TO THE PUBLIC PROSECUTOR OF THE REPUBLIC OF FRANCE JUDICIAL TRIBUNAL OF PARIS

COMPLAINT RELATIVE TO VACCINES

ARTICLE 40 OF THE CRIMINAL PROCEDURAL CODE

COMPLAINANT:

RÉACTION 19, a non-profit association established in accordance with the French law of 1901, registered at the Prefecture with number W751256495, situated at 63 rue la Boétie 75008 in Paris and managed by co-presidents Mr. Carlo Alberto Brusa and Mr. Riccardo Mereu.

AGAINST: Defendant(s)

Unknown persons, and any named person the investigation may reveal as regards the charges:

- **The crime of endangering the life of others**
  Article 223-1 of the Criminal/Penal Code

- **The crime of aggravated fraud/deception/deceit**
  Articles L213-1 and L213-2 of the Consumer Code

- ***The crime of exploiting an individual's weakness***
  Article 223-15-2 of the Criminal/Penal Code

- **The crime aggravated extortion**
  Article 312-2 of the Criminal/Penal Code

HAS THE HONOR OF EXPOSING

* * *

Outline of the Complaint Relative to Vaccines

I – OVERVIEW OF THE CASE

1. **Health and Political Context**
2. **Medical controversy surrounding the very advisability of a vaccine**
3. **Implementing an unprecedented gene therapy**
4. **Dangers of an unprecedented gene therapy for humans**
   a) *Adverse effects that can include death of the person*
   b) *Establishing by derogation a procedure allowing the distribution of vaccines without a marketing authorization and with no review from the scientific community*
5. *Government officials, pharmaceutical labs and the medical community have advance knowledge of the risks and potential damages from this vaccine.* **Violation of international and constitutional texts**
   a) *Violation of international texts*
   b) *Violation of the precautionary principle*

II – THE ACTS COMMITTED AGAINST INDIVIDUALS REPRESENTED BY RÉACTION 19 CONSTITUTE PARTICULARLY SERIOUS CRIMINAL OFFENSES

1. **The crime of deliberately endangering the life of others**
   a) *The existence of a specific safety or precautionary obligation imposed by law or regulations*
   b) *Deliberate violation of the specific precautionary obligations imposed by law or regulations*
   c) *The existence of an immediate risk of death or serious injury for others*
2. **The crime of fraud/deception/deceit**
   a) *Materiality/material evidence of the crime of deception*
   b) *Intentional element/aspect of the crime of deception/ Willful intent to deceive*
3. **The crime of fraudulent abuse of an individual's lack of knowledge/ignorance or exploitation of weakness**
   a) *Conditions required to commit the crime of fraudulent abuse of an individual's lack of knowledge/ignorance or exploitation of weakness*
   b) *Material evidence of the crime of fraudulent abuse of an individual's lack of knowledge/ignorance or exploitation of weakness*
   c) *The moral aspect of the crime of exploitation of weakness*
4. **The crime of extortion**
   a) *Material evidence of extortion*

b) <u>Intention/Willful intent to commit the crime of extortion</u>

I –EXPLANATION OF THE CHARGES AND THE CASE:

<u>1. Health and Political Context</u>:

Since the beginning of the Covid-19 virus health crisis, the *"vaccine" has been touted as the only way to definitively end the Covid-19 pandemic,* the origins of which are still not know with certainty.

Starting in March 2020, pharmaceutical companies promised to supply a Covid-19 *"vaccine"* within 12 to 18 months, even though "vaccine development usually takes 10 to 15 years".

In mid-November, several pharmaceutical companies announced, by way of press releases, their initial efficacy results.

One after the other, Pfizer, BioNTech and then Moderna announced they had created a Covid-19 "*vaccine*" with more than 90% efficacy, and then 95% efficacy.

All of these studies were conducted in a completely opaque manner, in disturbingly record time, and without allowing the slightest verification of their results by an independent body.

In light of this, Dr. Christian Perronne issued the following warning in a statement published by France Soir on December 8th, 2020:

> "*The most concerning: numerous countries, including France, say they are ready to begin vaccinating in the coming weeks, while these products were rushed through the review and evaluation process and* ***<u>no report has been published to date on the efficacy or dangerous nature of these vaccines</u>. We are only entitled to press releases issued by the pharmaceutical industry and manufacturers, which enabled their stock price to rise dramatically."***

Exhibit 1

Indeed, it is true that, as of today, no certainty exists as regards the efficacy of this "*vaccine*".

We have proof of this directly from Mr. Alain Fischer himself, doctor and immunologist appointed by the Prime Minister to coordinate the Covid-19

vaccination strategy for France [name home country/jurisdiction here], who stated on December 5th, 2020:

> *"It will take time to have the solution, to know if the vaccine protects the vaccinated individual against infection (...) but also protects against transmission (...)* ***Many months will probably be necessary in order to have this last type of information*** *which will have an impact on vaccination policies" (emphasis added).*

Exhibit 2

As such, the person in charge of vaccination in France clearly explains, that as of December 5th, and for several more months to come, it is impossible to know the efficacy of the "*vaccine*" offered by the different pharmaceutical companies.

Even more troubling is that the pharmaceutical group Pfizer has already been the subject of a complaint filed in the United States for "***deceptive trade practices***" pertaining to the sale of several drugs (Bextra, Zyvox, Geodon and Lyrica) and was ordered to pay a "*record"* fine 2.3 billion dollars.

Exhibit 5

Furthermore, the clinical trials brought to light adverse effects noted after receiving Pfizer's Covid-19 vaccine:

> "*After receiving the injection, 63 % of the trial participants noted that they had experienced fatigue and 55% declared they suffered from headaches. Chills were also mentioned by 32% of the participants, 24% complained of joint pain and 14% developed a fever.*"

Exhibit 3

Even more serious, certain patients appear to have contracted Bell's Palsy, a condition affecting the facial nerve which results in facial paralysis, and six of those individuals died during the clinical trials.

Exhibit 4

So, it is in this context of risk and total uncertainty that the President of France affirmed during his speech of November 24th, 2020, in clear violation of the precautionary principle, that the "*vaccination campaign"* would begin "***in late December, early January***".

Additionally, this announcement was made at a time when the very usefulness of the principle of vaccination against Covid-19 is very controversial within the medical community, namely due to its low efficacy, its dangerous nature and the lack of a track record for this new technology.

2. There is medical controversy as to whether a vaccine is appropriate.

According to *Imperial College of London,* after analyzing 175 studies published around the world, the real death rate of Covid-19, meaning the percentage of deaths reported to number of infected individuals is **estimated at 1.15%, meaning essentially nonexistent!**

Exhibit 9

Furthermore, it was revealed that the average age at death from Covid-19 is 84 and that 90.8% of the people were over 65.

Exhibit 28

It is thus older people who are most at risk and who should be the first targeted by this "*vaccination"* plan.

However, on July 9th, 2020, the Comité Scientifique [French Scientific Committee] released a memo on the vaccination strategy, stating notably among its key points:

> *"At any rate,* ***the question must be raised of immunizing elderly subjects over the age of 75 who are likely to elicit a weak response to the vaccine*** *and that it will be necessary to compensate for this with social distancing measures". [barrier measures]*
>
> ***Exhibit 27***

In other words, the "vaccine" trials provide little to no immunity for the people most at risk!

Additionally, some scientists affirm that most of the population is already immune to the virus.

Indeed, many scientists maintain that it is highly likely that cross-immunity, from having been exposed to other coronaviruses, provides immunity to Covid-19 without ever having actually contacted it.

In this vein, Dr. Didier RAOULT affirms:

> *"If you look that the people who have had an infection, a significant number of them already have antibodies. So they cannot be infected by*

> *the coronavirus because they are immune before this epidemic. […]* ***between 40 and 70% of the population was already immune."*** [1]

Exhibit 10

If between 40 and 70% of the population was already immune before the epidemic, this portion has necessarily increased since the beginning of the epidemic.

Others maintain **that a vaccine alone will not be able to stop the Covid-19 epidemic:**

> "A vaccine alone may not allow everything to return to normal unless both vaccine efficacy and vaccination coverage are fairly high [and] would require a potentially unachievable 100% coverage of the population." [2]

Which must be understood as:

> *"LOCAL TRANSLATION GOES HERE"*

Exhibit 11

Lastly, a recent poll conducted by [French news outlet] BFMTV published on December 9, 2020, revealed that 52% of French people state that they will not get vaccinated while only 32% state they are inclined to get vaccinated.

Exhibit 12

Therefore, regardless of the questions of efficacy and of whether or not such a *"vaccine"* is appropriate from a health standpoint, only a minority of French people want to be vaccinated, so that such a "*vaccine*" will not put an end to the Covid-19 epidemic.

Additionally, it should be noted that the famous *"vaccine"*, lauded by the Government and the pharmaceutical companies, is actually a new gene therapy.

3. Implementing a new gene therapy

The term *"vaccine"* used by the pharmaceutical companies and members of the Government constitutes an abuse of language.

