Writ in the Nature of Diplomatic Affairs ... USA2377JMW ... johnie-mae: walker ... post date: 02/14/2025 ... via: www

Private ~ Notice to Agent is Notice to Principal / Notice to Principal is Notice to Agent ~ Private





johnie-mae: wilson 33096 Redwood Hwy #65 O'Brien-Republic, territory, [97534] non-domestic without the U.S. Moorish /Aboriginal natural people of the Land – North, South, Central America / Northwest Amexem

#### Affidavit of Truth ~ Writ in The Nature of Diplomatic Affairs

**USPS Registered mail #** 7017 2620 0001 1678 3577

### $\mathfrak{S} \sim \mathbf{Exhibit Sheet} \sim \mathfrak{S}$

the enclosed affidavit(s) is hereby presented to your office, wherein the paramount executrix holder for the JOHNNIE M WALKER Public Trust Account (estate) gives notice of violations of fundamental & unalienable rights, breach of Contract, i. e.: Treaty of Peace and Friendship 1787, The Constitution **for** The United States of America 1791, breach of fiduciary duty.

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all documents can be viewed at: www.spiritalbreeze.com/notices, record no. # USA3577JMW

exhibit a. Affidavit of Truth, Writ in the Nature of Diplomatic Affairs exhibit b. original or **copy** of Bill of Exchange enclosed exhibit c. UCC financing statement exhibit d. **XXXXXXXXXX** exhibit e. 1099 registered online exhibit f. treaty of peace & friendship 1787, amity and commerce, The constitution **for** the United States of

America 1791, Art 1, sec 2, p 3: Indians not Taxed and Declaration on The Rights of Indigenous Peoples. posted at: www.spiritalbreeze.com/forgotten scrolls.

CC: David Reyes

Post Office Box 631, Cave Junction Oregon [97534]

footnote: reason for using lower case letter:

whereas ever culture has its own language; **entities** DBA/U.S., USA CORPORATE COMPANY'S language (the matrix) is used to dehumanize the natural person. my purpose for using lower case letters is a right, freedom of expression... **re:** Capitis Diminutio (meaning the diminishing of status through the use of capitalization) a diminishing or abridgment of personality. 'Black law 4th edition'.

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johnie-mae: wilson 33096 Redwood Hwy #65 O'Brien-Republic, territory, [97534] non-domestic without the U.S. Moorish /Aboriginal natural people of the Land – North, South, Central America / Northwest Amexem

#### Affidavit of Truth ~ Writ in The Nature of Diplomatic Affairs

DAVID REYES, Post Office Box 631, Cave Junction Oregon [97534] USPS # 7017 2620 0001 1678 \_\_\_\_ [account #]

#### to:

David Reyes, Internal Revenue Service and all entities acting as Servicers, Assigns, Principals, Agents or Successors. you are hereby Incorporated by this reference, Respondent(S). by the paramount secured interest holder, executrix, beneficiary and di rector for the JOHNNIE M WALKER Public Trust and all variations there of; for i am with the authority and hereby establishes this jurisdiction as follows:

#### re: Constitution for the United States of America 1791, Art 1, sec 2, p 3

Representatives and direct taxes shall be apportioned among the several states which may be included within this union, according to their respective numbers, which shall be deter- mined by adding to the whole number of free persons, including those bound to service for a term of years, and **excluding Indians** (aboriginal(s)), people of the land) not taxed, three fifths of all other Persons.

comes ye now; i, known as johnie-mae: wilson, the paramount secured interest holder, executrix/beneficiary and director for the public trust JOHNNIE M WALKER, not to be confused with, nor substituted by, Pro Se by unauthorized hand(s) of another. i am an aboriginal indigenous moorish-national; possessing free-hold by inheritance and primogeniture status; standing squarely affirmed, aligned and bound to the zodiac constitution, with all due respect and honors given to the constitution for the people of the United States Republic, North America. being a descendant of moroccans and born in morocco (america), with the blood of the ancient moabites from the land of moab, who received permission from the pharaohs of egypt to settle and inhabit north-west africa / north gate. the moors (flesh and blood) are the founders and are the true possessors of the present moroccan empire with our canaanite, hittite and amorite brethren, who sojourned from the land of canaan, seeking new homes. our dominion and inhabitation extended from northeast and southwest africa, across the great atlantis, even unto the present north, south and central **america** and the adjoining islands-bound squarely affirmed to the treaty of peace and friendship of seventeen hundred and eighty-seven (1787) ad. superseded by the treaty of peace and friendship of eighteen hundred and thirty-six (1836) ad. between morocco and the United States.

