

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSEE and AMY MILLER,)
Plaintiffs,)
v.	
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,)
Defendants.)

Declaration of Pam Long In Support of Plaintiffs' Ex Parte Application

I, Pam Long, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- All of the statements made in this declaration are true to the beset of my own personal knowledge.
- 3. I am Pam Long, a graduate and make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I am a graduate of the U.S. Military Academy at West Point and a former Army officer. I was commissioned in 1997 and served as a Medical Service Corps officer up to the rank of Captain. I served among Army medics as a Commander of HHD, 36th Medical Evacuation Battalion. I currently live in Colorado as a veteran and civilian.
- 4. I am the military health writer for Children's Health Defense's online newspaper *The Defender*. I have an active network of 18,000 people on social media who have shared concerns about the military vaccine mandate of the Emergency Use Authorized (EUA) COVID vaccines.
- 5. I verify all messages to me about vaccine coercion in the military with two other sources who also lead health organizations with over 20,000 supporters each. All of the following reports have been verified as happening to more than one person, at more than one duty location. I also communicate directly with spouses of active duty personnel and parents of cadets.

- 6. Vaccine coercion to take EUA vaccines, being called licensed vaccines, is happening across all branches, all ranks to degrees, both active and reserve units, and at military academies. Some of these policies have been documented in written memorandums by the chain of command.
- 7. Basic needs. Unvaccinated Service Members (SM) have been denied access to dining facilities and gyms. This includes reports from deployed soldiers in Baghdad who are denied access to all Morale, Welfare, and Recreation (MWR) facilities including the Post Exchange, without access to other venues to purchase toiletries, and forced to conduct Physical Training in 100+ degree heat outside while wearing a mask.
- 8. **Promotion.** Unvaccinated SM have been removed from leadership positions, denied Temporary Duty Station (TDY) and Permanent Change of Station (PCS) travel, denied schools for promotion, and told they are flagged as non-deployable. A non-deployable status for 12 months can result in separation.
- Leave. Unvaccinated SM have been ordered to forfeit their two week leave with families prior to
 deployment to live in quarantine facilities, even with negative Polymerase Chain Reaction (PCR)
 tests.
- 10. **Solitary Confinement of Sailors.** Unvaccinated SM on ships have been denied common port calls to leave the ship for up to the duration of the 8-12 month deployment and some SM have been placed in solitary confinement with meals brought to their confined space.
- 11. Physical and Emotional Coercion. SM report being ordered to stand in the sun at attention for hours until they consent to the vaccine. SM report a requirement to write a 1500 word essay explaining their refusal to be approved by the chain of command before they can leave for a long weekend.
- 12. Pregnancy. Pregnant and breastfeeding SM have been told they are required to take the experimental drug or face punishment or separation, while exemptions for pregnant SM are common with other vaccines. Similar coercion has been applied to SM in child bearing years expressing concerns about unknown fertility risk and developmental harm to a future child at conception.
- 13. **Cadets.** USMA only required the unvaccinated cadets to wear masks at graduation in May 2021. USMA relocated all unvaccinated cadets for summer training out of barracks with their platoons with latrines and fans to live in a co-ed tent exceeding capacity with a portable latrine nearby.

- USMA segregated all unvaccinated athletes from eating and traveling with their teams and then removed unvaccinated athletes from collegiate sports teams.
- 14. Junior Enlisted. One unvaccinated SM reported that he was ordered to say into a recorded phone conversation with the installation commander that he was not being coerced to take the vaccine, promised he would be approved for a school if he took the vaccine, and when he complied and took the vaccine he was denied approval for the school.
- 15. Junior Officers. After the FDA announcement of Comirnaty licensure and the Secretary of Defense's announcement of a mandate, a junior officer was ordered to a clinic to get the vaccine. He verified with the medical staff that the vial offered to him was Pfizer BioNTech, not Comirnaty, and that he was fully within his rights to decline a voluntary EUA drug. He left the clinic unvaccinated.
- 16. Senior Officers. I personally know an officer in the rank of lieutenant colonel who is promotable to brigadier general with 20+ years of service who will retire rather than advance if the vaccine is mandated.
- 17. Pilots. Unvaccinated pilots report being administratively grounded and sent home from training, even with a demonstrated higher risk of blood clots associated with the experimental COVID vaccines.
- 18. Families. Families of unvaccinated SM and cadets have been denied attendance at graduations and special events. Some events require the civilian family members to also be vaccinated to attend.
- 19. Civilian Spouses and Children. SM report their orders for Permanent Change of Station (PCS) now include a mandate for the SM, spouse, and children to be vaccinated to move to a new location.
- 20. Religious Accommodations. SM report chain of command unwilling to process Religious Accommodation paperwork to exempt from COVID vaccine with objectional ingredients and threatening to separate SM as alleged "religious extremists."

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 7, 2021.

Pam Long



August 23, 2021

RE: Pfizer-BioNTech COVID-19 Vaccine IMPORTANT PRODUCT INFORMATION Certain Pfizer-BioNTech COVID-19 Vaccine Lots authorized for Emergency Use comply with the Biologics License Application (BLA)

Dear Healthcare Professional,

Pfizer, Inc. would like to provide you with updated and very important information related to the Pfizer-BioNTech COVID-19 Vaccine, authorized for emergency use by FDA under an Emergency Use Authorization (EUA). On August 23, 2021, FDA approved BioNTech's Biologics License Application (BLA) for COMIRNATY (COVID-19 Vaccine, mRNA), under U.S. License No. 2229. Many lots of Pfizer-BioNTech COVID-19 Vaccine are in circulation that were authorized for emergency use, and are labelled in accordance with the EUA. Some of these lots comply with the recently approved BLA for COMIRNATY and are therefore considered "BLA-approved" lots for administration to individuals 16 years of age and older. The lots that are BLA-approved for administration may be found at cvdvaccine-us.com/resources. For these lots, please see the COMIRNATY® full prescribing information for indication and usage, dosing and administration, and important safety information. This information can be found by scanning the QR code. Please note, it is imperative that you not discard any available EUA lots. These lots continue to be authorized for use under EUA in individuals 12 years of age and older, and for use as a third dose in certain immunocompromised individuals. You can continue to use them up to the date of expiry.

Sincerely,

Donna Boyce

Senior Vice President, Global Regulatory Affairs



D. BORY



Manufactured for BioNTech Manufacturing GmbH An der Goldgrube 12 55131 Mainz, Germany Marketing Authorization Holder

Manufactured by Pfizer Inc. New York, NY 11017

USLicense No. 2229





DECLARATION AND DOCUMENTS IN SUPPORT OF SSGT. SAMUEL CRAYMER, UNITED STATES AIR FORCE

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,))))
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of Ssgt Samuel J Craymer In Support of Children's Health Defense and Amy Miller

- I, Ssgt Samuel J Craymer, declare:
- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a servicemember in the USAF, in the rank of Staff Sergeant, assigned to 354 AMXS on Eielson AFB.
- 4. I am Ssgt Samuel J Craymer, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I Enlisted into military service in 2014. I serve as an Advanced Fighter Avionics Craftsman. I have had the privilege to travel and deploy to many locations in that time

- writing the history for this f-35 program at every turn. I currently reside on Eielson AFB and continue to launch effective Airpower.
- 5. When FDA Approval was given, I read through every single FDA provided piece of information. Our command began planning mandatory vaccination within the week. I used every available avenue to ask for specific information regarding legality I could find in the hopes that it would stay any mandatory vaccination event. I was given no answers. The Monday during our four-day weekend, we were alerted that a mandatory vaccination line would be held for those of us that were still unvaccinated. I went as early as possible to collect, what I hoped was, proper information and see if indeed "The one called Comirnaty would be there". I asked for FDA approved information and was provided either no information or FDA Authorized information. I left the mandatory event and went straight to the IG.
- 6. I stand to lose retirement, VA assistance, and any semblance of trust and pride left in my military leadership or my own service.
- 7. I have written a religious exemption. My commander, Col Langan AMXS/CC, made it clear that any refusal will be met with administrative actions to include Article 92, 15 and administrative discharge less than honorable regardless of exemption. The final date that medical and religious exemptions were due was less than 2 hours after our meeting with him. At this writing, my exemption sits in my hands terrified of revocation.
- 8. I am the subject of shop artworks, cartooning and ridicule largely unchecked and uncorrected. I am also regarded as "having an attitude toward leadership" and the black sheep or "cancer of the flight".
- 9. Our base health care team member Lt Col Peterson asserts they are "interchangeable" and "This is how we beat a pandemic". I also asked to see the vials at the mandatory vaccination line. All were labelled "Pfizer-BioNTech Covid-19 vaccine". Continued visits to the immunizations clinic confirm they only hold EUA products currently.
- 10. I have had zero positive Covid tests as of this writing. I was tested before deployment in 2020 and before PCS to Eielson AFB. An antibody test has not been accomplished.
- 11. While it was expressed that it was not a threat, The afore mentioned articles and discharges we laid down as consequences for defying a "lawful" order. We have also been told that only vaccinated personnel will be allowed to go on future deployments.

12. I was handed a "Vaccination Counseling" page which references "the available and FDA Authorized vaccinations". I also hold the emails and attachments sent from Col Langan 354 AMXS/CC denoting that the vaccines are interchangeable. The attachments say otherwise,

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Samuel Craymer



Medical Material Quality Control Message MMQC-21-1467

Message Number: MMQC-21-1467 Released On: 25-Aug-21 Message Class: Informational Material Type: Vaccine

MMQC\MMI Reference: FDA Recall Reference: **ECRI Reference: DLA Reference:** MFG Release Date:

Subject:

Mandatory COVID-19 Vaccine for Members of the Armed Services

Reason / Information:

On 24 Aug 2021, The Secretary of Defense announced the mandatory vaccination of all service members with COVID-19 vaccine. Reason: To mitigate the risk posed by COVID-19.

Disposition / Instructions:

ACTIONS NEEDED:

- 1) All members of the armed forces under DoD authority on Active Duty, Ready Reserve and National Guard, who are not fully vaccinated against COVID-19 are required to be fully vaccinated in accordance with the Secretary of Defense Memorandum Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members dated 24 Aug 2021 and with corresponding Service-specific guidance. (See image attached under Additional Documentation / Attachments)
- 2) In accordance with the Secretary of Defense Memorandum dated 24 Aug 2021:
- ----The Secretaries of the Military Departments should impose ambitious timelines for implementation.
- -----Military Departments will report regularly on vaccination completion using established systems for other mandatory vaccine reporting.
- ----Mandatory vaccination against COVID-19 will only use COVID-19 vaccines that receive full licensure from the Food and Drug Administration (FDA), in accordance with FDA-

approved labeling and guidance. Service members who are not yet vaccinated may

approved labeling and guidance. Service members who are not yet vaccinated may voluntarily elect to receive any FDA EUA-authorized vaccine in lieu of the FDA-licensed vaccine to meet the mandatory COVID-19 vaccine requirement, but only the fully licensed vaccine may be mandated.

- ----Service members voluntarily immunized with a COVID-19 vaccine under FDA Emergency Use Authorization (EUA) or World Health Organization (WHO) Emergency Use Listing in accordance with applicable dose requirements prior to, or after, the establishment of the policy are considered fully vaccinated.
- 3) An updated DHA COVID-19 Vaccine Interim Procedures Memorandum (IPM) is pending clearance and will be disseminated via MMQC once approved. Services can begin their mandatory vaccination programs under the existing IPM.
- 4) An updated Pfizer, COMIRNATY, Standing Order and COVID-19 Vaccine Screening Form (DHA Form 207 version 13) are attached to this MMQC. Please note the only modifications to the DHA Form 207 are block 6 and block 8.
- 5) The CDC has not provided a Vaccine Information Statement (VIS) for the Pfizer vaccine, however, the updated FDA Fact Sheet should be given to patients receiving any Pfizer COVID-19 vaccine.
- 6) Facilities may coordinate COVID-19 vaccinations with influenza vaccine events, to facilitate ensuring service members are protected from both COVID-19 and influenza as soon as possible.
- 7) As a reminder, locations where other vaccines will be co-administered with COVID-19 vaccine will need to use the appropriate screening form for each vaccine being administered. As written in MMQC-21-1463, the FDA-approved COMIRNATY (COVID-19 Vaccine, mRNA) and the EUA Pfizer-BioNTech COVID-19 Vaccine have the same formulation and can be used interchangeably to provide the COVID-19 vaccination series. Shelf life extension of this product was approved and previously reported: cartons and vials of Pfizer-BioNTech COVID-19 Vaccine with an expiry date of August 2021 through February 2022 printed on the label may remain in use for 3 months beyond the printed date as long as approved storage conditions between -90C to -60C (-130F to -76F) have been maintained.
- 8) Vaccination sites need to expect a 7 business day processing timeline for CONUS and 14 business days for OCONUS from the time the MTF orders are placed into USAMMA-DOC and DLA. This process allows for CDC Redistribution, VTrcKS ordering, coordination, packaging, shipping time, conditioning time, and vaccine shipping time.

EXEMPTIONS AND SPECIAL SITUATIONS:

- --Documentation of medical and administrative exemptions will be in accordance with Joint Instruction AR 40–562, BUMEDINST 6230.15B AFI 48–110_IP CG COMDTINST M6230.4G, Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases, section 2-6 and Appendix C.
- --Those Service Members who previously received exemption from COVID-19 vaccine while the vaccines were authorized under an Emergency Use Authorization will be reevaluated per Service specific guidelines to determine whether the exemption remains valid.
- --IAW the 24 Aug 21 Secretary of Defense Memorandum, Previous COVID-19 infection is not considered fully vaccinated. A history of COVID-19 disease and/or positive serology does not exempt a Service Member from becoming fully vaccinated with COVID-19 vaccine, in accordance with CDC recommendations.

Service/Additional Instructions:



POC Contact Information:

AIR FORCE

Email: usaf.detrick.afmoa.mbx.sgmx-readiness-vaccines@mail.mil

Phone (COMM): 301-619-4183 **Phone (DSN):** 312-343-4183

Fax:

Army - USAMMA DOC Vaccines

Email: usarmy.detrick.usamma.mbx.vaccines@mail.mil

Phone (COMM): 301-619-4128/4318 **Phone (DSN):** 343-4128/4318 **Fax:** 301-619-4468

NAVY OR MARINES

Email: usn.detrick.navmedlogcomftdmd.mbx.vaccines@mail.mil

Phone (COMM): 301-619-8054 **Phone (DSN):** 343-8054 **Fax:** 301-619-2473

USAMMC-E

Email: usarmy.rheinland-pfalz.medcom-usammce.list.dtd-quality-assurance@mail.mil

Phone (COMM): 011-49-6331-86-7118/7181

Phone (DSN): 495-6265 **Fax:** 6218

USCG

Email: D05-DG-HSWLSC-USCG-Pharmacy-Logs@uscg.mil

Phone (COMM): 757-628-4331

Phone (DSN):

Fax:

USFK CUST CONTACT USAMMC-K PHARM

Email: usarmy.carroll.medcom-kor.list.usammc-k-customer-support@mail.mil

Phone (COMM): 011-82-54-970-8340

Phone (DSN):

Fax: KOREAN CELL:010-9232-8824

Additional Message Recipients:

Please ensure dissemination of this information to the following:

Command Channels Immunization Clinics Medical Log Officers Medical Staff Pharmacy Officers Supply Officers

Case 1.21 Per ed 200 De Centers Document 15 Filed 09/18/21 Page 11 of 197 PageID #:



Message Dissemination Authorization

AF Activities will take action as prescribed in AFMAN41-209, Medical Logistics Support, Chapter 7. For MAJCOMS & NGB – This Msg has been transmitted to all designated subordinate medical activities

See Army Regulation (AR) 40-61, 28 January 2005, Chapter 4, and The Department Of The Army Supply Bulletin (SB 8-75-11) For Applicable Policies and Procedures.

DODD 5105.22 and DODD 6025.13

COMNAVSURFPAC/COMNAVSURFLANT INSTRUCTION 6000.1. SECTION 12. Procedures for Quality Control Surveillance of the Medical Material, g. The SMDR and Pharmacy technician shall subscribe to MMQC messages to ensure all drug recall, extensions and suspensions are addressed in an expeditious manner.

Additional Documentation / Attachments

MMQC-21-1467 1.COVI

MMQC-21-1467 2.pdf

MMQC-21-1467 3.pdf

*** END OF MESSAGE ***

RE: COVID vaccine

LANGAN, JOSEPH D Lt Col USAF PACAF 354 AMXS/CC < joseph.langan@us.af.mil>



To: 354 AMXS ALL <UDG 354AMXS ALL@us.af.mil>

Sat 8/28/2021 3:41 AM

2 attachments (383 KB)

Atch 2 - MMQC-21-1467--Mandatory COVID-19 Vaccine for Members of the Armed Services.pdf; Atch 5 - Pfizer-BioNTECH COVID-19 vaccine, BLA Fact Sheet for Recipients, 23Aug21.pdf;

Grizzlies – A few updates to pass along:

- Due to some delays with supply and procedural issues, the mass vaccine line may be delayed past next week. The base is still determining the "NLT" date downtown vaccinations are still an option (just remember to keep your documentation). Stay tuned for further updates... we could still end up executing for starting a vaccination series. In the meantime, if you are unvaccinated and want to beat the crowds or avoid mandatory events, on-base and
- impermissible if the vaccine had changed functionally in any way... that's the entire basis of emergency approval followed by full approval. The FDA One concern I've heard is that there are substantive differences between the Pfizer EUA vaccine and the FDA fully-approved "Comirnaty" vaccine. Attached are a couple products from the Defense Health Agency that address that concern. To summarize, the EUA and "Comirnaty" vaccines are manufactured with the same formulation and are identical... the change in name is due to legal reasons. FDA approval would have been legally approval and DoD mandate covers both "brands" of the same vaccine, and both can be used interchangeably.

Thanks and have a great weekend -Lt Col Langan JOSEPH D. LANGAN, Lt Col, USAF

Commander, 354th Aircraft Maintenance Squadron Eielson AFB, AK

DSN 317-377-9730/Comm 907-377-9730 Cell 907 651 2706

354 AMXS anonymous feedback form



Case 1:21-cv-00200-DCLC-CHS Document 15 Filed 09/18/21 Page 13 of 197

From: LANGAN, JOSEPH D Lt Col USAF PACAF 354 AMXS/CC <joseph.langan@us.af.mil>

Sent: Wednesday, August 25, 2021 3:58 PM

To: 354 AMXS ALL <UDG_354AMXS_ALL@us.af.mil>

Subject: COVID vaccine

Grizzlies –

of Moderna doses, but we expect Pfizer doses in by next week, at which time the base will likely set up a mass vaccine line. So, for those still unvaccinated, here possible. If you have previously been vaccinated with Pfizer, Moderna, or J&J under emergency approval, you are covered. Currently the base only has a supply The Pfizer COVID vaccine is now FDA-approved and mandatory for all active duty personnel (see first attachment). 11 AF/CC has directed compliance as soon as are your options:

You can choose to receive the still-optional Moderna or J&J vaccine on base (though supplies are running low). ij.

