

- TRANSLATION -



FONDATION POUR LA DÉFENSE DES DROITS ET LIBERTÉS DU PEUPLE
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Quebec January 13, 2021

BY BAILIFF

BY EMAIL: Francois.Legault.ASSO@assnat.qc.ca

THE HONORABLE FRANÇOIS LEGAULT

Premier of Quebec

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**SUBJECT: VACCINATION - COVID-19
PFIZER / BIONTECH AND MODERNA “VACCINES”
** THIS LETTER WILL BE MADE PUBLIC ****

Mr. Prime Minister,

This letter is sent to you on behalf of the Foundation for the Defense of the Rights and Freedoms of the People (hereinafter “FDDL”), a non-profit organization with more than 35,000 subscribers and/or donors and whose mission is to maintain acquired freedoms, as well as to protect the fundamental rights of the people.



The FDDL, as well as a significant number of its subscribers / donors, are particularly concerned about the vaccination campaign that the Quebec government implemented on December 14, 2020 in connection with COVID-19.

We would like to bring to your attention the criminal complaint relating to the Pfizer / BioNTech and Moderna vaccines which was filed in France by the group **RÉACTION 19** with the Public Prosecutor at the Paris judicial court on December 16, 2020 (hereinafter the “Complaint”), a copy of which is attached hereto. The FDDL fully subscribes to the statements contained in the Complaint.

The Complaint states that the Pfizer / BioNTech “vaccine”, which is the one currently being used as part of the current vaccination campaign in Quebec, and that of Moderna, which could also be used in Quebec in the near future, **do not constitute vaccines, but gene therapy.**

Citing an extract from a document entitled "Expertise Note for the General Public on Vaccines Using GMO Technologies"¹ dated September 2020, the Complaint mentions the following:

“(…) The ‘vaccines’ offered by Pfizer, BioNTech and Moderna consist of:

"Introducing viral genetic material into the cells of the person to be vaccinated (administration is primarily intramuscular, or even intradermal in two of the cases). It is either RNA trapped in nanoparticles of lipids, or DNA inserted into a plasmid, or DNA or RNA delivered by a disarmed genetically modified virus.”

Regarding COVID-19 “vaccines”, which include those from Pfizer/BioNTech, **Professor Christian Perronne**, a physician specializing in infectious diseases at Garches hospital, France, recently expressed the following in an open letter:

“The worst part is that the first 'vaccines' we are offered are not vaccines, but gene therapy products. We're going to inject nucleic acids that will cause parts of the virus to be made by our own cells. **We do not know the consequences of this injection at all.**

¹ https://criigen.org/wp-content/uploads/2020/10/2020-09_Note-dExpertise-Vaccins-GM_C.Ve%CC%81lot-02_Traite-02.pdf



as it is a first in humans. What if the cells of some "vaccinees" make too many viral elements, causing uncontrollable reactions in our bodies?

The first gene therapies will be with RNA, but there are projects with DNA. Normally, in our cells, the message is sent from DNA to RNA, but the reverse is possible in certain circumstances, especially since our human cells have, since the dawn of time, contain so-called "endogenous" retroviruses integrated in the DNA of our chromosomes. (...).

So an RNA foreign to our body and administered by injection could encode DNA, just as foreign, which can then integrate into our chromosomes.

There is therefore a real risk of transforming our genes permanently. There is also the possibility, by modifying the nucleic acids of our eggs and sperm, to transmit these genetic modifications to our children. The people who promote these gene therapies, falsely called "vaccines" are sorcerer's apprentices and take the French and more generally the citizens of the world, for guinea pigs.

We do not want to become, like the tomatoes or the transgenic maize of GMOs (genetically modified organisms). A medical official from one of the pharmaceutical manufacturing companies said a few days ago that he hoped for an effect of personal protection, but that one should not hope too much for an impact on the transmission of the virus, therefore on the dynamics of the epidemic. This is a disguised admission that this is not a vaccine. A shame."² (Our emphasis).

Regarding the benefit of a generalized vaccine, Professor Perronne, expressed the following in his open letter:

“All these measures are made so that the French demand a vaccine. **Now, what is the benefit of a generalized vaccine for a disease whose mortality is close to 0.05%? No. This mass vaccination is unnecessary.** In addition, the risks of vaccination may be greater than the benefits.” (Our emphasis).

² <https://putsch.media/20201202/tribunes/la-culture-du-debat/le-professeur-perronne-et-le-vaccin-nous-ne-voulons-pas-devenir-com>.



