

Family Financial Disclosure Form for Covid-19 Injections

THIS FORM HAS TWO PARTS:

PART 1 Pages 1-6	Introduction and references.
PART 2 Pages 7-16	Family Form to be completed by family member/s.

Disclaimer: This form is provided to facilitate effective family due diligence, communication, and planning. It is essential that each person and each family take responsibility to identify and access the information they believe to be most relevant to their situation and decisions, and take responsibility to assess and manage their individual and collective risk as they believe best.

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Family Financial Disclosure Form for Covid-19 Injections

Form for Employees Whose Employers Are Requiring Covid-19 Injections under
Emergency Use Authorization

Form for Students Attending Colleges or Universities Requiring Covid-19 Injections
under Emergency Use Authorization

Notice and Declaration of Parental Authority Requirement of Disclosure and Safety
of Medical Treatment/s

Available from: solari.com/forms

INTRODUCTION

The goal of this Family Financial Disclosure Form is to ensure that an adverse event or death of one family member does not translate into long-lived or permanent financial destruction for the entire family.

This form was created to assist families to communicate regarding and to prepare for the family-wide financial impact of adverse events, if any, resulting from a Covid-19 injection. Reported adverse events following Covid-19 injections include: death, anaphylaxis, blood clots and related complications, leaky blood vessels and related complications, heart problems (myocarditis and pericarditis), neurological disorders, autoimmune disorders, other chronic and inflammatory conditions, blindness and deafness, infertility, fetal damage, miscarriage and stillbirth, and Covid-19.

Traditionally, informed consent forms for vaccination do not provide disclosure or statistics related to financial costs of possible injury, disability, or death, nor do they discuss the impact on family time, resources, health, and wealth—impacts that may include reduced career potential, divorce, or effects on the education and future plans of other family members.

Consequently, it is essential that prior to receiving a Covid-19 injection, parents and family members with financial responsibility for children and spouses not only do thorough due diligence—providing adequate disclosures to their families regarding the potential costs to family members of adverse events or death—but also take steps to protect themselves and family members from the material adverse financial consequences of an adverse event or death.

■ Overview of Covid-19 Injections

Experimental Covid-19 injections are currently administered under “emergency use authorization” (United States), “conditional marketing authorization” (European Union), “provisional approval” (Australia and New Zealand), and similar emergency provisions in other countries. National regulatory agencies granted the authorizations following abbreviated clinical trials and without long-term safety testing.

In the U.S., three injections have emergency use status: the messenger RNA (mRNA) injections developed by (1) Pfizer with German partner BioNTech and (2) biotechnology firm Moderna in partnership with the National Institute of Allergy and Infectious Diseases (NIAID) and (3) the adenovirus-vectored injection made by Janssen, a Johnson & Johnson (J&J) subsidiary. None has, as yet, received full approval, but the Food and Drug Administration (FDA) declares it is “pulling out all the stops” to fully approve the Pfizer/BioNTech injection by early September 2021.¹ Moderna and J&J are also preparing to seek full approval.

Outside the U.S., many OECD countries have also “conditionally” authorized the Oxford/AstraZeneca injection, which, like J&J’s shot, uses an adenovirus vector. The World Health Organization lists all four injections (plus China’s Sinopharm) for emergency use globally.

Though marketed as “vaccines,” both types of Covid-19 injections (mRNA and adenovirus) are experimental gene therapy. All four injections share the same end goal of getting genetic instructions into a person’s cells and “tricking” the cells into making coronavirus spike protein.

