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OREGON STATE SENATE
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Formal Grand Jury Petition Overview¹⁻⁸

This formal petition is presented by Oregon State Senator Kim Thatcher, District 13 and Oregon State Senator Dennis Linthicum, District 28 having been informed by American citizens with subject matter expertise in statistical analysis, death certificate reporting, federal law, medicine, virology and epidemiology.

This formal petition is based upon significant irregularities in COVID-19 data published by the CDC. Irregularities that have played a critical role in justifying emergency executive orders by the executive branch. Irregularities that have been used to establish public health policies that have infringed upon the Constitutionally protected civil liberties of the citizens we represent. Irregularities that have led to major collateral damages including but not limited to: (1) historic small business loss and community economic collapse, (2) unacceptable rises in mental illness, drug abuse, and suicide rates, and (3) unnecessary loss of life due to the withholding of evidence-based treatments from citizens in need.

Several exhibits (Exhibits B thru G) are provided as substantive evidence with this formal petition for a grand jury investigation into the alleged violations of Federal Law and subsequent acts of Willful Misconduct by the Centers for Disease Control and Prevention (CDC) and Food and Drug Administration (FDA). This formal petition acts as both an official complaint and preliminary exhibit to assist grand jury members in orienting themselves to the scope of alleged crimes committed. This formal petition is also a synopsis of the federal agencies involved, key findings, allegations, and relevant laws violated that led to the quality of COVID-19 data for cases, hospitalizations, and deaths being irreparably compromised.

Immediately upon request or subpoena, we are prepared to provide an extensive witness list of subject matter experts poised to testify under oath to the serious allegations being brought forth.

On behalf of the citizens of Oregon we represent and all Americans seeking answers, we humbly ask you to exercise your power as a U.S. Attorney. Your duty to notify the grand jury of this petition for their consideration is codified in **18 U.S. Code § 3332 - Powers and duties**. We request the U.S. Attorney reviewing this formal petition to immediately inform the grand jury of this petition and all preliminary exhibits submitted within 7 days of receipt. We request grand jury members thoroughly

investigate the alleged acts of Federal Law Violations and alleged acts of Willful Misconduct by the CDC and FDA found within this official formal petition. ¹⁻⁸

In Service to Our Constituents, Our County & Our Oath of Office,



The Honorable Senator Kim Thatcher
Oregon Senate District 13



The Honorable Senator Dennis Linthicum
Oregon Senate District 28

Expert witness list available upon request or subpoena via

Sen.KimThatcher@oregonlegislature.gov

Sen.DennisLinthicum@oregonlegislature.gov

Relevant Case Law Supporting Our Right To Petition

1. The right to petition a grand jury is codified in the first amendment to the United States Constitution and in **18 USC §3332 Powers and Duties**; "It shall be the duty of each such grand jury impaneled within any judicial district to inquire into offenses against the criminal laws of the United States alleged to have been committed within that district. Such alleged offenses may be brought to the attention of the grand jury by the court or by any attorney appearing on behalf of the United States for the presentation of evidence. Any such attorney receiving information concerning such an alleged offense from any other person shall, if requested by such other person, inform the grand jury of such alleged offense, the identity of such other person, and such attorney's action or recommendation."
2. This right is also affirmed again by **In Re Grand Jury Application** (No. 85 Civ. 2235 (VLB), 617 F. Supp 199 | 1985); "Since the United States Attorney has been requested to present certain information to the grand jury he must do so. I will not relieve him of a duty which Congress has seen fit to impose. 18 U.S.C. § 3332(a) imposes a "plainly defined and peremptory duty" on the part of the United States Attorney to present the plaintiffs' information concerning the alleged wrongdoing of the other defendants to the grand jury."
3. The right to petition a grand jury pre-exists codification, and we stand on this right. See **McDonald v Smith**, (472 U. S. 479, 482-484 | 1985) and **District of Columbia v. Heller**, (554 U.S. 570, 579, 592 | 2008).
4. Yet, when we examine English common law, we see this right pre-exists both the Constitution and the United States Code when, in 1689, the Bill of Rights exacted of William and Mary stated: "[I]t is the Right of the Subjects to petition the King."
5. The **US Attorney Manual** confirms the independence of the grand jury; "The prosecutor must recognize that the grand jury is an independent body." (USAM Chapter 9-11.010 – Introduction).
6. The Fifth Amendment "presupposes an investigative body acting independently of either prosecuting attorney or judge." **United States v. Dionisio**, (410 U.S. 1, 16 | 1973)
7. In **Frisbie v. United States** (157 U. S. 160), it is said by Justice Brewer, "But, in this country, it...is for the grand jury to investigate any alleged crime, no matter how or by whom suggested to them, and, after determining that the evidence is sufficient to justify putting the party suspected on trial, to direct the preparation of the formal charge or indictment."
8. "They [grand juries] are not appointed for the prosecutor or for the court; they are appointed for the government and for the people..." **Hale v. Henkel, 201 US 62.**