Indeed, what the pharmaceutical companies are offering is, in realty, **gene therapy.**

[1] Prof. Didier RAOULT. Interview available on YouTube: https://youtu.be/zUbiYhknaK0?t=568

It is accepted that **<u>vaccination</u>**:

> "*has the goal* of *stimulating immune defenses of a human being or an animal when faced with an infectious agent by exposing it voluntarily to that agent (in an attenuated or deactivated form) or to one of its components called antigens (usually a protein)"*

Exhibit 6

While the *"vaccines"* offered by Pfizer, BioNTech and Moderna involve:

> *"Inserting viral genetic material into the cells of the person to be vaccinated (administration is essentially intramuscular, or intradermal in two of the situations). What is used is either RNA encapsulated in lipid nanoparticles, DNA inserted into a plasmid, or DNA or RNA delivered by a genetically modified and deactivated virus."*

Exhibit 6

It is for this reason that Dr. Christian Perronne, head of infectious diseases at the Hôpital de Garches [Garches Hospital], rejects the use of the term *"vaccine"* and states that:

> *"The first "vaccines" they are offering us are not vaccines. They are gene therapy products. They are going to inject nucleic acids that will cause our own cells to produce elements of the virus."*

Exhibit 1

In this vein, a member of the European Parliament states:

> *"The first thing to understand is that these Covid-19 GMO vaccines are **highly experimental drugs**. We know practically nothing about **their mid- to long-term genetic effects**.*
>
> *First of all, since 2003 and the outbreak of SARS in Asia, the scientific community **has still not managed to develop an anti-coronavirus vaccine.** Then, there are several different GMO technologies used to develop various GMO Covid-19 vaccines currently undergoing evaluation. Among these GMO technologies, three of them **have never received authorization** for use as drugs **in humans**."*

Exhibit 15

Therefore, before the start of the Covid-19 epidemic, no gene therapy product had ever been approved for humans.

Exhibit 8

The vaccines being offered are experimental because they have never been tested on human beings to treat a virus, and **their function, initially curative, is now preventive.**

The report published in September 2020 by the CRIIGEN specifically states on this subject:

"*Gene therapy or immunotherapy* ***involves not only a limited number of people but people who are seriously ill****. Consequently, not only do the possible side effects affect a limited number of individuals* ***but the seriousness of the state of health and the urgent health situation they find themselves in, without a doubt, makes it possible to accept a certain level of risk****. In the case of vaccines, we are in a prevention situation. So this involves a considerable number of people, the vast majority of whom are in good health (at any rate as regards the disease the vaccine is supposed to protect us from)."*

Exhibit 6

Vaccination is thus a preventive method used to avoid contracting the disease, while gene therapy is a curative method used to treat a person who has already contracted the disease.

So gene therapies are generally reserved for treating sick people, and in particular, people with serious illnesses with regard to the potential risk factor.

Therefore, using gene therapy to carry out a *"massive vaccination plan"* would result in taking reckless risks with healthy people who are not particularly at risk even if they were to be infected by the virus (for those under the age of 65 with no comorbidities).

Additionally, this therapy has never been previously used on humans to combat a virus. So no historical information exists that would enable thorough analysis of its efficacy, but more importantly of its adverse effects on a person's health.

4. The dangers of a new gene therapy for humans

a) Side effects that include the death of the person

As such, numerous scientists warn of the **very serious side effects that would result from the use of such gene therapy products**.

In this vein, Dr. Hugues TOLOU, an expert with Santé Publique Belgique [Public Health Belgium], the Haute Autorité de Santé (HAS) [High Health Authority] and the European Centre for Disease Prevention and Control and (ECDC), stresses that:

> "*We do not have any historical data to confirm the safety of the vaccines for the general population:*
>
> - *RNA causes the production of antigens by the vaccinated person's cells. These cells thus become the target of the immune response, as is the case with a viral infection.* ***This normal process can be the source of undesirable side effects if it is too strong or widespread, or if it affects irreplaceable cells. RNA that is not taken up by the cells could also have a toxic effect.***
>
> *In the case of Covid-19, the immunity which develops, either after infection or by vaccination, can't it play a harmful role?* ***Much discussion has focused on the exaggerated immune response, the "cytokine storm", that can aggravate the evolution of the infection in certain patients and justifying the use of anti-inflammatory and immune suppressors****. There is also concern over the likelihood that* ***certain antibodies unable to neutralize the virus can actually act as facilitators for the infection****, by means of a mechanism called ADE,* Antibody-dependant enhancement*."*

Exhibit 34

Alexandra HENRION-CAUDE, geneticist, also supports this analysis and states:

> "*a risk [exists] of developing* ***an overactive immune system as regards antibody production"*** [3]

Exhibit 33

Gene therapies can also cause the development of cancers.

[3] Sud Radio, interview of November 16th, 2020 https://www.sudradio.fr/societe/alexandra-henrion-caude-jai-limpression-quon-est-revenu-au-temps-des-devins/

In this vein, a member of the European Parliament stated on September 7th, 2020, regarding a trial led by Mr. Alain Fischer:

> *"Let's remember that a viral vector gene therapy trial, an adenovirus similar to AstraZeneca's Covid-19 vaccine candidate,* ***caused leukemia [cancer of the blood] in two of the ten bubble babies*** *participating in the trial supervised by Immunology professor Alain Fischer in 2003. Specialists call this "insertional oncogenesis" to describe this risk of cancer brought about by genetic manipulation."*

Exhibit 15

Mr. Alain Fischer's gene therapy trial resulted in 20% of subjects developing leukemia. It is thus not surprising that he is currently urging precaution as regards this practice.

Furthermore, a report published in September 2020 by the Comité de Recherche et d'Information Indépendantes sur le génie Génétique (CRIIGEN) [Committee for Independent Genetic Engineering Information and Research] clearly explains the risks of vaccines that deliver RNA or DNA that encode the antigen protein:

> *"3.1. The risk of* ***recombinant virus*** *development*
>
> *This risk is independent of the vector used to introduce into the host cells DNA or viral RNA that encodes the protein antigen, whether it be a plasmid vector, a nanoparticle or a genetically modified virus.* ***However, this risk is even greater when genetically modified viruses are used because they introduce not only DNA or viral RNA of interest but also a part of their own genome.***
>
> ***Viruses have the great ability to exchange fragments of their respective genetic material very easily when the viral genomes involved are of the same nature*** *(either DNA or RNA) and when they share similar sequences (of genes). This well-known process which regulates these exchanges is called recombination. When this recombination occurs between similar DNA or RNA sequences, we speak of homologous recombination. This recombination phenomenon is not limited to DNA or viral RNA. However, viral sequences are known to be the subject of numerous recombinations and are therefore considered "highly recombinant". The result of these recombinations of so-called recombinant viral genetic material containing one or more genes which were the site of these exchanges are called "mosaics", meaning they are partially made up of sequences coming from virus 1 and sequences coming from virus 2 (Figure 3). Figure 3 illustrates the recombination of viral DNA. However, this phenomenon can also occur with viral RNA.*

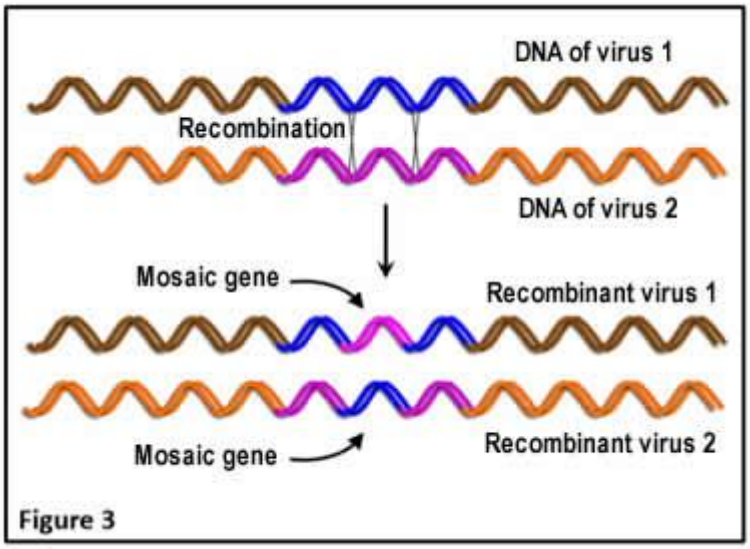

Figure 3

<u>In a certain number of cases, these recombinant viruses are much more virulent than the original viruses and can cause severe viral infections.</u> *This phenomenon has been widely demonstrated in transgenic plants where a viral gene was voluntarily inserted into their genome, and then infected by a virus similar to the one the provided the viral transgene [8-16].* ***An example of a recombinant virus capable of causing severe viral infections in humans that garnered extensive media coverage is the H1N1 virus of 2009, a recombinant virus composed of three strains of influenza: swine, human and bird*** *[17, 18].*