mRNA injections: Vaccine developers openly describe the never-before-authorized mRNA approach as a means of “programming a person’s cells”² or (using Moderna’s terminology) deploying new “software.”³ From their inception, mRNA injections have displayed an intrinsic inflammatory component.⁴ Both mRNA injections use lipid nanoparticles (LNPs) as an in-built “gene delivery” or “carrier” system that transports synthetic mRNA into the cytoplasm; the LNPs not only shield the mRNA and promote cellular uptake but also function as adjuvants, “revving up” the immune system. The LNPs are coated with polyethylene glycol (PEG), a controversial polymer—synthetic and nondegradable—associated with adverse immune responses. Moderna has acknowledged that the LNPs “could lead to significant adverse events,”⁵ and FDA has identified PEG as the likely culprit responsible for anaphylactic reactions.⁶

The expert group Doctors for COVID Ethics cites existing pharmacokinetic evidence and warns that the mRNA injections can be expected to cause blood clotting, grave harm to female fertility and to breastfed infants, and cumulative toxicity after multiple injections.⁷ Immunologist Bart Classen—who cautions that adverse events can occur several years after vaccination—is concerned that the mRNA injections could create new mechanisms of harm as well as prion-like neurodegenerative diseases like Parkinson’s.⁸ Since the injections’ U.S. debut, thousands of Americans have reported serious reactions.⁹

Adenovirus vector injections: Instead of mRNA, the J&J and AstraZeneca injections use genetically modified common cold viruses as a Trojan horse to “shuttle” spike protein DNA (genetic instructions) into the cells. Studied for several decades, adenovirus-vectored injections have a “checkered past” as a “failed gene therapy.”¹⁰ In late 2019, FDA approved an adenovirus-vectored Ebola vaccine, and the technology has also been deployed in experimental Zika and HIV vaccines,¹¹ but J&J’s Covid-19 injection is the first to be authorized (on an emergency basis) for general population use.¹² Both the J&J and AstraZeneca injections contain polysorbate 80, which is structurally similar to PEG and has been associated with hypersensitivity reactions, including anaphylaxis.¹³ Adverse event reports following J&J injections have forced FDA to issue warnings about potentially fatal blood clots and Guillain-Barré syndrome (GBS), a condition involving peripheral nerve damage.¹⁴ Many individuals have also reported blood clots following AstraZeneca injections. The Oxford/AstraZeneca research team had to call several time-outs during clinical trials after trial participants developed transverse myelitis, a condition, like GBS, that produces nerve damage.¹⁵ Two-thirds who experience transverse myelitis remain permanently disabled; 4% to 7% of those who develop GBS die.

■ Adverse Event Reporting and Databases

In the months since the Covid-19 injections' rollout, national databases in the U.S. and Europe have received tens of thousands of reports of adverse events.¹⁶ These numbers are sure to vastly undercount vaccine injuries because both are “passive” reporting systems (i.e., systems that rely on the willingness and ability of injured individuals and health care professionals to submit reports). The following is a selected list of databases that make adverse event reports available to the public:

Vaccine Adverse Event Reporting System (VAERS), Department of Health and Human Services (U.S.)

VAERS is a voluntary reporting system co-administered by the CDC and FDA. Dr. Sherri Tenpenny estimates that VAERS data represent approximately 10% of actual adverse events. A Harvard study commissioned in 2010 by the federal government produced an even lower estimate, concluding that less than 1% of adverse events get reported.¹⁷ It has been estimated that VAERS is about nine weeks behind in publishing adverse events reported following Covid-19 injections.¹⁸

VAERS reports are accessible through the CDC Wonder search engine or through the more user-friendly MedAlerts search engine maintained by the National Vaccine Information Center (NVIC). MedAlerts also offers more powerful search capabilities and more extensive reporting.

<https://vaers.hhs.gov>

<https://wonder.cdc.gov/vaers.html>

<https://www.medalerts.org/>

EudraVigilance (27 European countries), European Medicines Agency

The European Medicines Agency maintains a database of suspected adverse drug reactions accessible to the general public (see box for “Healthcare professionals, patients and the general public”). Under the letter “C,” reports can be generated for the various Covid-19 injections.