Summary of Primary Allegations

All federal agencies are required to comply with all federal laws. For convenience, relevant federal agencies and excerpts of relevant laws are included later in this petition.

The CDC and National Vital Statistics System (NVSS), a federal agency within the CDC, are required to comply with the Administrative Procedures Act (APA), the Paperwork Reduction Act (PRA), and the Information Quality Act (IQA). As you are aware, these three laws ensure essential oversight of our federal agencies in order to ensure accuracy in data collection, analysis, and publication.

Key Findings & Allegations:

- (1) The CDC and NVSS violated the APA, PRA, and IQA by issuing COVID-19 Alert No. 2 on March 24th, 2020. This alert significantly modified how death certificates were recorded and did so exclusively for COVID-19. This alert ensured COVID-19 was emphasized as the cause of death. This modification was made exclusively for COVID-19 fatalities which makes COVID-19 exclusively a cause of death and rarely a contributing factor to death. The 2003 CDC *Medical Examiner's and Coroner's Handbook on Death Registration and Fetal Death Reporting* states that in the presence of pre-existing conditions infectious disease is recorded as the contributing factor to death, not the cause. This modification was medically unnecessary, as existing rules for data collection and recording had been in successful use nationwide for the previous 17 years. Most egregiously, this material modification does not apply to any other infectious disease creating a double-standard exclusively for COVID-19 data collection. **Allegation: COVID-19 fatality data used to shape public health policy is significantly and fraudulently inflated.**
- (2) The CDC violated the APA, PRA, and IQA by adopting the Council of State and Territorial Epidemiologists (CSTE) Interim-20-ID-01 COVID-19 Standard Surveillance position paper on April 14th, 2020. This position paper significantly increased COVID-19 case counts. As seen in Section VII.B on page 6, the CSTE paper acknowledged the need to define a methodology for ensuring multiple tests on the same person were not erroneously counted multiple times as new cases. However, the position paper and the CDC declined to define a methodology to ensure the same person was not counted multiple times.

Additionally, Section 5 of the CSTE paper creates the option of “probable” COVID-19 cases with an extraordinarily low standard of proof for diagnosis. For example, the standard of medical diagnosis in this section allows a single cough of undetermined origin to be sufficient to diagnose a patient as COVID-19 positive. Even without confirmatory symptoms or lab testing, a patient with a single cough can now be included in data collection such as total cases, hospitalizations, and also as a COVID caused death. The adoption of the CSTE position paper creates material modifications exclusively for COVID-19 data collection that does not apply to any other infectious disease. **Allegation: COVID-19 case, hospitalization**

and fatality data used to shape public health policy is significantly and fraudulently inflated.