*Of course, this phenomenon can only occur when the genetic material from at least two of the viruses are found in the same cells, which is, luckily, extremely rare in nature since this implies that the same cells are co-infected by at least two viruses. But when intentional human intervention is involved, this phenomenon can become much more common. This is obviously the case, as previously mentioned, with transgenic plants which have undergone the insertion of a viral transgene. These plants just need to be infected with one virus for such recombination to take place****<u>. But humans are also being exposed to this risk when vaccines are produced that insert viral RNA or DNA into the patient's cells</u>****. The Covid-19 vaccines of this type, currently undergoing clinical trials, are administered through intramuscular or intradermal injection.* ***The target cells are therefore muscle cells, skin cells, and fibroblasts*** *(connective-tissue cells, meaning the supporting tissue that surrounds the organs, tissue, and notably muscle fibers)* ***and also blood cells in circulation and endothelial cells*** *(which line the blood vessels).* ***<u>All these cells can be the target of infections by other viruses</u>****. For example, enteroviruses (bare/unencapsulated? RNA viruses) have been detected in muscle cells [19], the Zika virus infects skin cells [20], Chikungunya targets not only muscle satellite cells (muscle tissue stem cells) [21], but also endothelial cells and fibroblasts [22]. And those are undoubtedly just a few examples...*

*Vaccination against Covid-19, if it becomes a reality, will be mass vaccination around the entire world. The likelihood of this type of occurrence is far from null even if frequency remains undoubtedly low**. Such a mass vaccination program with this type of vaccine could become a wide-scale recombinant virus factory.** Let's not forget that all it takes if for one new virus to appear somewhere in the world for the health, environmental and social consequence to be worldwide and colossal...*

V.2. Genotoxicity: The Risk of Insertional Mutagenesis

*Insertional mutagenesis is a mutation, meaning a modification of the genetic information, by means of the insertion of a sequence into the genome. This insertion can **deactivate or modify the expression of one or more genes.***

The risk of genotoxicity for human cells targeted by the vaccination (whose genome is of course DNA) only involves vaccines that deliver viral DNA, whether the vector be a plasmid or a genetically modified virus. However, this risk can also involve vaccines that deliver RNA by means of a genetically modified viral RNA vector such as the AIDS virus (HIV, widely used as a vector) if its reverse transcriptase and the gene that encodes it have not been correctly removed. Indeed, viral reverse transcriptase can convert the RNA delivered into DNA, which will then be integrated into the genome of the target cells.

*Genetically modified viruses are also widely used in gene therapy to deliver, in this case, a normal version of a human gene that is deficient (that has mutated) in the treated patient. In 2002, three years after a gene therapy trial (on children with severe immune deficiencies caused by a mutation on one the genes on the X chromosome) using a genetically modified RNA virus as vector, **two of the 10 children treated developed leukemia due to the insertion of reparative DNA delivered by a viral vector closely located near a proto-oncogene** (a cancer gene), severely disrupting its expression [23]. Several studies have shown the effects of insertional mutagenesis caused by different families of RNA viruses (which include HIV) [24]. **Similarly, several studies conducted on mice have shown that delivering genes with viral vectors derived from the adeno-associated virus (AAV, a small non-pathogenic DNA virus) produces insertional mutagenesis** [25]. In 2016, a study on the genotoxic effects of viral vectors derived from HIV and AAV for use in gene therapy concludes that "**Further knowledge of viral biology and the progress made in cellular genetics are necessary to understand how the viral vectors choose integration sites and the associated risks"** [26].*

V. Immunotoxicity: Risks specifically linked to the use of modified viral vectors

In addition to the risks of the appearance of recombinant viruses and insertional mutagenesis, especially when the genetic material delivered is DNA, the viral vectors themselves being immunogenic means that they can bring about major immunotoxic effects. In 2002, a gene therapy pilot experiment, conducted on 18 boys with a serious metabolic condition caused by a deficient gene located on the X chromosome ***led to the death of an 18-year old man who died from a fatal systemic inflammatory response caused by the viral vector*** *(deactivated human DNA virus): DNA sequences from the vector were found in the majority of his tissue [27]. The fact that the other 17 individuals treated did not experience this type of response shows just how difficult it is to predict and thus manage this risk. In Belgium, several clinical immunotherapy trials to combat cancers using a deactivated virus where more than 15% of its genome was replaced with two human genes (coding for an antigen present on the surface of cancer cells and interleukin, a protein which enables communication between immune cells)* ***showed a non-specific activation of the immune system linked to the vector resulting in an inflammatory reaction and an auto-immune response*** *[28]. Numerous other studies have shown* ***the immunotoxic effects of various viral vectors used in gene therapy or vaccination [29-33]. In the case of viral vectors used in vaccination, anti-vector immunity can also interfere directly with the vaccine efficacy sought (immunogenicity of the vaccine) [34].***

V. General considerations relative to risk evaluation of these vaccines

Using vaccines that deliver viral genetic material (DNA or RNA) is new or recent. ***The use of genetically modified viruses as vectors, namely for the purposes of gene therapy or immunotherapy, has shown just how varied, unmanageable and potentially serious the side effects can be.*** *While immunotherapy attempts are relatively recent, the nearly 35 years of gene therapy failures are there to remind us.* ***These failures can largely be explained by the quest for a scoop to the detriment of efficacy and/or biosecurity. Such an undertaking will never enable meeting the expectations and needs in terms of treatment. (…)***

Unmanaged side effects would thus have considerable repercussions, especially in a massive vaccination campaign such as the one destined to combat Covid-19*. These repercussions could be disastrous from a health perspective, of course, but also from an environmental one, as in the case, for example, of the spread of new recombinant viruses. (See Section IV. 3.1.) And the fact that this is to be done as a preventive measure does not authorize any risk-taking.*

Consequently, these vaccine candidates require a thorough health and environmental evaluation which is incompatible with urgency, *whether it be*

the result of pressure from decision-making health authorities or profits sought by the pharmaceutical industries engaged in this race to a vaccine. In its framework memorandum from July 23rd, 2020 on the Covid-19 vaccination strategy [35], the HAS, Haute Autorité de Santé, [High Health Authority] stated: "In the framework of the Covid-19 pandemic, the challenge is thus to create the most efficient and safe vaccine possible in record time". The claim is nonsense and an aberration on the part of an authority such as the HAS."

Exhibit 1

Reading this report is edifying: the possible side effects and complications are extremely serious, and can include the death of the person.

Despite the danger and recognized side effects, the European Union took the liberty of removing the safeguards that it itself has imposed on manipulation of all genetically modified organisms (GMOs), along with the requirements for environmental risk evaluation and authorization or consent previously established by the 2009/41/CE and 2001/18/CE Directives.

b) *Establishing by derogation a procedure allowing the distribution of vaccines without a marketing authorization and with no review from the scientific community*

As outlined in the 2020/1043 regulation adopted by means of an emergency procedure on July 15th, 2020, in its Recital 17, the European Union instituted a derogation system specific to GMO manipulations and experimental drugs, stating specifically:

"(17) The main objective of Union legislation on medicinal products is to safeguard public health. That legislative framework is supplemented by the rules in Directive 2001/20/EC laying down specific standards for the protection of clinical trial subjects. Directives 2001/18/EC and 2009/41/EC have as their objective to ensure a high level of protection of human health and the environment through the assessment of the risks from the deliberate release or the contained use of GMOs. In the unprecedented situation of public health emergency created by the COVID-19 pandemic, it is necessary that the protection of public health prevails. ***Therefore, it is necessary to grant a temporary derogation from the requirements concerning a prior environmental risk assessment and consent under Directives 2001/18/EC and 2009/41/EC for the duration of the COVID-19 pandemic or as long as COVID-19 is a public health emergency.*** *The derogation should be limited to clinical trials with investigational medicinal products containing or consisting*

of GMOs intended to treat or prevent COVID-19. ***During the period in which the temporary derogation applies, the environmental risk assessment and consent under Directives 2001/18/EC and 2009/41/EC should not be a prerequisite for the conduct of those clinical trials."***

Exhibit 7

This regulation was adopted in the framework of an emergency procedure, with no prior commission examination, with no debate or presentation of amendments.

In light of this, a member of the European Parliament states:

> *"This new regulation makes it possible for clinical trials of a vaccine or treatment aimed at combating Covid-19 that contain GMO's or are composed of GMOs to begin* ***without conducting an analysis of the risks linked to the transport, the spread into the environment or the injection into human beings of genetically modified organisms****. (…)*
>
> ***This dangerous text*** *exempts the manufacturers of these GMO-based treatments and vaccines* ***from supplying the prior environmental and biosecurity risk evaluation study*** *with each request for clinical trials and marketing authorizations of such drugs that the GMO legislation had required up until now."*

Exhibit 15

The consequence of implementing this Regulation is the removal of:

> *"all the* ***safeguarding, risk evaluation, verification, monitoring, labeling and public information procedures concerning the use, transportation, spread into the environment, injection into human beings of genetically modified organisms when it involves research or clinical trials for a Covid-19 vaccine or drug****."*

Exhibit 18

Six associations have already filed motions with the Court of Justice of the European Union to annul said Regulation, thus denouncing:

> *"a* ***dangerous experiment,*** *for clinical trial participants, the human population and the environment, requiring* ***the immediate application of the precautionary principle****, in accordance with rules of law."*

Exhibit 18

In this vein, Dr. Michael Yeadon, **former Pfizer Director of Research**, in collaboration with the famous German doctor Wolfgang Wodarg, created a petition addressed to the European Medicines Agency (EMA):

"In collaboration with Dr. Michael Yeadon, former Pfizer Director of Research, I have submitted a request to the EMA, European Medicines Agency, which is responsible for approving medicines at the EU level, on December 1st, 2020 for the immediate suspension all the studies on the SARS-CoV-2 vaccine, in particular the Pfizer/BioNTech study on BNT162b (EudraCT number 2020-002641-42).