You can get the Pfizer (or other) vaccine downtown for free at one of multiple locations (see 2nd attachment), and bring documentation back to the Eielson immunization clinic. 7

You can wait until the base's mass distro event of Pfizer, which will likely take place on Fri 3 Sep (PACAF Family Day) in order to minimize mission impact. This will be a mandatory event for all personnel who have not yet started a vaccination series by that date. æ.

require consultation with the Chaplain, and approval from every level of the chain of command through the PACAF Commander (4-star General). Again, these are only granted in very rare circumstances. Per AFI, if an exemption is not granted at the MAJCOM/CC level, continued refusal to get the vaccine coordinated through your PCM and are only granted under rare circumstances due to documented, pre-existing conditions. Religious exemptions will You can pursue either a medical or a religious exemption, in which case your first stop is your First Sergeant. Medical exemptions will have to be will result in administrative separation from the Air Force. Not a threat, just policy and facts. 4.

WSEP trip coming up in Oct and for all TDYs after that, regardless of exemption status. While we know the vaccine is not a guarantee against catching COVID, it is highly effective against serious and long-term symptoms. The operational risk associated with non-vaccinated travel is too great to accept, not only because of In the meantime, our current policy is that all personnel must be fully vaccinated (both shots + 14 days) in order to travel on any TDY, starting with the Demons' widely varying rules for ROM requirements, but also the operational costs of caring for a seriously ill Airman, particularly in an austere environment.

Those currently on leave will need to start their vaccine series asap upon their return. AMU leadership, please make sure this info gets briefed at all levels.

-Lt Col Langan Thanks

JOSEPH D. LANGAN, Lt Col, USAF

Commander, 354th Aircraft Maintenance Squadron

Eielson AFB, AK



https://www.surveymonkey.com/r/PCVWRYZ



DEPARTMENT OF THE AIR FORCE 354TH FIGHTER WING (PACAF) **EIELSON AIR FORCE BASE, AK**

EXHIBIT 3

MEMORANDUM FOR RECORD

FROM: 354 MDG

SUBJECT: COVID-19 Vaccination Counseling

- 1. This MFR is to serve as documentation that <u>Sampel Craymer</u> was counseled on the benefits and risks associated with COVID-19 vaccination. Universal vaccination for those without risk of serious allergic reaction or contraindication is advocated for by all major medical organizations. Vaccination is one of the most important measures we have to ensure readiness and lower the health risks associated with COVID-19.
- 3. The available and FDA authorized COVID-19 vaccinations are proven to be both safe and effective. It is my professional opinion that granting an exemption for COVID-19 vaccination would have a deleterious effect on mission/unit readiness, their personal health, and the health of the broader community.
- 4. Member was invited to reconsider their role in disease containment within this community and advised that our immunizations clinic stands ready and eager to assist them in joining the millions of safely vaccinated individuals around the world.

5. If you have further questions, please contact me at trevor.a.peterson.mil@mail.mil or 907-377-6653.

> TREVOR A. PETERSON, Lt Col, USAF MC Chief of Medical Staff

Date: 7 Sept 21

I have been counseled by a military physician regarding the medical risks of not receiving vaccination against SARS-CoV-2.



DECLARATION AND DOCUMENTS IN SUPPORT OF LIEUTENANT JOHN ESCHMANN, UNITED STATES NAVY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,))))
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of LT John M. Eschmann In Support of Children's Health Defense and Amy Miller

I, LT John M. Eschmann, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a service member in the US Navy, in the rank of Lieutenant, assigned to VAW-124 on Naval Station Norfolk.
- 4. I am LT John M. Eschmann, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I started out as an enlisted sailor and have worked my way to become an officer. I am presently on active duty and fly as a Naval Flight Officer with VAW-124 and have



- over ten years active duty behind me. I live in Chesapeake, Virginia and work on Naval Station Norfolk.
- 5. Coercive measures such as having differing restrictions for the vaccinated vs the un-vaccinated have been a problem for most of 2021. Attached is a document listing some of the measures. On numerous occasions it has been stated that the vaccine is the way forward and we need to get it. Over and over again, we have been told to the point of harassment.
- 6. I am risking my career and potentially any benefits later on. I had hoped to make this a career.
- 7. I have filed a religious exemption but have not heard the results at this time.
- 8. I have been tested for COVID-19 against my will solely because I have not taken the vaccine. It had nothing to do with being around sick people, or being sick myself. My only crime was that I had not taken the vaccine.
- My CO went as far as to say at quarters that it was the BioNTEch that was approved, after I had told him about the Comirnaty approval and the EUA extension on BioBTech.
- 10. Yes, according to my medical record, I have an entry for having had COVID-19
- 11. I am a male, but I am concerned with fertility for the women in the population.
- 12. My career is likely over if I don't compromise on this.
- 13. I have several emails stating that the BioNTech and Comimaty are the same according to the Navy.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

[Signature full name]

NOTICE

HPCON Charlie for Hampton Roads Area

	OFF Installation				
Non-Immunized	Prohibited from:				
(Anyone who is not	- RECREATIONAL SWIMMING POOLS, GYMS, FITNESS FACILITIES,				
two weeks	EXERCISE CLASSES, SAUNAS, SPAS, AND SALONS				
following the	- TATTOO/BODY ART/PIERCING PARLORS				
completion of a full	- BARBER SHOPS, HAIR OR NAIL SALONS, AND MASSAGE PARLORS				
vaccine regiment)	- CINEMAS/THEATERS				
_	- PARTICIPATION IN TEAM/ORGANIZED SPORTS				
	- DINE-IN RESTAURANTS (TAKE-OUT AUTHORIZED), BARS, NIGHT				
	CLUBS, CASINOS, CONFERENCES, SPORTING EVENTS, CONCERTS,				
	PUBLIC CELEBRATIONS, PARADES, PUBLIC BEACHES, AMUSEMENT				
	PARKS OR OTHER EVENTS DESIGNED TO PROMOTE LARGE				
	GATHERINGS				
	- OUTDOOR RECREATION WHERE COMMON USE FACILITIES ARE				
	USED AND IF A MINIMUM OF SIX FEET PHYSICAL DISTANCING				
	CANNOT BE MAINTAINED				
	- NON-ESSENTIAL COMMERCIAL RETAIL ESTABLISHMENTS AND				
	SHOPPING MALLS				
	Authorized:				
	- USE OF MASS TRANSIT (BUS, RAIL, OR FERRY)				
	- AUTO REPAIR, MAINTENANCE, AND ANNUAL INSPECTION				
	- CURB-SIDE AND DRIVE THROUGH SERVICES				
	- IN-HOME DOMESTIC SERVICES (HOME MAINTENANCE/REPAIR AND				
	LAWN SERVICES)				
	- BANKING SERVICES				
	- PET CARE AND VETERINARY SERVICES				
	- POST OFFICE				
	- LAUNDRY SERVICES, DRY CLEANING				
	- IN-RESIDENCE SOCIAL GATHERINGS LIMITED TO TEN (10) GUESTS				
	THAT DO NOT RESIDE IN THE RESIDENCE				
	Other:				
	- MEMBERS MAY ATTEND RELIGIOUS SERVICES AND PLACES OF				
	WORSHIP PROVIDED THEY COMPLY WITH CDC MITIGATION				
	MEASURES				
Immunized	- Immunized Sailors will NOT be subject to INDIVIDUAL restrictions higher				
(Two weeks	than those corresponding to HPCON B, regardless of the HPCON status of the				
following the	installation to which they are assigned.				
completion of a full					
vaccine regiment)	- Symptomatic personnel regardless of immunization status SHALL follow local				
	and CDC guidance on response to illness				

Vaccine Regiment: Two doses of the Pfizer-BioNTech or Moderna vaccines or one dose of the Johnson and Johnson's Janssen vaccine.

VAW-124 BEAR ACES Plan of the Week

Monday, 30 August 2021 - Sunday, 12 September 2021 FOR OFFICIAL USE ONLY

Commanding Officer: Executive Officer: Command Master Chief:

CDR J. J. Faraco CDR D. A. Huston

CMDCM(AW/IW/SW) C. E. Doss

Sailor of the Quarter: AM1(AW) Meads Junior Sailor of the Quarter: AM2(AW) Mendenhall

Blue Jacket of the Quarter: AD3(AW) Dejoy Bear Ace of the Quarter: AT3(AW) Weadon

Plane Captain of the Quarter: AME2(AW) McClellan

Sailor of the Year: AE1(AW) Regnet Junior Sailor of the Year: AE2(AW) Haverlah Blue Jacket of the Year: YN2(SW) Echeverria

Bear Ace of the Year: AE3 Aguas

Plane Captain of the Year: AD3 Baysinger

OUR MISSION

Provide combat-ready E-2 Hawkeyes, aircrew, and personnel anywhere at anytime

IT IS THE RESPONSIBILITY OF ALL HANDS TO READ THE PLAN OF THE WEEK

SAPR POC-LT Vasquez DAPA-AMC(AW) Maney ESO-LTJG Cruz

Safety Officer-LCDR Chapelle IA Coordinator-LT Vasquez CACO-YNC(SW/EXW) Martinez

MWR President-PR1(AW/SW) Bussard Suicide Prevention Coordinator-LT Vasquez

CFS-LT Wheeler/LS1 (AW/SW) Zhang FAP-CMDCM(AW/SW/IW) Doss

Security Manager-LCDR Carr CMEO-ATC(AW/SW) Blanchard VWAP Coordinator- VACANT Legal Officer-LT Wilster

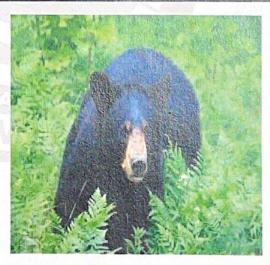
PAO-LT Irving

CCC-NC1(SW) Shepherd Health Promotions-LTJG Cruz

EAWS Coordinator-ADC(AW) Santiago/

AD1(AW) Murray **OPSEC-LTJG** Lynem





Bear of the Week

This week's Bear of the Week is LS2 Julius Elleby from Lenoir, North Carolina. He has been in the Navy for 8 years, and his favorite bear is the Black bear. Favorite Quote: "A complex, accomplished life recounted with confidence and candor. Every page sparkles with directness and grace." - Douglas Brinkley

POW NOTES

Ombudsman: Mrs. Tanja Santiago: Cell (757) 618-1808 vaw124bearaces@gmail.com

Family Readiness Group: VACANT (President) frgvaw124@gmail.com

Fraud, Waste and Abuse Hotline: (800) 522-3451

Sexual Assault Helpline: (877) 995-5247 | National Suicide Hotline: (800) 273-TALK

Navy Suicide Prevention Program Website: www.suicide.navy.mil

Public Website: http://www.public.navy.mil/airfor/vaw124/pages/index.aspx

Facebook: https://www.facebook.com/pages/VAW124/

CORONAVIRUS Hotline: (757) 953-6200

(All Hands SHALL coordinate with your COC before and after calling the CORONAVIRUS Hotline)

1. KEY DATES:

30 August Enlisted Advancement Worksheet Due

1 - 16 September E-6 Exam 6 September Labor Day

15 September E-7 & E-8 Reporting Period Ends 15 September E-5 Midterm Counseling Due

17 - 30 September E-5 Exam

30 September CW04 Midterm Counseling Due
15 October E-9 Midterm Counseling Due
31 October O-4 Reporting Period Ends
15 November E-6 Reporting Period Ends

2. ALNAVS/NAVADMINS TO NOTE: All ALNAVS & NAVADMINS can be found at https://www.public.navy.mil/bupers-npc/reference/messages/Pages/default2.aspx

NAVADMIN 161/21: UPDATED MASK GUIDANCE FOR ALL DOD INSTALLATIONS AND OTHER

FACILITIES

NAVADMIN 150/21: DOD COVID-19 TESTING PRIOR TO OVERSEAS TRAVEL (UPDATE 2)

NAVADMIN 140/21: CHANGE TO URL FOR DEPARTMENT OF NAVY CLASSIFIED ISSUANCES (DONCI)

NAVADMIN 134/21: RESCINDING AUTORITY TO RELAX HAIR GROOMING STANDARDS

NAVADMIN 129/21: PHYSICAL READINESS PROGRAM UPDATE FOR CY2021 PFA

NAVADMIN 123/21: PROCEDURES FOR FOREIGN VISIT REQUESTS TO U.S. NAVY COMMANDS DURING COVID-19 PANDEMIC

3. <u>PFA Plan for 2021:</u> With the second courtesy BCA completed, the official PFA season for FY 2021 has started and this is your 10+ week notice. As of right now the PRIMS electronic PARFQ is unavailable. All PARFQ's are to be filled out and printed. If you are required to see medical for any exceptions/waivers, take your completed PARFQ with you and have them fill out all applicable sections. If a waiver is required, they must be provided to your chain of command (NAVMED 6110/4) prior to the official BCA date. All other waivers will not be accepted. The following is the schedule for the official PFA season;



POW NOTES

- August 30th, official 10 week notice. PARFQ's are available to print from the "Help" tab on the PRIMS web page, fill out, print, and take to medical if necessary for waiver for any or all portions of the PFA.
 Once your PARFQ is complete route through your chain ending with the CFL.
- September 27-01 October mock PFA's (All Hands).
- 1-5 November Official BCA (All Hands)
- 08-12 November Official PFA.

FEP will continue to take place on Monday, Wednesday, and Friday from 0500-0600 and 1300-1400.

4. COVID-19 CONSIDERATIONS: If you have the following symptoms, STAY HOME, contact medical and your COC: Fever > 100 degrees, loss of taste or smell, shortness of breath, cough, cold or flu symptoms, fatigue, muscle or body aches, nausea, vomiting, or diarrhea. If the guidance is unclear to your situation, ask your Chief/DIVO.

5. LEAVE POLICY:

Immunized Sailors:

- Out of Local Area (outside 250 mi) CONUS leave approved at the CO level.
- Officer Local Area leave approved at XO level.
- Enlisted Local Area Leave approved at DH level.
- OCONUS Leave approved at CAG level, additional security requirements discuss with command security manager.

Non-Immunized Sailors:

- Out of Local Area leave:
 - Fill out a VAW-120 COVID Leave screening form and take it to VAW-120 medical for risk assessment and ROM recommendation. Form is available in Admin.
 - Attach the leave screening form to the leave chit and route leave through chain of command. Include VAW-120 medical ROM recommendations, return to work date (after ROM), and a detailed description of expected exposure in the comments.
 - CO is approving authority.
- Local Area Leave
 - No COVID screening required.
 - For Officers, XO is the approving authority.
 - For Enlisted, DH is the approving authority.
- OCONUS Leave
 - CAG final authority. Expect only family emergency or extenuating circumstances to achieve approval.
- 6. COVID-19 UPDATE: The Delta Variant of the COVID-19 virus has become the dominant strain in the US, representing over 83% of all cases. The CDC now estimates this variant is 225% more transmissible than the original COVID-19 strain circulating in 2020. Observations by Navy Medicine have shown a shorter incubation time and higher percentage of symptomatic cases involving delta. Based on anecdotal evidence, symptoms of delta include headache, sore throat, and fever. Compared to previous strains, delta is less often attributed with cough and loss of smell.

The available vaccines (Pfizer, Moderna, and Johnson & Johnson/Janssen) remain the most powerful tool in preventing the spread of COVID-19 including the delta variant. Based on studies from the UK, the Pfizer vaccine is still 88% effective against the delta strain (93.7% effective for previous strains). For reference, the annual influenza vaccine is normally between 60 and 70% effective. Within the Navy and Marine Corps there has been more cases of immunized members contracting the delta variant; however, none of the immunized cases were

POW NOTES

severe or resulted in a hospitalization. Additionally, of immunized individuals that do contract the disease there are many fewer cases of secondary transmission.

The DOD has implemented a policy requiring all members to wear masks (regardless of vaccination status) on DOD instillations indoors to prevent the spread of COVID-19. This precaution is due to the possibility of immunized individuals contacting and spreading the virus NOT because the vaccines are ineffective. The vaccines are still highly effective at protecting from severe illness and hospitalization; however, evidence suggests even immunized individuals can spread COVID-19 without being symptomatic. For more information about the vaccine benefits and risks see the following link:

https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html. The Pandemic is still ongoing. The Bear Ace family has and continues to adjust needed to meet this challenge.

Make your vaccine appointment today:







Oceana



Norfolk



NMCP

- 7. ESO ANNOUNCEMENT: All requests for TA must be accompanied by a routed paper chit. Instructions for routing a TA request can be found on the shared drive under \All Hands\TA Request Forms\. Now is a great time to start studying for the exam to get ahead! E-4 exams are cancelled this cycle, but the Enlisted Advancement Worksheet must still be completed by 30 Sept.
- 8. WORDS FROM XO: Bears, we continue to make great strides in our E-2D transition. We have achieved the goal of qualifying enough maintainers for single-shift maintenance, and are working toward having qualifications for double-shift maintenance. We will soon start NAMP program audits as the next step in preparing for our MPA inspection. We are doing great and ahead of schedule! Bravo Zulu!

As you know, the Secretary of Defense has announced COVID-19 vaccinations will become mandatory, and we expect to start receiving shots in early September. Additionally, NS Norfolk has moved back to HPCON-C status which imposes additional measures off-base for non-immunized personnel. Please be sure to read the enclosed attachments in their entirety. Our command COVID numbers are also rising, so continue to be diligent in using your mask and employing good hygiene. Your health and well-being are paramount. Thank you for your hard work and dedication!

Honored to serve,

D. A. HUSTON

DECLARATION AND DOCUMENTS IN SUPPORT OF FIRST CLASS PETTY OFFICER WAYNE HASTRITER, UNITED STATES NAVY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,	
Plaintiffs,	
V.	
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,	
Defendants.	