- (3) The Office of Management and Budget (OMB) is appointed to oversee data collection for all federal agencies. Should a federal agency, even in an emergency situation, desire to modify any aspect of their data collection, analysis, or publication, they must first notify the Federal Register. Notification of intent to modify any aspect of data collection, analysis, or publication in the Federal Register alerts the Office of Information and Regulatory Affairs (OIRA) within the OMB. Notification in the Federal Register also opens the mandatory 60-day period for public comment on proposed modifications to data collection, analysis, or publication. The CDC and NVSS failed to notify the Federal Register and therefore failed to comply with federal law. **Allegation: The CDC has made unilateral changes, with far-reaching consequences, to data collection and recording exclusively for COVID-19, without federal oversight, independent of peer-review, and without public comment in violation of federal law.**

- (4) The US Food & Drug Administration (FDA) has participated in withholding safe and effective evidence-based treatments for COVID from Americans in need. Both vitamin D and ivermectin have extensive clinical histories of safety following the administration of billions of doses. Per the results of the Belmont Report following the Congressional investigation into the CDC's role in the Tuskegee Experiment, it was determined that the withholding of safe and effective, evidence-based treatments from people in need was an act of Willful Misconduct on the part of the CDC and all coconspirator organizations, namely the American Medical Association. **Allegation: The FDA has prevented medical professionals from prescribing and administering ivermectin, vitamin D, et al. to people in need under threat of revocation of medical licenses, fines, and even imprisonment. This petition alleges that these actions are a blatant act of Willful Misconduct to withhold evidence-based treatments from Americans in need during a national health crisis.**

- (5) The FDA has additionally been instrumental in preventing improvements to COVID PCR testing that would enable improved accuracy and could have helped prevent the spread of the infection and ensured accuracy of data. World renowned PCR expert Dr. Sin Hang Lee first made the FDA aware of significant problems with PCR design and calibration in March 2020 and again with legal assistance on November 25, 2020. The FDA rejected his formal petition as lacking scientific merit without any justifiable argument or empirical evidence to prove that Dr. Lee's assertions did indeed lack scientific merit. **Allegation: The FDA has refused to collaborate with independent subject matter experts regarding PCR to address the severe flaws surrounding PCR testing, stating without evidence that current PCR testing is 'sufficiently sensitive and accurate' even though the scientific literature confirms the inaccuracy of the current tests. This is yet another example of alleged acts of Willful Misconduct that have cost American lives and placed undue burden upon Americans who were never proven to be infectious based upon scientific method and internationally accepted ethical medical practice.**

- (6) Due to the historical levels of collateral damage created, the actions of the CDC and NVSS may have violated additional laws such as 18 USC §1035 (False Statements Related to Healthcare Matters), 18 USC §1001 (False Statements), 18 USC §1040 (Fraud in Connection with Major Disaster or Emergency Benefits), 18 USC §1038 (False Information & Hoaxes), 18 USC §371 (Conspiracy to Defraud the United States), 18 USC §242 (Deprivation of Rights Under Color of Law), 18 USC §241 (Conspiracy Against Rights), 18 USC §2331 - Chapter 113B (Domestic Terrorism), 18 USC §1031 (Major Fraud Against the United States), 18 USC §3333 (Malfeasance), 18 USC §1622 (Subornation of Perjury), 18 USC §4 (Misprison of Felony).
- Allegation: Considering the extraordinary ramifications of the actions taken by the CDC and FDA to compromise data quality and integrity, support inaccurate testing, and withhold evidence-based treatments from Americans in need, we exercise our right to petition the grand jury to use the broad subpoena power and exercise their authority to investigate our allegations of significant criminal activity.**

Relevant Federal Agencies

Research conducted points to, but is not limited to, the following federal agencies being immediately worthy of grand jury investigation regarding the potential illegal composition and collection of COVID-19 data:

Office of Management and Budget (OMB)

The Office of Management and Budget (OMB) is a federal agency within the Executive Branch that serves the President of the United States by assisting the President with management and regulatory objectives, among other things, and to fulfill the agency's statutory responsibilities.