Renowned geneticist Alexandra Henrion-Caude has spoken as follows about the Pfizer / BioNTech vaccine in a recent interview:

“The problems are numerous and indeed worrying. Some data from the Pfizer report is worrying, particularly around lymphadenopathies, facial paralysis and ventricular arrhythmias. While we are talking about vaccinating our elders in nursing homes, we are still in the human experimentation phase.

The government has decided to implement a strategy never used in healthy people, while it is still in the midst of a clinical trial, which is particularly the case with Pfizer. Where are the basic standards of medical ethics? Will those who will implement this experimental campaign be aware of the need to clarify the consent of voluntary subjects? Will the elderly be informed that they are going to participate in a biomedical research project?

Furthermore, even under the pretext of a health emergency, in which so many free people without conflict of interest no longer believe, how dare we play on people's gullibility by using technocratic definitions of words? So ask people what a "vaccine" means to them. **They will certainly not imagine that, by this injection, their body will end up, like a GMO, the heir of genetic information from a virus, which will force their cells to produce its viral protein,** to create — according to an autoimmune-like reaction — antibodies directed against the cells that have produced the virus protein.

We must therefore start by ceasing to use the word "vaccine", misappropriated by regulatory texts and put into place truly informed consent.”³ (Our emphasis).

Renowned German physician Wolfgang Wodarg, together with former Pfizer research director Dr Michael Yeadon, have filed a petition to the European Medicines Agency (EMA) to demand the immediate suspension of all studies on the vaccine from Pfizer / BioNTech and, to this

³ <https://fr.sputniknews.com/interviews/202012111044914113-vaccins-contre-le-covid-19-une-cascade-tres-negative-deffets-secondaires-a-craindre-/>



effect, a text has been published to explain this petition, the French version of which reads as follows:

“In collaboration with former Pfizer Research Director Dr. Michael Yeadon, I submitted an application to the EMA, the European Medicines Agency, which is responsible for drug approval across the country. 'EU, December 1, 2020 *for the immediate suspension of all studies on the SARS-CoV-2 vaccine*, in particular the BioNtech / Pfizer study at BNT162b (EudraCT number 2020-002641-42).

We demand that studies — to protect the life and health of those tested — only continue when a study design is available, suitable to address the considerable safety concerns expressed by a growing number of well-known scientists against vaccine and study design. Take into account (sic).

As petitioners, we demand, on the one hand, that due to the known lack of precision of the PCR test in a serious study, so-called Sanger sequencing be used. This is the only way to make reliable claims about the effectiveness of a vaccine against Covid-19. On the basis of the many different PCR tests of very different quality, neither the risk of the disease nor a possible vaccine benefit can be determined with the necessary certainty. **For this reason alone, such testing of vaccines on humans is inherently unethical.**

In addition, we demand that risks known from previous studies be ruled out beforehand, some of which, stemming from the nature of corona viruses, could have dangerous effects. Our concerns relate in particular to the following points:

The formation of so-called "non-neutralizing" antibodies can lead to an overreaction of the immune system, particularly when test subjects are confronted with the true "wild" virus after vaccination. This so-called antibody-dependent enhancement, ADE, has long been known from experiments with corona vaccines in cats. During these studies, **all** of the cats that initially tolerated the vaccination well died after being infected with true coronaviruses. This overreaction is further favored by active boosters.



The vaccinations are expected to produce antibodies against the SARS-CoV-2 spike proteins. However, the spike proteins also contain proteins homologous to syncytin, which are essential for the formation of the placenta in mammals such as humans. **It must be absolutely ruled out that a vaccine against SARS-CoV-2 triggers an immune reaction against syncytin-1, otherwise it may cause infertility of indefinite duration in vaccinated women.**

BioNTech / Pfizer mRNA vaccines contain polyethylene glycol (PEG). 70% of people develop antibodies to this substance — this means that many people can develop allergic reactions to vaccination, or even die.

The much too short duration of the study does not allow a realistic assessment of the long-term effects. As with cases of narcolepsy after swine flu vaccination, long-term effects would only be seen with planned emergency approval when it is already too late for millions of people vaccinated. Governments plan to expose millions of healthy people to unacceptable risks and force them to vaccinate by applying discriminatory restrictions on those who are not vaccinated.

Nonetheless, BioNTech / Pfizer apparently filed for emergency approval on December 1, 2020. Scientific responsibility requires us to take this action.