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of AE1(AW) Wayne F Hastriter In Support of Children's Health Defense and Amy Miller

I, AE1(AW) Wayne F Hastriter, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a servicemember in the United States Navy, in the rank of Aviation Electrician's Mate First Class Petty Officer, assigned to VAQ-140 on NAS Whidbey Island, Washington.
- 4. I am AE1(AW) Wayne F Hastriter, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I joined the United States Navy in April of 2002 where after completion of Basic Training, I attended the "A-School" for Aviation Electrician's Mate in Pensacola, Florida. I graduated first in my class and was meritoriously promoted to the rank of Third Class Petty

Officer. I was given orders of my choice to VFA-22 in NAS Lemoore, California in December of 2002. We then deployed onboard the USS Carl Vinson for the Western Pacific Cruise of 2003 for 8.5 months. During this cruise, when we visited South Korea, I fell ill with the worst fever that I have ever had in my life and woke up with blisters all over my nose. This is not in my medical record, but I do have photo evidence. I believe I contracted and recovered from the SARS virus at that time. After performing the 2003 Western Pacific Cruise and the 2006 maiden cruise of the USS Ronald Reagan, I transferred to shore duty with SFWPD "Top Gun" in NAS Fallon, Nevada where I was honored as Junior Sailor of the Year for the command. I was also trained in the Auxiliary Security Force where I was given a "US Navy Law" badge for my uniform. After being blessed with a ride in the back seat of an F-16B Viper as the adversary of a "red air" Top Gun event, I was promoted to Petty Officer First Class in 2010. I transferred to VFA-192 where I performed back to back eight month cruises on the USS John C. Stennis in 2011 through 2013 where I served as the Leading Petty Officer of the Electrician and Line Shack work centers. I also served as a Quality Assurance Petty Officer for over a year. I then received orders to FRCNW in NAS Whidbey Island, Washington where I was the Leading Petty Officer of the IMRL work center and served in the Avionics Branch. I then transferred to my current squadron of VAQ-140 in NAS Whidbey Island, Washington where I have served as the Leading Petty Officer of the Electrician work center and was the Command Safety Representative while on the 2019 cruise onboard the USS Abraham Lincoln. I am currently serving as a Quality Assurance Representative in the command. I have never been to any disciplinary boards and have served honorably for over 19 years. My request to transfer to the Fleet Reserves for retirement has been approved for 31 May, 2022. Due to the mandate to receive the vaccine for Covid-19 and my unwillingness to partake in said action for medical and religious beliefs, I risk disobeying a lawful order which could put my honorable service and retirement in jeopardy.

- 5. I was issued a "page 13" on 02 September, 2021 stating that I had "until 14 September, 2021 to initiate vaccination with an FDA-licensed vaccine or, optionally and alternatively, with a vaccine authorized for emergency use."
- 6. If I fail to receive the vaccination within the "page 13" timelines, then I will be disobeying a lawful order and will suffer the consequences under the Uniform Code of Military Justice. This could rob me of my retirement, or other benefits, and could result in an administrative separation under other than honorable conditions which can negatively affect the rest of my life.

- 7. On 09 September, 2021 I submitted a medical waiver for the vaccines for my heart issues and mental health through the flight doctor, LT Ian Speirs at the NHCOH hospital on the NAS Whidbey Island base, for decision through the chain of command. I expect to be denied between the week of the 13th 17th of September, 2021. I also submitted a religious waiver for the vaccines on 09 September, 2021 through the Wing Chaplain, LCDR Andrew Hayler, who said that only one waiver in the last seven years has been approved in the U.S. Navy. I expect that waiver to be denied between the week of the 13th 17th of September, 2021. The waivers have not been denied yet as they both are still routing up the chain of command.
- 8. Liberties. When the vaccines became available for Emergency Use Authorization, the U.S. Navy made a mandate that those who are not vaccinated are to wear a face mask at all times while on base except for eating and the like. I was told that because I am a risk to my fellow Sailors, any leave that I wanted to submit would be rigorously vetted and probably not approved until I received the injection. I was able to take leave while not vaccinated, but I had to submit many forms and rout the request well above the normal chain than a regular leave request. I had to cancel one leave request during this time as it took so long to rout up the chain of command, that it was not approved in time for me to start the leave.
- 9. I have not yet been told exactly which vaccines are available for me at the naval hospital, except that the "Pfizer vaccine will be on base and anyone not already vaccinated will be put on Mando Shot Ex." I asked, "Pfizer or Comirnaty?" They stated, "Pfizer." I asked the local Rite Aid if they had Comirnaty in stock yet and they said they have Pfizer, "it's the same thing."
- 10. I have not been tested positive for Covid during the last 18 months, but as I stated before, I'm sure I have a natural immunity from SARS which I have no doubt that I contracted in South Korea in 2003 which might have kept me from being sick, or lessened the severity if I did become infected.
- 11. My wife and I are currently trying to become pregnant with our second child. We had a miscarriage in June of last year, and we fear that it may have been because of Covid, as she became sick during the pregnancy. We have not been able to become pregnant since then. I fear for fertility and birth defects every day due to this mandate to receive the vaccines.
- 12. **Retirement and Benefits**. I have had my entire Navy career threatened. If I fail to receive a vaccine in the timeframe given, then I will be disobeying a lawful order and will be subject to



- Court Martial and possibly lose my retirement and honorable service just eight months before I am slated to be honorably retired out of the U.S. Navy.
- 13. I have my "page 13" lawful orders which state that I am to receive an FDA approved or optionally, an Emergency Use Authorized vaccine, but they never state that they have the FDA approved "Comirnaty" vaccine available or if it is just the Pfizer BioNTech Covid-19 vaccine.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

AE1(AW) Wayne Franklin Hastriter

hy Franks Herin



ADMINISTRATIVE REMARKS NAVPERS 1070/613 (REV. 08-2012) PREVIOUS EDITIONS ARE OBSOL	ETE SUPPORTING DIRECTIVE	VE MILPERSMAN 1070-320			
SHIP OR STATION: VAQ -146					
SUBJECT:	X PERMANENT	TEMPORARY			
	AUTHORITY (IF PERMANENT):				
COVID-19 Vaccination Administrative Counseling/Warning	BUMEDINST 6230.15B and [Implement	enting Service Directive]			
On 24 August 2021, the Secretary of Defense directed the Secretaries of the vaccination of all members of the Armed Forces.	Military Departments to immed	liately begin full			
On 30 August 2021, ALNAV 062/21 mandated COVID-19 vaccination for	all Navy service members who	are not exempt.			
On 31 August 2021, NAVADMIN 190/21 mandated COVID-19 vaccinatio	n for all Navy service members	who are not exempt.			
On 31 August 2021, Commander, U.S. Pacific Fleet directed all service me COVID-19 within 14 days and complete full vaccination by 28 November 2	mbers who are not exempt to init	tiate vaccination against			
1. No later than 14 September 2021, you are ordered to initiate vaccinal alternatively, with a vaccine authorized for emergency use. You are also or This is a lawful order. Failure to comply with this order constitutes a violate result in punitive or administrative action unless otherwise exempt. Proof medical record.	ion of the Uniform Code of Mil	itary Justice and may			
Service members voluntarily immunized with a COVID-19 vaccine under Health Organization Emergency Use Listing in accordance with applicable this policy are considered fully vaccinated in compliance with this order.	DA Emergency Use Authorizat	tion (EUA) or World			
3. Prior to receiving a COVID-19 vaccine, you will be provided acceroncerns and receive counseling regarding COVID-19 vaccination.	ss to healthcare providers to add	ress questions or			
Member must initial all that apply below:		* ₂			
I acknowledge the above counseling/warning and understand its content of the property of the p	this counseling/warning (initial	one below).			
I intend to seek an exemption as indicated in NAVADMIN 190/21. N	Ty exemption request will be sul	bmitted within 10 days of			
this date.					
Commanding Officer	1				
The Orser, 21	At Ame NEWEL	L 0754821			
2 The District Ozser 21 Member's Signature Date/Signed Witness' Signature Date/Signed					
ENTERED AND VERIFIED IN ELECTRONIC SERVICE RECORD:					
VERIFYING OFFICIAL RANK OR GRADE/TITLE: DATE: SIGNATURE OF VERIFYING OFFICIAL:					
NAME (LAST, FIRST, MIDDLE):	SOCIAL SECURITY NUMBER:	BRANCH AND CLASS:			

I, AE1(AW) Hastriter, do strongly object to the mandate to take experimental drugs. To force a medical experiment on a person is against the Nuremburg Code of Ethical Guidelines for Research numbers 1,5,6, and 9 set forth at the end of World War II and federal regulations U.S. Code Sec. 360bbb-3(e)(1)(A)(ii)(III). The FDA approved the Pfizer-BioNTech companies to produce "Comirnaty" on August 23rd i, which is a "COVID-19 vaccine" designed to minimize the effects of SARS-CoV-2 and the disease COVID-19. Simultaneously, the FDA extended the Emergency Use Authorization on the same day, August 23rd ii, to continue to use the "Pfizer-BioNTech COVID-19 Vaccine," which is already produced for local distribution and overseas sales, under Emergency Use Authorization only. Both drugs are "legally distinct" iii. They can both, "with certain differences," iv be used interchangeably with each other, but as they are legally distinct, only "Comirnaty" is FDA approved. Pfizer is set to start distributing the FDA approved drug in the year 2022. drugs that have been produced have massive adverse side effects as documented in the VAERS medical system, and do not make the test subject immune to, nor have been proven to inhibit the spread of SARS-CoV-2 v. There is data emerging that also shows the "vaccines" may have a long lasting, negative affect on the subject's immune system to the point that future waves of the SARS-CoV-2 mutations will hit those who are "vaccinated" harder than those who are not vi. This "COVID-19 vaccine" could be better described as "a therapeutic with a limited window of efficacy and a terrible side effect profile that must be dosed in advance of illness." Once again, I am appalled at the mandate to coerce and force people into participating in experimental medical procedures, especially by misleading them into thinking that they are taking FDA approved vaccines.

> 2 Jakin W. F. HASTRITER

"BLA Pfizer "Comirnaty" FDA approval letter https://www.fda.gov/media/151710/download

Pfizer-BioNTech COVID-19 Vaccine EUA LOA reissued August 23 2021 https://www.fda.gov/media/150386/download

Pfizer-BioNTech COVID-19 Vaccine EUA Fact Sheet for Healthcare Providers https://www.fda.gov/media/144413/download

Pfizer-BioNTech COVID-19 Vaccine EUA Fact Sheet for Healthcare
Providers https://www.fda.gov/media/144413/download

v Israel the most vaccinated countries in the world spike in cases https://www.cnbc.com/2021/08/30/israel-doubles-down-on-covid-booster-shots-as-breakthrough-cases-rise.html

vihttps://safe.menlosecurity.com/doc/docview/viewer/docNA059D08D8BC80b5dfd63dc74b0a96f82c5d41b237852ab43be6d6f31a33acdcfbdbaebf5e90b

I, AE1(AW) Hastriter, am filing for medical exemption from the Covid-19 vaccination because I do not believe the risk of losing my life outweighs the possible benefits from the vaccine. I have a documented history of cardiac issues, which were never fully resolved. I have a documented instance of poor personal choices after an episode of heavy alcohol use, I am currently employed in a high stress environment and have personally experienced increased anxiety related to my employment and recent mandates related to the covid-19 vaccination, causing me to suffer anxiety and stress related sleep loss and weight loss.

Research has shown that while anxiety is a normal physical response to stress, long term anxiety and stress are linked to an increase in inflammatory markers and in the development and progression of cardiac related events. i i Anxiety alone is linked to a 26% increased risk in coronary artery disease, and is associated with recurrent cardiac events. iii And risk for Sudden Cardiac Arrest increases with age, male gender, personal history of arrythmia, history of tobacco use, history of alcohol abuse, and high levels of stress or adrenaline.iv

The Covid-19 vaccines have been linked to an increased risk of cardiac events, with the most commonly reported adverse events being tachycardia, hypertension, and palpations regardless of age or gender. Observed numbers of myocarditis in military members who have received the covid-19 vaccine are higher than expected, especially when the person has history of prior exposure to the covid-19 virus greater than 2 months prior to covid-19 vaccination.vi

Because of my past medical history, and the risk for new onset of cardiac adverse events related to covid-19 vaccination, I believe I am at higher risk for cardiac adverse event, including loss of life, following covid-19 vaccination, and respectfully request medical exemption.

W. F. HASTRITER

[&]quot;Stress can increase your risk for heart disease" <u>Stress Can Increase Your Risk for Heart Disease - Health Encyclopedia - University of Rochester Medical Center</u>

[&]quot;Anxiety disorders and cardiovascular disease" Anxiety disorders and cardiovascular disease (nih.gov)

[&]quot;Anxiety disorders and cardiovascular disease" Anxiety disorders and cardiovascular disease (nih.gov)

[&]quot;Sudden Cardiac Arrest" Sudden Cardiac Arrest | NHLBI, NIH

^v "Cardiovascular adverse events reported from COVID-19 vaccines: a study based on WHO database" IJGM A 324349 3909..3927 (dovepress.com)

vi "Myocarditis following immunization with mRNA COVID-19 vaccines in members of the US military" Myocarditis Following Immunization With mRNA COVID-19 Vaccines in Members of the US Military | Cardiology | JAMA Cardiology | JAMA Network

09 SEP 21

MEMORANDUM

From: AE1 (AW) Wayne F. Hastriter, USN

To: Commanding Officer, Electronic Attack Squadron 140

Subj: Request for Religious Accommodation

(a) BUPERSINST 1730.11A Ref:

(b) MILPERSMAN 1730-020

(c) NAVADMIN 190/21

Encl: (1) Doctrinal Documents and Statements of the Christian

Faith pertaining to the COVID-19 VACCINE

(2) This Religious Accommodation will not affect Mission

Readiness

- 1. I request a religious accommodation to not be required to receive a vaccination for COVID-19 in accordance with the standards provided in ref (a) through (c). See enclosures (1) and (2) for consideration.
- 2. This request is based on my Christian values found in the Holy Bible and the shared values of religious leaders' views of doctrinal mandate to abstain from any medicines which are the product of immoral production, and the religious advisory of the synods, hierarchs, elders, medical workers of the Christian faith against the COVID-19 vaccine.
- 3. I understand that, if my request is disapproved, I understand I may continue to serve without an accommodation, or I may request administrative separation. I also understand that an approved accommodation continues throughout my Navy career, but may be suspended, modified, or revoked by appropriate authorities when required by military necessity.
- 4. Please take in account that my request to transfer to the Fleet Reserves has been approved for 31 May, 2022 and that this waiver will not impact any deployments as my terminal leave date is approved for 21 February, 2022.
- 5. The point of contact is AE1(AW) Hastriter at 559-904-8768 or wayne.hastriter@navy.mil.

9 Tra-W. F. HASTRITER

09 Sep 21

MEMORANDUM FOR THE RECORD

From: LCDR Andrew J. Hayler, CHC, USN

To: Commander Officer, Electronic Attack Squadron ONE FOUR ZERO

Subj: REQUEST FOR A WAIVER OF POLICY TO ACCOMMODATE PRACTICE

BASED ON RELIGIOUS BELIEF ICO AE1 WAYNE F. HASTRITER

Ref: (a) SECNAVINST 1730.8

(b) SECNAVINST 1730.9

- 1. AE1 Hastritier has submitted a request for accommodation of a religious practice per reference (a). Per BUPERSINST 1730.11A, I interviewed the requestor on 9 September 2021. I explained that this interview would not be a confidential communication as defined by reference (b) and informed the requestor that referral for confidential chaplain support was available.
- 2. Petty Officer Hastriter is requesting a religious accommodation waiver for an exemption from the COVID-19 vaccination mandated by the Secretary of Defense in a memo of 24 August 2021. No previous request for accommodation has been made.
- 3. AE1 Hastriter has been involved in his Christian faith for all his life. He has been attending Church at the local Lutheran Church with his wife since they were married in 2015. Petty Officer Hastriter is listed on NAVPERS 1070/602 (Page 2) as "Church of the Nazarene" this should not be seen as a contradiction as both Churches lie within mainstream Protestant Christianity.
- 4. There are no alternate means of meeting this request.
- 5. AE1 Hastriter is, and has been, fully committed to his faith, and I have no question of his sincerity in requesting exemption from the mandatory COVID-19 vaccine for reasons based in the faith he practices.
- 6. My contact information is (360) 257-4176, andrew.j.hayler1@navy.mil.

A. J. HA

Copy to:

AE1 Wayne F. Hastriter

DECLARATION IN SUPPORT OF SECOND LIEUTENANT CASSIDY HOLLOWELL, UNITED STATES NAVY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,)
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of 2d Lt Cassidy L Hollowell In Support of Children's Health Defense and Amy Miller

I, 2d Lt Cassidy L Hollowell, declare:

- I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a servicemember in the United States Air Force (USAF), in the rank of Second Lieutenant, assigned to the 14th Student Squadron on Columbus Air Force Base.
- 4. I am Second Lieutenant Cassidy L Hollowell, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I have been in the United States Armed Forces for almost 12 years now. I served my first 11 years in the Nevada Army National Guard as an enlisted helicopter mechanic and then commissioned as a Warrant Officer in 2013 and became a

CH-47 Chinook helicopter pilot. I earned my bachelor's degree in Aeronautics from Embry Riddle Aeronautical University in 2016 and made it to the rank of Chief Warrant Officer 3 before leaving the Army in 2020 to transfer to the Air Force. I commissioned in the Air Force from Officer Training School as a Second Lieutenant on May 28, 2021. I am currently going through Specialized Undergraduate Pilot Training at Columbus Air Force Base and will ultimately be flying the C-5M Galaxy at Travis Air Force Base for the Air Force Reserves.

5. On 17 August 2021, my class and I had our Commander's brief for starting flight school. During Lt Col Stanley's (14th STUS Commander) brief, he stated that we all know the vaccination mandate is coming so we need to be proactive and go get the vaccine now. He stated that this vaccine is no different than any other vaccine that we will get in the military, and we need to go get it in order to protect everyone, including his civilian staff.

On 19 August 2021, we had a mandatory "Commander's Call" that all personnel assigned to the 14th STUS were required to attend. During this meeting, Lt Col Stanley repeated all of the same things from the previous meeting about Covid and how he urges us to go get it now.

On 20 August 2021, Capt Sean Oats and myself had a meeting with Lt Col Stanley (because we are the senior ranking officers in charge of our class) and he said that he wants us to find out who in our class refuses to get the vaccine and then referred to the people who refuse to get it as "conscientious objectors".

On 24 August 2021, we had a mandatory "Commander's Call" that all personnel assigned to the 14th STUS were required to attend. During this meeting, Lt Col Stanley repeated all of the same things from the previous meeting but included a slideshow with his vaccination record on it and said that now the FDA approved the vaccine and we will be required to get it so we might as well be proactive and go get it now. He also stated that he knows who is and isn't vaccinated.

