

NOTICE OF EMPLOYEE EXEMPTION FROM ANY AND ALL VACCINES

To all owners, CEOs, administrators, medical staff, employees, and legal department of _____

This is to inform all parties that _____ is now and forever exempt from all vaccines.

We are aware that some businesses and agencies may be unilaterally attempting to coerce employees with an arbitrary new vaccine requirement. This is to inform all parties that such unlawful and unsupported regulation will not be tolerated.

There are currently no laws, either state or federal, requiring mandatory vaccines for adults. No business, corporation, or agency can invent its own rules on vaccines that would have the force of law for their employees.

The decision to vaccinate or not - is a matter of religious and medical freedom, specifically covered under federal, state, and international law.

Any demand for disclosure of private medical records is a flagrant violation of federal HIPAA laws. Any attempt to force vaccines clearly violates the Fourth Amendment - the right of the people to be secure in their persons.

Every state can mandate a recommended schedule for school children. All states but two have exemption forms – religious or philosophical. But no state has laws that can force vaccines on unwilling adults.

In international law, defined at Nuremberg, the principle of **Informed Consent** protects everyone from experimental medical procedures. EUA status may be the very definition of experimental.

No other forms are required in this matter.

If these express instructions are violated at any time, this is Fair Warning that every available resource will be brought to prosecute the perpetrators for physical assault, Bill of Rights violations and any other charges counsel might deem applicable, to the fullest extent. This may include disclosure to social networks.

No bullying or intimidation tactics against the unvaccinated will be tolerated.

Furthermore the undersigned will not to be fired, harassed, insulted, assaulted, profiled, proscribed on any list – public or private, threatened or intimidated in any way, for their personal choice of medical treatment. The undersigned have thoroughly informed themselves about the issue and will not give way. They will not discuss it, debate it, or be questioned by anyone.

As with all medical records, we expect this exemption to be kept **strictly confidential** from any personnel, parties, or databases. There are specified penalties for such federal HIPAA violations.

Signed _____ print name _____
date _____ Notary: _____

Sent by certified mail to the Legal Department of _____

cc: _____, Esq