CALL FOR HELP: Dr Wodarg and Dr Yeadon are asking as many European citizens as possible to sign their petition by sending the email prepared here to the EMA.⁴ (Our emphasis).

In their document entitled "Petition / Motion for Administrative / Regulatory Action"⁵ in connection with the trials concerning the Pfizer / BioNTech "vaccine", Dr Yeadon and Dr Wodarg write in particular the following:

⁴ <https://www.francesoir.fr/societe-sante/vaccination-sars-cov-2-le-dr-wodarg-et-le-dr-yeaddon-disent-stop>.

⁵ <https://www.docdroid.com/w7hXHSE/wodarg-yeaddon-ema-petition-pfizer-trial-final-01dec2020-en-unsigned-with-exhibits-pdf#page=43>



“II. Petitioner deems the current study designs for the Phase II/III trials of BNT162b (the Pfizer/BioNTech trial) to be inadequate to accurately assess efficacy. Petitioner also deems the designs of clinical trials of vaccine candidates designed to stop transmission of the virus from vaccine recipient to others and/or to prevent or mitigate symptoms of COVID-19 for which PCR results are the primary evidence of infection to be inadequate to accurately assess efficacy.

(...)

IV. Furthermore, if the vaccines are approved without an appropriate and accurate review of efficacy, then any potential acceptance or mandate of these vaccines is likely to be based on inaccurate evidence regarding the vaccine, namely that it will stop transmission of the virus from the vaccine recipient to others and or that it will reduce COVID-19 disease and deaths. The Pfizer/BioNTech trial protocol and other trial protocols are currently not designed to determine whether either of those objectives can be met; and even if it was, if cases cannot be reliably identified, neither objective could be reliably met.

(...)

IX. There are some concerning issues with the trial designs, spelled out by Dr. Peter Doshi in the British Medical Journal. Dr. Doshi focuses on the two biggest issues. First, none of the leading vaccine candidate trial is designed to test if the vaccine can reduce severe COVID-19 symptoms, defined as hospital admissions, ICU or death. And second, the trials are not designed to test if the vaccine can interrupt transmission (...). If neither of these conditions is met, the vaccine in essence performs like a therapeutic drug, except a vaccine would be taken prophylactically, even by the healthy, and more than likely carries a higher risk of injury than therapeutic drug. If this were to be true, then therapeutic drugs would be superior to any COVID vaccine.

(...)

D. STAY URGENTLY REQUIRED

I. Petitioner any (sic) many EU residents/citizens will suffer irreparable harm because once the EMA approves the COVID-19 vaccine(s) in question, both governments of EU members states and employers in the EU are most likely going to recommend them for widespread use, and hence without the



EMA assuring proper safety trials of the vaccine now, the Petitioner and others will not have the opportunity to object to receiving the vaccine based on deficient trials later.

II. Furthermore, if the vaccines are licensed without an appropriate efficacy review and without improving the accurate determination of primary endpoints, then any potential acceptance or mandate of these vaccines are likely to be based on inaccurate beliefs and data about the vaccines recipients to others and/or that it will reduce severe COVID-19 disease and deaths. The trial protocols in question are not currently properly designed to determine whether either of those objectives can be met.”

In an interview on Fox News, famous microbiologist Sucharit Bhakdi, speaking of COVID-19 vaccines, stated unequivocally that they were downright dangerous.⁶

With regard to the side effects and complications that may arise from the use of gene therapy products, such as the “vaccines” from Pfizer / BioNTech and Moderna, we refer to what is mentioned in the Complaint, on pages 9 to 14, to the effect that the side effects and possible complications are extremely serious and can even go as far as the death of the person inoculated.

In a document titled “Vaccines and Related Biological Products Advisory Committee October 22nd, 2020 Meeting Presentation”⁷ the Food and Drug Administration (FDA) listed 22 adverse reactions that may result from COVID-19 vaccines, including the following:

- transverse myelitis, which is a severe neurological syndrome;
- arthritis and joint pain;
- tetragenic effects on pregnancy and birth;
- Guillain-Barré syndrome;
- thrombocytopenia;
- vein thrombosis;
- myocardial infarction;
- stroke;
- convulsions and epileptic fits;
- multisystemic inflammatory syndrome in children;
- Kawasaki disease;

⁶ <https://www.youtube.com/watch?v=Gjfl3DigBLU>

⁷

<https://www.fda.gov/media/143557/download?fbclid=IwAR0PJDn2kbf0ReBbp1bfzwZgPmOo62S1kxZ5Fjh4QVgyroJOE0RYmcTNvs0>