- 6. If I refuse to get vaccinated and my religious accommodation gets denied, I will be kicked out of the United States Air Force and will no longer be able to become an Air Force pilot. I left the career that I had built in the Army for 11 years in hopes of having a better command climate in the USAF but unfortunately that is not the case.
- 7. On 8 September 2021, all of the unvaccinated Service Members assigned to the 14th STUS on Columbus Air Force Base were counseled and ordered to go to the base gym on Friday, 10 September 2021, to receive the Emergency Use Authorization (EUA) Pfizer-BioNTech vaccination while being told that the vaccine is "licensed". When I personally told Lt Col Stanley

that the FDA's website specifically states that the EUA Pfizer-BioNTech vaccination is legally distinct from the FDA Approved Comirnaty vaccine, he said that the website says they are interchangeable and that is what will be administered. Multiple people were bringing up this same point so he sent out an email and cited the Department of the Air Force (DAF) COVID Vaccine FAQ: "Service members can elect to receive any FDA licensed or authorized (EUA) vaccine to meet the vaccination requirement. If vaccinations are being given on a mandatory basis, the only vaccine that may be used at this time is the Pfizer-BioNTech COMIRNATY® COVID-19 vaccine. (COMIRNATY® has the same formulation and can be used interchangeably with the FDA authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine according to the FDA. Other vaccines may be added to this list in the future.) If supplies are limited, members can choose to get vaccinated on their own or wait for adequate supply at a DoD facility. MTFs will have adequate vaccine supplies to meet the SECAF's vaccination timeline." When I asked why he was making the deadline for the first vaccination 10 September 2021, instead of a more practical deadline to meet the 2 November 2021 mandate of being fully vaccinated, he said because they just got in a huge shipment of the Pfizer vaccines and they were going to expire if we didn't start administering them this week. On 10 September 2021, I went to the base gym where they were doing the mandatory vaccinations and requested a copy of the fact sheet and all of the other forms that they were handing out. In addition to the fact sheet, they gave me a pre-filled DHA Form 207 (COVID 19 VACCINE SCREENING AND IMMUNIZATION DOCUMENTATION) that has the Pfizer vaccine checked and the Lot number and expiration date (20211130) filled out (definitely not about to expire as we were previously told). I asked if they had the "Dear HCP letter" authorizing that specific Lot as being BLA compliant and no one knew what I was talking about. I then went to the JAG office and asked if the order to get the EUA Pfizer vaccine was a lawful order and I was told yes. The JAG Officer told me that I needed to speak with ADC (Area Defense Council) about my concerns of disobeying a lawful order and the repercussions, that he couldn't discuss it with me because he represents the command.

8. When I did my annual flying physical, I asked my Doctor if I could get an antibody test done so that I can apply for a medical exemption due to already having Covid and I was told that the Air Force is not doing that. I have asserted that I am applying for a religious accommodation and was given a deadline of 17 September 2021 to submit my paperwork. They sent out an email that once we submit our religious accommodation request, we will be pulled from training (put on admin hold) effective that day. On 13 September 2021, I received a message via the Slack app from my interim Flight Commander (Capt Matt Jones) stating "Filling in for Capt Rogers while he's on leave. Be advised no further syllabus events until further notice due to being placed on admin hold/awaiting approval for exemption. Expect a meeting with Lt Col Stanley on Friday afternoon. Please acknowledge and let me know if you have any questions." When I replied that this was conflicting with the previous guidance we were given, he replied, "Col Graham just changed guidance. Call me ###-#### and I can explain." When I called him, he stated that the admin hold was going into effect immediately so students could focus on getting their memo typed up in order to meet the deadline of 17 September 2021. I was told that I am not allowed to attend class or any further syllabus events until I hear otherwise (until my religious accommodation is denied or approved).

- 9. The discrimination goes hand in hand with the coercion. However, what I thought was an empty threat (putting students who seek religious accommodation on admin-hold and pulling them from training) has officially come to fruition as of today, 13 September 2021. They were successful in coercing students though because out of the hundreds that were unvaccinated on 8 September 2021, only 15 of us have decided to pursue the religious accommodation. All of the other students that wanted to seek a religious accommodation caved and got the vaccine because they didn't want to be pulled from training after waiting months/years to get to this point.
- 10. I had Covid-19 at some point in 2020. I found out that I had already recovered from Covid when I donated platelets and was notified that my test came back positive for the antibodies in December 2020. I also went to LabCorp on 9 September 2021 to have another antibody test done and again my results showed that I was positive for the Covid antibodies (I had a quantitative number of 146.0 with a negative test being <0.8) and positive for the spike protein.</p>
- 11. I do want to have children sometime in the near future and I absolutely have concerns about the vaccine's impact on fertility, my reproductive organs, and my menstruation cycle.
- 12. The counseling statement threatens us with UCMJ Punishment under Article 92 for failing to obey a direct order if we do not get vaccinated.
- 13. Yes, I do have proof that we are being offered unlicensed vaccines and being told that they are "interchangeable" with licensed ones or that what we are being offered is licensed.

EXHIBIT 6

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Cassidy Hollowell

EXHIBIT 7

DECLARATION AND DOCUMENTS IN SUPPORT OF TECHNICAL SERGEANT NATHANIEL MASON, AIR NATIONAL GUARD



IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
V.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,	()))
Defendants.))

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of TSgt Nathaniel D Mason In Support of Children's Health Defense and Amy Miller

- I, TSgt Nathaniel D Mason, declare:
- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a servicemember in the Air National Guard, in the rank of Technical Sergeant, assigned to 173FW on Kingsley Field ANGB.
- 4. I am TSgt Nathaniel D Mason, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I have been in the military for 20 years of service and am currently active stationed to 173FW on Kinglsey Field ANGB in Klamath Falls, OR. I have a craftsman skill level in multiple career fields and obtained special duty in flight safety. I was previously



- stationed with the 118AW in Nashville, TN. During my years of dedicated service I have traveled to Germany and Israel with the military.
- 5. On or about 12 September 2021 I was required to complete a survey of my intent to take the Covid shot, without the opportunity to review with legal counsel and prior to filing any official exemption, and return to my commander by 1300PST. This came as a surprise as I have been on paternity leave since 16 August 2021. I was forced to agree that even if I file a religious or medical exemption and it is denied that I will be required to get the COVID-19 shot in addition if my exemption is denied I refuse to get the shot that "I will be subject to discipline and/or adverse administrative action, to include, but not limited to, non-judicial punishment and discharge from military service.
- 6. If I refuse I have been told that I could be demoted and or separated from the military for my potential refusal of the COVID-19 shot. In addition there will be no separation pay available if I am discharged for refusing the shot.
- 7. I have not asserted a medical or religious exemption as of today as I have been on paternity leave.
- 8. I have been intimidated due to the verbiage on the survey for the COVID-19 Mandatory Vaccination and Acknowledgement of Receipt issued on 10 September 2021. The verbiage makes it clear that any medical or religious exemption will result in disciplinary measures. I have dedicated half of my life to the military and feel threatened that it will all be taken away due to my personal religious beliefs.
- 9. Per the military Education Plan for Vaccination, section 3.1.1 they advise the COVID-19 COMIRNATY has been approved for injection, however, they go on to say that the Pfizer-BioNTech COVID-19 shot can be used instead and will be administered under the EUA even though the Pfizer-BioNTech COVID-19 shot is not approved by the FDA.
- I was never formally tested but believe I had COVID in September/November of 2019 upon return from a personal trip to China.
- 11. I have had major concerns about the shot's impact on fertility for both male and female. My wife recently delivered our son in August 2021. My wife and I both refused to receive the shot and tried to avoid anyone that did receive it due to adverse reactions, section 8.3.5, listed in Pfizer's A PHASE 1/2/3 STUDY TO EVALUATE THE SAFETY, TOLERABILTY,



IMMUNOGENICITY, AND EFFICACY OF RNA VACCINE CANDIDIATES AGAINST COVID-19 IN HEALTHY INDIVIDUALS.

- 12. Yes, the Federal Government has made it clear their patience with non-injected induvial is low and additional measures will be taken against those of us who refuse the shot.
- 13. Documents provided by the military indicate that I am being offered unlicensed vaccines and being told that they are "interchangeable" with licensed ones as mentioned above in the EDUCAION PLAN FOR VACCINATION, section 3.1.1.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Meson

[Signature full name]



MEMORANDUM FOR ALL OREGON AIR NATIONAL GUARD MEMBERS

FROM: Oregon Air National Guard Commander, Brig. Gen. Donna Prigmore

SUBJECT: COVID-19 Mandatory Vaccination and Acknowledgement of Receipt

- On 24 August 2021, after the U.S. Food and Drug Administration (FDA) officially approved a vaccine (Pfizer-BioNTech/Comirnaty) for COVID-19, the Secretary of Defense directed that all members of the Armed Forces, to include the National Guard, get vaccinated. The Adjutant General, Maj. Gen. Michael Stencel, has also directed all Oregon National Guard members to get vaccinated immediately.
- It is a lawful order that all Airmen receive the COVID-19 vaccine immediately. Failure to comply with this lawful order will result in appropriate disciplinary and/or adverse administrative action, including separation, pursuant to applicable AF and ANG regulations.
- 3. In order to manage the vaccination program and these new requirements, I am requiring all members of the ORANG to read the statements below and initial the areas that pertain to their respective personal situation. All Airmen are also required to sign the form at the bottom and submit it to their unit commander, or their unit commander's designee no later than 1700 hrs on 12 Sep 2021.

4.	For the statements I simply put N/A.	below, choose (using your initials) ONLY THE ONES THAT APPLY TO YOU. Otherwise,
	(Initials)	I am partially vaccinated and will receive my second shot immediately or at the prescribed date. I understand that I must be fully vaccinated immediately, and that am to provide proof of my vaccination to the medical clinic where I am assigned.
	(Initials)	I am fully vaccinated (meaning it's been two weeks since I received my second shot of Moderna or Pfizer; or it's been two weeks since I received my first and only J&J shot), and have provided proof of vaccination to the clinic.
	(Initials)	I am fully vaccinated but have not yet provided proof to the clinic but will by 1700 hrs on 12 Sep 2021. If later, please explain when/why:
	(Initials)	I have NOT been vaccinated, but plan on doing so at the military base I'm assigned, as soon as the vaccine is available. I understand I need to be fully vaccinated immediately.
	(Initials)	I have NOT been vaccinated yet, but plan on doing so at a civilian medical provider or clinic. I understand I need to be fully vaccinated immediately, and that I am to provide proof of my vaccination to the medical clinic where I am assigned.



(Initials)	Although I understand that the COVID19 vaccination is required for continued membership in the Oregon Air National Guard, I plan to exercise my right to apply for a medical exemption and will do so IMMEDIATELY. For members seeking a medical exemption, initials are also required below:
	(Initials) In the event that my medical exemption is denied, I acknowledge I will be required to get the COVID-19 vaccination.
	(Initials) I acknowledge that, if my exemption is denied and I refuse to get vaccinated, I will be failing to obey a lawful order and will be subject to discipline and/or adverse administrative action, to include, but not limited to, non-judicial punishment and discharge from military service.
	(Initials) I further acknowledge that I may be subject to discipline and/or administrative action if I make a false statement about my vaccination status or fail to comply with the exemption request process that is required.
	(Initials) I understand I may be eligible for legal defense services if my chain of command takes disciplinary or administrative action against me.
	(Initials) I understand medical exemptions are processed and reviewed in accordance with established Air Force regulations.
(Initials)	Although I understand that the COVID19 vaccination is required for my continued membership in the Oregon Air National Guard, I plan to exercise my right to apply for a religious exemption and will do so IMMEDIATELY. For members seeking a religious exemption, additional initials are required below:
	(Initials) In the event that my religious exemption is denied, I acknowledge I will be required to get the COVID-19 vaccination.
	(Initials) I acknowledge that, if my exemption is denied and I refuse to get vaccinated, I will be failing to obey a lawful order and subject to discipline and/or adverse administrative action, to include, but not limited to, non-judicial punishment and discharge from military service.
	(Initials) I further acknowledge that I may be subject to discipline and/or administrative action if I make a false statement about my vaccination status or fail to comply with the exemption request process that is required.
	(Initials) I understand I may be eligible for legal defense services if my chain of command takes disciplinary or administrative action against me.



	(Initials) I understand religious exemptions are processed and reviewed in accordance with established Air			
(Initials)	Force regulations. Although I understand that the COVID19 vaccination is required for my continued membership in the Oregon Air National Guard, I do not plan to obtain the COVID19 vaccine, and do not plan to apply for an exemption of any kind.			
	For members refusing to get the COVID19 vaccination, and who are not applying for an exemption, you are required to also initial below:			
	(Initials) I acknowledge that, by my refusal to get vaccinated, I am failing to obey a lawful order and will be subject to discipline and/or adverse administrative action, to include, but not limited to, non-judicial punishment and discharge from military service.			
	(Initials) I further acknowledge that I may be subject to discipline and/or administrative action if I make a false statement about my vaccination status or fail to comply with the exemption request process that is required.			
	(Initials) I understand I may be eligible for legal defense services if my chain of command takes disciplinary or administrative action against me.			
(Initials)	I am a T32 AGR Service Member, and I understand that refusal to obtain the COVID19 vaccination would serve as the basis for release from the AGR program.			
(Initials)	I am a T32 Dual Status Military Technician, and I understand that refusal to obtain the COVID19 vaccination could result in loss of military membership, which would end T32 technician employment by operation of law. (See 32 U.S.C. § 709).			
FDA-approved COV Oregon Air Nationa continue serving in	I, I acknowledge that the direction being given to me (via this document) to receive the (ID19 vaccine is a lawful order being administered to me by the Commander of the Id Guard. I understand this legal order is one that I am obligated to obey in order to the military, unless I have an approved exemption. I understand I am to provide a copy r, digital or hard copy, to my unit commander or their designee, no later than ther, at 1700hrs.			
PERSONAL STATEMENTS				

I am initialing this document under a direct order from the ORANG Commander however, I am being required to initial this without the opportunity to consult with an attorney on a weekend dated 11 September 2021. I reserve my rights to consult with an attorney at a later date regarding this document.



NAME (FIRST M. LAST, RANK)	SIGNATURE
UNIT	DATE

EXHIBIT 8

DECLARATION AND DOCUMENTS IN SUPPORT OF MASTER SERGEANT THOMAS MEACHMAN, UNITED STATES AIR FORCE RESERVE



IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and)
AMY MILLER,)
)
Plaintiffs,)
)
v.)
PAGE 4 PRINCIPLE)
FOOD & DRUG ADMINISTRATION, and)
JANET WOODCOCK, Acting Commissioner of)
Food and Drug Administration,)
)
Defendants.)
)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of MSgt Thomas M Meacham In Support of Children's Health Defense and Amy Miller

I, MSgt Thomas M Meacham, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a servicemember in the United States Air Force Reserve, in the rank of Master Sergeant, assigned to 304th Rescue Squadron on Portland Air National Guard Base, Oregon.
- 4. I am MSgt Thomas M Meacham, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I am a current and qualified Pararescue Craftsman with over 16 years of dedicated and honorable service including three combat tours in Afghanistan, two combat tours in Africa, one combat tour in Turkey, and multiple other NASA deployments in support of

EXHIBIT 8

manned space flight. I began my career graduating basic training as an honor graduate and have continued to excel as one of the most qualified members in my unit as Pararescue Team Leader, Tandem Parachutist, Jumpmaster, and Dive Supervisor just to name a few. I currently work on the civilian side as a Firefighter/Paramedic with Camas-Washougal Fire Department in Clark County, Washington.

- 5. It has been described to me in various details from multiple personnel including my Squadron Commander and enlisted Chief that I may be facing up to a dishonorable discharge if I refuse the COVID-19 vaccine. It has also been related to me that I will not be Combat Mission Ready and my Individual Medical Readiness will not be "green" if I refuse in which my Commander related he will pull my BASIP pay. I have been told that even if I pursue an exemption than I will still remain non-deployable, therefore a liability to the squadron and no longer needed.
- 6. I reach 17 years in service on 26 JAN 2022, leaving me with almost three years until retirement (over 13 years of those being on Active Duty Status). I stand to lose everything I've sacrificed over that time without further pay, healthcare, or retirement due to this mandate.
- 7. I have not yet submitted an exemption but will plan on doing so when the time comes. I've been told by my command that they most likely not get approved and even if they do it will not allow me to continue my job as a Pararescueman.
- 8. I was told that I would not be deployable without being vaccinated as well as I cannot go TDY. In addition if I were to be on long tour orders, any leave requests outside of the local area will be denied unless vaccinated.
- 9. I have been directly told that the Pfizer-BioNTech vaccine is the same as Comirnaty with them being interchangeable and since they've both been FDA approved I have been mandated to receive it. I have been told even if Comirnaty is not available that I am still mandated to receive the Pfizer-BioNTech vaccine or I can volunteer to receive the Moderna or J&J in its stead.
- 10. I contracted COVID-19 while TDY for the military in March with my unit putting me on continuing orders to quarantine for an additional 11 days with my immediate family (my wife & three children getting sick as well due to this exposure). I had my labs drawn in August and tested Positive for T-cells for COVID-19 showing natural immunity. I submitted an COVID-19 LOD with my medical section including my orders, events leading up to, and my positive T-cell test.
- 11. N/A I do have concerns about sterility.



- 12. Among everything else I have been told that if I attempt to transfer to the Inactive Ready Reserve it will be denied due to not being mission ready without being vaccinated first.
- 13. Yes, some are confidential but will attach documents that decisions are being made from.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

MSgt Thomas Martell Meacham



SECRETARY OF DEFENSE 1000 DEFENSE PENTAGON WASHINGTON, DC 20301-1000

EXHIBIT 8

AUG 24 2021

MEMORANDUM FOR SENIOR PENTAGON LEADERSHIP COMMANDERS OF THE COMBATANT COMMANDS DEFENSE AGENCY AND DOD FIELD ACTIVITY DIRECTORS

SUBJECT: Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members

To defend this Nation, we need a healthy and ready force. After careful consultation with medical experts and military leadership, and with the support of the President, I have determined that mandatory vaccination against coronavirus disease 2019 (COVID-19) is necessary to protect the Force and defend the American people.

Mandatory vaccinations are familiar to all of our Service members, and mission-critical inoculation is almost as old as the U.S. military itself. Our administration of safe, effective COVID-19 vaccines has produced admirable results to date, and I know the Department of Defense will come together to finish the job, with urgency, professionalism, and compassion.

