To Whom It May Concern:

I am writing this letter on behalf of my patient, for a medical exemption for the COVID-19 vaccines. The vaccine injections have Polyethylene glycol and SM102. Both substances have been deemed toxic to humans. *** is at risk for acute, intermediate, and long term adverse reactions that could be significantly debilitating due to his/her*** genetic medical history as well as his/her*** family history.

In addition, it is imperative to note that COVID-19 vaccines being dispensed have not received FDA approval. See https://www.fda.gov/media/150386/download. See footnote 10. The liability immunity extended to the pharmaceutical companies only extends protection to them under the emergency use authorization. It does not extend to medical professionals or mandates.

This exemption also applies to government employees, contractors and the military. Courts have stated that informed consent is required. https://biotech.law.lsu.edu/cases/vaccines/
Doe v Rumsfeld I.htm

Contrary to the news, the vaccine data now indicates risk to health and have only been granted emergency use authorizations. See https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization#vaccines. The adverse effects to the vaccines can be found here: https://waersanalysis.info/2021/10/01/vaers-summary-for-covid-19-

<u>vaccines-through-9-24-2021/</u> Vaers is the US system for reporting vaccine injuries. The global WHO reporting system is http://vigiaccess.org. The search term is COVID-19 vaccine.

The death rate for COVID-19 infections is not as extreme as has been portrayed nor is the percentage of fully vaccinated people as high as reported by the media. See https://covid.cdc.gov/covid-data-tracker/#vaccinations_vacc-people-onedose-pop-12yr. Although it has been reported that vaccines provide immunity for over one year, none of the COVID-19 injections which are currently available meet the criteria to be deemed vaccines. See effectiveness: https://www.cdc.gov/mmwr/volumes/70/wr/mm7038e1.htm vs. natural immunity: https://www.nih.gov/news-events/nih-research-matters/lasting-immunity-found-after-recovery-covid-19. Here is another study pertaining to the importance of informed consent: https://onlinelibrary.wiley.com/doi/10.1111/ijcp.13795.

mRNA technology has never been used in traditional vaccines and the long-term effects of this type of treatment are unknown. It is also unknown what other illnesses may manifest because of the immune response that these injections invoke.

In addition, there is no lawful authority for a private organization to force experimental treatments on its employees. OSHA has not mandated the vaccine as it requires a discussion period and temporary recommendations are not law and cannot override the legal requirements for informed consent and the exemptions. See https://www.osha.gov/coronavirus/standards. The President's executive order lists a therapeutic that is not

being used or produced for COVID-19 vaccines in the United States at this time. See: https://enidease-2019-vaccination-for-federal-employees/. See the FDA list of approved vaccines and the list of medications still under the emergency use authorization. They are not the same medication or therapeutic. Here is a lawsuit filed based on the bait and switch tactic used by the government to cause people to believe that the vaccine had received FDA approval: https://childrenshealthdefense.org/defender/childrenshealth-defense-sues-fda-pfizer-comirnaty-covid-vaccine/.

Forcing this experimental treatment and depriving people of informed consent is subjecting you and your organization to liability. As an agent of your business entity, you are individually and collectively responsible for preventing such liability.