

Notice of Liability

Employer: _____

Date: _____

Attention: _____

Job title: _____

Address: _____

Re: COVID-19 injections and other medical procedures recommended or administered to employees.

This is an official and personal Notice of Liability.

As my employer you are not my doctor or a medical expert, scientist (i.e., virologist, immunologist, or pathologist) and therefore, you are unlawfully demanding medical procedures, recommending, and/or using coercion and duress to insist employees submit to the experimental medical treatment for Covid-19, namely being injected with one of the experimental gene therapies commonly referred to as a “vaccine”, and further being tested via RT-PCR that has been proven to give up to 97% false positives as per the CDC/FDA or the newer medical test known as the “rapid test”.

To begin with, the emergency measures are based on the claim that we are experiencing a "public health emergency." There is no evidence to substantiate this claim. In fact, the evidence indicates that we are experiencing a rate of infection consistent with a normal influenza season.¹

The purported increase in “cases” is a direct consequence of increased testing through the inappropriate use of the RT-PCR instrument to diagnose so-called COVID-19. It has been well established that the RT-PCR test was never designed or intended as a diagnostic tool and is not an acceptable instrument to measure this so-called pandemic. Its inventor, Kary Mullis, has clearly indicated that the PCR testing device was never created to test for coronavirus.² Mullis warns that “the PCR Test can be used to find almost anything, in anybody. If you can amplify one single molecule, then you can find it because that molecule is nearly in every single person.”

In light of this warning, the current PCR test utilization, set at higher amplifications, is producing up to 97% false positives.³ Therefore, any imposed emergency measures that are based on PCR testing are unwarranted, unscientific, and quite possibly fraudulent. An international consortium of life science scientists has detected 10 major scientific flaws at the molecular and methodological level in a 3-peer review of the RT-PCR test to detect SARS-CoV-2.⁴

- In November 2020, a Portuguese court ruled that RT-PCR tests are unreliable.⁵
- On December 14, 2020, the WHO admitted the RT-PCR Test has a ‘problem’ at high amplifications as it detects dead cells from old viruses, giving a false positive.⁶
- Feb 16, 2021, BC Health Officer, Bonnie Henry, admitted RT-PCR tests are unreliable.⁷
- On April 8, 2021, the Austrian court ruled the RT-PCR was unsuited for COVID testing.⁸
- On April 8, 2021, a German Court ruled against RT-PCR testing stating, “the test cannot provide any information on whether a person is infected with an active pathogen or not, because the test cannot distinguish between “dead” matter and living matter.”⁹
- On May 8, 2021, the Swedish Public Health Agency stopped RT-PCR testing for the same reason.¹⁰
- On May 10th, 2021, Manitoba’s Chief Microbiologist and Laboratory Specialist, Dr. Jared Bullard testified under cross examination in a trial before the court of Queen's Bench in Manitoba, that RT-PCR test results do not verify infectiousness and were never intended to be used to diagnose respiratory illnesses.¹¹

¹ <https://standupcanada.solutions/declarations-of-emergency>

² <https://rumble.com/vhu4rz-kary-mullis-inventor-of-the-pcr-test.html>

³ <https://academic.oup.com/cid/advance-article/doi/10.1093/cid/ciaa1491/5912603>

⁴ <https://cormandrostenreview.com/report/>

⁵ <https://unitynewsnetwork.co.uk/portuguese-court-rules-pcr-tests-unreliable-quarantines-unlawful-media-blackout/>

⁶ <https://principia-scientific.com/who-finally-admits-covid19-pcr-test-has-a-problem/>

⁷ <https://rumble.com/vhww4d-bc-health-officer-admits-pcr-test-is-unreliable.html>

⁸ <https://greatgameindia.com/austria-court-pcr-test/>

⁹ <https://2020news.de/sensationsurteil-aus-weimar-keine-masken-kein-abstand-keine-tests-mehr-fuer-schueler/>

¹⁰ <https://tapnewswire.com/2021/05/sweden-stops-pcr-tests-as-covid19-diagnosis/>

¹¹ <https://www.jccf.ca/Manitoba-chief-microbiologist-and-laboratory-specialist-56-of-positive-cases-are-not-infectious/>