<https://www.ema.europa.eu/en/human-regulatory/research-development/pharmacovigilance/eudravigilance/access-eudravigilance-data>

VaxxTracker

VaxxTracker offers “a safe place to report negative side-effects” of Covid-19 injections and “acts independently from all government, pharmaceutical, or lobbying groups.” Currently, about 80% of all records on the site are imported from VAERS, while the remainder are entered directly by physicians and the public. The site's Covid-19 statistics page groups adverse events into about 20 different categories.

<https://www.vaxxtracker.com/VaxStatistics.aspx>

UK Medical Freedom Alliance (UKMFA) (global)

The UKMFA publishes a physician-compiled weekly round-up of COVID-19 vaccine safety reports and news. See “Vaccine Safety Update Weekly Reports – The Daily Sceptic” and “UKMFA Collated Data – Adverse Reactions Summary document” (the latter collates media reports of adverse events from around the world and is regularly updated).

<https://www.ukmedfreedom.org/resources/covid-19-vaccine-info>

Additional Sources of Adverse Event Information and Data

Children’s Health Defense: <https://childrenshealthdefense.org/>

OpenVAERS: <https://www.openvaers.com/covid-data>

The COVID Blog: <https://thecovidblog.com/>

Vaccine Impact News: <https://vaccineimpact.com/>

■ Medical/Scientific Resources

Comprehensive, high-integrity medical and scientific information, including briefs and reports summarizing what is known about the risks of Covid-19 injections and adverse events, is available (and routinely updated) at the following websites:

America’s Frontline Doctors (AFLDS): AFLDS’ website includes information about Covid-19 treatments, “issue briefs” on post-vaccination complications and other topics, and numerous other resources.

<https://americasfrontlinedoctors.org/>

Doctors for COVID Ethics (D4CE): Among the excellent resources provided by this group of doctors and scientists from 30 countries are “Letter to physicians: Four new scientific discoveries regarding the safety and efficacy of COVID-19 vaccines,” which warns that “all physicians must reconsider the ethical issues surrounding COVID-19 vaccination,” and a 23-page Expert Statement outlining the serious risks of the Pfizer injection (European brand name Comirnaty) in children.

<https://doctors4covidethics.org/>

Children’s Health Defense (CHD): In addition to reporting on vaccine safety topics via its flagship online news outlet *The Defender*, CHD offers a “Fighting COVID Mandates” toolkit and related resources, a series of eBooks (including eBooks on vaccine mandates and protection of individual rights), a research library, and a “Community Corner.”