We demand that the studies – to protect the life and health of the people tested – be conducted only when a concept study is available, suited to address the considerable safety concerns expressed by more and more well-known scientists regarding the vaccine and the design of the study.

As signatories to this petition, we demand that Sanger sequencing be used due to the known lack of accuracy of the PCR test in a serious study. It is the only way to make reliable statements on the efficacy of a Covid-19 vaccine. Neither the risk of illness nor the possible benefit from a vaccine can be determined with the necessary certainty on the basis of numerous different PCR tests with very different levels of quality. For this reason alone, such vaccine tests on humans are they themselves unethical.
Furthermore, we demand that the risks of potentially dangerous effects as revealed from previous studies, some of which relate to the nature of the coronavirus, be eliminated. Our concerns focus on the following points:

The formation of so-called non-neutralizing antibodies can lead to an excessive immune reaction, in particular when the subjects tested are challenged with a real "wild" virus after vaccination. This is called Antibody-Dependent Enhancement, ADE, and it has been known for a long time since coronavirus vaccine experiments were conducted on cats. During these studies, all the cats that had initially tolerated the vaccination well died when they were exposed to a real coronavirus. This excessive reaction is further enhanced by active boosters.

The vaccinations are expected to produce antibodies against the SARS-CoV-2 spike protein. However, the spike proteins also contain proteins that are homologous to syncytine, which is essential for the formation of the placenta in mammals such as humans. A SARS-CoV-2 vaccine absolutely must not set off an immune reaction against syncytine-1, as this would result in vaccinated women becoming infertile for an unlimited period of time.

The Pfizer/BioNTech mRNA vaccines contain polyethylene glycol (PEG). 70% of people develop antibodies to this substance. This means that many people may develop allergic and potentially fatal reactions to the vaccination.

The length of the study is much too short and does not allow for a realistic evaluation of the long-term effects. *As with the cases of narcolepsy noted after swine flu vaccination, long-term effects would only be observed with a planned emergency approval while it is already too late for millions of vaccinated people.* ***Governments are planning to expose millions of healthy people to unacceptable risks and to force them to get vaccinated by implementing discriminating restrictions on those who are not vaccinated.***

Nevertheless, Pfizer/BioNTech apparently requested emergency approval on December 1st, 2020. Scientific responsibility obliges us to take these measures.

CALL FOR HELP: Dr. Wodarg and Dr. Yeadon are asking as many European citizens as possible to sign their petition by sending the prepared email here to the EMA."

Exhibit 17

c) *Government authorities, pharmaceutical labs and the medical community have advance knowledge of the risks and harm expected and their pre-established management process*

The scientific and medical community is perfectly aware of the risks being taken and expected to come from this "*vaccination"* of the population.

- Indeed, in an **announcement of a contract awarded in the framework of a European Union contract attribution**, the section entitled "*Description of the procurement"*, translated as "LOCAL *TRANSLATION HERE", indicates the following*:

"The MHRA urgently seeks an Artificial Intelligence (AI) software tool to process the expected high volume of Covid-19 vaccine Adverse Drug Reaction (ADRs) and ensure that no details from the ADRs' reaction text are missed."

Exhibit 13

Which can be translated as follows:

*"***LOCAL *TRANSLATION HERE"***

In other words, the British Medicines and Healthcare products Regulatory Agency (MHRA) was urgently looking for a company that can provide it with an artificial intelligence tool that can manage the high **volume of adverse effects expected from the vaccine**, explaining that their current data processing system will be insufficient to handle the number of requests.

Indeed, a few lines down, it is clearly indicated that:

> *"It is not possible to retrofit the MHRA's legacy systems to handle the volume of ADRs that will be generated by a Covid-19 vaccine."*

These statements can be translated as follows:

"*LOCAL *TRANSLATION HERE"

Worse still, the MHRA states in no uncertain terms that the launch of the vaccine took place before this artificial intelligence tool could be developed:

> *"The MHRA recognises that its planned procurement process for the SafetyConnect programme, including the AI tool, would not have concluded by vaccine launch. Leading to an inability to effectively monitor adverse reactions to a Covid-19 vaccine."*

Which can be translated as:

"*LOCAL *TRANSLATION HERE"

This document stipulates:

> *"Therefore, if the MHRA does not implement the AI tool, it will be unable to process these ADRs effectively. This will hinder its ability to rapidly identify any potential safety issues with the Covid-19 vaccine and represents a direct threat to patient life and public health."*

Which can be translated as:

"*LOCAL *TRANSLATION HERE"

The MHRA thus clearly explains that the Covid-19 vaccination implies:

1. Serious adverse effects that will affect a great many people;
2. Such a high number of people affected by the adverse reactions that it is necessary to implement artificial intelligence software to manage all the cases.
3. That implementing such software is necessary to ensure that no detail of the adverse effects from the vaccination is omitted.
4. That implementing such software cannot happen before the start of the vaccination plan.
5. That without such software, a direct threat to the life of patients and public health exists.

The MHRA is thus perfectly aware of not only the existence of adverse effects from the Covid-19 "*vaccine*", but also the particularly high prevalence, since at least September 14th, 2020, date the contract was awarded!

And yet, it is this same entity, the MHRA, that validated the distribution of the gene therapy offered by the Pfizer pharmaceutical group on December 2nd, 2020, knowing full well what lay ahead:

Decision

Regulatory approval of Pfizer / BioNTech vaccine for COVID-19

Information for healthcare professionals and the public about the Pfizer/BioNTech vaccine.

Published 2 December 2020
Last updated 10 December 2020 — see all updates
From: Medicines and Healthcare products Regulatory Agency

- Additionally, in an article dated December 6th, 2020, the International Association for A Scientific Independent and Caring Medicine (AIMSTB) made public an exchange of emails between one of its members and the French Order of Doctors.

Exhibit 14

As such, in an email of November 30th, 2020, the Order of Doctors replies to a member of the AIMSTB who brought up the question of vaccines as follows:

> ***"Furthermore, I think that a decision to make vaccination mandatory is highly unlikely politically <u>as this measure could end up being counterproductive and our leaders and, in particular, the Minister of Health are aware of that."</u>***

Therefore, the vaccination plan implemented in France and in Europe is not only particularly dangerous for public health and the environment but it also violates the fundamental and constitutional rules of law, which protect from these violations.

5. Violation of international constitutional texts

<u>a) Violation of international texts</u>

The European Union's approval of the Pfizer/BioNTech vaccine, with no prior health or environmental risk analysis, violates numerous international texts.

Indeed, Article 5 of the Oviedo Convention stipulates:

> *"An intervention in the health field may only be carried out after **<u>the person concerned has given free and informed consent to it.</u>**"*
>
> *This person shall beforehand be given **appropriate information as to the purpose and nature of the intervention as well as on <u>its consequences and risks.</u>***
>
> *The person concerned may freely withdraw consent at any time."*

Exhibit 19

Additionally, Article 6 of the Universal Declaration on Bioethics and Human Rights of October 19th, 2005 establishes that:

> *« 1. **<u>Any preventive, diagnostic and therapeutic medical intervention is only to be carried out with the prior, free and informed consent of the person concerned, based on adequate information.</u>** The consent should, where appropriate, be express and may be withdrawn by the person concerned at any time and for any reason without disadvantage or prejudice."*

Exhibit 20

No official information can clearly outline the risks and consequences of such a "vaccination" because no official study has been conducted, so that no consent can ever be free and informed.

Paragraph 2 of Article 3 of this same Declaration establishes again:

> *"The interests and welfare of the individual should have priority over the sole interest of science or society."*

Exhibit 20

Given the few studies that have been conducted which have shown the potentially devastating effects of these gene therapies, the interests and well-being of the individual are largely sacrificed on the supposed altar of science and the common good.

Worse still, this *"vaccine"* appears to have been implemented above all in the interest a certain individuals: the directors of the pharmaceutical companies.

Indeed, from May 15th to August 31st, 2020, the directors of five pharmaceutical companies made over 145 million dollars with the sale of their company stock.