**re:** http://www.vale.edu/lawweb/avalon/diplomacy/barbarv/barl866t.htmo ra tBevinesL a wB o o ko f Treaties) the same as displayed under treaty law, obligation, authority as expressed in article vi (6) of the Constitution for the United States of America (Republic); we the people.

Private ~ Notice to Agent is Notice to Principal / Notice to Principal is Notice to Agent ~ Private

i, known as johnie-mae: wilson hereby present the enclosed Bill of Exchange for the benefit of the Taxpayer; Respondent(s) dba/the United States Inc. Re: International Bill of Exchange enclosed.

#### terms for response

this notice will establish the terms of a contract between Respondent(S) and the undersigned principal. Respondent(S) unconditionally accept these terms, if Respondent(S) do not return this notice and the enclosed instrument(s) within twenty-one **(21) days** of receipt; should Respondent(S) choose to dishonor the enclosed instruments, pursuant to these terms and established principles of law and commerce (see; ucc § 3-503 & § 9-210 *nihil dicit etc.*), Respondent(S) must return the enclosed instrument(s), with a written explanation of Respondent(S) cause for dishonor, full description of any defects in said instruments and Respondent(S) correction of the certified statement of account as stated herein, within **21 days** of receipt. Respondent(S) failure to respond as described herein shall render the debt in dispute and constitute Respondent(S) confirmation and confession that the enclosed instruments are valid, sufficient, and not defective and that the obligation has been fully acquitted and discharged as full satisfaction of the claim.

#### certification & verification

i, known as johnie-mae: wilson, natural person, the undersigned principal am of majority age and sound mind, am competent to testify, have personal firsthand knowledge of the facts stated herein, and do hereby solemnly declare and affirm, under the penalty of perjury and my unlimited commercial liability, that the facts stated herein are, to the best of knowledge are true, correct, complete, certain, not misleading, the truth, the whole truth and nothing but the truth, so help me (god).

an 27,2025 date:

bv: johnie-mae: wilson, autograph non-negotiabl affiant, flesh and blood being.

johnie-mae: wilson, autograph non-negotrable, affiant, flesh and blood being, in propria persona all rights exercised (reserved), u.c.c. 1-207/1-308; u.c.c.1-103

use of a notary on this document does not constitute any adhesion nor alter affiant's neutral standing in original common law jurisdiction. the purpose of the notary is verification and identification only and not entrance into any foreign jurisdiction.

jurat

1.1

Oregon, territory, County, Josephine territory

subscribed and affirmed to (sworn) before me on this day: 27 of January 2025 by *johnie-mae: wilson*, proved to me on the basis of satisfactory evidence to be the natural person/entity who appeared before me.

OFFICIAL STAMP MONIQUE A. ALLEN NOTARY PUBLIC – OREGON COMMISSION NO. 1033436 MY COMMISSION EXPIRES FEBRUARY 6, 2027

SS:

signature of public notary

# International Bill of exchange

## COPY

#### USPS # 7017 2620 0001 1678 3577 [record#]

Date: 1/3/ 2025

Bill To: DAVID REYES, Post Office Box 631, Cave Junction Oregon [97534]  Accept For Value
 Pay To The Order Of The United States Treasury Deposit To United States Treasury
 For Further Credit To JOHNNIE M WALKER By: executrix, master, beneficiary
 UCC 3-306, UCC 3-301, IRS 6334 (a)(b)