<https://childrenshealthdefense.org/>

■ Notes to the Introduction

1. <https://www.politico.com/news/2021/08/04/fda-approval-pfizer-vaccine-coronavirus-502397>
2. See “COVID-19 vaccine candidates show gene therapy is a viable strategy.” American Society of Gene + Cell Therapy, November 17, 2020. <https://www.asgct.org/research/news/november-2020/covid-19-moderna-nih-vaccine>
3. <https://www.modernatx.com/about-us>
4. <https://www.nature.com/articles/s41541-020-0159-8>
5. <https://childrenshealthdefense.org/news/components-of-mrna-technology-could-lead-to-significant-adverse-events-in-one-or-more-of-our-clinical-trials-says-moderna/>
6. <https://thehill.com/policy/healthcare/530966-fda-investigating-allergic-reactions-to-pfizer-vaccine-reported-in-multiple>
7. See Michael Palmer and Sucharit Bhakdi, “The Pfizer mRNA vaccine: pharmacokinetics and toxicity,” Doctors for COVID Ethics, July 23, 2021. <https://doctors4covidethics.org/the-pfizer-mrna-vaccine-pharmacokinetics-and-toxicity/>
8. See <https://scivisionpub.com/pdfs/covid19-rna-based-vaccines-and-the-risk-of-prion-disease-1503.pdf> and <https://scivisionpub.com/pdfs/covid19-vaccine-associated-parkinsons-disease-a-prion-disease-signal-in-the-uk-yellow-card-adverse-event-database-1746.pdf>
9. See, for example, <https://childrenshealthdefense.org/defender/doctors-ethics-halt-pfizer-covid-vaccines-adolescents/> and <https://childrenshealthdefense.org/defender/rfk-jr-the-defender-podcast-dr-charles-hoffe-adverse-health-effects-covid-vaccine/>
10. <https://cen.acs.org/pharmaceuticals/vaccines/Adenoviral-vectors-new-COVID-19/98/i19>
11. See Buchbinder et al., “Use of adenovirus type-5 vectored vaccines: a cautionary tale,” published in *The Lancet* in October 2020: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)32156-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)32156-5/fulltext)
12. <https://news.ncsu.edu/2020/12/vaccines-koci-101/>
13. See <https://childrenshealthdefense.org/defender/inactive-ingredients-covid-vaccines-allergic-reactions/>
14. See <https://childrenshealthdefense.org/defender/fda-warning-jj-vaccine-serious-rare-autoimmune-disorder/>
15. <https://childrenshealthdefense.org/news/the-intertwined-history-of-myelitis-and-vaccines/>
16. As of July 23, 2021, well over half a million adverse events (n=518,770) had been reported to VAERS (including “foreign reports” estimated to be 10% of the total); these include nearly 12,000 deaths, 20% of which occurred within 48 hours of injection (see <https://childrenshealthdefense.org/defender/vaers-cdc-vaccinated-spread-covid-serious-vaccines-injuries-surge/>). Through July, injury reports published by EudraVigilance for 27 European countries had reached nearly two million (n=1,960,607), including 20,525 deaths (see <https://healthimpactnews.com/2021/20595-dead-1-9-million-injured-50-serious-reported-in-european-unions-database-of-adverse-drug-reactions-for-covid-19-shots/>). See also, <https://doctors4covidethics.org/us-adverse-events-by-symptom-across-vaccines/>
17. <https://digital.ahrq.gov/sites/default/files/docs/publication/r18hs017045-lazarus-final-report-2011.pdf>
18. See VAERS Analysis, June 23, 2021, <https://vaersanalysis.info/2021/06/23/what-is-the-backlog-in-terms-of-time-for-the-publishing-of-vaers-records-for-covid-19-vaccines/>

Family Financial Disclosure Form for Covid-19 Injections

FROM: [ADULT FAMILY MEMBER]

TO: [ADULT SPOUSE AND CHILDREN]

DUE DILIGENCE

I have completed my due diligence on the Covid-19 injection that I propose to take.

1. I have reviewed the available **databases provided of material adverse events** from Covid-19 injections, including deaths reported to date by people who have received these injections.
2. I understand that this Covid-19 injection is being distributed under an **emergency use authorization** and that it has not been approved by [FDA/national regulatory agency].
3. I understand that this Covid-19 injection is **made by**:
 - Moderna**: a company that in 10 years had never brought a single product to market prior to the coronavirus vaccine¹
 - Pfizer**: a company with a demonstrated history of enforcement settlements for fraudulent marketing²
 - Johnson & Johnson**: a company with a lengthy record of health care fraud facing billions in payouts for marketing baby powder known for decades to be tainted with cancer-causing asbestos³
 - AstraZeneca**: a company that illegally marketed an anti-psychotic drug to children and the elderly, paying one of the top 10 pharmaceutical company settlements ever⁴
4. I understand that this Covid-19 injection is an experimental **gene therapy**.
5. I understand that the injection has only been designed to protect against **moderate symptoms** of Covid-19 and that it may not protect me from more severe symptoms.⁵
6. I understand that by agreeing to this injection, I may be required to take further Covid-19 injections as indicated by the manufacturer's protocol or requirements, including potential **"booster shots."**⁶

7. I understand that this Covid-19 injection is not designed to address **mutating versions** or additional variants of the coronavirus.