Exhibit 21

Article 16 of this same Declaration again states:

> *"The impact of life sciences on future generations, including on their genetic constitution, should be given due regard."*

On this subject, Dr. Perronne clearly indicates that there is a risk of genetic transformation capable of impacting the DNA of future generations:

> *"So **foreign RNA in our body administered by injection could encode for DNA,** just as foreign also, which may then be integrated into our chromosomes. There is thus a **real risk of permanently transforming our genes.** There is also the possibility, through the modification the nucleic acids of our eggs and sperm, of **transmitting these genetic modifications to our children**."*

Exhibit 22

The Nuremberg Code is a list of ten criteria contained in the ruling following the trial of the Nuremberg doctors (December 1946 - August 1947) which indicate the conditions that scientific experiments on human beings must meet in order to be considered "*acceptable*":

" 1. ***The voluntary consent of the human subject is absolutely essential. This means that the person involved should have legal capacity to give consent;*** *should be so situated as to be able to exercise free power of choice, without the intervention of any element of force, fraud, deceit, duress, overreaching, or other ulterior form of constraint or coercion; and should have sufficient knowledge and comprehension of the elements of the subject matter involved as to enable him to make an understanding and enlightened decision. This latter element requires that before the acceptance of an affirmative decision by the experimental subject there should be made known to him the nature, duration, and purpose of the experiment; the method and means by which it is to be conducted; all inconveniences and hazards reasonably to be expected; and the effects upon his health or person which may possibly come from his participation in the experiment.*

The duty and responsibility for ascertaining the quality of the consent rests upon each individual who initiates, directs, or engages in the experiment. ***It is a personal duty and responsibility which may not be delegated to another with impunity.***

2. ***The experiment should be such as to yield fruitful results for the good of society, unprocurable by other methods or means of study, and not random and unnecessary in nature.***

3. The experiment should be so designed and based on the results of animal experimentation and a knowledge of the natural history of the disease or other problem under study that the anticipated results justify the performance of the experiment.

4. ***The experiment should be so conducted as to avoid all unnecessary physical and mental suffering and injury.***

5. ***No experiment should be conducted where there is an a priori reason to believe that death or disabling injury will occur;*** *except, perhaps, in those experiments where the experimental physicians also serve as subjects.*

6. The degree of risk to be taken should never exceed that determined by the humanitarian importance of the problem to be solved by the experiment.

7. Proper preparations should be made and adequate facilities provided to protect the experimental subject against even remote possibilities of injury, disability or death.

8. The experiment should be conducted only by scientifically qualified persons. The highest degree of skill and care should be required through all stages of the experiment of those who conduct or engage in the experiment.

9. During the course of the experiment the human subject should be at liberty to bring the experiment to an end if he has reached the physical or mental state where continuation of the experiment seems to him to be impossible.

10. During the course of the experiment the scientist in charge must be prepared to terminate the experiment at any stage, if he has probable cause to believe, in the exercise of the good faith, superior skill and careful judgment required of him, that a continuation of the experiment is likely to result in injury, disability, or death to the experimental subject."

The French Government's vaccination plan violates all of the fundamental texts, international in scope, along with <u>precautionary principle</u> which has constitutional value.

<u>b) Violation of the precautionary principle</u>

The precautionary principle is established in Article 5 of the Charter for the Environment, making it part of the block of constitutionality since 2005, as follows:

"When the occurrence of any damage, albeit unpredictable in the current state of scientific knowledge, may seriously and irreversibly harm the environment, public authorities shall, with due respect for the principle of precaution and the areas within their jurisdiction, ensure ***the implementation of procedures for risk assessment and the adoption of temporary measures commensurate with the risk involved in order to preclude the occurrence of such damage."***

If this principle is incorporated into the block of constitutionality in an environmental context, it is equally applicable to health matters.

Indeed, the precautionary principle was confirmed in medicine, notably with the "sang contaminé" scandal dubbed "contaminated blood".

In this vein, William Dab, Professor of Health Chair in charge of the Health Safety Curriculum at the Cnam, explains:

> *"The main thing to learn from the painful contaminated blood scandal, regarding public health, is that in a situation of uncertainty, decisions must be made not by basing them on more or less explicit opinions from those that claim to be experts, but rather by using a* ***group process with opposing expert opinions****,* ***by using explicit health criteria as the basis, by making it known from the start at which point the problem will have been sufficiently understood so as to take action."***

Exhibit 23

Specifically in medical terms, the precautionary principle is found in Article R4127-39 the Code of Public Health which establishes:

> ***"Doctors may not propose, or present as safe and beneficial, to patients or their family or friends, remedies or procedures that have not been sufficiently tested or that are illusory. Practicing charlatanism is forbidden."***

It has been shown that no counter expertise was able to ever be conducted. The procedure has thus not been sufficiently tested and is not safe, which violates the precautionary principle.

European Parliament member, Michèle RIVASI, reached the same conclusion, stating on September 7th, 2020, during an interview with France Soir:

> *"The Commission specifies that this only applies to clinical trials, and is only valid within the context of the fight against Covid-19 for as long as Covid-19 is considered a pandemic or public health emergency.* ***Nevertheless, this proposed exemption to GMO legislation for experimental Covid-19 GMO drugs is for us in the Green Party a very bad sign that runs counter to the precautionary principle."***

Exhibit 15

The "*vaccination plan*" was established in violation of fundamental texts that represent the safeguards for fundamental freedoms and in particular the right to information, the right to security and the right to life.

By implementing this *"vaccination plan"*, a great many people can be held criminally liable on several grounds.

II – THE ACTS COMMITTED AGAINST INDIVIDUALS REPRESENTED BY RÉACTION 19 CONSTITUTE PARTICULARLY SERIOUS CRIMINAL OFFENSES

Making available and distributing gene therapy products can be considered criminal offenses, namely deliberately endangering the life of others **(1),** fraud/deception/deceit **(2)**, extortion **(3)** exploitation of weakness **(4)**.

1. The crime of deliberately endangering the life of others

Article 223-1 of the Criminal/Penal Code establishes the offense of deliberately endangering the life of others:

> "*Directly exposing others to an immediate risk of death or injury capable of causing mutilation or permanent disability by the clearly deliberate violation of the specific obligation of caution or safety imposed by law or regulations is punishable by one year in prison and a fine of 15,000 euros.*"

To characterize the crime of deliberately endangering the life of others, the obligation of caution or security imposed by law or regulations must be identified (a), the deliberate violation of this obligation (b) along with the existence of an immediate risk of death or serious injuries (c) must be proven.

a) *Existence of a specific obligation of safety, security and/or caution imposed by law or regulations*

- **The right to information and the obligation to obtain free and informed consent before performing a medical procedure.**

Article 5 of the 1997 Oviedo Convention on Human Rights and Biomedicine also states:

> "*An intervention in the health field may only be carried out after the person concerned has given* ***free and informed consent*** *to it.*"
>
> *"This person shall beforehand be given appropriate information as to the purpose and nature of the intervention as well as on its consequences and risks.*"

Additionally, Article L1111-4 of the Code of Public Health stipulates:

"*No medical procedure or treatment can be performed or administered without the **free and informed consent** of the person and this consent may be withdrawn at any time."*

Article 16-3 of the Civil Code establishes again:

*"The integrity of the human body must not be violated except in the case of **medical necessity** for the person or exceptionally in the therapeutic interest of others.*

***Consent of the person concerned must be obtained in advance** except in the case where his or her state makes the therapeutic intervention necessary and he or she is unable to consent to it."*

Line 1 of Article R.4127-35 of the Code of Public Health states:

*"The doctor owes the patient that he examines, cares for or advises **clear, honest and appropriate information** on his state of health and the tests and treatments that he proposes to him. For his explanations, he takes into account the patient's personality and verifies that they are understood for the duration of the illness."*

Article R.4127-36 of the Code of Public Health states:

*"**The consent of the person examined or cared for must be sought in all cases.***

When the patient, capable of expressing his wishes, refuses the tests or treatment proposed, the doctor must respect this refusal after informing the patient of its consequences.

If the patient is unable to express his wishes, the doctor cannot perform the procedure with first alerting and informing a trusted person, family member or a close friend or relative, except in an emergency or if this is impossible.

The obligations of the doctor with respect to the patient when the patient is a minor or protected adult are defined in Article R.4127-42.

Indeed, all failures to provide the required information and to obtain free and informed consent deprive the patient of the possibility to avoid a risk.

- **The precautionary principle**

In addition to the right to information and the obligation to obtain free and informed consent, Article R4127-39 of the Code of Public Health reiterates a precautionary principle.

Indeed, this article establishes:

> ***"Doctors may not propose, or present as safe and beneficial, to patients or their family or friends remedies or procedures that have not been sufficiently tested or that are illusory. Practicing charlatanism is forbidden."***

The law or regulations thus impose on medical personnel several specific obligations regarding the obligation to provide information, obtain free and informed consent, and respect the precautionary principle.

- **The obligation of the State (France) to ensure the right to the protection of each individual's health**

There is also a legal obligation for the State to ensure the right to the protection of each individual's health.

Indeed, Article L1411-1 of the Code of Public Health states:

> *"The Nation defines its health policy so as to guarantee the right to the protection of each individual's health.*
>
> ***The State (France) has the responsibility of establishing its health policy.***
>
> ***It aims to assure the promotion of living standards that favor health, improvements to the state of health of the population, reductions of social and territorial inequality and equality between men and women and to guarantee the best health safety possible and accessible prevention and care for the population.***
>
> *Health policy includes:*
>
> *1.* ***Monitoring and observation of the state of health of the population and identification of its main determinants, namely those related to education and living standards and working conditions****. The identification of these determinants relies on the exposome concept, defined as the integration of all exposures in one's entire life that can influence human health;*

2. Promoting health in every aspect of life, namely in learning establishments and in the workplace, and the reduction of health risks related to diet, environmental factors and living standards that may alter it;

3. Prevention, for the individual and collectively, throughout one's life, of illness and pain, trauma and loss of autonomy, namely by defining a children's health education plan, health education, by fighting a sedentary lifestyle and by developing the regular practice of sports and physical activities for all age groups;

4. Carrying out nationwide actions within the framework of protecting and promoting mother-child health as mentioned in Article L. 2111-1 ;

5. Organization of health processes. By coordinating healthcare, social and medico-social workers, in collaboration with users and local communities, these processes aim to guarantee continuity, accessibility, quality, security, safety and efficiency of caring for the population by taking into account the specific geographic, demographic and seasonal factors of each region so as to contribute to territorial equality;

6. Collective handling in solidarity of the financial and social consequences of illness, accidents disabilities by the social protection system/social security system;

7. Preparation for and response to health warnings and crises;

8. Production, use and distribution of knowledge useful for its development and implementation;

9. Promotion of training programs, research and innovation in the health sector;

10. Ensuring that initial training and continuing education for healthcare professionals is appropriate for the exercise of their responsibilities;

11. Information from the population and it participation, either directly or through associations, in public debates on health-related issues and on health risks and the process of developing and implementing health policy.