Amount of Obligation: - 63.600.00

Description	Fee	Amount
Rental of Property located at: 837 Hays Cut Off Road, Cave Junction, Oregon [97523] Fax's for 2019 to 2024, address does not denote the land.	-63,600.00	
		- 63,600.00
re: Declaration on The Rights of indigenous Peoples; Constitution for the United States America, Art 1, sec 2, p 3: Indians (indigenous) not Taxed; Unlawful taking and/or Adverse action:		

Pay to the order of: the United States Treasury, 1500 Pennsylvania, Remittance room #3413 Washington, District of Columbia 20220, Johnnie M Walker, 33096 Caves Hwy, O'Brien Oregon [97534]

#### MEMO: Discharge Of Debt

this actual and constructive notice by special deposit for the benefit of the depositor/secured party/grantee beneficiary/claimant in this trust action for claimant's claim; Notice of Claim of all investment, commodity and trust deposit accounts and contracts as secure collateral, along with claim of Tradename/Trademark, Copyright/Patent of the Name JOHNNIE M WALKER, my mind, body, soul of infants, spirit, and Live Borne Record, as member One Heaven, and reject and rebuke any and all assumptions and presumption of being Property of any Cestui Que Vie Trust/estates mentioned under CONON 2055-2056, and assignment of all debt obligation to the office of Secretary of the Treasury (31 USA3123). Discharge this tax matter (UCC 3-601). ???

the below space intentionally left

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CC FINANCING STATEMENT					
. NAME & PHONE OF CONTACT AT SUBMITTER (optional)					
johnie-mae . E-MAIL CONTACT AT SUBMITTER (optional)					
jw.iam2020@protonmail.com					
. SEND ACKNOWLEDGMENT TO: (Name and Address)					
johnie-mae wilson	I				
33096 Redwood Hwy # 65					
O'Brien, Oregon 00000	1	Prir		Deast	
SEE BELOW FOR SECURED PARTY CONTACT INFORMAT				R FILING OFFICE USE	
1b. INDIVIDUAL'S SURNAME REYES	FIRST PERSONA		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
15. INDIVIDUAL'S SURNAME REYES	FIRST PERSONA		ADDITIO	., .,	SUFFIX
REYES	CITY			DAVE	COUNTR
1b. INDIVIDUAL'S SURNAME REYES MAILING ADDRESS POST OFFICE BOX 631 DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, full nar	CITY CAV	DAVID /E JUNCTION	STATE OR the Debtor's nar	DAVE POSTAL CODE 97534 ne); if any part of the Individual	COUNTF
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THIS ACTUAL AND CONSTRUCTIVE NOTICE BY SPECIAL DEPOSIT FOR THE BENEFIT OF THE DEPOSITOR/ SECURED PARTY/GRANTEE BENEFICIARY/CLAIMANT IN THIS TRUST ACTION FOR CLAIMANT'S CLAIM; Notice of Claim of all investment, commodity and trust deposit accounts and contracts with attached collateral and proceeds to secure collateral, along with claim of TRADENAME/TRADEMARK, COPYRIGHT/PATENT of the Name JOHNNIE M WALKER, my mind, body, soul of infants, spirit, and Live Borne Record, as member One Heaven, and reject and rebuke all assumptions and presumption of being Property of any Cestui Que Vie Trust/estates mentioned under CONON 2055-2056, and assignment of all debt obligation to the office of Secretary of the Treasury (31 USA3123). Discharge this tax matter (UCC 3-601).

see attachment(s)

5. Check only if applicable and check only one box: Collateral is X held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check <u>only</u> if applicable and check <u>only</u> one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable):	er 🚺 Bailee/Bailor 🔲 Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	