8. I have attached a copy of the **manufacturer's fact sheet** [traditionally called a package insert] of the Covid-19 injection that describes the ingredients and potential material adverse events, and I am willing, able, and available to review and explain it to you.

Moderna: <https://www.fda.gov/media/144638/download>

Pfizer: <https://www.fda.gov/media/144414/download>

Johnson & Johnson: <https://www.janssenlabels.com/emergency-use-authorization/Janssen+COVID-19+Vaccine-HCP-fact-sheet.pdf>

AstraZeneca: <https://www.gov.uk/government/publications/regulatory-approval-of-covid-19-vaccine-astrazeneca/information-for-uk-recipients-on-covid-19-vaccine-astrazeneca>

9. I understand that because some of the **ingredients** of these Covid-19 injections are proprietary and may, therefore, be secret, the ingredients listed in the manufacturers' fact sheets may be incomplete. I also understand that prior research on other vaccines has demonstrated the presence of nanoparticles, heavy metals, fetal tissue, and other substances not disclosed (or not fully disclosed) in "vaccinations."⁷

10. [*U.S. only*]: I understand that under the 2005 PREP [Public Readiness and Emergency Preparedness] Act (for emergency use authorization vaccines) and the 1986 National Childhood Vaccine Injury Act (for fully approved vaccines), it will be difficult if not impossible to hold the **manufacturer** of this Covid-19 injection financially or otherwise responsible for any damage to my health or death resulting from this injection.

11. [*Non-U.S.*]: I have reviewed the policies or agreements in place in my country regarding indemnification and compensation; I understand that depending on these policies or agreements, it may be difficult if not impossible to hold the **manufacturer** of this Covid-19 injection financially or otherwise responsible for any damage to my health or for death resulting from this injection.

12. I understand that it will be difficult if not impossible to hold the **health institutions, doctors, and nurses** that distributed this Covid-19 injection to me financially or otherwise responsible for any damage to my health or for my death.

13. I understand that it will be difficult if not impossible to hold **federal, state, and local health care officials and regulators** financially or otherwise responsible for any damage to my health from the Covid-19 injection or for my death.

14. I understand, therefore, as a practical matter that I and my closest relatives will experience and shoulder the **full cost in terms of time and money** of any financial adverse impact of a material adverse event resulting from my taking this Covid-19 injection.

For Families Planning on Having Additional Children

15. I understand that this Covid-19 injection has the potential to alter my DNA in ways that no one yet understands and that this injection could alter the DNA of my **unborn children** or any woman who carries my unborn children.
16. [*Pfizer and Moderna injections*]: I understand that knowledgeable experts have shared serious concerns in a petition filed with the European Medicines Agency that components of the mRNA injections could trigger an immune reaction against syncytin-1, a protein responsible for development of the placenta and essential for a successful pregnancy, resulting in **potential infertility**.⁸
17. [*Johnson & Johnson injection*]: I understand that this injection is produced in genetically modified human embryonic retinal cells (PER.C6 TetR) and that the presence of **fetal DNA fragment contaminants** in injections has been linked to autism spectrum disorder.⁹
18. [*AstraZeneca injection*]: I understand that this injection is produced in genetically modified **human embryonic kidney cells** (HEK 293).¹⁰
19. My spouse has agreed to assume the risks of such alterations of my DNA and any impact it may have on our **ability to have children** or on our unborn children.

Material Adverse Events

20. I understand and have reviewed the material adverse events reported in connection with the Covid-19 injections. **Known adverse events** include death, anaphylaxis, blood clots and related complications, leaky blood vessels and related complications, heart problems (myocarditis and pericarditis), neurological disorders, autoimmune disorders, other chronic and inflammatory conditions, blindness and deafness, infertility, fetal damage, miscarriage and stillbirth, and Covid-19.