- death

In a document entitled “Pfizer / BioNTech mRNA vaccine — known elements of the benefit-risk balance”⁸ prepared and distributed on January 8, 2021 by **REINFOCOVID**, a French collective of healthcare professionals, doctors and university scientists, the following is reported:

"BENEFITS (efficacy)

- Efficacy shown only on the reduction of mild to moderate forms of SARS-Cov-2 infection.
- No efficacy shown for the prevention of severe forms with hospitalization.
- No efficacy shown for the prevention of fatal forms.
- No efficacy shown in people over 75 years old.
- Efficacy not studied in people under 16 years old.
- Efficacy not studied in immunocompromised.
- No data on the prevention of transmission of the virus in vaccinated people, possibly allowing a return to "a normal life".
- No data on the persistence of the effect of the vaccine beyond 3 months.
- No data on the efficacy of the vaccine on potential variants of the virus.

RISKS (adverse effects)

- mRNA "vaccine": part of the virus RNA is modified and then introduced into the body, is read by the cellular machinery which begins to produce viral components.
- New technology: no precedent in humans.
- Study period for adverse effects: first 3 months following the vaccination.
- Significant risk of anaphylactic shock (allergic mechanism): frequency between 1 / 10,000 and 1/1000.
- No data on side effects in the medium or long term, particularly with regard to the occurrence of autoimmune diseases, carcinogenicity, genotoxicity, potential integration of material vaccine genetics into the genome.

⁸ https://reinfocovid.fr/wp-content/uploads/2021/01/balance_BR_vaccin_A5.pdf



- No safety data on use in pregnant women and children, nor regarding breastfeeding."

In a report dated December 19, 2020 entitled "Anaphylaxis Following m-RNA COVID-19 Vaccine Receipt"⁹, from the ACIP COVID-19 Vaccines Work Group, it is stated that, out of 112,807 people who were vaccinated in the United States from December 14 to 18, 2020 by the Pfizer / BioNTech vaccine, 3,150 people, or 2.8% of people vaccinated, had effects that had an impact on their health (health impact events) which are described as follows: inability to perform daily tasks, unable to work, care/follow-up required by a doctor or health care professional.

The Quebec government has never informed the Quebec population as to the real nature of Pfizer/BioNTech and Moderna "vaccines", namely that they constitute a genetic or experimental therapy, nor about the many adverse effects and risks that these "vaccines" entail for the health of the people who will receive them, which is unacceptable in a free and democratic society like Quebec. Consequently, the Quebec government has misled and continues to mislead the public. The Quebec government has seriously failed in its duties to the Quebec population of information, transparency, prudence and security by not adequately informing the population, in particular as regards the real nature of the "vaccines", as well as regards the risks and undesirable effects for health which may result from the said "vaccines".

Furthermore, the FDDLDP denounces the fact that the government of Quebec, to date, has failed to hold a real public debate on any issue related to the Covid-19 crisis.

Also, the FDDLDP strongly denounces the use by the government Quebecois, of the character of Santa Claus, on December 20, 2020, who, during a television interview, in the company of yourself, as Prime Minister of Quebec, told the children that "Being vaccinated is good for everyone"¹⁰

Such an exercise, especially with children, was unworthy of a government and a prime minister, especially given the serious and grave risks associated with vaccines administered in connection with COVID-19, and constituted a shameful marketing exercise aimed at promoting the COVID-19 vaccine to children.

⁹ <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-19/05-COVID-CLARK.pdf>

¹⁰ <https://www.youtube.com/watch?v=-VjKuG1EZGE>



In light of the above, the FDDL considers that the vaccination campaign the government of Quebec has implemented and has been running since December 14th is dangerous for the health of the population and violates the fundamental rules of constitutional and international law, in particular those set out below.

According to some scientists, such as Professor Perronne and Dr Henrion-Caude, the Pfizer/BioNTech and Moderna “vaccines” constitute gene therapies and/or an experimental program and/or a biomedical research project; the *Nuremberg Code* (December 1946 - August 1947) would then be applied. The *Nuremberg Code* includes a list of ten criteria for conditions that human experiments must meet, including the following:

- "1. The voluntary consent of the human subject is absolutely essential. This means that the person concerned must have the legal capacity to consent;
2. The experience must be such as to produce results which are beneficial for the good of society, impossible to obtain by other methods or means of study, and not random or unnecessary in nature;
- (...)
4. The experiment must be conducted in such a way that unnecessary suffering and harm, physical and mental, is avoided;
5. No experiment should be conducted when there is a priori reason to believe that death or disabling injury will occur;"

The *WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Beings* states in particular the following:

- "4. The duty of the physician is to promote and safeguard the health, well-being and rights of patients, including those of those involved in medical research. The doctor devotes his knowledge and his conscience to the accomplishment of this duty.
- (...)