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

“After December 31, 2021, CDC will withdraw the request to the U.S. Food and Drug Administration (FDA) for Emergency Use Authorization (EUA) of the CDC 2019-Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel, the assay first introduced in February 2020 for detection of SARS-CoV-2 only. CDC is providing this advance notice for clinical laboratories to have adequate time to select and implement one of the many FDA-authorized alternatives.”¹²

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

“During the early months of the Coronavirus Disease 2019 (COVID-19) pandemic, clinical specimens [of the virus] were not readily available to developers of IVDs [in vitro diagnostics] to detect SARS-CoV-2. Therefore, the FDA authorized IVDs based on available data from contrived samples generated from a range of SARS-CoV-2 material sources (for example, gene specific RNA, synthetic RNA, or whole genome viral RNA) for analytical and clinical performance evaluation. While validation using these contrived specimens provided a measure of confidence in test performance at the beginning of the pandemic, it is not feasible to precisely compare the performance of various tests that used contrived specimens because each test validated performance using samples derived from different gene specific, synthetic, or genomic nucleic acid sources.”¹³

Based on this compelling and factual information, the emergency use of the COVID-19 experimental injection is not required or recommended.

From the CDC’s website:

Vaccine: A product that stimulates a person’s immune system to produce immunity to a specific disease, protecting the person from that disease.

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

Unlike some countries, immunization is not mandatory in Canada; it cannot be made mandatory because of the Canadian Constitution.¹⁴ Only three provinces have legislation or regulations under their health-protection acts to require proof of immunization for school entrance.

2. All the treatments being marketed as COVID-19 “vaccines”, are still in Phase III clinical trials until 2023,¹⁵ and hence, qualify as a medical experiment. People taking these treatments are enrolled as test-subjects and are further unaware that the injections are not actual vaccines as they do not contain a virus but instead an experimental gene therapy without informed consent.
3. None of these treatments have been fully approved; only granted emergency use authorization by the FDA, which Health Canada,^{16 17} is using as the basis for approval under the interim-order, therefore, fully informed consent is not possible;
4. Most vaccines are trialed for at least 5-10 years,¹⁸ and COVID-19 treatments have been in trials for one year;
5. No other coronavirus vaccine (i.e., MERS, SARS-1) has been approved for market, due to antibody-dependent enhancement resulting in severe illness and deaths in all animal models;¹⁹
6. Numerous doctors, scientists, and medical experts are issuing dire warnings about the short and long-term effects of COVID-19 injections, including, but not limited to death, blood clots, infertility, miscarriages, Bell’s Palsy, cancer, inflammatory conditions, autoimmune disease, early-onset dementia, convulsions, anaphylaxis, inflammation of the heart,²⁰ and antibody dependent enhancement leading to death; this includes children ages 12-17 years old.²¹

Dr. Byram Bridle, a pro-vaccine Associate Professor on Viral Immunology at the University of Guelph, gives a terrifying warning of the harms of the experimental treatments in a new peer reviewed scientifically published research study²² on COVID-19 shots. The added Spike Protein to the “vaccine”

¹² https://www.cdc.gov/csels/dls/locs/2021/07-21-2021-lab-alert-Changes_CDC_RT-PCR_SARS-CoV-2_Testing_1.html
¹³ <https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/sars-cov-2-reference-panel-comparative-data>
¹⁴ https://publications.gc.ca/collections/collection_2016/aspc-phac/HP3-1-23-S4-eng.pdf
¹⁵ <https://clinicaltrials.gov/ct2/show/NCT04368728>
¹⁶ <https://covid-vaccine.canada.ca/info/summary-basis-decision-detailTwo.html>
¹⁷ <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/drugs-vaccines-treatments/authorization/list-drugs.html>
¹⁸ <https://hillnotes.ca/2020/06/23/covid-19-vaccine-research-and-development/>
¹⁹ <https://www.tandfonline.com/doi/full/10.1080/21645515.2016.1177688>
²⁰ <https://www.nbcconnecticut.com/news/coronavirus/connecticut-confirms-at-least-18-cases-of-apparent-heart-problems-in-young-people-after-covid-19-vaccination/2494534/>
²¹ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>
²² <https://omny.fm/shows/on-point-with-alex-pierson/new-peer-reviewed-study-on-covid-19-vaccines-sugge>