Reasons for Taking Injection

21. I understand that, according to estimates by international researchers, Covid-19 has an estimated **statistical probability of death** of 0.002% at age 10, 0.01% at age 25, 0.4% at age 55, 1.4% at age 65, 4.6% at age 75, and 15% at age 85.¹¹
22. I also understand that there are multiple, low-cost, non-injection therapeutic **drug protocols for early intervention and prophylaxis** that have a high rate of success in helping defend against or recover from Covid-19.¹²
23. Nevertheless, I want to take these Covid-19 injections. The **reason(s)** why is (are):

HEALTH CARE

24. Due to the difficulties of accessing the appropriate **care in an emergency**,¹³ I have identified and arranged health care providers who will be available on a timely basis in the event of a material adverse event from the Covid-19 injection:

Material Adverse Event	Health Care Provider
Anaphylaxis	
Blood clots and related complications	
Leaky blood vessels and related complications	
Heart problems (e.g., myocarditis, pericarditis)	
Neurological disorders	
Autoimmune disorders	
Other chronic/inflammatory conditions	
Blindness or deafness	
Infertility, fetal damage, miscarriage or stillbirth [women only]	
Covid-19	
Other (please specify)	

HEALTH CARE PROXY

25. I have filled out the Aging with Dignity form and **planning process** (<https://agingwithdignity.org>) and have provided a Health Care Proxy to you along with detailed instructions on resuscitation and extreme measures at end of life.
26. I have reviewed this form with the following people who have authority in my **Health Care Proxy** and have agreed to assume responsibility in the event of a material adverse event or death resulting from the Covid-19 injection:

PERSON 1: _____

PERSON 2: _____

PERSON 3: _____

INSURANCE

27. In the event of a material adverse event from Covid-19 injection, my **health care insurance** will cover will not cover all health care and hospitalization expenses.¹⁴
28. My insurance broker has confirmed that page ____ of my _____ policy states that taking an experimental or emergency-use Covid-19 injection: will impact will not impact my insurance coverage.
29. In the event that I am unable to work for a period of time or lose my job, profession, or business, my **disability insurance** will cover the following amounts for ____ months/years:¹⁵
- _____
- _____
30. I have reviewed my decision with my insurance broker and **additional health care and disability or other insurance** is available is not available to cover any material adverse event from a Covid-19 injection on the following basis:
- _____
- _____
31. In the event of my death, my **life insurance** will provide the following protection to you:
- _____
- _____
32. I have reviewed my decision with my insurance broker and **additional life insurance** is available is not available to cover any material adverse event or death on the following basis:¹⁶
- _____
- _____
- _____
33. I have provided sufficient time and resources for my family and I to arrange for **other available insurance** that my family members and I believe are prudent.

FINANCIAL INVESTMENT

Loss of Income

34. In the event of a material adverse event from Covid-19 injections, the potential range in the **loss of income** is estimated to be [provide range if unable to work for 1 year, 5 years, or permanently]:

Material Adverse Event	Loss of Income (range)
Anaphylaxis	
Blood clots and related complications	
Leaky blood vessels and related complications	
Heart problems (e.g., myocarditis, pericarditis)	
Neurological disorders	
Autoimmune disorders	
Other chronic/inflammatory conditions ¹⁷	
Blindness or deafness	
Infertility, fetal damage, miscarriage or stillbirth [women only]	
Covid-19	
Other (please specify)	
Death	

Health Care Expenses

35. In the event of a material adverse event from Covid-19 injections, the potential range of **health care expenses** not covered by our health care insurance is estimated to be *[estimate potential expenses for 1 year, 5 years, or long-term]*:

Material Adverse Event	Health Care Expenses (range)
Anaphylaxis	
Blood clots and related complications	
Leaky blood vessels and related complications	
Heart problems (e.g., myocarditis, pericarditis)	
Neurological disorders	
Autoimmune disorders	
Other chronic/inflammatory conditions ¹⁸	

Blindness or deafness	
Infertility, fetal damage, miscarriage or stillbirth [women only]	
Covid-19	
Other (please specify)	
Death	