Health policy is adapted to the needs of people with disabilities and the caregivers in their family.

All proposed health-related legislation, with the exclusion of proposed legislation to finance the social security program and financial legislation,

is subject to prior consultation with the National Union Health Insurance Funds, professional organizations representing health maintenance organizations and HMO unions regulated by the Code de la mutualité, insurance institutions and insurance institution unions regulated by the Social Security Code, companies mentioned in Article L. 310-1 du code des assurances and offering guarantees for the reimbursement and indemnities of costs incurred by an illness, a pregnancy or an accident, the National Union Healthcare Professionals, representatives of local collectivities and the National Union of Authorized Healthcare System User Associations."

b) *Deliberate violation of specific obligations to use caution as imposed by law or regulations*

The deliberate violation of this obligation constitutes the intentional element of the crime of endangering the life of others.

While it has been established that the effects of mRNA technology on human health can be disastrous, announcements made in recent weeks by President Macron and the Minister of Health reflect the existence of a "vaccine *strategy"* that has been launched.

Indeed, President Macron, during his speech on November 24th, 2020, indicated that a vaccinate campaign would begin "*in late December, early January"* for "*the people most at risk"*.

As for the Health Minister, he stated that France had purchased the required storage equipment for the "vaccines"[4].

The government, by way of Prime Minister Jean Castex at his press conference on November 3rd, 2020, presented a vaccination plan already outlined in three phases.

'[It is recommended] to first vaccinate the elderly in care homes such as the EHPAD. […] This represents about 1 million people."
"*Then, as we receive deliveries, we will widen the scope of vaccination starting with the 14 million people who are risk due to their age or a chronic illness […]. That is Phase 2 of our plan which will begin in February and run into next Spring."*
"Lastly, we will progressively open up vaccination to the rest of the population starting in the Spring. This will be Phase 3 of our strategy." [5]

[4] Health Minister's press conference on November 12th, 2020.

Lastly, a document entitled "*Vaccination Strategy against SARS-Cov-2*" was published by the High Authority of Health on November 27th, 2020.

As such, a veritable "*vaccine strategy*" was developed with a precise calendar. The first target public was defined and the logistics were established.

The Government established this action plan knowing full well that gene therapy could generate potentially devastating effects and was careful not to mention them to the general public.

Indeed, it was unable to bypass the CRIIGEN's extremely revealing public study (Exhibit 6), or the head of Infectious and Tropical Diseases at the Hôpital de Garches Dr. Perronne's open letter (Exhibit 22) where he stated on November 30th, 2020:

> *"The people promoting these gene therapies, wrongly called "vaccines", are the sorcerer's apprentices and they're* ***taking the people of France and more generally speaking, the people of the world, for guinea pigs****."*

As such, the Government and the other players in medical field involved are deliberately depriving patients of their right to information, which prohibits them from later providing informed consent.

In addition, the Scientific Counsel communicated in an opinion from July 9th, 2020 that while it didn't recommend mandatory vaccination, it didn't envision *"a vaccine strategy based purely on individual choice"* either.

Exhibit 26

Furthermore, they are deceiving the public by speaking of a "*vaccine*" when, in reality, they are talking about a gene therapy and they are thus going to put a health population in danger by injecting everyone with a potentially fatal product.

This erroneous use alone demonstrates the perpetrators' desire to not fulfill their specific obligation to inform, to use caution and to ensure safety, and to deliberately violate it by supplying only partial information.

This specific violation was highlighted by the International Association for A Scientific Independent and Caring Medicine (AIMSTB) in an email exchange between one of its

[5] Video, Press conference of November 3rd, 2020
https://www.francetvinfo.fr/sante/maladie/coronavirus/vaccin/video-Covid-19-decouvrez-les-trois-phases-du-plan-de-vaccination-devoile-par-le-gouvernement_4205753.html

members and the Order of Doctors made public on November 30th, 2020, which was as follows:

"Dear President and fellow colleague,

I acknowledge receipt of your second reply which is, unfortunately, unsatisfactory not only from a fellow peer and deontological perspective, but also from a legal and ethical one, not to mention from a scientific standpoint.

***1- You accuse me of "having an anti-vaccine position"**: simply because I have raised serious doubts about these new products. This expression rife with great disdain must certainly reveal your very poor opinion of me. Others before you used similar expressions such as "Negro music", "communist movie", "Jewish literature", or even "degenerate art". It didn't always end well for them. So "anti-vaccine position" is now a must these days, a new way for you to use a knee-jerk reaction to reject the arguments without actually having to think about them.*

***2- You speak to me of "the rule of law, freedom of choice and responsible to refuse care"**: I think you have forgotten the episode in 2018 when vaccination for newborns was made mandatory for 11 vaccines against the advice of the college of health professionals. Since then, I don't really think parents can freely choose, as you imply. As for the institutionalized residents in care homes (EHPAD) and their freedom to choose to receive a Covid-19 vaccination after receiving clear and appropriate information… Is this black comedy or are you really convinced of what you're saying? The administration doesn't give two hoots about shortening the life of this captive population and prohibits yet again any collection of data on long-term serious negative side effects. Who has seriously studied the effects of flu-Covid co-vaccination in the elderly? Is this a new hidden Phase III, absolutely forbidden theoretically? (2)(3)*

*3- **"No therapeutic is really effective against Covid"**: Your position is biased, pro-industry, perfectly aligned with the government but light-years away from the scientific reality described all around the world. On the contrary, there is a plethora of efficacious products to fight Covid, both preventively and curatively, all the data has been published: Vitamin D3, HCQ, azithromycin, zinc, artemisinine, ivermectin and today, even the combination of Quercetine-Vitamin C-bromelaine appears to be showing results at least as good as Pfizer's*

vaccine. Here's an original pre-print from the Lancet on a Turkish study:
https://papers.ssrn.com/sol3/papers.cfm?abstract_id=3682517.
You could also read this:
https://blogs.mediapart.fr/laurent-mucchielli/blog/021220/l-importance-du-traitement-precoce-des-patients-ages-atteints-de-la-covid-en-ehpad still relevant today.

4- ***"Documented results show real efficacy of the vaccine"****: Your statement is, excuse me, absolutely appalling anti-science, humiliating for your institution. Reread the last two AIMSIB articles:*
https://www.aimsib.org/2020/11/22/vaccins-anti-covid-en-2020-folie-sanitaire-politique-mediatique-financiere/
https://www.aimsib.org/2020/11/29/vaccins-anti-covid-surs-et-efficaces-avis-du-conseil-scientifique-de-la-has-ce-quen-a-fait-la-commission-europeenne/

Nothing, absolutely nothing scientifically admissible has been published anywhere on mRNA products, two of which are ready for distribution at the circus or medical fairgrounds*. You're confusing authentic science with advertising leaflets. Justice will never understand that the Order approved of such bull.* ***I remind you that Pfizer was ordered to pay a 2.3-billion dollar fine in 2009 for false advertising and you're taking this company's baloney at face value.*** *It's absolutely dreadful but I unfortunately saw it coming. I anticipated this in my first email because they have to make you say these things.*

5- ***"Even if the vaccine is new, and there is little background": Be sure that all the criminal defense attorneys will never content themselves with such a statement to get rid of the vaccinators' overwhelming responsibility as soon as the first complaints are filed for lack of information and violation of Art. 39, that you carefully avoid mentioning.*** ***As of today, these vaccines are not new because they don't exist yet, they don't even have a marketing authorization in Europe, and the CNOM [National Counsel of the Order of Doctors] is already approving them,*** *but on whose orders? The next phase will take place in courtrooms, so you will have to defend such a position before the lawyers.*

I'm not very optimistic about what's to come, the health scandal is going to explode quickly because the judges have already begun their investigations and seizures at the highest level of the State [Country].

On the minds of many magistrates and many defense attorneys, ***the Covid-Mask-HCQ-remdesivir-vaccine affair will be the scandal of the century, a thousand times worse than the contaminated blood one.*** *I don't envy your position between a rock and a hard place, perhaps an orchestrated resignation of all the departmental counsels might help recognize and save the independent practice of medicine, at least you would spare yourself and your teams the nasty aftermath.*

I'm attaching just a very concise body of articles to go over because I know from experience that, in general, the members of ordinal counsels (departmental, disciplinary, nationals, etc…) don't read anything they are sent. I will distribute your reply, and I'll of course hide your name and title. This is not about putting you personally in a difficult position with your readers. Indeed, our criticism is directed at your institution.

