

# Notice

## Conditional acceptance – for wearing a face mask

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**This document is lawful. Once you have taken it from me, you must read it.** You then have two choices. You either agree and sign it or return it to me, unsigned, having accepted my terms. This document may be used as evidence against you in a lawfully convened court of law.

If you believe that wearing a mask is essential for public health, I require you to provide the following foundation evidence. Until I have your agreement in writing, I do not consent, and my consent cannot be assumed or presumed.

### **Please provide the following foundation evidence:**

1. Provide evidence for the existence of the Covid-19 virus. To date, no one individual, nor any organisation or government has isolated an infection causing virus despite the offer of substantial rewards.
2. Provide evidence that the risk of Covid-19 is more serious than the seasonal flu. To date, it has not been suggested that we need to be tested for seasonal flu, nor has it ever been deemed necessary. Numerous studies now show that the risk of dying from Covid-19 is less than 0.2%. That is less than seasonal flu. What we are seeing are substitution deaths, without coroner certificates.
3. Provide evidence that the statistics on covid-19 deaths are accurate.
4. Provide evidence that the test kits are accurate.
5. Please verify that you have read and understand the Nuremberg code and its implications.
6. Provide evidence that wearing a mask will not reduce my oxygen consumption or increase my risk of carbon dioxide poisoning.
7. Provide evidence that wearing a mask will not increase my risk of lung infections.
8. Please verify:
  - You accept full responsibility for any inaccurate detail or false information that you provide, whether known or unknown at the time of sought consent.
  - Any damage or health issues suffered by me from wearing a mask, short term or long-term will render you liable in your private individual capacity.
  - In addition, if you provide false information, knowingly or unknowingly, you agree to pay a significant penalty fee as determined by me, the living wo/man for providing misleading information.

Failure to provide **all** the foundation evidence is your tacit agreement that you and your organisation do not have such evidence. Without proof of claim, you cannot lawfully insist I wear a mask, nor threaten the loss of my work, nor withhold any essential medical treatment, nor lawfully restrict my travel. One of my unalienable rights is the right to travel freely.

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I, the undersigned, accept full responsibility for any inaccurate detail or false information provided herein, whether known or unknown at the time of the agreement. Any damage caused by mask usage will be my responsibility and my employer's responsibility. I understand I will be held liable in my private individual capacity. In addition, even if damage is not present and false information is provided, I agree to pay a penalty fee as determined by the individual suffering the restriction of Human Rights.

I have read and understand this entire notice. I have provided all the requested information in a paper format.

Employee name in full: .....

Employee I.D number: .....

Employee Address: .....

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Employee Government issued I.D (Drivers Licence): .....

Employee Autograph: ..... Date: .....

Managers name in full: .....

Managers I.D number: .....

Managers Address: .....

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Manager Government issued I.D (Drivers Licence): .....

Managers Autograph: ..... Date: .....

Witness signature: ..... Date: .....

Witness Address: .....

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Witness signature: ..... Date: .....

Witness Address: .....

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