Long-Term Care

36. If a material adverse event from a Covid-19 injection results in the need for **long-term care**, this is how I propose to arrange such care and fund it:

Investment of Family Time

37. In the event of a material adverse event from a Covid-19 injection, here is the time I would request from my **family or professional caregivers** paid by my family to assist me:

Material Adverse Event	Time Requested
Anaphylaxis	
Blood clots and related complications	
Leaky blood vessels and related complications	
Heart problems (e.g., myocarditis, pericarditis)	
Neurological disorders	
Autoimmune disorders	
Other chronic/inflammatory conditions	
Blindness or deafness	
Infertility, fetal damage, miscarriage or stillbirth [women only]	
Covid-19	

Other (please specify)	
Death	

Proposed Sources of Financial Support

38. If a material adverse event from a Covid-19 injection results in **adverse financial events**—loss of income and/or increased expenses—these are my estimates of costs and my arrangements to fund them:

Material Adverse Event	Estimated Costs and My Plan to Cover Them
Anaphylaxis	
Blood clots and related complications	
Leaky blood vessels and related complications	
Heart problems (e.g., myocarditis, pericarditis)	
Neurological disorders	
Autoimmune disorders	
Other chronic/inflammatory conditions ¹⁹	
Blindness or deafness	
Infertility, fetal damage, miscarriage or stillbirth [women only]	
Covid-19	
Other (please specify)	
Death	

DEATH

39. In the event of my death from a Covid-19 injection, I have finalized an **estate plan**, have reviewed it with my attorney and executor, and have provided instructions for my funeral and disposition of my remains as follows:

FAMILY REVIEW

40. Having completed my **due diligence** on the Covid-19 injection and having made my decision to proceed, I am available to review my findings and arrangements with my family.

I am responsible for my health care choices and am committed to taking responsibility for the true costs of my choices and their impact on those I love and not shifting these costs and risks to them without their full knowledge, due diligence, and consent. Please let me know when you would like to review and discuss.

Your loving [spouse/parent]

SIGNED: _____

DATE: _____

■ Notes to the Form

1. See Motley Fool's three "red flags": <https://www.fool.com/investing/2020/08/29/3-red-flags-for-modernas-potential-coronavirus-vac/>. In the company's briefing document reviewed by FDA (<https://www.fda.gov/media/144452/download>, page 15, tables 7 and 8), Moderna refers to a *23.9%* rate of adverse events. Among the 15,185 people in the study, there were 3,632 adverse events in the first 28 days, statistics that do not include the longer-term effects of DNA modification, infertility, autoimmunity, etc.
2. See "Softball Pfizer vaccine rollout interview goes horribly wrong," <https://www.youtube.com/watch?v=LMAZJtOdYNI>
3. See, for example, <https://www.cbsnews.com/news/johnson-johnson-to-pay-22b-in-us-health-care-fraud-settlement/> and <https://markets.businessinsider.com/news/stocks/johnson-johnson-sets-aside-3-9-bln-for-baby-powder-verdict-settlements-1030109923?op=1>
4. See <https://www.enjuris.com/blog/resources/largest-pharmaceutical-settlements-lawsuits/>
5. See Peter Doshi and Eric Topol, "These coronavirus trials don't answer the one question we need to know. We may not find out whether the vaccines prevent moderate or severe cases of Covid-19." *The New York Times*, September 22, 2020. <https://www.nytimes.com/2020/09/22/opinion/covid-vaccine-coronavirus.html>
6. See <https://childrenshealthdefense.org/defender/pfizer-ceo-annual-vaccine-covid/>. Israel is now giving booster shots to already vaccinated people over age 60, and Germany and France are planning to do the same (see <https://news.yahoo.com/french-president-macron-third-covid-080543489.html>).
7. In 2017, Italian researchers reviewed the ingredients of 44 types of so-called "vaccines." They discovered heavy metal debris and biological contamination in every human vaccine they tested. They stated, "The quantity of foreign bodies detected and, in some cases, their unusual chemical compositions baffled us." They then drew the obvious conclusion, namely, that because the micro- and nanocontaminants were "neither biocompatible nor biodegradable," they were "biopersistent" and could cause inflammatory effects right away—or later. From Catherine Austin Fitts, "The Injection