Despite this,
Respectfully and fraternally yours."

Exhibit 14

The violation of the obligation to inform, to respect the precautionary principle along with the obligation of the State [Country] to guarantee the right to the protection of the health of each individual that falls on the Government and medical body is thus characterized.

c) <u>The existence of an immediate risk of death or serious injury for others</u>

Article 223-1 of the Criminal/Penal Code involves proving that others are exposed to an *"immediate and direct risk"*. It is thus not necessary to prove the existence of actual harm, but rather the imprudent behavior "*capable of"* causing harm.

As it has been shown, injecting gene therapy products into the human body is likely to have particularly serious effects on the human being, which can include paralysis, cancer and death.

<u>The elements of the crime of deliberately endangering the life of others are thus fully met.</u>

2. <u>The crime of fraud/deception/deceit</u>

The crime of fraud/deception/deceit is established in Article L213-1 of the Consumer Code in these terms:

"Shall be punished by two or more years in prison and a fine of 300, 000 euros, whoever, whether or not party to the contract, shall deceive or attempt to deceive the contracting party, by any means or procedure, even through the intermediary of a third party as pertains to:

1° la nature, type, origin, essential qualities, composition or content of necessary elements of any merchandise;

2° the quantity of the things delivered or their identity by delivering merchandise other than the thing determined and set forth in the contract;

3° the fitness for use, the inherent risks from the use of the product, the verifications conducted, the user manuals or the precautions to be taken.

The amount of the fine may be increased, proportionally to the advantages obtained from the breach, to 10% of the average annual turnover based on the last three known annual turnovers at the time of the incident."

a) The materiality of the crime of fraud/deception/deceit

The materiality of the crime of fraud/*deception/deceit* implies both the use of deceptive means and carrying out the actual fraud/deception.

The fraud/deception can pertain to the essential qualities of any merchandise, along with the inherent risks involved by its use and the precautions to be taken.

In this case, it has already been shown that the products presented as vaccines are in reality **gene therapies**.

Therefore, the Government has knowingly employed the misleading term *"vaccines*" instead of using the scientifically correct term "gene therapy", and is developed its communications campaign in this way.

Additionally, the deception has been carried out because most French people do not currently know that the injection that they have planned to get, or not, is in reality, gene therapy.

The Government and the pharmaceutical companies are deceiving the people by passing off a medical product for what it isn't.

c) The intentional element of the crime of fraud/deception/deceit

The intentional element of the crime of fraud/deception/deceit is characterized when an individual is aware of the untrue character/characteristics/false representation that he attributes to the incriminated product.

In this case, the manufacturers of the gene therapy products, being healthcare professionals, cannot not know that these products are not vaccines and that there are dangers associated with them for health of an individual.

In addition, it follows from the developments of the introduction, as shown in points 3 and 4, that the Government is aware that this is not a vaccine but really a gene therapy and knows that potentially disastrous effects are associated with it.

In this case, by using the term *"vaccine"*, the government and the pharmaceutical companies know that they are misleading the population.

As such, Alexandra Henrion-Caude, geneticist and former director of research at the Inserm, stated during an interview published on December 11th, 2020 on the Sputnik France website:

> *"Furthermore, even under the pretext of a health emergency, that so many free people, with no conflicts of interest, no longer believe exists, how dare we play with people's gullibility by using technocratic definitions of words? Ask people what they think a "vaccine" is.* ***They are certainly not going to think to themselves that by getting this injection, their body is going to end up, just like a GMO, inheriting viral genetic information that is going to force their cells to produce its viral protein to create –by way of an auto-immune type reaction– antibodies directed against the cells which will have produced the protein of the virus.***
>
> *The first thing that must be done is to stop using the word 'vaccine', which is being misused in the regulatory texts and* ***establish truly informed consent****."*

Exhibit 16

Since proof of the element of intent has been demonstrated, the crime of deceit is constituted in all its elements.

3. The crime of fraudulent abuse of an individual's lack of information/ignorance or state of weakness

Fraudulent abuse of an individual's lack of information/ignorance or state of weakness is stated in Article 223-15-2 of the Criminal/Penal Code:

> *"The fraudulent abuse of an individual's lack of knowledge/ignorance, whether a minor or a particularly vulnerable person due to age, illness, disability, physical or mental deficiency or pregnancy, is apparent "or known" to the perpetrator, whether it be a person under psychological or physical influence resulting from serious or repeated pressure or techniques used to alter his or her judgment, to lead this minor or this person to an act or an abstention which are gravely/seriously harmful to him."*

a) *Prior conditions of the crime of fraudulent abuse of an individual's lack of knowledge/ignorance or state of weakness*

Article 223-15-2 of the Criminal/Penal Code protected three categories of persons: minors, vulnerable people and people in a state of psychological dependence.

The situation of particular vulnerability can, according to this text, be linked namely to the age of a person, an illness, a disability or a physical or mental/psychological deficiency.

In this case, the strategy developed the High Authority of Health (HAS) and made public on November 30th, 2020 establishes:

> *"In this initial phase during which a very limited number of doses will be available, [some] populations appear as the top priorities due to their vulnerability (age and/or comorbidities) and their increased exposure to the SARS-Cov-2virus:*
>
> *– Residents of establishments for the elderly and residents in long-term care services (EHPAD …) »*

Exhibit 24

In addition, the National Syndicate of Establishments and private residences for the elderly stated in regards to care home/nursing home/retirement home residents (EPHAD, Residential Establishment for the Dependent Elderly):

"***40 to 60% of residents*** *in retirement homes can no longer make decisions about their health due to severe diseases like Alzheimer's or dementia."*

Exhibit 25

Consequently, the vaccination policy targets first and foremost residents in care homes/nursing homes/retirement homes (EHPAD) who are particularly vulnerable due to their age, illnesses, disabilities and physical and mental/psychological deficiencies.

b) <u>The material element of the crime of fraudulent abuse of an individual's lack of knowledge/ignorance or state of weakness</u>

To characterize this crime, it is necessary to prove the fraudulent abuse of an individual's lack of knowledge or state of weakness which leads the person to an act or an abstention which are seriously harmful to him.

The perpetrator must have taken advantage of the lack of knowledge/the ignorance or state of weakness of the person to lead him to an act or an abstention which are seriously harmful to him. The act to which the vulnerable person was led may be material or legal.[6]

The criminalization text does not require that the harm actually be done/be carried out.[7]

In this case, the residents in the care homes/nursing homes/retirement homes (EHPAD), who are particularly vulnerable, find themselves in a situation of weakness that can be abused of so that they consent to the injection of gene therapy products which, as proven above, will cause particularly serious adverse reactions that will affect their health.

c) <u>The moral element of the crime of abuse of a state of weakness</u>

In order to characterize the moral element of the crime of abuse of a state of weakness, the perpetrator needs to have had knowledge of the victim's state of ignorance or situation of weakness and to have sought to exploit it in order to obtain from the victim an act or an abstention which he knew to be of a seriously harmful nature.

[6] Cass. Crim., Feb. 19, 2014, n°12-87558.
[7] Cass. Crim., Jan. 12, 2000

In this case, "*Phase 1"* of the "*vaccination" plan* will begin in care homes/nursing homes/retirement homes (EHPAD).

Consequently, the state of dependence and weakness of the individuals receiving the doses of the product is known.

Furthermore, as explained above, several studies have shown that gene therapy products, falsely called "*vaccines",* will produce numerous and adverse reactions that the healthcare professionals are aware of but cannot predict.

The crime of abuse of weakness is thus clearly constituted in all its elements.

4. The crime of extortion

The crime of extortion is outlined in Article 312-1 of the Criminal/Penal Code which states:

> *"Extortion is the fact of obtaining through violence, threat of violence or constraint a signature, commitment or renunciation, the disclosure of a secret, or the making of a payment, the obtaining of assets or any type of goods.*
>
> *Extortion is punishable by seven years in prison and a fine of 100,000 euros."*

In addition, Article 312-2 Criminal/Penal Code specifies:

> *"Extortion is punishable by two years in prison and a fine of 150,000 euros:*
> *1. When it is* ***preceded, accompanied or followed by violence/acts of violence on others*** *having caused a total inability to work for 8 or more days;*
> ***2. When it is committed to the detriment of a person whose particular vulnerability, due to his age, illness, disability, physical or mental/psychological deficiency or state of pregnancy, is apparent or known to the perpetrator (…)*** *; »*

a) On the material element of extortion

In this case, it seems that the authorities are exerting a moral constraint on the population so that it will agree to be vaccinated.

Firstly, Government is conducting a reign of terror and creating a climate of **fear and guilt** in order to morally force the population to get vaccinated.

In this case, the Health Ministry has produced advertising spots that are particularly guilt-inducing[8].

Exhibit 29

In addition, the President of France has used **wartime vocabulary** in all of his speeches since the beginning of the epidemic.