gets into the blood, circulates through the blood in individuals over several days post-vaccination, it accumulates in the tissues such as the spleen, bone marrow, the liver, the adrenal glands, testes, and of great concern, it accumulates high concentrations into the ovaries. Dr. Bridle notes that they “have known for a long time that the Spike Protein is a pathogenic protein, it is a toxin, and can cause damage if it gets into blood circulation.” The study confirms the combination is causing clotting, neurological damage, bleeding, heart problems, etc. There is a high concentration of the Spike Protein getting into breast milk and reports of suckling infants developing bleeding disorders in the gastrointestinal tract. There are further warnings that this injection will render children infertile, and that people who have been vaccinated should NOT donate blood;

7. Minors are at nearly zero percent risk of contracting or transmitting this respiratory illness and are, instead, buffers which help others build their immune system. The overall survival rate of minors is 99.997%.²³ In spite of these facts, the government is pushing the experimental treatment with the tragic outcome of a high incidence of injury and death;
8. According to Health Canada's Summary Basis of Decision, updated May 20, 2021, the trials have not proven that the COVID-19 treatments prevent infection or transmission. The Summary also reports that both Moderna and Pfizer identified that there are six areas of missing (limited/no clinical data) information: “use in pediatric (age 0-18)”, “use in pregnant and breastfeeding women”, “long-term safety”, “long-term efficacy” including “real- world use”, “safety and immunogenicity in subjects with immune-suppression”, and concomitant administration of non-COVID vaccines.”

Under the Risk Management plan section of the Summary Basis of Decision,²⁴ it includes a statement based on clinical and non-clinical studies that “one important potential risk was identified being vaccine-associated enhanced disease, including VAERD (vaccine-associated enhanced respiratory disease).” In other words, *the shot increases the risk of disease and side-effects, and weakens immunity toward future SARS related illness.*

The report specifically states, “the possibility of vaccine-induced disease enhancement after vaccination against SARS-CoV-2 has been flagged as a potential safety concern that requires particular attention by the scientific community, including The World Health Organization (WHO), the Coalition for Epidemic Preparedness Innovations (CEPI) and the International Coalition of Medicines Regulatory Authorities (ICMRA);”²⁵

9. As reported in the United States to the Vaccine Adverse Events Reporting System (VAERS), there have been more deaths from the COVID-19 injections in five months (Dec. 2020 – May 2021) than deaths recorded in the last 23 years from all vaccines combined.²⁶

It is further reported that only one percent of vaccine injuries are reported to VAERS,²⁷ compounded by several months delay in uploading the adverse events to the VAERS database.²⁸

On May 21, 2021, VAERS data release (in the USA alone) showed 262,521 reports of adverse events following COVID-19 injections, including 4,406 deaths and 21,537 serious injuries, between December 14, 2020, and May 21, 2021, and that adverse injury reports among 12-17-year old’s more than tripled in one week.²⁹

Dr. McCullough, a highly cited Covid doctor, came to the stunning conclusion that the government was “...scrubbing unprecedented numbers of injection-related-deaths.” He further added, “...a typical new drug at about five deaths, unexplained deaths, we get a black-box warning, your listeners would see it on TV, saying it may cause death. And then at about 50 deaths it’s pulled off the market;”³⁰

10. Canada’s Adverse Events Following Immunization (AEFI) is a passive reporting system and is not widely promoted to the public, hence, many adverse events are going unreported;
11. **Safe and effective treatments and preventive measures exist for “COVID-19”, apart from the experimental shots yet the government is prohibiting their use.**^{31 32}

²³ <https://online.anyflip.com/inblw/ufbs/mobile/index.html?s=08>

²⁴ <https://covid-vaccine.canada.ca/info/summary-basis-decision-detailTwo.html>

²⁵ <https://www.tandfonline.com/doi/full/10.1080/14760584.2020.1800463>

²⁶ <https://vaccineimpact.com/2021/covid-shots-are-killing-and-crippling-teens-in-record-numbers-young-children-are-next/>