- Fraud: It's Not a Vaccine," <https://childrenshealthdefense.org/news/editorial/the-injection-fraud-its-not-a-vaccine/>. In separate analyses of aborted fetal cell lines in "vaccines," investigators have identified abnormal human DNA, including genes associated with cancer, in all samples analyzed in quantities "up to 300 times higher than the limit imposed by the [European Medicines Agency] for carcinogenic DNA." From Corvelva, "New data shows DNA from aborted fetal cell lines in vaccines," <https://childrenshealthdefense.org/news/new-data-shows-aborted-fetal-cells-in-vaccines/>
8. https://dryburgh.com/wp-content/uploads/2020/12/Wodarg_Yeadon_EMA_Petition_Pfizer_Trial_FINAL_01DEC2020_signed_with_Exhibits_geschwarz.pdf
 9. See Deisher et al., "Epidemiologic and molecular relationship between vaccine manufacture and autism spectrum disorder prevalence," <https://pubmed.ncbi.nlm.nih.gov/26103708/>
 10. See <https://vk.ovg.ox.ac.uk/vk/covid-19-vaccines>
 11. See Levin et al., "Assessing the age specificity of infection fatality rates for COVID-19: systematic review, meta-analysis, and public policy implications," <https://pubmed.ncbi.nlm.nih.gov/33289900/>. See CDC statistics here: https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm#SexAndAge. Additional sources of statistics can be found at Swiss Policy Research (<https://swprs.org/facts-about-covid-19/>) and Children's Health Defense (<https://childrenshealthdefense.org>)
 12. For treatment protocols, see, for example, <https://americasfrontlinedoctors.org/treatments/hydroxychloroquine/treatment-protocols/> and <https://swprs.org/on-the-treatment-of-covid-19/>
 13. On the grounds that the injections are not formally licensed, many health care providers are refusing service to individuals injured by the Covid-19 injections, and health and life insurance companies are declining coverage for vaccine-related injuries and deaths. See "Del Bigtree interviews 3 medical professionals incapacitated by Covid injections," *The Highwire*, April 29, 2021. <https://www.bitchute.com/video/A4d8FB2cIBTc/>
 14. See footnote #13.
 15. See footnote #13.
 16. See "If you die from Coronavirus 'vaccine,' your life insurance won't pay as it's an 'experimental medical intervention,'" <https://tapnewswire.com/2021/03/if-you-die-from-vaccine-your-life-insurance-wont-pay-as-its-an-experimental-vaccine/>
 17. In a panel for a screening of the film *Vaxxed*, one U.S. mother claimed that a seriously vaccine-injured child would cost \$5 million present value over their lifetime. A WHO report (https://apps.who.int/gb/ebwha/pdf_files/WHA67/A67_17-en.pdf) dated March 21, 2014 stated: "Initial data from studies in the United Kingdom of Great Britain and Northern Ireland and the United States of America indicate that estimated lifetime costs of caring for individuals with autism spectrum disorders lie between US\$ 1.4 million and US\$ 2.4 million per case according to the level of intellectual impairment" (page 2, item 11). The WHO report added that "The reduction in family earnings due to the need to provide care for family members with autism spectrum disorders compounds the problem." A 2015 study by University of California–Davis health economists estimated that autism's annual costs in the U.S. could reach \$500 billion—and potentially \$1 trillion—by 2025: <https://www.universityofcalifornia.edu/news/autisms-costs-estimated-be-500-billion-potentially-1-trillion-2025>
 18. See footnote #17.
 19. See footnote #17.