Office of Information and Regulatory Affairs (OIRA)

Within the OMB, the Office of Information and Regulatory Affairs (OIRA) is tasked with ensuring that all federal agencies are in legal compliance with the APA, PRA, and IQA.

Department of Health and Human Services (HHS)

The Department of Health and Human Services (HHS) is a cabinet level department. The HHS is a federal agency within the Executive Branch.

Centers for Disease Control (CDC)

The Centers for Disease Control and Prevention (CDC) is a federal agency within the HHS. The CDC is responsible for developing evidence-based public health strategies, monitoring disease statistics, and providing effective guidance for citizens and public officials in times of public health crises.

National Center for Health Statistics (NCHS)

The National Center for Health Statistics (NCHS) is a federal agency within the CDC. The NCHS is the nation's principal health statistics agency, compiling statistical information to guide actions and policies to ensure the health of the population.

National Vital Statics Service (NVSS)

The National Vital Statistics System (NVSS) is a federal agency within the NCHS. The NVSS is responsible for the accurate collection of data for all births, deaths, and disease processes attributed to citizens of the United States of America.

Relevant Law

All federal agencies are required to comply with the Administrative Procedures Act, the Paperwork Reduction Act, and the Information Quality Act. Below is a brief summary of relevant law.

Administrative Procedures Act (APA)

One of the primary objectives of the Administrative Procedures Act (APA) 5 USC §551 et seq. (1946) is to govern the process by which federal agencies develop and issue regulations. This includes requirements for publishing in the Federal Register notices of both proposed and final rulemaking, and it provides opportunities for public comment on proposed rules. Most rules have a 30-day delayed effective date. The APA also addresses other agency actions including the issuance of policy statements. (See Additional Considerations Regarding the APA on Pages 15 & 16)

Paperwork Reduction Act (PRA) and Creation of the Office of Information of Regulatory Affairs (OIRA)

The Paperwork Reduction Act (PRA) (44 U.S.C. §§ 3501–3521, Public Law 96-511, 94 Stat. 2812) passed on December 11, 1980 and later amended on May 22, 1995 (44 U.S.C. §§ 3501–3521, Public Law 104-13, 109 Stat. 182) gives authority over collection of certain information by Federal agencies to the Office of Management and Budget (OMB).

To facilitate this, the PRA created within the OMB a new Office of Information and Regulatory Affairs (OIRA). The OIRA is the “central authority for the review of Executive Branch regulations, approval of Government information collections, establishment of Government statistical practices, and coordination of Federal privacy policy.”

<https://www.whitehouse.gov/omb/information-regulatory-affairs/>

Information Quality Act (IQA)

Congress passed the Information Quality Act (IQA i.e., the Data Quality Act) in 2000, which amended the PRA and added two additional requirements. (Section 515 of the Congressional Consolidated Appropriations Act, 2001 Public Law 106-554)

The first provision directs the OMB to issue information quality guidelines for Federal agencies to follow to ensure and maximize the quality, objectivity, utility, and integrity of information, including statistical information, disseminated by federal agencies.

The second provision sets out the requirements for those guidelines, including the requirement that affected federal agencies must establish a process for people to submit correction requests when they believe that the information quality guidelines have not been followed.

18 USC §1035 – False Statements Related to Healthcare Matters

“Whoever, in any matter involving a health care benefit program, knowingly and willfully (1) falsifies, conceals, or covers up by any trick, scheme, or device a material fact; or (2) makes any materially false, fictitious, or fraudulent statements or representations, or makes or uses any materially false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry, in connection with the delivery of or payment for health care benefits, items, or services, shall be fined under this title or imprisoned not more than 5 years, or both.”