In his different speeches, he has thus confirmed that "*we are at war*", he has imposed a "*curfew*", he has affirmed that "*the enemy is there, invisible, elusive"*, that the caregivers are "*on the frontline of this combat"*, and so on and so forth.

In addition to this moral pressure based on fear and guilt, another type of pressure consisting of preventing the population that has not been vaccinated against Covid-19 from entering certain public places is being implemented.

Indeed, more and more organizations are speaking of "*a vaccination card*", without which it will be impossible to enter certain public places or to travel.

This is what Christophe BARBIER, former Editor in Chief of *L'Express* declared by affirming:

> ***"If you are not vaccinated, you will no longer be able to go to the restaurant, to the theater, or take a plan… A vaccination certificate will be needed as a pass in society."***

Exhibit 30

This statement has already rung true as airlines have implemented this requirement.

Indeed, the International Air Transport Association (IATA), which represents 290 airlines which handle 82% of air traffic worldwide, issued a press release on November 23rd, 2020 in which it announced:

[8] Health and Solidarity Ministry, advertising:"Continuons d'appliquer les gestes barrières" https://www.youtube.com/watch?v=kHSsIoSZSQI

"The airline industry demands a cost effective, global, and modular solution to safely restart travel. IATA Travel Pass is based on industry standards and IATA's proven experience in managing information flows around complex travel requirements.

- *IATA's Timatic is used by most airlines to manage compliance with passport and visa regulations and will be the base for the global registry and verification of health requirements.*

- *IATA's One ID initiative was endorsed by a resolution at its 75th Annual General Meeting in 2019 to securely facilitate travel processes with a single identity token. It is the base for the IATA Contactless Travel App for identity verification that will also manage the test and vaccination certificates.*

"Our main priority is to get people traveling again safely. In the immediate term that means giving governments confidence that systematic COVID-19 testing can work as a replacement for quarantine requirements. ***And that will eventually develop into a vaccine program****. The IATA Travel Pass is a solution for both. And we have built it using a modular approach based on open source standards to facilitate interoperability. It can be used in combination with other providers or as a standalone end-to-end solution. The most important thing is that it is responsive to industry's needs while enabling a competitive market.* ***The first cross-border IATA Travel Pass pilot is scheduled for later this year and the launch slated for quarter one 2021."***

Exhibit 31

The Government is thus exerting a moral constraint on the population, coupled with a physical constraint consisting of the impossibility to enter certain establishments and to travel.

Additionally, the International Association for A Scientific Independent and Caring Medicine (AIMSTB) stated in its article published on November 29th, 2020 on its website:

"Vaccination will not be compulsory, but ***we can trust the French health authorities not to really leave a free individual choice to the citizens****. This is all the more serious as the new technologies of future vaccines (never used until now) add a lot of uncertainty about the safety and efficacy problems of future vaccines."*

And states in this vein that:

> *"The European Commission has just finished signing six contracts as secret as they are far-reaching with vaccine manufacture for a number of doses corresponding to the complete vaccination* ***1.2 billion individuals!"***

Exhibit 26

Furthermore, if the *"vaccination"* plan initially involves the elderly and people placed in care homes/nursing homes (EPHAD), the judges must take into consideration the victim's person, his age, his physical and intellectual condition and his vulnerability in order to characterize the materiality of the offense.

The elderly, for some among them, lived through a real state of war, such that the vocabulary employed by the President of France recalls their memories of the terror they lived through.

Furthermore, it is these elderly people who spend the most time watching television.

Indeed, according to a survey conducted by *Nielsen* in the United States, people over the age of 50 spend an average of 7 hours a day in front of the television.

Exhibit 32

Therefore, elderly people constitute the prime target audience for these TV spots produced by the Health Ministry which show an elderly woman in intensive care after kissing her grandchildren.

Exhibit 29

Given the amount of vaccines ordered along with the AIMSTB advisory, the vaccination plan does not just involve the elderly and people at risk, but rather the entire population, the majority of which is hesitant to get this "*vaccination"*.

Indeed, the European Commission published a Roadmap for Vaccination in the third quarter of 2019, clearly revealing the hesitancy of the population towards vaccination.

Exhibit 38

Even more conclusive, this same document plans to **institute a common vaccination card for 2022**.

This last element clearly proves that a common vaccination strategy exists and is being imposed on everyone.

Through the use of moral constraint, the Government thus intends to obtain the commitment from the population to be subjected to gene therapy.

b) The intentional element of the crime of extortion

The intentional element of the crime of extortion is characterized *"by the awareness of obtaining by force, violence or other pressure that which would not otherwise be freely consented to."* [9]

In its Roadmap for Vaccination from the third quarter of 2019, the European Commission established that the people of Europe were hesitant about traditional vaccination.

Exhibit 38

At present, it is actually a question of *"gene therapy"*, which has been shown to be new, without a track record and rife with associated risks.

There is thus no doubt, and the recent surveys highlight this, that the people of Europe are even more hesitant regarding this new technique.

Exhibit 12

Having knowledge of this reticence, the Government is using a strategy **aimed at spreading a reign of terror** within the population, and very soon an interdiction to travel and enter public places so as to morally force the population to adopt this gene therapy.

Indeed, given the group of studies conducted and the risks noted, along with the strategy implemented, there is no doubt that the Government was aware that it would not be able to obtain agreement from the population without exerting this moral constraint.

The elements of the crime of extortion have been met.

Additionally, extortion, "*when it is committed to the detriment of a person whose particular vulnerability, due to age, illness, disability, physical or mental deficiency or pregnancy, is apparent or known to the perpetrator, is aggravated.*

In this case, as regards committing this crime, the priority is given to elderly people placed in care homes/nursing homes with comorbidities, meaning that they are suffering from pre-existing illnesses prior to infection.

[9] Crim. January 9, 1991, Bull . Crim. n°17

The Government cannot be unaware of the advanced age and state of illness of these individuals since these very conditions are used to justify their intervention.

All the elements have thus been indentified to constitute the crime of aggravated extortion.

The Public Ministry is hereby asked to open an investigation into the aforementioned facts which constitute the following offenses:

- **The crime of deliberately endangering the life of others**
  Article 223-1 of the Criminal/Penal Code

- **The crime of aggravated deception/fraud/criminal deceit**
  Articles L213-1 and L213-2 of the Consumer Code

- **The crime of *abuse of an individual's state of weakness***
  Article 223-15-2 of the Criminal/Penal Code

- **The crime of aggravated extorsion**
  Article 312-2 of the Criminal/Penal Code

We bring to the attention of the Public Ministry the urgent need to launch a criminal investigation into this matter which is the only way to put an end to the offenses the victims have been subjected to.

The Réaction 19 Association remains at the disposal of the investigators for questioning about these facts so as to provide any and all specifics that could be useful in obtaining the truth of this matter.

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On

LISTE OF EXHIBITS

1. Article published on the Médiapart website on December 8th, 2020;
2. Article published on the Gala website on December 4th, 2020;
3. Article published on the Tvlibertés website on December 8th, 2020;
4. Article published on the Marseille news.net website on December 9th, 2020;
5. Article published on the France 24 website on September 2nd, 2009;
6. Septembre 2020 CRIIGEN experts report;
7. European regulation 2020/1043 of July 15th, 2020;
8. Article published on the Capital website November 9th, 2020;
9. Report published by Imperial College London dated October 29th, 2020;
10. Video interview with Dr. Didier Raoult published on June 2nd, 2020 (At 09:30)
11. Study published by the US National Library of Medicine, National Institute of Health on July 15th, 2020;
12. Poll published on the BFMTV website on December 9th, 2020;
13. Contract award announcement published on the official website of the European Union on October 19th, 2020;
14. Article published by AIMSTB on December 6th, 2020;
15. Article published on the France Soir website on September 7th, 2020;
16. Article published on the Sputnik News website on December 11th, 2020;
17. Article published on the France Soir website on December 3rd, 2020;
18. Article published on the France Soir website on October 19th, 2020;
19. 1997 Oviedo Convention on Human Rights and Biomedicine
20. Universal Declaration on Bioethics and Human Rights of October 19th, 2005;
21. Article published on the Capital website on November 15th, 2020;
22. Article published on the Putsch website on December 2nd, 2020;
23. Precautionary principle memo published by Natures Sciences Sociétés in 1995;
24. High Authority of Health recommendation of November 27th, 2020;
25. Article published on the Medisite website on December 10th, 2020;
26. Article published on the AIMSTB website on November 29th, 2020;
27. Scientific Committee Opinion of July 9th, 2020;
28. Article published on the Eurodif website on November 2nd, 2020;
29. Advertisement from the Health Ministry published on YouTube on September 12th, 2020;
30. Article published on the 20 minutes website on November 17th, 2020;
31. Official press release from the IATA association on November 23rd, 2020;

32. Article published on the Yahoo Style website on August 30th, 2019;
33. Article published on the Sud Radio website on November 16th, 2020;
34. Article published on the MesVaccins.net website on November 22nd, 2020;
35. Article published on the AIMSTB website on November 22nd, 2020;
36. Salvetti vs Italie ruling by the ECHR of July 9th, 2002;
37. Memo published by the European Medicines Agency in 2016;
38. Roadmap for Vaccination produced by the European Commission Q3 2019