I therefore direct the Secretaries of the Military Departments to immediately begin full vaccination of all members of the Armed Forces under DoD authority on active duty or in the Ready Reserve, including the National Guard, who are not fully vaccinated against COVID-19.

Service members are considered fully vaccinated two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Those with previous COVID-19 infection are not considered fully vaccinated.

Mandatory vaccination against COVID-19 will only use COVID-19 vaccines that receive full licensure from the Food and Drug Administration (FDA), in accordance with FDA-approved labeling and guidance. Service members voluntarily immunized with a COVID-19 vaccine under FDA Emergency Use Authorization or World Health Organization Emergency Use Listing in accordance with applicable dose requirements prior to, or after, the establishment of this policy are considered fully vaccinated. Service members who are actively participating in COVID-19 clinical trials are exempted from mandatory vaccination against COVID-19 until the trial is complete in order to avoid invalidating such clinical trial results.

Mandatory vaccination requirements will be implemented consistent with DoD Instruction 6205.02, "DoD Immunization Program," July 23, 2019. The Military Departments should use existing policies and procedures to manage mandatory vaccination of Service members to the extent practicable. Mandatory vaccination of Service members will be subject to any identified contraindications and any administrative or other exemptions established in Military Department policy. The Military Departments may promulgate appropriate guidance to carry out the requirements set out above. The Under Secretary of Defense for Personnel and



Readiness may provide additional guidance to implement and comply with FDA requirements or Centers for Disease Control and Prevention recommendations.

The Secretaries of the Military Departments should impose ambitious timelines for implementation. Military Departments will report regularly on vaccination completion using established systems for other mandatory vaccine reporting.

Our vaccination of the Force will save lives. Thank you for your focus on this critical mission.

ARADISTR



SECRETARY OF THE AIR FORCE WASHINGTON

3 September 2021

MEMORANDUM FOR DEPARTMENT OF THE AIR FORCE COMMANDERS

SUBJECT: Mandatory Coronavirus Disease 2019 Vaccination of Department of the Air Force Military Members

On 24 August 2021, the Secretary of Defense issued a mandate for all members of the Armed Forces under Department of Defense authority on active duty or in the Ready Reserve, including the National Guard, to immediately begin full vaccination against COVID-19.

Effective immediately, commanders in the Department of the Air Force shall take all steps necessary to ensure all uniformed Airmen and Guardians receive the COVID-19 vaccine, which includes issuing unit-wide and individual orders to their military members. Commanders must take action systematically and as expeditiously as possible to ensure prompt and full vaccination of Service members. Unless exempted, Active Duty Airmen and Guardians will be fully vaccinated by 2 November 2021. Unless exempted, Ready Reserve, to include National Guard, Airmen and Guardians will be fully vaccinated by 2 December 2021. To aid in the process, there are additional resources available in the COVID-19 Commander's Toolkit, available at https://usaf.dps.mil/teams/COVID-19/SitePages/Home.aspx.

Only COVID-19 vaccines that receive full licensure from the Food and Drug Administration (FDA) will be utilized for mandatory vaccinations unless a military member volunteers to receive a vaccine that has obtained U.S. Food and Drug Administration Emergency Use Authorization or is included in the World Health Organization's Emergency Use Listing. Individuals with previous COVID-19 infection or positive serology are not considered fully vaccinated and are not exempt.

Pursuant to my authority under Article 22 of the Uniform Code of Military Justice and Rules for Courts-Martial 306, 401, and 601, I hereby withhold initial disposition authority from all commanders within the Department of the Air Force who do not possess at least special court-martial convening authority and who are not in the grade of O-6 with respect to any alleged offense that constitutes refusal or failure to obtain the COVID-19 vaccine. Commanders are advised to consult with their servicing staff judge advocate for further guidance.

Together, we will win this fight against COVID-19. One Team, One Fight.

Frank Kendall

EXHIBIT 8

2 Attachments:

- 1. Secretary of Defense Memorandum, "Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members," 24 August 2021
- 2. Department of the Air Force COVID-19 Vaccination Implementation Guidance, 2 September 2021

cc:

AF/CC

SF/CSO



<u>Department of the Air Force Mandatory COVID-19 Vaccine Implementation</u> <u>Frequently Asked Questions</u>

GENERAL

The FDA formally licensed the Pfizer-BioNTech COMIRNATY® COVID-19 vaccine on 23 August 2021. Secretary Of Defense HON Lloyd Austin issued a memorandum on 24 Aug 2021, which directed Secretaries of the Military Departments to immediately begin full vaccination of all members of the Armed Forces under DoD authority on active duty or in the Ready Reserve, including National Guard, who are not fully vaccinated against COVID-19. The Secretary of the Air Force HON Frank Kendall directed that DAF components move out aggressively on this guidance.

The Secretary of Defense's direction establishes a requirement for Service members to be fully vaccinated. Service members can elect to receive any FDA licensed or authorized (Emergency Use Authorized (EUA)) vaccine to meet that requirement. If vaccinations are being given on a mandatory basis, only vaccines with full FDA licensure may be required. At this time, that only includes the COMIRNATY® (Pfizer) vaccine, but more may be added to that list in the future. COMIRNATY® has the same formulation and can be used interchangeably with the FDA authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine according to the FDA. Other vaccines may be added to this list in the future.

Any refusal to receive the COVID-19 vaccine, absent an approved exemption, may be punishable under the Uniform Code of Military Justice. Prior to receiving the COVID-19 vaccine, Department of the Air Force Active and Reserve Component personnel, as well as the Air National Guard, will have access to healthcare providers and chaplains at DAF vaccination sites to address questions or concerns with COVID-19 vaccination. Commands are advised to consult with their servicing Staff Judge Advocate office for additional guidance on vaccination non-compliance. The process for obtaining exemptions for all mandatory vaccinations is provided in AFI 48-110_IP for medical exemptions, and DAFI 52-201 for religious accommodations.

Unit vaccination data will be tracked and monitored in ASIMS with weekly reporting through command channels to the Office of the Secretary of Defense. It is the expectation of the SecAF that commanders execute this guidance as soon as feasible, taking into consideration the availability of vaccine and mission requirements.

REFERENCES

20210824 Secretary of Defense Memo Mandating COVID-19 Vaccination for DoD Service Members.

AFI 48-110_IP, Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases.

DAFI 52-201, Religious Freedom in the Department of the Air Force.

20210825 DoD Public Affairs Guidance: COVID-19 Vaccinations for Military Personnel

20210802 DAF Public Affairs Guidance: Department of the Air Force Mandatory COVID-19 Vaccine Implementation

FREQUENTLY ASKED QUESTIONS

PERSONNEL

1) Will I be discharged if I refuse to take the vaccine?

Should a Department of the Air Force (DAF) service member decline to accept the vaccine, without a valid medical or administrative exemption, we will make available to him/her a full range of resources – to include individual and professional medical advice – to demonstrate the safety and effectiveness of the vaccine. We want our people to be fully informed about any medical procedure, this one included.

If counseling and informal efforts fail to convince the member to receive the vaccine, a member's chain of command could, as a last resort, take appropriate administrative or disciplinary action commensurate to the alleged offense, up to and including discharge. Commanders have a range of other tools available to them and will ultimately make judgments based on the circumstances of each case in consultation with legal, chaplain, and medical professionals.

2) If I have an approved retirement in 12 months, can I be exempt from the vaccine?

There will be no exemptions from the vaccine due to approved retirements or separations. Of note, COVID-19 vaccinations are NOT deployment (mobility) immunizations. The Secretary of Defense has mandated vaccination for all service members for force health protection. The provisions of AFI 48-110 that allow members within 180 days of separation or retirement to be exempt from certain vaccinations DO NOT apply in this case.

3) I'm currently on terminal leave, will I be required to take the vaccine?

Members on terminal leave will not be required to take the vaccine; however, if recalled to active duty, the member will be required to take the vaccine.

- 4) Will I be allowed to reenlist or extend my current enlistment if I refuse to take the vaccine?
 - Reenlistment is a command prerogative and a commander may take into account vaccination status in making that determination.
- 5) If discharge is premised on the refusal to follow the order to take the vaccine, will the DAF owe me involuntary separation pay?
 - No. The Air Force or Space Force will not owe you separation pay.
- 6) Do I need to repay bonuses/education if I refuse to take vaccine?

If an Active Duty Service Commitment (ADSC) was incurred as a result of educational opportunities, and it was not completed before any potential separation or discharge, then the



service may seek to recoup any associated funding or payments.

7) Will I be denied PCS/TDY or Formal School opportunities if I refuse to take the vaccine?

It is possible commanders may deny PCS/TDY or Formal School opportunities if a member is unvaccinated.

8) Can I be pulled from training if I refuse the vaccine?

It is possible commanders may pull a member from training if a member is unvaccinated.

9) I'm requesting a Mandatory Separation Date (MSD) waiver. Will it be denied if I don't take the vaccine?

Failing to maintain retention and/or readiness standards could result in denial of an MSD waiver request.

OPERATIONS

10) Why do I have to take the vaccine? Won't those with exemptions also affect readiness?

COVID-19 vaccines have proven to be safe and very effective in preventing hospitalizations and deaths. Vaccine requirements are tied to personal medical readiness, and are designed to afford Service members with the best protections available so they can perform missions across the globe.

Personnel with approved exemptions will be identified as required in all applicable data systems. Commanders will assess impact to individual and unit level readiness using vaccination status as a key parameter to determine availability to perform mission and ability to meet mission requirements.

11) Will all deployers without an exemption be required to take the vaccine?

Yes. The vaccine is mandatory for all personnel regardless of deployment status or posture. This includes all personnel who are not presently ordered to deploy.

12) I'm a flyer. Will there be a grounding or "feet-on-the-ramp" policy if I refuse the vaccine? (Also refer to Question 17)

All Airmen performing flight or controller duties must maintain medical readiness. Members who are non-compliant with medical standards may face administrative, disciplinary, and flying grounding status actions. These could include Duty Not Involving Flying (DNIF), Duty Not Involving Controlling (DNIC), and Duty Not Involving Alert (DNIA). A member will not automatically be placed in a DNIF/DNIC/DNIA status. Commanders should assess mission requirements before taking these administrative actions.

13) Will some AFSCs be allowed to refuse the vaccine if there is a shortage in their career field? Does the "pilot shortage" give me leverage?

No. All service members, regardless of pay grade and/or career field, are required to be vaccinated. Individual vaccination status in critically manned AFSCs will not be offered as solution to manage career field shortfalls. Members could face administrative or legal actions if they decline to take the vaccine.

MEDICAL

14) What if the vaccine on my base is not licensed by the FDA? Can I be forced to be vaccinated?

Service members can elect to receive any FDA licensed or authorized (EUA) vaccine to meet the vaccination requirement. If vaccinations are being given on a mandatory basis, the only vaccine that may be used at this time is the Pfizer-BioNTech COMIRNATY® COVID-19 vaccine. (COMIRNATY® has the same formulation and can be used interchangeably with the FDA authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine according to the FDA. Other vaccines may be added to this list in the future.)

If supplies are limited, members can choose to get vaccinated on their own or wait for adequate supply at a DoD facility. MTFs will have adequate vaccine supplies to meet the SECAF's vaccination timeline.

15) Will vaccine refusal cause me to be DNIF/DNIC/DNIA?

Maybe. All members must maintain medical readiness. Members that are non-compliant with medical standards may face administrative, disciplinary, and flying grounding status actions. These could include Duty Not Involving Flying (DNIF), Duty Not Involving Controlling (DNIC), and Duty Not Involving Alert (DNIA).

A member refusing COVID-19 vaccination will not initially be placed in a grounding status. Before duty, during review of Go/No-Go Items they may be deemed not medically compliant. Also, once designated as "Red" in ASIMS the member may be considered to have failed to maintain medical qualification standards.

16) Are there exemptions for vaccination?

Yes. Much like the annual flu shot, there are medical and administrative exemptions (including religious accommodation exemptions). Airmen and Guardians should consult with their local MTF for information on the exemption process. Medical and administrative exemptions are addressed in AFI 48-110_IP, Immunizations and Chemoprophylaxis for the



Prevention of Infectious Diseases. Religious accommodations are addressed in DAFI 52-201, Religious Freedom in the Department of the Air Force.

17) If I am "high-risk," do I have to take the vaccine?

Most "high-risk" medical conditions are suitable for the COVID-19 vaccination. Vaccinations are usually helpful for populations at higher risk for infection and more severe illness complications. Members may consult with their Primary Care Provider (PCP) or supporting MTF/RMU (ARC/ANG) for appropriate plan of vaccination.

18) If I have religious objections, do I have to take the vaccine?

Only service members with an approved exemption do not have to take the vaccine. Refer to DAFI 52-201 and AFI 48-110 for information on requesting an exemption from the vaccination requirement for reasons of religious accommodation. Members who submit a religious waiver to not receive the vaccination will be exempt from the requirement while their request is pending. If the waiver is denied, the member will be required to be vaccinated. Commanders must counsel the requestor after receiving the request that noncompliance with immunization requirements may adversely affect readiness for deployment, assignment, travel, or result in other administrative or disciplinary consequences. Counseling must be documented in a memorandum and included with the religious accommodation request package.

19) If I am pregnant, do I have to take the vaccine?

Pregnant Service members are recommended to receive COVID-19 vaccination consistent with guidance from the Centers for Disease Control and Prevention (CDC), American College of Obstetricians and Gynecologists (ACOG), and the Society for Maternal-Fetal Medicine (SMFM); however, a pregnant Service member with concerns about vaccination during pregnancy may pursue a temporary medical exemption following vaccine counseling from her healthcare provider, as per paragraph 2-6.a.(1)(a) of AFI 48-110. There is no data that COVID-19 vaccination is unsafe for members who are pregnant or breastfeeding. Pregnant and breastfeeding members are at higher risk for severe illness or hospitalization from COVID-19 infection.

20) If I am planning to become pregnant, do I have to take the vaccine?

Yes. There is no data that COVID-19 vaccination is unsafe for members who plan to become pregnant. Members considering pregnancy should consult with their specialty care doctor or primary care doctor if they have concerns regarding the COVID-19 vaccination.

21) If I am post-partum but breastfeeding, do I have to take the vaccine?



Yes (unless under medical exemption). There is no data that COVID-19 vaccination is unsafe for members who are pregnant or breastfeeding. Pregnant and breastfeeding members are at higher risk for severe illness or hospitalization from COVID-19 infection. Service members who are breast-feeding should consult their primary care doctor if they have concerns regarding the COVID-19 vaccination.

22) If I've already had COVID-19, do I still need to take the vaccine?

Yes. Vaccinated individuals have significantly lower rates of reinfection and illness than those who have been previously infected but remain unvaccinated. Having had COVID-19 does not mean you are immune to future infections and does not meet the requirement to be vaccinated.

23) If I have a history of allergic reactions to vaccinations, do I have to take the vaccine?

Reactions to other vaccines do not necessarily predict a reaction to COVID-19 vaccines. Those who have had a reaction to a specific COVID-19 vaccine, or one of the ingredients in the vaccine, should not continue receiving that particular vaccine. As medical conditions vary for individuals, members should consult with their primary care providers for special condition concerns.

24) What conditions will allow me to obtain a medical exemption? (also see Question 18)

As medical conditions vary for individuals, members should consult with their primary care providers for special condition concerns.

25) How safe is the vaccine?

COVID-19 vaccines have proven to be safe and very effective in preventing hospitalizations and deaths. As we do with other deadly infections, we want to protect our force through the best tool available, vaccination. Required vaccination to protect the force is routine for DoD, including annual influenza vaccination. The COMIRNATY® (Pfizer) vaccine is fully licensed by the FDA. The two other EUA vaccines have been thoroughly tested and found to be safe and effective in preventing severe COVID-19 symptoms. All three vaccines continue to undergo continuous and intense safety monitoring.

26) Will my medical records list accurate information so that if I experience short or long-term adverse events associated with the vaccine, I will be able to receive appropriate health care in the future? Will the government pay for this health care?

Yes. All immunizations are recorded on a DD2766c and kept in the Service member's medical record. Members experiencing adverse effects related to vaccinations or any illness,



injury, disease, operative procedure, or hospitalization, are responsible for promptly reporting information to their commander or supervisor and supporting medical facility. If lasting adverse effects are found to be related to vaccination, your medical records will be noted and appropriate care provided. Members of the Air Reserve Component who believe they have suffered adverse effects of a military vaccination should consult their commanders for a line of duty determination to appropriately reflect the source of any purported injury.

27) I feel uncomfortable and not safe receiving the vaccine due to the limited amount of knowledge on potential long term effects of the vaccine. Can I be given a waiver until more information is known on the possible future effects?

No. We have a full range of resources – to include individual and professional medical advice – to help service members understand the safety and effectiveness of the vaccine.

28) Can I choose which type of vaccine to take (Pfizer, J&J, Moderna)?

Service members can elect to receive any FDA licensed or authorized (EUA) vaccine to meet the requirement. If vaccinations are being given on a mandatory basis, the only vaccine that may be used at this time is the COMIRNATY® (Pfizer) vaccine. (COMIRNATY® has the same formulation and can be used interchangeably with the FDA authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine according to the FDA. Other vaccines may be added to this list in the future.)

29) If I've had a monoclonal antibody preparation or Convalescent Plasma, do I still need to be vaccinated?

Yes. Currently, there is no data on safety or efficacy of COVID-19 vaccination in persons who received monoclonal antibodies or convalescent plasma as part of COVID-19 treatment. The CDC recommends that COVID-19 vaccination be deferred for 90 days after receipt to avoid a possible impact on COVID-19 vaccination by prior antibody treatment. However, providers and patients can consider COVID-19 vaccination in such treated individuals within this 90-day window on a case-by-case basis with shared clinical decision-making for Force Health Protection and other important vaccination needs. (also see Question 18)

30) If I was part of the trial vaccination group, do I still need to take the FDA mandated vaccination?



Service members that were part of a vaccine trial, should now be aware of whether they were in the treatment or placebo group. Service members that were in the actual vaccine treatment group will be required to provide proof of vaccination and have that recorded in their military health records. Service members that were part of the placebo group are required to be vaccinated.

31) I am currently awaiting a second dose of the Moderna vaccine. I do not want to take another shot. Will I be required to take the second shot even though it is not currently a mandatory vaccine?

No, but refusing to be fully vaccinated, without a medical exemption or religious accommodation, will be handled the same as if you are unvaccinated. (also see Question 1)

32) What if I lost my CDC vaccination card? Am I required to get the vaccine again?