<https://www.law.cornell.edu/uscode/text/18/1035>

18 USC §1001 (a) – False Statements

“Except as otherwise provided in this section, whoever, in any matter within the jurisdiction of the executive, legislative, or judicial branch of the Government of the United States, knowingly and willfully (1) falsifies, conceals, or covers up by any trick, scheme, or device a material fact; (2) makes any materially false, fictitious, or fraudulent statement or representation; or (3) makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry; shall be fined under this title, imprisoned not more than 5 years or, if the offense involves international or domestic terrorism (as defined in section 2331), imprisoned not more than 8 years, or both. If the matter relates to an offense under chapter 109A, 109B, 110, or 117, or section 1591, then the term of imprisonment imposed under this section shall be not more than 8 years.”

<https://www.law.cornell.edu/uscode/text/18/1001>

18 USC §1040 – Fraud in Connection with Major Disaster or Emergency Benefits

“Whoever, in a circumstance described in subsection (b) of this section, knowingly (1) falsifies, conceals, or covers up by any trick, scheme, or device any material fact; or (2) makes any materially false, fictitious, or fraudulent statement or representation, or makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or representation, in any matter involving any benefit authorized, transported, transmitted, transferred, disbursed, or paid in connection with a major disaster declaration under section 401 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5170) or an emergency declaration under section 501 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5191), or in connection with any procurement of property or services related to any emergency or major disaster declaration as a prime contractor with the United States or as a subcontractor or supplier on a contract in which there is a prime contract with the United States, shall be fined under this title, imprisoned not more than 30 years, or both.”

<https://www.law.cornell.edu/uscode/text/18/1040>

18 USC §1038 – False Information and Hoaxes

“Whoever engages in any conduct with intent to convey false or misleading information under circumstances where such information may reasonably be believed and where such information indicates that an activity has taken, is taking, or will take place that would constitute a violation of chapter 2, 10, 11B, 39, 40, 44, 111, or 113B of this title, section 236 of the Atomic Energy Act of 1954 (42 U.S.C. 2284), or section 46502, the second sentence of section 46504, section 46505(b)(3) or (c), section 46506 if homicide or attempted homicide is involved, or section 60123(b) of title 49, shall (A) be fined under this title or imprisoned not more than 5 years, or both; (B) if serious bodily injury results, be fined under this title or imprisoned not more than 20 years, or both; and (C) if death results, be fined under this title or imprisoned for any number of years up to life, or both.”

<https://www.law.cornell.edu/uscode/text/18/1038>

18 USC §371 – Conspiracy to Defraud the United States

“If two or more persons conspire either to commit any offense against the United States, or to defraud the United States, or any agency thereof in any manner or for any purpose, and one or more of such persons do any act to effect the object of the conspiracy, each shall be fined under this title or imprisoned not more than five years, or both.”

<https://www.law.cornell.edu/uscode/text/18/371>

18 USC §242 – Deprivation of Rights Under Color of Law

“Whoever, under color of any law, statute, ordinance, regulation, or custom, willfully subjects any person in any State, Territory, Commonwealth, Possession, or District to the deprivation of any rights, privileges, or immunities secured or protected by the Constitution or laws of the United States, or to different punishments, pains, or penalties, on account of such person being an alien, or by reason of his color, or race, than are prescribed for the punishment of citizens, shall be fined under this title or imprisoned not more than one year, or both; and if bodily injury results from the acts committed in violation of this section or if such acts include the use, attempted use, or threatened use of a dangerous weapon, explosives, or fire, shall be fined under this title or imprisoned not more than ten years, or both; and if death results from the acts committed in violation of this section or if such acts include kidnapping or an attempt to kidnap, aggravated sexual abuse, or an attempt to commit aggravated sexual abuse, or an attempt to kill, shall be fined under this title, or imprisoned for any term of years or for life, or both, or may be sentenced to death.”