### UCC FINANCING STATEMENT ADDENDUM

#### FOLLOW INSTRUCTIONS

c. MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         ADDITIONAL SECURED PARTY'S NAME or       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)       I1a. ORGANIZATION'S NAME         I1a. ORGANIZATION'S NAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         WALKER       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         c. MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL	9b. INDIVIDUAL'S SURNAME         REYES         FIRST PERSONAL NAME         DAVID         ADDITIONAL NAME(S)/INITIAL(S)         DAVE         THE ABOVE SPACE IS FOR FILING OFFIC         DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use ex do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c	
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)       SUF         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         ADDITIONAL SECURED PARTY'S NAME or       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)       COL       11a. ORGANIZATION'S NAME       ADDITIONAL SECURED PARTY'S NAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         11b. INDIVIDUAL'S SURNAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         33096 REDWOOD HWY #65       O'BRIEN       OR       97534       U	10b. INDIVIDUAL'S SURNAME	
MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         ADDITIONAL SECURED PARTY'S NAME or       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)       I1a or 11b)         11a. ORGANIZATION'S NAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         33096 REDWOOD HWY #65       O'BRIEN       OR       97534       U	INDIVIDUAL'S FIRST PERSONAL NAME	
ADDITIONAL SECURED PARTY'S NAME or       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)         11a. ORGANIZATION'S NAME       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)         11a. ORGANIZATION'S NAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         11b. INDIVIDUAL'S SURNAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         33096 REDWOOD HWY #65       O'BRIEN       OR       97534       U         ADDITIONAL SPACE FOR ITEM 4 (Collateral):       Collateral):       Collateral       Collatera       Collateral       Collateral </th <th>INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</th> <th>SUFFIX</th>	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
ADDITIONAL SECURED PARTY'S NAME or       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)         11a. ORGANIZATION'S NAME       ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)         11a. ORGANIZATION'S NAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         11b. INDIVIDUAL'S SURNAME       FIRST PERSONAL NAME       ADDITIONAL NAME(S)/INITIAL(S)       SUF         MAILING ADDRESS       CITY       STATE       POSTAL CODE       COL         33096 REDWOOD HWY #65       O'BRIEN       OR       97534       U         ADDITIONAL SPACE FOR ITEM 4 (Collateral):       Collateral):       Collateral       Collatera       Collateral       Collateral </th <th></th> <th>0.0111175</th>		0.0111175
11a. ORGANIZATION'S NAME         11b. INDIVIDUAL'S SURNAME         11b. INDIVIDUAL'S SURNAME         WALKER         JOHNNIE         MAILING ADDRESS         33096 REDWOOD HWY #65         O'BRIEN         OR         97534         III	MAILING ADDRESS CITY STATE POSTAL CODE	COUNTR
11b. INDIVIDUAL'S SURNAME     FIRST PERSONAL NAME     ADDITIONAL NAME(S)/INITIAL(S)     SUF       MAILING ADDRESS     JOHNNIE     M     CITY     STATE     POSTAL CODE     COL       33096 REDWOOD HWY #65     O'BRIEN     OR     97534     U       ADDITIONAL SPACE FOR ITEM 4 (Collateral):     Collateral):     CITY     COLL     COLL     COLL     COLL     CITY	ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)	
WALKER     JOHNNIE     M       MAILING ADDRESS     CITY     STATE     POSTAL CODE     COL       33096 REDWOOD HWY #65     O'BRIEN     OR     97534     U       ADDITIONAL SPACE FOR ITEM 4 (Collateral):     COL     COL     COL     COL	11a. ORGANIZATION'S NAME	
MAILING ADDRESS     CITY     STATE     POSTAL CODE     COL       33096 REDWOOD HWY #65     O'BRIEN     OR     97534     U       ADDITIONAL SPACE FOR ITEM 4 (Collateral):     Collateral):     CITY     CITY     COL     COL	11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
33096 REDWOOD HWY #65O'BRIENOR97534UADDITIONAL SPACE FOR ITEM 4 (Collateral):	WALKER JOHNNIE M	
ADDITIONAL SPACE FOR ITEM 4 (Collateral):	MAILING ADDRESS CITY STATE POSTAL CODE	COUNTR
ADDITIONAL SPACE FOR ITEM 4 (Collateral):	33096 REDWOOD HWY #65 O'BRIEN OR 97534	US.
see attached documents		
	see attached documents	

13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STATEMENT:
REAL ESTATE RECORDS (if applicable)	covers timber to be cut covers as-extracted collateral Is filed as a fixture filing
15. Name and address of a RECORD OWNER of above-described real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate:
17. MISCELLANEOUS:	