If a service member was vaccinated outside of the military health system, and/or their health records do not indicate that they've been vaccinated, they will need to provide proof of vaccination. If they cannot show proof of vaccination either with a CDC card or other vaccination records, they may be required to be vaccinated. It is suggested that members keep a copy of their vaccination documentation in an electronic form such as a picture on their phone or in their email. Service members should get this documentation added to their military health records as soon as possible.

33) Can I get titers drawn and be considered current with the vaccine?

No. Titers are considered unreliable and not an FDA approved method to prove immunity to COVID-19. There is NO titer level that is considered to represent immunity from COVID-19.

34) Will vaccination be required for TDY or Deployment to other countries?

Each country has its own requirements for entry related to COVID-19 testing, vaccination status, and quarantine standards. The DAF will respect and follow these requirements when sending members abroad.

35) Will I require a booster if I have already received the vaccine?

The DoD will follow CDC guidance for booster shots.

36) Can I request a different type of vaccine based on what I feel will be good for me?

If the medical treatment facility has more than one type of vaccine you may request that vaccine based on availability. If a service member decides to use a vaccine outside of the



military health system, they will need to provide proof of vaccination. Service members should get this documentation added to their military health records as soon as possible.

LOGISTICS

37) Do I have to be vaccinated to fly on the Patriot Express? How about other carriers?

All service members are required to be vaccinated. Other travelers aboard the Patriot Express, other government-contracted carriers, or commercial airlines, are not required to be vaccinated at this time. However, passengers must meet point-of-entry vaccination/testing requirements outlined in the Foreign Clearance Guide (e.g. negative PCR test within 72 hours).

38) Do I have to be vaccinated to sign up for Space-A travel?

All service members are required to be vaccinated. Due to COVID-19 associated restrictions, only certain categories remain eligible to seek Space-A travel unless an exception is provided. See Table 3 of DoDI 4515.13 Air Transportation Eligibility for more information.

39) What if the COMIRNATY® (Pfizer) vaccine can't be shipped to my base? Can I be asked to take the vaccine while TDY or at Formal School?

Yes. You may be ordered to take the vaccine while on TDY or at a Formal School. In this situation, your Commander would coordinate with the TDY location or school.

40) Now that the vaccine is mandatory, will the movers that pack my household goods be required to be vaccinated?

US Transportation Command, the DoD Personal Property Program Manager, is reviewing the mandatory vaccine requirements and its application to personnel that provide services to the Government, and will publish guidance upon completion of their review.

LEGAL

41) Can my chain-of-command require proof of vaccination?

For service members, vaccination status is captured in DoD medical health records, which commanders, first sergeants, or a commander's designee can utilize to verify vaccination status. The member's commander, first sergeant, or commander's designee may also ask the member to provide proof of vaccination status in order to effectively accomplish their force health protection mission and implement force health protection policies.



42) What administrative actions (LOR, Article 15, referral evaluation, etc.) can my chain-of-command take if I refuse vaccine? How will this be enforced uniformly among units?

Commanders have wide latitude to use the full range of quality force management tools to enforce good order and discipline. Any refusal to receive the COVID-19 vaccine, absent an approved exemption, may be punishable under the Uniform Code of Military Justice. (also covered under questions 1, 7, and 8)

43) What will happen to my career if I refuse to take the vaccine when it's mandatory?

Absent an approved medical or administrative exemption (e.g., religious accommodation), any refusal by a service member to receive the COVID-19 vaccine may be punishable under the Uniform Code of Military Justice.

44) I work in very close quarters with others. Will civilians in my organization also be required to take the vaccine?

Not at this time. DoD requires social distancing and masking indoors for all unvaccinated individuals, regardless of the level of community spread. Unvaccinated individuals are also subject to restrictions on travel. The Department is also working to implement the new federal guidance issued on 29 July 2021 that will require all DoD personnel attest to their vaccination status, which may require unvaccinated individuals to be tested 1-2 times per week.

45) How can I speak out about not wanting to be vaccinated? Am I allowed to give interviews or protest?

Military members are required to obey all lawful orders they receive. They are not restricted from any of the usual free speech avenues, such as signing a petition or writing a letter to the editor, if these actions are done as a private citizen and not as a representative of the DAF or DoD. Members may not participate in uniform or in their official capacity (including implied or inferred) in any radio, television, or other program as an advocate of a partisan political party, candidate, or cause. Members are prohibited from participating in demonstrations when they are on duty, when they are in a foreign country, when they are in uniform, when their activities constitute a breach of law and order, or when violence is likely to result.

46) Who is allowed to ask me if I'm vaccinated?

Commanders, first sergeants, and commander's designees have a need to know if their military members are vaccinated. They may ask their military members and expect a truthful response. If a military member is suspected of misconduct (e.g., being not fully vaccinated and not wearing a mask), he or she must be advised of their rights under Article 31, UCMJ.



47) If discharged, will it be characterized as Honorable if I refuse the vaccine?

Characterization of service upon discharge is based on the quality of the member's service as reflected in the military record of the current enlistment or period of service including personal conduct, performance of duty, and the reason for separation.

48) How long will I have to decide if I'll get the vaccine before disciplinary action will happen?

Uniformed members are required to obey all lawful orders issued to them, and their actions should be informed by the SECAF's vaccination timeline.

PUBLIC AFFAIRS

49) What mental health, chaplain, first sergeant resources are available to members who find themselves in hardship after vaccine refusal?

Commanders should proactively make available chaplains and first sergeants and the opportunity to consult with an Area Defense Counsel for members who initially refuse to be vaccinated. Additionally, during any period that mandatory vaccinations are taking place, commanders will ensure that mental health professionals are on-call and available to support.

50) FDA licensed COVID-19 vaccines have become mandatory. They're labeled a "commander's program" and affect unit readiness. Is the acceptance rate a reflection of leadership ability? Will military providers be as likely to report adverse reactions or declinations?

During the period that all COVID-19 vaccinations were voluntary, commanders supported the choices of individual Airmen and Guardians. Whether vaccinated or not, as a team we followed force health protection guidance to stay safe and to be able to execute the mission. No adverse action has been taken for exercising a choice to thus far decline vaccination.

As vaccination is now mandatory, declinations will be recorded. Adverse reactions are reported by the member. They will be entered into military health records and VAERS.

51) How long will unvaccinated members be required to wear a mask?

Personnel who are not fully vaccinated for COVID-19, and others as determined by the Assistant Secretary of Defense for Personnel and Readiness, will be required to wear a mask in accordance with DoD Force Health Protection Guidance (FHPG). As conditions change, DoD FHPG will be updated.

52) Will there be a grace period from FDA approval and when the vaccine is mandatory?

No. The requirement is effective upon SECAF implementation of DoD memo, dated 24 Aug 21, that mandates COVID-19 vaccination for service members. For those who do not voluntarily comply, unit commanders will issue lawful orders to be vaccinated as soon as

feasible. Commanders will weigh risk to mission against individual Airmen and Guardians location and ability to be vaccinated. The Defense Health Agency and Air Force Medical Service will move COMIRNATY® (Pfizer) vaccine as required to quickly and effectively vaccinate the remaining force.

53) Will all new recruits be given the vaccine upon entry into the service?

Yes. All new recruits will be vaccinated through entry-level in-processing (BMT, OTS, etc.).

54) Will Cadets at USAFA be required to take the vaccine? What about AFROTC cadets?

Yes. For the purpose of medical readiness, USAFA cadets are considered active duty service members. AFROTC cadets on scholarship who have signed service contracts are members of the Air Force Reserve are subject to the same requirements for mandatory vaccinations as all Airmen and Guardians.

TOTAL FORCE (Specific)

55) If I refuse the vaccine on a UTA or in other Inactive Duty status, can I be ordered to Annual Tour or other Active Duty and compelled to be vaccinated?

Yes, you may be ordered to Annual Tour with the appropriate notice. You will be expected to comply with the requirement to receive the COVID-19 vaccine. You may also do so at a civilian provider of your choice. If you elect to receive the vaccine at a civilian provider, an FDA approved or authorized (EUA) vaccine will satisfy the mandate. You will need to provide appropriate paperwork to your Unit Health Monitor to be entered in AHLTA and ASIMS for tracking purposes.

- **56)** Is there a difference if I refuse the vaccine on Inactive or Active Duty status?
 - No. Members of the reserve components, in either status, are required to comply with this mandate.
- 57) If I refuse the vaccine, will I be paid? Can I be "red-lined" and given an unexcused drill period? Will I be put in "no pay, no points" status?

You will be paid for any duty completed but could be then excused and sent home pending further action. Any subsequent drill periods could be marked as unexcused if the member does not have prior approval from the commander. Your commander could also place you in a "No Pay No Points" duty status for failing to meet medical readiness requirements.

- **58)** If I don't take the vaccine, can I transfer to the Individual Ready Reserve?
 - No. Your transfer will be denied.
- **59)** What happens if I stop attending drill because I do not want to be vaccinated?



- Drill periods missed without prior approval of the commander will be marked unexcused. Refusing to be vaccinated is not an acceptable excuse for not attending drill.
- **60)** Do I have to fill out a form declining the vaccine? If so, will that also be in my VA health records?
 - Yes. Completing DHA Form 207 is required for all members, even those who decline the vaccination. The form will be retained in your permanent health records.
- 61) I'm an IMA. Can my Active Duty unit stop my participation if I refuse the vaccine?
 - Yes. The COVID-19 vaccine is a mandatory requirement. If a member does not meet medical readiness standards participation could be curtailed.
- **62)** If I refuse the vaccine, will I be allowed to participate in order to get a 'good year' for retirement?
 - It depends. The COVID-19 vaccine is a mandatory requirement. If a member does not meet medical readiness standards participation could be curtailed.
- 63) I'm at a unit that only has FDA authorized (EUA) vaccines. If the Active Duty Military Treatment Facility (MTF) gets an FDA licensed vaccine will reserve component members have to take it as well?
 - Yes. On an installation, the Active Duty MTF and Reserve Medical Unit will coordinate to ensure that there is enough COMIRNATY (Pfizer) vaccine on hand for all unvaccinated members. The Secretary of Defense's direction establishes a requirement for service members to be fully vaccinated. Service members can elect to receive any FDA licensed or authorized (EUA) vaccine to meet that requirement. If vaccinations are being given on a mandatory basis, the only vaccine that may be used at this time is the COMIRNATY® (Pfizer) vaccine. If you do not now have the COMIRNATY® (Pfizer) vaccine at your installation or location, your servicing Military Treatment Facility can advise if or when it will be available. (COMIRNATY® has the same formulation and can be used interchangeably with the FDA authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine according to the FDA. Other vaccines may be added to this list in the future.)

Members can always choose to get vaccinated on their own or wait for adequate supply at a DoD facility. MTFs will have adequate vaccine supplies to meet the SECAF's vaccination timeline.

64) I'm an Air Reserve Technician (ART). In civilian status can I be asked to take the vaccine?



No. In civilian status, you cannot be asked to take the vaccine. However, as an ART, you'll be required to take the vaccine in your Part B – or military status. As an ART, if you ultimately refuse the vaccine, you will not meet your conditions of employment and will not remain qualified for your position.

65) Can a member of the reserve component use an Active Duty MTF to receive the COVID-19 vaccination while not in a paid duty status?

Yes.

66) If a member of the reserve component receives a COVID-19 vaccination off-base while not in paid duty status, are they responsible for the cost? Can they seek treatment through TRICARE or the military medical system if they suffer complications? What about through the Veterans Health Administration (VHA)?

Service members, regardless of status, who require medical attention as a result of COVID-19 vaccination may utilize the military medical system. Determinations on benefits from the VHA or TRICARE will be made by each respectively.

Most civilian vaccination programs are offering the COVID-19 vaccination free of charge. Members of the SELRES may utilize vaccination programs outside of MTFs and DoD vaccination sites, such as civilian county and state programs.



Public Affairs Guidance

Mandatory COVID-19 Vaccine Implementation Plan for DAF Service Members (Supersedes previous versions) Sept. 4, 2021

- **1. PURPOSE:** To provide messaging and public affairs guidance for the implementation of the COVID-19 vaccine as a Force Health Protection (FHP) requirement for Department of the Air Force (DAF) service members.
- **2. BACKGROUND:** When the U.S. Food and Drug Administration (FDA) granted Emergency Use Authorization (EUA) for COVID-19 vaccines in December 2020, the Department of Defense began providing vaccines to Airmen and Guardians on a voluntary basis.

The FDA formally licensed the Pfizer-BioNTech mRNA COVID-19 ® vaccine (referred to as "Comirnaty®"), vaccine on Aug. 23, 2021. To further mitigate the risk to readiness posed by COVID-19, especially the highly transmissible Delta variant, all service members (Active, Air National Guard and Air Force Reserve) who are not fully vaccinated against COVID-19 are now required to do so in accordance with the Secretary of Defense memorandum dated Aug. 24, 2021.

Service members are considered fully vaccinated two weeks after completing the second dose of a two-dose COVID-19 vaccine, or two weeks after receiving a single dose of a one-dose vaccine. This includes one or two-dose options approved under Emergency Use Authorization (EUA) or U.S. Food and Drug Administration licensure or World Health Organization (WHO) Emergency Use Listing (EUL). Airmen and Guardians who have proof of vaccination per this definition will be considered as meeting the vaccination requirement. Airmen and Guardians who received the AstraZeneca or Novavax vaccine through an approved clinical trial at Walter Reed National Military Medical Center or Ft. Belvoir Community Hospital will be considered vaccinated.

Airmen and Guardians who have started a vaccination series using a vaccine under EUA should be offered the same vaccine, if available, to complete their current vaccination series. Mixed vaccination series will be avoided when practicable following the Centers for Disease Control and Prevention (CDC) guidelines concerning clinical considerations for use of COVID-19 vaccines. Mandatory vaccination through a military provider will utilize only the Pfizer-BioNTech mRNA Comirnaty COVID-19 ® vaccine.

Note: In accordance with FDA guidance, COMIRNATY® has the same formulation and can be used interchangeably with the FDA-authorized Pfizer-BioNTech COVID-19 Vaccine. Providers can use doses distributed under the EUA to administer the vaccination series as if the doses were the licensed vaccine.

Vaccination of Airmen and Guardians enhances force health protection and readiness. This action is consistent with DoD mandatory vaccination programs for service members to address other health threats such as seasonal influenza.

- 3. POSTURE: Active with Airmen and Guardians. Response to query with media.
 - Information in this document may be used by the chain of command to help communicate the importance of protecting the health, safety, and readiness of Airmen and Guardians through vaccination against COVID-19.



- The information may be used in conjunction with vaccine implementation guidance provided by the Department of the Air Force Surgeon General and/or local Military Treatment Facilities.
- Additional resources are available from the Centers for Disease Control and Defense Health Agency in the Vaccination Toolkit located in section 8 of this guidance.

4. PUBLIC RELEASE:

DAF announces mandatory COVID vaccine implementation guidelines for Airmen, Guardians By Secretary of the Air Force Public Affairs

WASHINGTON (AFNS) — Secretary of the Air Force Frank Kendall directed the COVID-19 vaccine implementation guidelines for Department of the Air Force total force military members Sept. 3, in accordance with the Secretary of Defense mandate last month.

The service implementation plan requires Airmen and Guardians to be fully vaccinated against COVID-19 by the following dates, unless seeking an exemption:

- Nov. 2 Active Duty personnel
- Dec. 2 Air National Guard and Air Force Reserve personnel

Vaccinations will help ensure service members' health and safety while preserving the department's readiness and ability to execute worldwide air and space forces missions, according to department leaders.

"We are taking an aggressive approach to protect our service members, their families and their communities from COVID-19 and the highly transmissible Delta variant," said Under Secretary of the Air Force Gina Ortiz Jones. "As members of the nation's Armed Forces, our Airmen and Guardians must be able to respond to situations around the globe—being fully vaccinated will help us safely meet the readiness requirements that our national security depends on."

Mandatory vaccination through a military provider will initially only include the Pfizer-BioNTech mRNA COVID-19 ® vaccine (widely referred to as "Comirnaty®" upon receipt of FDA approval), which is currently the only vaccine approved by the U.S. Food and Drug Administration. Airmen and Guardians may continue to volunteer to receive the COVID-19 vaccines approved under Emergency Use Authorization (EUA), including Moderna, Janssen and AstraZeneca, from both military and civilian providers.

Service members are considered fully vaccinated two weeks after completing the second dose of a two-dose COVID-19 vaccine, or two weeks after receiving a single dose of a one-dose vaccine. This includes one or two-dose options authorized under EUA or full FDA approval.

Airmen and Guardians who have proof of vaccination documented in their medical records per this definition will be considered as meeting the vaccination requirement.

Prior to receiving the COVID-19 vaccine, service members have access to healthcare providers and chaplains to address questions or concerns with COVID-19 vaccination. Additionally, commanders must consult with their servicing Staff Judge Advocate for additional guidance on vaccination non-compliance.



Exemptions

Service members have the option to apply for medical or administrative exemption, including religious accommodations. The process for obtaining exemptions for all mandatory vaccinations is provided in AFI 48-110_IP, *Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases*, for medical exemptions, and DAFI 52-201, *Religious Freedom in the Department of the Air Force*, for religious accommodations. No exemptions from the vaccine will be approved solely because Airmen and Guardians have an approved retirement or separation date.

Vaccination non-compliance

Any refusal to receive the COVID-19 vaccine, absent an approved exemption or accommodation, may be punishable under the Uniform Code of Military Justice (UCMJ). Military commanders retain the full range of disciplinary options available to them under the UCMJ.

For more information, Airmen and Guardians are encouraged to work with their chains of command and their local military treatment facilities.

5. TALKING POINTS/COMMANDER MESSAGES TO AIRMEN AND GUARDIANS:

Implementing the Vaccination Requirement

- The Department of the Air Force requires all Airmen and Guardians to be fully vaccinated against COVID-19 to ensure service members' health, safety, and ability to execute our mission at all times, throughout the globe, including where vaccination rates are low and disease transmission is high.
- The vaccine will be tracked in the Aeromedical Services Information Management System (ASIMS), just like the flu shot (and all mandatory vaccinations). The vaccination will be required for all Airmen and Guardians (Active, Air National Guard and Air Force Reserve).
- The Department expects all Airmen and Guardians to be vaccinated in accordance with the
 deadlines established by the Secretary of the Air Force, with the understanding that vaccine
 availability may vary at locations across the service.