<https://www.law.cornell.edu/uscode/text/18/242>

18 USC §241 – Conspiracy Against Rights

“If two or more persons conspire to injure, oppress, threaten, or intimidate any person in any State, Territory, Commonwealth, Possession, or District in the free exercise or enjoyment of any right or privilege secured to him by the Constitution or laws of the United States, or because of his having so exercised the same; or If two or more persons go in disguise on the highway, or on the premises of another, with intent to prevent or hinder his free exercise or enjoyment of any right or privilege so secured. They shall be fined under this title or imprisoned not more than ten years, or both; and if death results from the acts committed in violation of this section or if such acts include kidnapping or an attempt to kidnap, aggravated sexual abuse or an attempt to commit aggravated sexual abuse, or an attempt to kill, they shall be fined under this title or imprisoned for any term of years or for life, or both, or may be sentenced to death.”

<https://www.law.cornell.edu/uscode/text/18/241>

18 USC §2331 (Chapter 113B) – Domestic Terrorism

“Definitions: As used in this chapter (5) the term “domestic terrorism” means activities that (A) involve acts dangerous to human life that are a violation of the criminal laws of the United States or of any State; (B) appear to be intended (i) to intimidate or coerce a civilian population; (ii) to influence the policy of a government by intimidation or coercion; or (iii) to affect the conduct of a government by mass destruction, assassination, or kidnapping;...”

<https://www.law.cornell.edu/uscode/text/18/2331>

18 USC §1031 – Major Fraud Against the United States

“Whoever knowingly executes, or attempts to execute, any scheme or artifice with the intent (1) to defraud the United States; or (2) to obtain money or property by means of false or fraudulent pretenses, representations, or promises, in any grant, contract, subcontract, subsidy, loan, guarantee, insurance, or other form of Federal assistance, including through the Troubled Asset Relief Program, an economic stimulus, recovery or rescue plan provided by the Government, or the Government’s purchase of any troubled asset as defined in the Emergency Economic Stabilization Act of 2008, or in any procurement of property or services as a prime contractor with the United States or as a subcontractor or supplier on a contract in which there is a prime contract with the United States, if the value of such grant, contract, subcontract, subsidy, loan, guarantee, insurance, or other form of Federal assistance, or any constituent part thereof, is \$1,000,000 or more shall, subject to the applicability of subsection (c) of this section, be fined not more than \$1,000,000, or imprisoned not more than 10 years, or both.”

<https://www.law.cornell.edu/uscode/text/18/1031>

18 USC §3333 – Malfeasance

“A special grand jury impaneled by any district court, with the concurrence of a majority of its members, may, upon completion of its original term, or each extension thereof, submit to the court a report: (1) concerning noncriminal misconduct, malfeasance, or misfeasance in office involving organized criminal activity by an appointed public officer or employee as the basis for a recommendation of removal or disciplinary action; or (2) regarding organized crime conditions in the district. (etc.)”

<https://www.law.cornell.edu/uscode/text/18/3333>

18 USC §1622 – Subornation of Perjury

“Whoever procures another to commit any perjury is guilty of subornation of perjury and shall be fined under this title or imprisoned not more than five years, or both.”

<https://www.law.cornell.edu/uscode/text/18/1622>

18 USC §4 – Misprision of Felony

“Whoever, having knowledge of the actual commission of a felony cognizable by a court of the United States, conceals and does not as soon as possible make known the same to some judge or other person in civil or military authority under the United States, shall be fined under this title or imprisoned not more than three years, or both.”

<https://www.law.cornell.edu/uscode/text/18/4>

18 USC §3332 – Powers and Duties

“It shall be the duty of each such grand jury impaneled within any judicial district to inquire into offenses against the criminal laws of the United States alleged to have been committed within that district. **Such alleged offenses may be brought to the attention of the grand jury by the court or by any attorney appearing on behalf of the United States for the presentation of evidence. Any such attorney receiving information concerning such an alleged offense from any other person shall, if requested by such other person, inform the grand jury of such alleged offense,** the identity of such other person, and such attorney’s action or recommendation.”