9. It is the duty of physicians engaged in medical research to protect the life, health, dignity, integrity, right to self-determination, privacy and confidentiality of information of those involved in the research. The responsibility to protect those involved in research should always rest with a physician or other health professional and never with those involved in research, even if they have given their consent.

10. In medical research involving human beings, physicians must take into account ethical, legal and regulatory norms and standards applicable in their own country as well as at international law. The protections guaranteed by this Declaration to persons involved in research cannot be restricted or excluded by any ethical, legal or regulatory, national or international provision.

(...)

17. Any medical research involving human beings must first be subject to a careful assessment of the foreseeable risks and disadvantages for the persons and groups involved, in relation to the foreseeable benefits for them and the other persons or groups affected by the disease pathology under study.

All measures intended to reduce the risks must be implemented. Risks must be constantly monitored, assessed and documented by the researcher.

18. Physicians cannot engage in research involving humans without being certain that the risks have been properly assessed and can be managed satisfactorily.

When the risks are found to outweigh the potential benefits or once definitive conclusions have been demonstrated, physicians should assess whether to continue, modify or immediately cease research.



Vulnerable populations and people

19. Certain groups or individuals subject to research are particularly vulnerable and may have a higher likelihood of being abused or suffering additional harm.

All vulnerable groups and individuals should benefit from adequate protection.

20. Medical research involving a vulnerable group is justified only if it meets the health needs or priorities of that group and cannot be carried out on a non-vulnerable group. In addition, this group should benefit from the resulting knowledge, practices or interventions.

(...)

Enlightened consent

25. The participation in medical research of persons capable of giving informed consent should be voluntary. While it may be appropriate to consult with family members or community leaders, no person capable of giving informed consent can be involved in research without having given free and informed consent.

26. In medical research involving persons capable of giving informed consent, any person who may potentially be involved must be properly informed of the objectives, methods, sources of funding, any possible conflict of interest, institutional affiliations of the researcher, the expected benefits and potential risks of the research, the inconvenience it may cause, the measures that will be taken after the clinical trial and any other relevant aspect of the research. The person who could potentially be involved in the research should be informed of their right to refuse to participate or to withdraw from it at any time without retaliation. Particular attention should be paid to the specific information needs of each person who may potentially be involved in the research as well as to the methods adopted to provide the information.



When the doctor or other qualified person is satisfied that the data subject has understood the information, he must then seek his free and informed consent, preferably in writing. If consent cannot be given in writing, the unwritten consent must be formally documented in the presence of a witness.

All those involved in medical research should have the option of being informed of the general conclusions and the results thereof.” (Our emphasis).

The *Universal Declaration on Bioethics and Human Rights* enacts as follows:

"1. Any preventive, diagnostic or therapeutic medical intervention must only be carried out with the prior, free and informed consent of the person concerned, based on sufficient information. Where appropriate, consent should be express and the data subject can withdraw at any time and for any reason without causing any disadvantage or harm to them.

(...)

16. The impact of the life sciences on future generations, including their genetic makeup, should be given due consideration.”

The *Convention for the Protection of Human Rights and the Dignity of the Human Being with regard to the Applications of Biology and Medicine: Convention on Human Rights and Biomedicine*, enacts in particular the following :

“Article – 5

An intervention in the health field can only be carried out after the person concerned has given their free and informed consent.

This person receives adequate information in advance as to the purpose and nature of the intervention as well as its consequences and risks.

(...)



Article- 13

An intervention aimed at modifying the human genome can only be undertaken for preventive, diagnostic or therapeutic reasons and only if it is not intended to introduce a modification in the genome of the offspring.

(...)

Article - 28

The Parties to this Convention shall ensure that the fundamental questions raised by developments in biology and medicine are the subject of an appropriate public debate in the light, in particular, of the medical, social, economic and ethical implications and relevant legal matters, and that their possible applications be the subject of consultations.

Although this convention is only applicable in Europe, the fact remains that it lays down rules and principles which are part of the fundamental rules and principles of any democracy and that these rules and principles are naturally integrated into the principles of fundamental justice promulgated by the *Canadian Charter of Rights and Freedoms*.