²⁷ https://www.lewrockwell.com/2019/10/no_author/harvard-medical-school-professors-uncover-a-hard-to-swallow-truth-about-vaccines/

²⁸ <https://vaxoutcomes.com/thelatestreport/>

²⁹ <https://childrenshealthdefense.org/defender/vaers-data-reports-injuries-12-to-17-year-olds-more-than-triple/>

³⁰ <https://leohohmann.com/2021/04/30/highly-cited-covid-doctor-comes-to-stunning-conclusion-govt-scrubbing-unprecedented-numbers-of-injection-related-deaths/>

³¹ <https://www.washingtonexaminer.com/news/study-finds-84-fewer-hospitalizations-for-patients-treated-with-controversial-drug-hydroxychloroquine>

³² <https://alethonews.com/2021/05/26/five-recently-published-randomized-controlled-trials-confirm-major-statistically-significant-benefits-of-ivermectin-against-covid-19/>

Domestically, in the seminal decision of *Hopp v Lepp*, [1980] 2 SCR 192,³³ the Supreme Court of Canada determined that cases of non-disclosure of risks and medical information fall under the law of negligence. Hopp also clarified the standard of informed consent and held that, even if a certain risk is only a slight possibility which ordinarily would not be disclosed, but which carries serious consequences, such as paralysis or death, the material risk must be revealed to the patient.

The duty of disclosure for informed consent is rooted in an individual's right to bodily integrity and respect for patient autonomy. In other words, a patient has the right to understand the consequences of medical treatment regardless of whether those consequences are deemed improbable, and have determined that, although medical opinion can be divided as to the level of disclosure required, the standard is simple, "A Reasonable Person Would Want to Know the Serious Risks, even if Remote." *Yule v. Parmley*, 1945;³⁴ *Hopp v. Lepp*, 1980; *Bryan v. Hicks*, 1995;³⁵ *R. v. Ewanchuk*, 1999.³⁶

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

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

Canadian Constitution³⁷ (1982) Section: 52.-(1) The Constitution of Canada is the supreme law of Canada, and any law that is inconsistent with the provisions of the Constitution is, to the extent of the inconsistency, of no force or effect.

Supreme Court of Canada rulings on "Informed Consent": *Yule v. Parmley*, 1945, *Hopp v. Lepp*, 1980, *R. v. Ewanchuk*, 1999

According to top constitutional lawyer, Rocco Galati, "both government and private businesses cannot impose mandatory vaccinations...mandatory vaccination in all employment context would be unconstitutional and/or illegal and unenforceable."³⁸

There is no legislation that allows an employer to terminate an employee for not getting a COVID-19 shot. If an employer does so, they are inviting a wrongful dismissal claim. For those employees who are influenced, pressured or coerced or put under duress by their employer to have the COVID-19 shot, and suffer any adverse consequences as a result of the injection, the employer, and its directors, officers, and those in positions carrying out these measures on behalf of the employer, will be opening themselves up to personal civil tort, and/or a criminal charge of Malfeasance.

In conclusion, administration of vaccines and testing is defined as a "medical procedure". In what other medical context could non-doctors and non-pharmacists prescribe, promote and help distribute pharmaceutical drugs? This is unauthorized practice of medicine.

Therefore, I hereby notify you that I will hold you personally liable for any financial injury and/or loss of my personal income and my ability to provide food and shelter for my family if you use duress, coercion or discrimination against me based on my decision not to participate in the COVID-19 experimental treatments.

Name: _____

Job Title: _____

Signature: _____

³³ <https://scc-csc.lexum.com/scc-csc/scc-csc/en/item/2553/index.do>

³⁴ <https://www.canlii.org/en/bc/bcca/doc/1945/1945canlii277/1945canlii277.html>

³⁵ <https://www.canlii.org/en/bc/bcca/doc/1995/1995canlii172/1995canlii172.html>

³⁶ <https://www.canlii.org/en/ca/scc/doc/1999/1999canlii711/1999canlii711.html>

³⁷ <https://www.canada.ca/en/canadian-heritage/services/how-rights-protected/guide-canadian-charter-rights-freedoms.html>

³⁸ <http://www.constitutionalrightscentre.ca/employee-rights-the-covid-19-vaccine/>