

# LEGAL NOTICE

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

By authority of the Nuremberg Code on Medical Experimentation, I do hereby exercise my right to refuse to submit to or to administer the Covid 19 experimental gene therapy injection heretofore known as the "Covid 19 Vaccine."

The United States Government has extraterritorially prosecuted, convicted and executed Medical Doctors who have violated the Nuremberg Code on Medical Experimentation. Aiders and abettors of Nuremberg Crimes are equally guilty and have also been prosecuted, convicted and executed.

Every court of law in any location has original jurisdiction (Universal) to hear and try Crimes Against Humanity; and violations of the Nuremberg Code are classified as Crimes Against Humanity, which carry a maximum penalty of Death.

You are hereby put on NOTICE that any further effort to coerce, intimidate, persuade, trick or compel me to receive any experimental gene therapy injection ("Covid Vaccine") or any other medical device, drug or procedure against my will, implicates you as aiding and abetting in the Capital Offense of a Crime Against Humanity. I hereby reserve my rights to swear to a criminal complaint against you in the nearest available law enforcement agency or court of law. I do not contract with you in any way and expressly deny any contractual relationship with you.

I hereby reserve my rights and put you on NOTICE that you may also be liable for civil damages under various Tort claims including but not limited to: negligence, fraud (in the inducement), Assault, Battery, Intentional Infliction of Emotional Distress, Loss of Consortium, Trespass and Products Liability. You are hereby notified of potential liability and this NOTICE shall serve as actual NOTICE in support of these claims.

Delivered to: \_\_\_\_\_ (name of person on notice) BY HAND DELIVERY

Badge Number (other ID) \_\_\_\_\_ (medical or law enforcement if applicable) from  
\_\_\_\_\_ (agency, facility or hospital)

on this \_\_\_\_\_ day of 20\_\_ at: \_\_\_\_\_ (place) at \_\_\_\_\_ : \_\_\_\_\_ AM/PM

By: \_\_\_\_\_ (Complainant/You)

\*\*\*Please complete the empty sections and hand deliver this NOTICE to the individual seeking to cause the injection (or other coercive act) and take a picture of both this completed NOTICE and the person you delivered it to and file a copy of this completed notice with your nearest Law Enforcement office, County Registrar, County Court, District Attorney, Attorney General and your legal counsel. Please be aware that some states require all parties to a conversation be aware that your interactions are being recorded and as such, you should inform all people present that you are recording pictures, audio and/or video of your interaction. Please keep all such recordings/pictures for evidence and take notes about the circumstances while it is fresh in your memory. All of this may be used as evidence or support for you claim.