informed consent and Federal Law requires that such vaccinations must be voluntary. **An employer is violating Federal Law if such a vaccine is mandated by the employer and an employee is forced to receive such an injection under duress.**

For some of your employees, accepting a potentially toxic chemical concoction into the human body, which they view as a God-given "temple" of the flesh, violates their religious beliefs. Both federal and state laws prohibit discrimination by employers based on religious beliefs. Some people have medical reasons not to take the vaccine. Employers must accommodate employee's medical needs under the law. Employers are putting themselves at risk of serious liability if they choose to mandate the COVID-19 vaccine.

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[27] https://wwwnc.cdc.gov/eid/article/27/4/20-4576_article
[28] https://www.osha.gov/coronavirus/faqs#worker (Vaccine Related)
[29] https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws

The United States Constitution, as well as the State of New Mexico's Constitution, protect the fundamental rights of we the people. These rights are inherent and are guaranteed by the mere fact that we were born human. All persons are born equally free, and have certain natural, inherent and inalienable rights, among which are the rights of enjoying and defending life and liberty, of acquiring, possessing and protecting property, and of seeking and obtaining safety and happiness. N.M. Const. art. II, § 4

The discharge of an employee for refusing experimental medical products is a violation of that employee's due process right to life and liberty under the 14th Amendment and an invasion of the zone of privacy and right to bodily integrity which have been held to emanate from various of the Bill of Rights. The constitutionally protected zone of privacy and right to bodily integrity have been articulated in many Supreme Court cases, including *Mapp v. Ohio*, 367 17 U.S. 643 (1961), *Griswold v. State of Connecticut*, 381 U.S. 479, 85 S.Ct. 1678, 14 L.Ed.2d 510 (1965); and *Roe v. Wade,* 410 US 113 (1973).

The United States Supreme Court has held: "T**he principle that a competent person has a constitutionally protected liberty interest in refusing unwanted medical treatment may be inferred from our prior decisions.**" *Cruzan v. Director, Mo. Dept. of Health*, 497 U.S. 261, 278, 111 L. Ed. 2d 224, 110 S. Ct. 2841 (1990). The Court continued: "This notion of bodily integrity has been embodied in the requirement that informed consent is generally required for medical treatment. Justice Cardozo, while on the Court of Appeals of New York, aptly described this doctrine: '***Every human being of adult years and sound mind has a right to determine what shall be done with his own body ……. The logical corollary of the doctrine of informed consent is that the patient generally possesses the right not to consent, that is, to refuse treatment***.'" (emphasis added) C*ruzan,* at 269-270.

It is not only SNL itself which is potentially liable for unlawfully mandating employees to utilize un approved medical products. **Any staff that is involved in the enforcement of SNL's unlawful policy can be held liable with a Bevens action for federal law or under 42 USC Section 1983 for state constitutional violations!** That law states in relevant part: ***"Every person*** who, under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia, subjects, or causes to be subjected, any citizen of the United States or other person within the jurisdiction thereof to the deprivation of any rights, privileges, or immunities secured by the Constitution and laws, shall be liable to the party injured in an action at law…."

RETALIATION AND DISCRIMINATION

Employees at SNL have stated they are being retaliated against, discriminated against and being subjected to a hostile work environment as a result of not taking the injection. This includes being kept in a segregated area and not being allowed to join in certain socializing events. This is not acceptable. If an employee quits in response to such treatment, it is considered a *constructive* firing and can be a grounds for a retaliatory discharge suit. It also is in violation of the N.M. Whistleblowers Act which states:

A public employer shall not take any retaliatory action against a public employee because the public employee…(c) objects to or refuses to participate in an activity, policy or practice that constitutes an unlawful or improper act.

SHARING HEALTH INFORMATION OF EMPLOYEES IS AN INVASION OF PRIVACY

An employee has advised us that the employee's supervisor had access to his health information and was sharing that with others. New Mexico recognizes invasion of privacy as a tort and a constitutional violation. We demand that whatever policies or procedures you are utilizing that gives access to employees' health and medical information be ceased.

You are hereby on notice that if SNL continues to mandate EUA medical products on employees, such as face masks, COVID-19 testing or any of the experimental COVID-19 vaccines, New Mexico Stands Up! may have no choice but to take legal action. These illegal mandates expose individuals to compulsory risk and directly violate Federal law. Employers can be held liable for damages caused by the experimental medical products if they are not given full freedom of choice without threat of consequences. We urge you to comply with the FD&C Act and the terms of the EUAs, and to advise all employees of their right to **accept or refuse** any experimental medical products. Any other course of action is contrary to Federal and State law. Thank you for your time and for protecting the best interest of your employees.

Sincerely,

NM Stands Up!

/s/ *N. Ana Garner*
N. Ana Garner, Esq.

/s/ *Jonathan Diener*
Jonathan Diener, Attorney

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