Safety for Airmen, Guardians, Their Families and the Larger General Population

- The COVID-19 vaccine(s), even under the EUA, have proven to saves lives and may help protect against all known circulating coronavirus variants.
- The benefits of vaccination are clear. It provides a safe and effective approach to the global fight against COVID-19 while offering Airmen and Guardians a shield of defense.
- There are many sources of misinformation surrounding the COVID-19 vaccine. With hundreds of millions of doses administered nationally, there have been few side effects.
- The risks from contracting COVID-19 are much higher than any risks associated with the



• The basis of research and science for mRNA coronavirus vaccines started more than 10 years ago and has been refined for use with this particular SARS-CoV-2 coronavirus in the past year.

Maintaining Mission Readiness

- Our Airmen and Guardians have committed to maintaining readiness for the Department of the Air Force.
- Wearing the uniform signifies an obligation to fight and win, anywhere, anytime and in
 establishing, maintaining and preserving U.S. freedom of operations in the ultimate high
 ground. This vaccine will ensure Airmen and Guardians are healthy and ready to fulfill
 that obligation.
- Being vaccinated not only protects the health and welfare of our Airmen and Guardians, but also ensures the readiness and availability of our Air Force and Space Force to defend our Nation's freedom.

6. FREQUENTLY ASKED QUESTIONS (FAQs):

Q. The Secretary's memo says the Services should set "ambitious timelines" for implementing the new COVID-19 vaccine requirement. Does the Department of the Air Force have a specific timeframe or deadline in place for vaccinating all Airmen and Guardians? If not, when will that be established?

A. The service implementation plan requires all Airmen and Guardians to be fully vaccinated against COVID-19 by these dates, unless seeking an exemption:

- Nov. 2 Active Duty personnel
- Dec. 2 Air National Guard and Air Force Reserve personnel

Q. Can Airmen and Guardians be required to receive the vaccine?

A. Yes. The Secretary of Defense memorandum dated Aug. 24, 2021 directs the Secretaries of the Military Departments to immediately begin full vaccination of all military members.

Q. Are Civil Service employees in the Department of the Air Force required to receive the vaccine? A. No, the current COVID vaccine mandate only applies to Active Duty, Guard and Reserve Airmen and Guardians at this time. We highly encourage everyone to help protect themselves and others by being vaccinated. This will help defend against virus variants and mitigate the effects of an infection.

Q. Will I have a choice in which COVID-19 vaccine I receive?

A. Yes. Airmen and Guardians who elect to accept the mandatory vaccine from a Military Treatment Facility will receive the Pfizer-BioNTech Comirnaty COVID-19 ® vaccine which was formally licensed by the FDA on Aug. 23, 2021. Airmen and Guardians may also choose to receive Emergency Use Authorization COVID-19 vaccines or the Pfizer-BioNTech Comirnaty COVID-19 ® from civilian providers. There are numerous off-base locations available for vaccination. If an Airman or Guardian decides to receive (or has already received) the vaccine from a civilian provider, they should receive and submit documentation to their Immunization Clinic to update their immunization record.



Q. Will family members of Airmen and Guardians be required to be vaccinated?

A. No. While we encourage everyone to protect themselves and their loved ones by receiving the vaccine, only service members (Active, Air National Guard and Reserve Components) will be required to receive the COVID-19 vaccine.

Q. What will happen if I refuse to receive the COVID-19 vaccination?

A. The requirement for mandatory vaccinations is a Department of Defense decision and required vaccines are nothing new to the U.S. military. Should a military member refuse the order to receive the vaccine, without a valid medical or administrative exemption, commanders will have the wide latitude to use the full range of quality force management tools to enforce good order and discipline.

Q. Can I receive a waiver so I don't have to receive the vaccine?

A. Much like the annual flu shot, there are potential medical waivers and administrative accommodations, including religious accommodations (AFI52-2, Accommodation of Religious Practices in the Air Force), that Airmen and Guardians may request. The guidance for waivers is included in AFI 48-110 IP, Immunizations and Chemoprophylaxis for the Prevention of Infectious Diseases and DAFI 52-201, Religious Freedom in the Department of the Air Force. Additionally, there will be no exemptions from the vaccine due to approved retirements or separations.

The waiver authority for immunization exceptions is the MAJCOM/FLDCOM commander. If the waiver is denied, the appeal authority is to the DAF Surgeon General.

Q. Will Air National Guard and Air Force Reserve personnel be required to receive the COVID-19 vaccination?

A. Yes, the Total Force will be required to receive the vaccine.

Q. Why require the vaccination now?

A. The vaccine is mandatory now because: (1) the FDA has approved a fully licensed vaccine, and (2) there is a growing health threat from COVID-19 due to continued and increased community transmission.

Q. Will I still be required to wear a mask while at work if I am vaccinated?

A. The Department of Defense follows the recommendations of the CDC and each base determines their HPCON level and need for mask wear based on vaccine spread in their area. Members who are not vaccinated will be required to wear masks in accordance with installation guidelines.

Q. How will I know if I need the shot and when to get it?

A. COVID-19 shots will be tracked in the Aeromedical Services Information Management System (ASIMS). Each Airman and Guardian will be able to login to their IMR via the Air Force Portal and determine if their records reflect the vaccination. As a Force Health Protection requirement, COVID-19 vaccines will be tracked like all others within the IMR and status completion will be indicated by green, yellow and red. Commanders will also be able to view which of their Airmen or Guardians needs to receive the vaccination.

Q. Will Airmen and Guardians be able to go off-base to a civilian doctor for a COVID-19 vaccination?

A. Yes. There are numerous off-base locations available for vaccination. If an Airman or Guardian decides to receive (or has already received) the vaccine from a civilian provider, they should receive and submit documentation to their Immunization Clinic to update their immunization record.



Q. How often will I need to receive the COVID-19 vaccination?

A. Medical research has not indicated how often COVID-19 vaccinations will be required. Information will be provided when it becomes available.

Q. What if the mandatory vaccine is not available at my base?

A. If supplies are limited at the local Military Treatment Facility (MTF), the MTF will communicate when vaccinations are available and work with installation leadership to adjust methods to administer vaccination.

Q. Will new recruits be required to receive the mandatory vaccine?

A. Yes. All new recruits will be vaccinated through entry-level in-processing (BMT, OTS, etc.)

Q. Will USAFA and AFROTC cadets be required to get vaccinated?

A. Yes. USAFA cadets are considered active duty and AFROTC cadets on scholarship who have signed service contracts are subject to the same requirements for mandatory vaccinations as active duty Airmen and Guardians.

Q. This sounds a lot like what happened with the Anthrax vaccine? Why should I receive the COVID-19 vaccine?

A. There are significant differences between the anthrax vaccine and the COVID-19 vaccines. While there were five deaths associated with Anthrax in 2001, there have been more than 640,000 deaths in the U.S. from COVID-19 since 2020, a much greater risk than the threat from anthrax. The safety of our Airmen and Guardians is paramount. The science-based approach for the vaccine makes it a safe and effective means of mitigating COVID-19.

Q. Is it required for Airmen and Guardians to get the vaccine before they deploy?

A. Yes. The safety of our deploying personnel is paramount. Deadlines and guidelines for those deploying will be determined based on the time of departure.

Q. Will you discontinue use if you find there are more suspected cases of myocarditis and pericarditis?

A. The health and welfare of our Airmen and Guardians are always the number one priority. If the level of concern elevates, we will follow updated CDC and DHA guidance.

Q. How many Airmen and Guardians are currently fully vaccinated?

A. Approximately 60 percent of Total Force Airmen and Guardians are fully vaccinated.

Q. If I have already been diagnosed with COVID-19 in the past, do I need to receive the vaccine?

A. Yes. The vaccine will help fight against re-infection and will mitigate against adverse effects if you are infected in the future. Having had COVID-19 does not mean you are immune to future infections and does not meet the requirement to be vaccinated. Consult your medical provider to ensure vaccination occurs at the appropriate time considering CDC guidelines on how long an individual should wait to be vaccinated after recovering from COVID-19.

Q. What are the current mandatory vaccines for military members?

A. DoD requires 17 total vaccines under varying circumstances for its service members. It's not likely for an individual to be required to be vaccinated with all 17 since many of these are Combatant Command



based. You can find additional information for required vaccines by area of operation at: https://www.health.mil/Military-Health-Topics/Health-Readiness/Immunization-Healthcare/Vaccine-Recommendations-by-AOR.

7. ADDITIONAL GUIDANCE:

- Secretary of Defense Memorandum, August 24, 2021, "Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members"
- Under Secretary of Defense for Personnel and Readiness memorandum, "<u>Administrative Leave for Coronavirus Disease 2019 Vaccination of Department of Defense Employees</u>," dated April 14, 2021.
- DoD Instruction 6205.02, "DoD Immunization Program," dated July 23, 2019.
- AFPD 52-2, "Accommodation of Religious Practices in the Air Force," dated July 28, 2020.
- COVID-19 Vaccination Facts

8. VACCINE COMMUNICATION TOOLKITS:



Final MTF Websites COVID-19 Toolkit.pc

CDC Resources:

Vaccination Communication Toolkit for Medical Centers, Pharmacies, and Clinicians
COVID-19 Vaccination Toolkit for Health Departments and other Public Health Partners
Long-Term Care Facility Toolkit: Preparing for COVID-19 Vaccination at Your Facility
Essential Worker Vaccination Toolkit for Employers of Essential Workers
Community-Based Organization Toolkit for Staff of Organizations Serving Communities
COVID-19 Vaccine Toolkit for School Settings and Childcare Programs
Social Media Toolkit: COVID-19 Vaccinations

9. POINTS OF CONTACT: Ann Stefanek or Rose Riley at 703-695-0640.



Talking points from 9 Sept 2021 All-Call

- -Your health and safety and the accomplishment of the mission are our #1 concerns.
- -SECAF mandate: ready reserve fully vaccinated by 2 Dec 2021.
- -920 WG mandate: fully vaccinated by 18 Oct 2021 (*OPORD does not specifically say "fully" vaccinated but 943 RQG/CC confirmed that the intent is "fully" vaccinated).
- -The Comirnaty vaccine is FDA approved, safe and effective. The other FDA-authorized vaccines (Moderna, J&J, and Pfizer) are as well, and they fulfill the mandate. FDA-approved Comirnaty and FDA-authorized Pfizer-BioTech have the same formulation and can be used interchangeably, according to AF guidance (see attached FAQs) and 920 Wg/JA.
- -Previous infection does not mean fully vaccinated.
- -I recommend you get it while in a military status so you are covered for LOD. We can cut orders (pending funds) if you'd like orders while being vaccinated.
- -Regarding IRR: see email pasted below.
- -142nd clinic has 1000 doses on order for the entire installation.
- -All AGR, TR, and ART are required to inform TSgt Testa and their supervisor (who notifies the Commander) of vaccination status and/or positive COVID 19 test results or if they are quarantining because of a close contact.
- -Sick or experiencing any symptoms, especially fever: DO NOT come to work.
- -If a member contracts COVID 19 while in a military status, they are entitled to apply for a LOD (Line of duty).
- -Area Defense Counsel: For the 943rd, we typically use the DM ADC. Their number is 228-5664 from 0900-1630 weekdays. However, both attorneys are TDY this weekend and the paralegal is out sick so we won't get weekend support. They also do not have an on call phone. If issues arise during the weekend, direct your people to the MacDill ADC. The best way to contact them is via the duty cell phone. That is 813-459-1247. The ADC's paralegal is TSgt Montero, and I verified with her just now that she is prepared to take calls this weekend. You can also attempt to use Lt Col Bob Sullivan, ORANG ADC at 702-808-4027 (send a text containing your name, rank, and call-back number) or email rsull1995@aol.com.
- -See attached docs for instructions for exemption requests. The person requesting the exemption is responsible for starting the process, via written notification.



From: ANDROSKY, DAWN B SES USAF AFRC HQ AFRC/DS <a href="mailto:cale-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-article-a

Sent: Wednesday, September 1, 2021 5:09 PM

To: WHITE, TIMOTHY C JR CMSgt USAF HAF AF/AF/RE < timothy.white.7@us.af.mil >

Cc: BURGER, MATTHEW J Maj Gen USAF AFRC HQ AFRC/CD < matthew.burger.4@us.af.mil>; HEALY,

JOHN P Maj Gen USAF HAF AF/RE < <u>john.healy@us.af.mil</u>>; HICKOK, JOHN A Maj Gen USAF HAF

AF/AF/A4 < john.hickok@us.af.mil>; SCARISBRICK, STACEY L Brig Gen USAF AFRC FGC/CC

<stacey.scarisbrick.1@us.af.mil>; KEYES, CRAIG A Col USAF AFRC HQ AFRC/SG <craig.keyes@us.af.mil>;

LIEGLPAUL, CHARLOTTE M Col USAF AFRC HQ AFRC/JA < charlotte.lieglpaul@us.af.mil; ROBERTSON,

DAVID W Col USAF AFRC HQ AFRC/DSD < david.robertson.3@us.af.mil>

Subject: COVID-19 VAX in or out of status//Transfer to IRR

1) Can a member of the reserve component use an Active Duty MTF to receive the COVID-19 vaccination while not in a paid duty status?

Yes, but this action is unadvisable. Members of the SELRES which includes Individual Mobilization Augmentees (IMA), are not required to be eligible for, or participating in, a TRICARE plan to obtain the vaccine at MTFs or other DoD vaccination sites. The Defense Health Agency (DHA) recommends that SELRES personnel receive COVID-19 vaccinations at MTFs or other DoD vaccination sites and be in a service-appropriate duty status for the purpose of Line of Duty (LOD) determinations.

2) If a member of the reserve component receives a COVID-19 vaccination off-base while not in paid duty status, are they responsible for the cost? Can they seek treatment through TRICARE or the military medical system if they suffer complications? What about through the VA Medical System?

Members of the SELRES can also utilize vaccination programs outside of MTFs and DoD vaccination sites, such as civilian county and state programs, to achieve DHA's objective of increased access to safe vaccinations for all eligible members of the DoD force. Costs associated with vaccines obtained outside of MTFs and DoD vaccination sites will only be covered by TRICARE for those actively enrolled in a TRICARE program. Most civilian vaccination programs are offering the COVID-19 vaccination free of charge.

Within certain limits, military members who incur or aggravate an injury, disease or illness in a qualifying duty status are covered for that episode of care under LOD authority. Determinations on any benefits from the Veterans Health Administration (VHA) will be made by the VHA. All individuals vaccinated with a FDA authorized or licensed COVID-19 vaccine may be eligible for compensation for adverse reactions under other programs such as the Countermeasures Injury Compensation Program, National Vaccine Injury Compensation Program, applicable Workers Compensation authorities, and other sources of care for which they may be eligible. (also see Question 1)



Also, the one on transferring to IRR:

3) If I don't take the vaccine, can I transfer to the Individual Ready Reserve?

No. Your transfer will be denied.

Mrs. Dawn Bizub Androsky, SES Director of Staff HQ Air Force Reserve Command 555 Robins Parkway, Ste 250 Robins AFB, GA 31098-2005

2: (478) 327-2443 DSN: 497-2443

☐: (478) 235-7458

TEAMS: <u>dawn.b.androsky.civ@cvr.mil</u>

MIPR: <u>dawn.androsky.1@us.af.mil</u>

SIPR: dawn.b.androsky.civ@mail.smil.mil

☑JWICS: dawn.androsky@af.ic.gov

EXHIBIT 9

DECLARATION OF SERGEANT JAKE NUSS, UNITED STATES ARMY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of SGT Jake R Nuss In Support of Children's Health Defense and Amy Miller

I, SGT Jake R. Nuss, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a servicemember in the Army, in the rank of Sergeant, assigned to B co, 2-12th IN, 2nd SBCT, 4th ID on Ft. Carson.
- I am SGT Jake R. Nuss, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's

Comirnaty COVID-19 vaccine. I joined the Army in 2017 as an infantryman. Following basic training I attended jump school, and earned my parachutist badge. Immediately after jump school I was assigned to the second battalion of the 504th parachute infantry regiment out of the 82nd airborne division. I was with the 82nd ABN DIV for three years. During my time I was a part of many different teams, and went through many train ups, including a quick reaction deployment to Iraq in 2020. I was promoted to the rank of Sergeant May 2020 and became a fire team leader of an infantry company. I reenlisted June 2020 and chose Ft. Carson as my new duty station. I have been at Ft. Carson for five months living in Colorado Springs with my family. I am now a squad leader of an infantry company for the second battalion of the 12th infantry regiment.

It all started when the vaccine started to become available for everyone, the Army really wanted everyone to get the vaccine. My leadership incentivized getting the vaccine by offering days off and other perks. Around June, my leadership began to tell everyone that the vaccine will eventually become mandatory and that if you want to stay in the Army you had better get it now. As the months went on leadership kept pushing harder and harder on guys to get the vaccine. Then once the vaccine became FDA approved, and the Military mandated it, my leadership held the remaining unvaccinated soldiers after work to have a talk one day. This talk consisted my leadership telling us that we are going to get kicked out of the Army with a dishonorable discharge, lose all of our benefits, and how hard it will be to get a job outside of the Army because of a dishonorable. After the talk, they asked who was going to go get the vaccine the next day and had them raise their hand. Then they had everyone who raised their hand leave the formation and kept everyone else longer. They continued to tell us that we were going to get kicked out of the Army and that religious accommodations won't work. Finally, they released everyone else but me. I believe that due to my leadership role in the company, my leadership cared more about holding onto me and tried even further to convince me. It got to the point where they asked me "Are you a leader?", and "Is this the example I want to set for my guys?", and I replied "This is how I want to lead". I was then asked "Oh so now it's all about you?". Ultimately the conversation ended when I told them that my religion comes before the Army.



- 6. According to what I have been told by my leadership, I will be kicked out of the Army with a dishonorable discharge within a couple of months, and lose all of my benefits. If this is true, I would be required to find job and a house for my wife and two kids on short notice. We will have to be uprooted and relocated with having been in our new home for only 5 months. I will not be able to use the GI Bill to go back to college, and will receive none of the benefits that our honorably discharged veterans receive. I stand to lose everything they are threatening against me as I will not take the vaccine.
- 7. I have submitted a religious accommodation for all vaccines. I first went to my unit Chaplain, CPT Fruchey, after my leadership started talking about mandated vaccines. We discussed the process of filing for a religious accommodation. He was helpful and described the process. I went to my unit Chaplain a second time and he created a memo describing our conversation and the sincerity of my request. He also helped me with creating my own memo that I needed to submit to start the process. I created and handed in the memo, along with a memo from the pastor of my church backing me in my convictions. Once submitted, my commanding officer, CPT Hagerty, was supposed to counsel me on the situation. I went to his office, he sat me down and just asked me if I understood everything in the counseling, and had me sign it. That was it, there was no in depth discussion on the situation. From the conception of my religious accommodation, I have been told on multiple occasions, by many different leaders above me, essentially every leader that has talked to me about the situation, has said that there is zero chance my accommodation will get approved, along with everyone else that will attempt to submit one.
- 8. In my unit, everyone is required to wear a mask indoors. If you have your vaccine, you're not required to wear a mask when you're outside, but if you don't have the vaccine, you are still required to wear it outside. For our morning formations at 06:30, where you normally form up with your organic platoon, it has gotten to the point where they have unvaccinated people stand off to the side in a separate formation, away from everyone else. One day all unvaccinated soldiers were required to go to the vaccination site, whether or not they were going to take the vaccine or not. Soldiers who still didn't want the vaccine showed up and were then counseled on refusing to take the vaccine.