The *Canadian Charter of Rights and Freedoms* enacts as follows:

“7. Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

(...)

26. The guarantee in this Charter of certain rights and freedoms shall not be construed as denying the existence of any other rights or freedoms that exist in Canada.

The *Charter of Human Rights and Freedoms* (the Quebec Charter) enacts as follows at Article 1:

“Every human being has a right to life, and to personal security, inviolability and freedom. He also possesses juridical personality.”



Finally, the *Civil Code of Quebec* enacts the following in articles 10, 11, 20 and 21:

“10. Every person is inviolable and is entitled to the integrity of his person.

Except in cases provided for by law, no one may interfere with his person without his free and enlightened consent.

11. No one may be made to undergo care of any nature, whether for examination, specimen taking, removal of tissue, treatment or any other act, except with his consent. Except as otherwise provided by law, the consent is subject to no other formal requirement and may be withdrawn at any time, even verbally.

If the person concerned is incapable of giving or refusing his consent to care and has not drawn up advance medical directives under the Act respecting end-of-life care (chapter S-32.0001) by which he expresses such consent or refusal, a person authorized by law or by a protection mandate may do so in his place.

(...)

20. A person of full age who is capable of giving his consent may participate in research that could interfere with the integrity of his person provided that the risk incurred is not disproportionate to the benefit that can reasonably be anticipated. The research project must be approved and monitored by a research ethics committee.

21. A minor or a person of full age who is incapable of giving consent may participate in research that could interfere with the integrity of his person only if the risk incurred, taking into account his state of health and personal condition, is not disproportionate to the benefit that may reasonably be anticipated.

Considering all the above, the FDDL makes the following requests to the Quebec government:

- i) that there be immediate suspension of the COVID 19 vaccination campaign;
- ii) that an independent committee of local and international experts be set up to analyze and assess the issue of vaccination in connection with COVID-19 in the light of the various opinions of these experts, in particular with regard to the real nature of the COVID-19 vaccines currently used in Quebec and with regard to the risks and adverse effects already identified by the FDA and by several international experts;



iii) that any decision on the continuation of vaccination in connection with COVID-19 take into account the various opinions that will be formulated by the experts who will be part of the independent committee, in particular as regards the risks and harmful and undesirable effects on the health of people related to any vaccine;

iv) that the government immediately confirm and undertake to the effect that there will be no compulsory vaccination for anyone and that no employer, including the government of Quebec, will be able to oblige one of its employees to be vaccinated as a condition of employment;

v) that the government immediately confirm and undertake that no company, in any field whatsoever, can require that a person has been vaccinated in order to be able to receive/purchase their products and services or have access to its premises/place of business.

In the event that the Quebec government, despite everything that is set out in this letter, nevertheless decides to continue with the vaccination already implemented in Quebec in connection with COVID-19, the FDDLDP requests that the Quebec government, **immediately**, fully and completely inform the entire Quebec population as to the real nature of the Pfizer/BioNTech and Moderna vaccines, that is, that they constitute gene therapies / experimental therapies, as well as all the risks and undesirable effects that may result from these “vaccines”.

In such an eventuality, the FDDLDP also asks each of the elected representatives of Quebec, including yourself, as well as the National Director of Public Health, Dr. Horacio Arruda, to sign a declaration stating that:

i) according to him (her), the Pfizer / BioNTech and Moderna vaccines are the most suitable solution for Quebecers in the fight against COVID-19 ;

ii) according to him (her) these vaccines do not pose any serious risk to health; and

iii) as a representative of the Quebec population, he (she) agrees to engage his/her personal civil liability towards any Quebecer who has suffered or could suffer adverse effects following the injection of the Pfizer/BioNTech “vaccine” or of the Moderna “vaccine”.

A copy of the declaration that the FDDLDP asks you to sign in this regard, in such event, is attached hereto.



Hoping that this letter will provoke in you the useful and necessary reflections which are called for in the circumstances, we ask you to accept, Mr. Prime Minister, our respectful greetings.

FOUNDATION FOR THE DEFENSE OF THE RIGHTS AND FREEDOMS OF THE PEOPLE (FDDL) [translation]

BY :

[SGD.: Stéphane Blais]

STÉPHANE BLAIS,
President,

Signing for the entire FDDL board of directors composed also of: Benoit Boisvert, vice-president, and Daniel St-Hilaire, vice-president.

Attch.: Criminal complaint of **Réaction 19** and draft Declaration of personal liability

c.c. All Members of the National Assembly
Dr. Horacio Arruda, National Director of Public Health