<https://www.law.cornell.edu/uscode/text/18/3332>

Additional Exhibits

The following exhibits provide evidence corroborating what appears to be violations of relevant law.

Exhibit B - COVID-19 Data Collection, Comorbidity & Federal Law: A Historical Retrospective

This is a detailed, peer-reviewed look into the historical timeline describing how the CDC appears to have violated federal law and how these violations have adversely impacted COVID-19 data leading to public health policies that compromised the Constitutionally protected rights of all Americans. (Attached, and link provided)

https://cf5e727d-d02d-4d71-89ff-9fe2d3ad957f.filesusr.com/ugd/adf864_c39029cd980642e48797cdb2ef965972.pdf

Exhibit C - COVID-19: Restoring Public Trust During A Global Health Crisis

This is a detailed, peer-reviewed look into alleged acts of Willful Misconduct carried out by elected and appointed officials within federal, state, and county governments. In this manuscript the authors review the scientific literature regarding the alleged fraud of asymptomatic transmission, PCR testing, withholding of evidence-based treatments from people in need, violations of federal law, projection models used to manipulate public perception of the emergency, and the significant problems with the COVID vaccine clinical trials that should have prevented them from advancing through phasic testing. (Attached, and link provided)

<https://www.greenmedinfo.com/blog/covid-19-restoring-public-trust-during-global-health-crisis>

Exhibit D - March 24th, 2020 NVSS COVID-19 Alert No. 2 Published By the CDC

This document significantly modified how certificates of death were recorded exclusively for COVID-19. (See Executive Summary at The Beginning For Visual Examples)

<https://www.cdc.gov/nchs/data/nvss/coronavirus/Alert-2-New-ICD-code-introduced-for-COVID-19-deaths.pdf>

Exhibit E - April 5th CSTE Interim-20-ID-01 Position Paper Adopted by the CDC April 14th, 2020

This document significantly lowered the medical standards for what constitutes a COVID-19 case and has had far-reaching consequences by inaccurately increasing case counts, hospitalizations, and fatalities. This document also neglected to define a methodology for ensuring that the same individual was not counted multiple times in data collection. The CSTE is not a federal agency. They are a non-profit organization. This paper includes authors from state health departments (page 8) and subject matter experts from the CDC (page 7). (Attached, and link provided)

https://cdn.ymaws.com/www.cste.org/resource/resmgr/2020ps/Interim-20-ID-01_COVID-19.pdf

Exhibit F - Medical Examiner's & Coroner's Handbook on Death Registration

This handbook, published by the CDC, has been in use nationwide in every state since 2003 without incident. This is the proven handbook that the CDC and NVSS elected to abandon in favor of new and untested guidelines for certificate of death recording that did not have proper legal oversight, opportunity for independent peer-review, or public comment. (Attached and link provided.)

https://www.cdc.gov/nchs/data/misc/hb_me.pdf

Exhibit G - NVSS April 2020 Guidance for Certifying Death Certificates

This guidance, published by the CDC in April 2020, was used to exemptify the changes to death certificate reporting exclusively for COVID. The CDC and NVSS did not notify the Federal Register to initiate federal oversight or public comment as required by federal laws mentioned previously. (Attached and link provided.)

<https://www.cdc.gov/nchs/data/nvss/vsrg/vsrg03-508.pdf>

Supplement - U.S. District Judge William Stickman IV Ruling in Pennsylvania

"The congregate gathering limits imposed by defendants' mitigation orders violate the right of assembly enshrined in the First Amendment; (2) that the stay-at-home and business closure components of defendants' orders violate the due process clause of the Fourteenth Amendment; and (3) that the business closure components of defendants' orders violate the Equal Protection Clause of the Fourteenth Amendment..." (Attached and link provided.)

