Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I write regarding the matter of masks, Coronavirus testing, COVID-19 vaccine mandates, and my desire to be fully informed and appraised of ALL facts before going ahead. I’d be most grateful if you could please provide the following information, in accordance with statutory legal requirements:

1. Can you please advise me of the approved legal status of vaccines, masks, Coronavirus testing and if they are experimental?

2. Can you please provide details and assurances that vaccines, masks, and Coronavirus tests have been fully, independently, and rigorously tested against control groups and the subsequent outcomes of those tests?

3. Can you please advise of the full list of contents of the vaccine I am to receive and if any are toxic to the body?

4. Can you please fully advise of all the adverse reactions and risks associated with vaccines, masks, and coronavirus testing since their introduction or use?

5. Can you please confirm that the vaccine you are advocating is NOT ‘experimental mRNA gene altering therapy’?

6. Can you please confirm that I will not be under any duress from yourselves as my employers, in compliance with the Nuremberg Code?

7. Can you please advise me of the likely risk of fatality associated with the vaccines, should I be unfortunate to contract COVID-19 and the likelihood of recovery?

8. Can you please provide me with the information that details the isolation of the COVID-19 virus for which the vaccines are based upon?

9. Can you please provide details and assurances that masks are highly effective at preventing the spread of airborne diseases and that the health benefits to wearing a mask for prolonged periods of time outweigh the health risks?

10. Because you are asking me to wear a mask at all time, can you please provide me with information on how many people have gotten COVID-19 through asymptomatic spread and the data that supports the spread of the coronavirus during the pandemic via asymptomatic spread?

11. Can you please provide details on the accuracy of Coronavirus testing in determining sickness and discriminating between the flu, pneumonia, Coronavirus, and other viruses?

Once I have received the above information in full and I am satisfied that there is no threat to my health, I will be happy to either accept the vaccine, wear a mask and/or be tested as indicated, but with certain conditions - namely that:

1. You confirm that I will suffer no harm.

2. Following acceptance of this, the offer must be signed by a fully qualified doctor who will take full legal and financial responsibility for any injuries occurring to myself, and/or from any interactions by authorized personnel regarding these procedures.

If I should have to decline the offer of vaccination and/or the wearing of a mask, and Coronavirus testing because the health risks outweigh the benefits, please confirm that it will not compromise my position, I will not suffer prejudice, discrimination, or retaliatory disciplinary action and that I will not endure any more pressure to follow these mandates/guidelines.

I would also advise that my inalienable rights are reserved.

I would greatly appreciate your prompt written acknowledgement of my concerns within seven business days of receipt of this letter.

Thank you for your time.

Sincerely,