<https://www.courthousenews.com/wp-content/uploads/2020/09/butler-v-wolf.pdf>

Supplement - Physician's Handbook on Medical Certification of Death

This handbook was published by the CDC and has been in use nationwide in every state since 2003 without incident. Another proven handbook that the CDC and NVSS elected to abandon in favor of new and untested guidelines for certificate of death recording that did not have proper legal oversight, opportunity for independent peer-review, or public comment. (Attached and link provided.)

https://www.cdc.gov/nchs/data/misc/hb_me.pdf

Supplement – Data Analysis

Data analysis compiled from every state health department concerning comorbidity, global research supporting the safety of children attending in person school, as well as participating in athletics, performance arts, and extracurricular activities. (Attached and link provided. Not Printed.)

<https://childrenshealthdefense.org/news/if-covid-fatalities-were-90-2-lower-how-would-you-feel-about-schools-reopening/>

Supplement – Data Analysis

Data analysis compiled from every state health department supporting many new cases and hospitalizations were the result of the CDC's test-based diagnosis strategy from June 13, 2020 to July 17, 2020. (Attached and link provided.)

<https://childrenshealthdefense.org/news/covid-19have-you-heard-there-is-good-news/>

Supplement – Data Analysis

Data analysis compiled from every state health department supports extremely high recovery rates without the use of FDA approved vaccines or treatments regardless of infection rates. (Attached and link provided.)

<https://childrenshealthdefense.org/news/are-children-really-recovering-99-9584-of-the-time-from-covid-19/>

Additional Considerations Regarding the Administrative Procedures Act (APA)

Did *COVID-19 Alert No. 2* and the *Guidance for Certifying Deaths Due to Coronavirus Disease 2019 (COVID-19)* create a new rule that required APA informal rulemaking procedure?

APA §551(4) defines a rule as “...any agency statement of general or particular applicability and future effect designed to implement, interpret, or prescribe law or policy...”

COVID-19 Alert No. 2 adopted a new ICD-10 code for COVID-19 as well as the *Guidance for Certifying Deaths Due to Coronavirus Disease 2019 (COVID-19)* which changed the death certificate recording such that, **“COVID-19 should be reported on the death certificate for all decedents where the disease caused or is assumed to have caused or contributed to death... If the decedent had other chronic conditions such as COPD or asthma that may have also contributed, these conditions can be reported in Part II.”**

This is a fundamental change in policy in the way deaths are recorded on certificates. Under the guidance of the 2003 death registration handbooks, the chronic conditions mentioned in the example in the paragraph above would be reported in Part I of the death certificate and not Part II.

This change in policy should have required the APA §553 rulemaking steps to be followed.

Was APA §553 properly followed?

Under APA §553, three steps must be followed. The first step involves publishing notice of the proposed rulemaking in the Federal Register except if “the agency for good cause finds (and incorporates the finding and a brief statement of reasons therefore in the rules issued) that notice and public procedure thereon are impracticable, unnecessary, or contrary to the public interest.”

APA §553 does not specifically mention emergency rules, instead mentioning “good cause.” A pandemic does not necessarily qualify as “good cause” for immediate policy change relating to data collection for infectious disease when data collection rules for other infectious diseases already exist and are used nationwide. By declaring “good cause,” the CDC would be exempt from providing notice for public opportunity to comment but not from federal oversight for data accuracy. The CDC would be able to unilaterally make changes they determined to be necessary, even if they understood proposed changes may compromise the integrity and accuracy of COVID-19 data.

The CDC is required to provide a brief statement of notice, prior to enacting the changes that elucidate the medical and statistical rationale for “good cause.” This notice should state the rationale for the enactment of changes and why notifying the Federal Register to initiate federal oversight, independent

peer-review, and public comment is impracticable, unnecessary, or contrary to the public interest. The CDC is also required to publish their rule changes in final form within the Federal Register. The CDC appears to have failed to provide this brief statement of notice or report their changes in final form to the Federal Register.