- 9. I cannot say for certain exactly what vaccine they are using in my unit.
- 10. Yes, I have had COVID already.
- 11. I am a male, and I do have concerns about the vaccines impact on my ability to reproduce.
- 12. There was a thing going around in my unit where if leadership caught unvaccinated soldiers with their mask down, our leadership gave them an ultimatum, and told them that they can either go get the vaccine or get an Article 15. Just this last Friday my brigade held a formation for everyone that still has not been vaccinated, and my brigade commander came and talked to us. He was trying to convince everyone to go get the vaccine, and at one point he said, you better get the vaccine sooner than later, because once you receive UCMJ action, your rank has been stripped, and you're pulling extra duty it will be too late to go get the vaccine.
- 13. No I do not have any documents, but I am being told that what I am being offered is licensed.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

[Signature full name]

DECLARATION AND DOCUMENTS IN SUPPORT OF CHIEF WARRANT OFFICER II ROBERT PEREZ, UNITED STATES ARMY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,)))
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of CW2 Robert A. Perez In Support of Children's Health Defense and Amy Miller

I, CW2 Robert A. Perez, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a Service Member in the US Army, in the rank of Chief Warrant Officer 2, assigned to Alpha Company 2-4 GSAB on Fort Carson, Colorado.
- 4. I am CW2 Robert A. Perez, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I am a Chief Warrant Officer 2 in the field of Army Aviation with experience in civilian aviation. Since flight school I have been qualified in the UH-60L as a Medevac Pilot, flown internationally in extreme weather, in mountainous terrain and over volcanoes and ocean. I deployed to Central America in 2020 where I traveled extensively

completing humanitarian aid missions, delivering tens of thousands of pounds of food and medical supplies to victims of hurricanes Eta and Iota during the COVID-19 Pandemic. I am a fixed and rotary wing pilot, licensed foster to adopt parent, Red Cross Volunteer, former Army Musician, and former Air Force Security Forces Officer. I have deployed four (4) times over the course of my Military Career to include Central America, Kuwait, United Arab Emirates and Saudi Arabia. I am fluent in Spanish and English coming from a bilingual, multi-cultural upbringing with College Level credits for Spanish I, II, and III, DLAB scores of 131 qualifying for Category 4 languages, trained in Aviation Spanish, with a Medical Interpreter Certificate. I am currently stationed at Fort Carson, Colorado where I am set to retire in October 2023. My family and I are Reformed Christians, devoted to walking out our faith in every area of our lives including the care and upbringing of our children, as well the education and healthcare decisions for our entire family.

- 5. During my eighteen (18) years of military service, I have never witnessed such aggressive, or abrasive measures in regard to compulsory vaccination. The pressure is coming from the top down and lower-level Commanders are taking the heat. Commanders are being scrutinized for failure to meet 100% compliance and in turn pressuring troops with warnings of administrative actions and punitive actions to include even general or dishonorable discharge. Brigade and Battalion Commanders are threatening punitive actions against refusals for failure to obey a "lawful order", court martial, rapid discharges, falsely claiming EUA Pfizer-BioNTech is the same as BLA Pfizer Comirnaty.
- 6. I am currently an UH-60 BlackHawk Helicopter Pilot with over eighteen (18) years of Active-Duty service, set to retire from Active-Duty service in OCT 2023 at risk of losing my military retirement. I have five (5) small children at home, two (2) of which are special needs children requiring extensive therapies and medical specialists, and two (2) more young adults for whom I am financially responsible. I am the sole provider of my family both financially and for health care insurance. I am at risk of losing not only my career, my ability to provide health care insurance and provide financially for my children, but also at risk of losing my retirement benefits with access to Tricare for Life for my family and potential 100% VA disability benefits. I am also at risk of being required to pay back the remainder of my Active-Duty Service Obligation for flight school which would destroy my family financially.
- 7. a.) In 2018, under AR 600-20 5-6 (g), revised 06 NOV 2014, I exercised my First Amendment Right to declare religious opposition to the practices of immunization based upon mine and my

family's sincerely held religious beliefs. This Religious Accommodation was approved and granted 26 NOV 2018 and has been honored by multiple Company, Battalion, Brigade and Garrison Commanders until now. [Please see attached]

- b.) In February 2020, after a long discussion with my Flight Surgeon, CPT Murphy at Fort Wainwright, AK, I was also granted a medical exemption to all vaccines based on risk of serious harm due to prior adverse reactions, anaphylaxis to unknown vaccine ingredients, multiple allergies and increased levels of heavy metals and inflammation in my body. This medical exemption has been honored by multiple medical personnel until 2 SEP 2021. When the COVID-19 vaccine was added to my MEDPROS (Vaccine Record) in July 2021, I contacted the NCOIC of the immunization clinic, SGT Amanda Williams and showed her proof of my Medical Exemption and Religious Accommodation. She updated my MEDPROS record to reflect I was exempt from the vaccine. [Please see attached]
- c.) On 2 SEPT 2021, I received a message from my Platoon Leader, LT Colton Hinson, "Hey, so technically it's a Direct Order from CPT Dulce for you to to attend the formation at 1115 on Tuesday 7 SEP for the Covid Shot, and then from there you can be able to refuse the shot. MAKE SURE you are there at 11:15 or it will be a failure to report by BC directive and you will have to sign a counseling for refusing the shot. Also the Docs are looking into your shot exemption and it sounds like will remove the exemption unless you have a medical condition to keep you from getting the shot which they are not tracking an exemption as of today. Please call me if you have any questions regarding this." [Please see attached] I responded to this message reminding him I also have a Religious Accommodation to vaccines and did not receive a reply, but he told me in person later that I would have to bring that documentation with me to the formation. Only my medical exemption to COVID-19 vaccines was taken away but not my medical exemptions to other vaccines. I also emailed the NCOIC, SGT Amanda Williams again on 2 SEP 2021 reminding her I also had a Religious Accommodation to all vaccines and that the removal of my exception from MEDPROs was not in compliance with my religious exemption from 2018. [Please see attached] To date, my long-standing Religious Accommodation has not been honored or acknowledged by my Chain of Command at Fort Carson for the COVID-19 vaccine specifically. I am not safe from threats or coercion to receive an EUA vaccine.

8. At the mandatory formation on 7 SEP 2021 at 1115, hundreds of us were informed Fort Carson did have the BLA Pfizer Comirnaty vaccines which was not true. Despite evidence coming to light to the contrary during that briefing, which I lawfully recorded, I was given a NEGATIVE counseling for refusing to obey a "lawful order" which stated I could receive punitive action under UCMJ Article 92 and 133 or administrative action under AR 600-8-24 paragraph 4-2. [Please see attached] After this formation where my Religious Accommodation was completely ignored, I was advised by my Commander, while again lawfully recording, that he, CPT Richard Dulce, did not know what actions Brigade would be taking against me next. That evening, 7 SEP 2021, I began to get sick. By the following morning, Wednesday, 8 SEP 2021 I was burning up with a fever. I followed COVID-19 Policy and notified my Flight Surgeon, CPT Grisham, who advised me to go get a COVID-19 test immediately and then quarantine for 72 hrs or until I had the results. My wife drove me to a nearby Colorado Health Department clinic for a PCR test. We were advised the test could take 48-72 hours for the results. Then I was quarantined in the guest bedroom. During this time, my Platoon Leader, LT Colton Hinson began asking the results and telling me if I was negative for COVID-19, I needed to report to work. Then, LT Mitchell Sembert accused me of Failure to Report to work and began harassing my wife, Jessica Perez, through my phone, wanting to know where I took my COVID-19 test, when we would have results, demanding proof of said test, proof of symptoms, and wanting to know my home address. He ordered me to report to a 2nd mandatory formation 9 SEP 2021 with hundreds of other Service Members to be vaccinated despite having active flu-like symptoms. This is also a violation of Fort Carson's COVID-19 Response Policy. My wife had provided details of my appointment time and location to these Lieutenants, but this was ignored. Then, I received this text from my Commander, "Hey, this is CPT Dulce. You are ordered by to physically report at the soccer field next to special events center on post at 1315. Right now there is no official proof you received a test yesterday nor do you have results on whether you're positive or negative. If you are too physically ill to answer the phone or text me back I recommend you go to Evan's hospital emergency room. Otherwise you also do not have a sick call slip to validate that you are actually sick. To be clear, your place of duty at 1315 today 9 SEP will be at the field next to special events center. Here are your courses of action 1. Present official documentation by medical clinic that you got tested for covid yesterday 2. Present official documentation of the results of your covid test 3. Present a sick call slip saying you're on quarters validated by official medical personnel Please acknowledge receipt and call me back when able." My wife

EXHIBIT 10

immediately notified him via text I had indeed contacted the Flight Surgeon and followed Fort Carson protocol for quarantine and isolation and while we did not have the results of the test, I was still sick with flu like symptoms, and he could verify my illness with the Flight Surgeon who had given permission to use off post testing sites. After speaking with the Flight Surgeon, she loaded up our five (5) children into the vehicle and took me to a nearby Emergency Room recommended by the Flight Surgeon to prove I was sick and stop the harassment from my Chain of Command. Never once in the history of my time in the military, have I ever been treated so horribly. Never have I been ordered to attend a mass formation with active flu-like symptoms. Never have I been accused of faking illness and threatened with Direct Orders during an illness. All of this was over the top aggression and seemed directly related to declining the COVID-19 vaccine and requesting my Religious Accommodation be honored. I have been told to expect follow up this week from Legal over my refusal to consent to vaccination.

- 9. On 2 SEP 2021, I was given a Direct Order to receive the Emergency Use Authorization (EUA) Pfizer-BioNTech vaccination while being told that the vaccine is "licensed". I was lawfully audio recording my interactions with Army Medical Professionals who admitted they did not have any vials of the Biologics License Approved Pfizer's Comirnaty vaccination. Army Medical Professionals admitted the Department of Defense is treating them as one and the same for the purpose of mandates but could not explain how they were "legally distinct".
- 10. I have had COVID-19 and do have natural immunity. The DOD is refusing to accept positive titers in place of vaccination for Medical Immune Exceptions which violates page 6 of Joint Instruction (AR 40-562, BUMEDINST 6230.15B, AFI 48-110 IP, CG COMDTINST M6230.4G) Immunizations and Chemoprophylaxis for Prevention of Infectious Disease.
- 11. My wife and I do wish to have more children and are gravely concerned about impaired fertility and possible birth defects as a result of these vaccines. We are both genetically predisposed to vaccine injury and know our children are as well. There are no long-term safety studies. Acceptance of these vaccines also violates our conscience and convictions before God.
- 12. I lawfully audio recorded my Battalion Commander telling us who refused to allow medical professionals to administer the vaccines, that we could be chaptered out of the Army within one (1) month for not consenting to the COVID-19 vaccines. He is aware Fort Carson has no Biologics License Approved Comirnaty vaccines. Brigade is also aware but says the Joint Chiefs' Surgeon General has concluded they are the same and both are mandatory.

13. While I do not have any documents indicating I am being offered unlicensed vaccines and being told that they are "interchangeable" with licensed ones, or that what I am being offered is licensed, I do have all of this lawfully audio recorded. I am including emails, text messages, my vaccine records time stamped in July and September 2021 showing removed exemptions, as well as my long-standing Religious Accommodation.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Robert A. Perez

CW2 US Army





DEPARTMENT OF THE ARMY CHARLIE COMPANY, 1ST BATTALION, 52^{TD} AVIATION REGIMENT 2088 MONTGOMERY ROAD, HANGAR 6 FORT WAINWRIGHT, ALASKA 99703

APVR-AVNA-CCO

26 November 2018

MEMORANDUM FOR RECORD

SUBJECT: CW2 Perez, Robert A. Religious Exemption from Immunization

1. Reference

- a. AR 600-20, Army Command Policy, 06 NOV 2014.
- 2. CW2 Perez has been counseled on the adverse consequences of noncompliance with immunization requirements.
- 3. Having been counseled, this exemption is approved.
- 4. Point of contact for this memorandum is the undersigned at (907) 353-6283 or william.j.keller.mil@mail.mil.

MAJ, MS Commanding



DEPARTMENT OF THE ARMY CHARLIE COMPANY, 1ST BATTALION, 52ND AVIATION REGIMENT 2088 MONTGOMERY ROAD, HANGAR 6 FORT WAINWRIGHT, ALASKA 99703

APVR-AVNA-C-CO

19 SEPTEMBER 2018

MEMORANDUM FOR RECORD

SUBJECT: Religious Exemption from Immunization

- 1. I, CW2 Robert Anthony Perez, wish to exercise my rights under the United States Constitution, AR 600-20 section 5-6 (g), AR 40-562 and DODI 1300.17, to receive Religious Exemption from Vaccination due to my genuine and sincere religious beliefs which are contrary to the practices herein required.
- 2. As a member of the Christian faith, vaccination is a direct violation of my beliefs for several reasons.
 - a. Aborted fetal cell use in vaccines.
 - (1) "Thou shalt not kill" (Exodus 20:13 & Deuteronomy 5:13)."
- (2) Children are recognized from God at the point of conception (Genesis 4:1, 17, and Jeremiah 1:5), are knit together by God in the womb (Psalm 139:13-16; Psalm 22:10-11; & Galatians 1:15), are blessings from God (Genesis 1:28; Genesis 4:1; and Psalms 127:3 and 113:7-9), are valued and loved (Matthew 18:1-14 and 19:13-15), are created in His image (Genesis 1:27), and their killing is condemned (Psalm 106:35, 37-38).
- (3) The argument that the benefit to the public outweighs the life of the aborted child is an absolute contradiction to my faith. God prohibits child sacrifice (Exodus 20:13, Deuteronomy 5:13, 12:30-32, 18:10, Leviticus 18:21 & 20:2-5, 2 Kings 16:3, and Psalm 106:38), and there is no "for the greater good clause" or "public exception" listed anywhere in the Bible.
- (4) Vaccine ingredients that contain aborted fetal cell tissue include, but are not limited to PER C6, HEK 293, IMR-90, WI-38, WI-1 through WI-25, W-44, and MCR-5.

EXHIBIT 10

APVR-AVNA-C-CO

SUBJECT: Religious Exemption from Immunization

- (5) Although some immunizations do not contain human tissue as an ingredient, many still used aborted fetal cells during the testing phase of production. Additionally, by using vaccines produced by manufacturers who use aborted fetal tissue in any way, I am supporting the financial security of those organizations.
- b. Adding external contaminants to my body (specifically directly into my bloodstream).
- (1) In the Bible, blood represents the life force of the human or animal. Human blood was to be kept pure under all circumstances and free of contaminants (Genesis 9:4, Leviticus 17:11, 17:14, Deuteronomy 12:23, Leviticus 17:10, Acts 15:20, and Acts 15:29).
- (2) Besides aborted fetal cells, vaccines also contain other unhealthy and potentially dangerous ingredients such as several types of animal cells (Luke 13:1-5 prohibits the mixing of animal and human blood), thimerosal (mercury), formaldehyde, aluminum, monosodium glutamate, acetone, phenoxyethanol, and several artificial colors.
- (3) All of the above ingredients listed are foreign contaminants to my blood. By allowing them into my bloodstream I am in contradiction to my religious belief that my blood should remain pure. (1 Corinthians 3:16 and 6:19-20).
- 3. The point of contact for this memorandum is the undersigned at (915)-600-3998 or robert.a.perez72.mil@mail.mil

ŘOBERT A. PEREZ

CW2, AV UH-60 Pilot

FILE AS PAGE DIRECTLY BEHIND DD FORM 2766 on LEFT SIDE OF MEDICAL RECORD

VACCINE ADMINISTRATION RECORD

(THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974)

This document complies with the Article 80 of the World Health Organization International Health Regulations (IHR) of 1969. International Health Regulations call for this document to be accepted in lieu of the International Certificate of Vaccination' (PHS Form 731) when traveling outside the United States. In accordance with the IHR, this automated record is an equivalent document issued by the United States Armed Forces.

By inserting the Vaccine Information Statement (VIS) version date in the applicable field, providers verify that the vaccine(s) annotated were administered and current VISs were given to the parent, legal guardian or patient. This form complies with federal record-keeping requirements of the National Childhood Vaccine Injury Act of 1986 as amended 14 December' 1993. Parent, guardian, or patient signature is not required unless state law mandates a guardian signature and proof of informed consent.

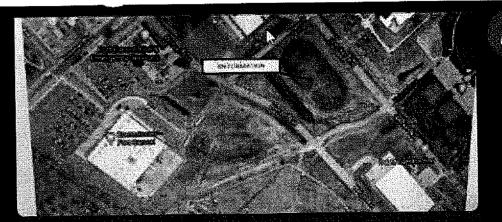
Vaccine	Exception	Expiration Date
ANTHRAX	Medical Permanent	31 Dec 9999
COVID-19	Medical Permanent	31 Dec 9999
JAPANESE ENCEPHALITIS, SC	Medical Permanent	31 Dec 9999
HEP B	Medical Permanent	31 Dec 9999
HEP A	Medical Permanent	31 Dec 9999
INFLUENZA	Medical Permanent	31 Dec 9999
JAPANESE ENCEPHALITIS, IM	Medical Permanent	31 Dec 9999
MMR	Medical Immune	31 Dec 9999
POLIO	Medical Permanent	31 Dec 9999
SMALLPOX	Medical Permanent	31 Dec 9999
TETANUS-DIPHTHERIA-PERTUSSIS	Medical Permanent	31 Dec 9999
TETANUS AND DIPHTHERIA	Medical Permanent	31 Dec 9999
TYPHOID	Medical Permanent	31 Dec 9999
VARICELLA	Medical Immune	31 Dec 9999
YELLOW FEVER	Medical Permanent	31 Dec 9999
	LAST ITEM	

LAST ITEM DO NOT MAKE ENTRIES BELOW THIS BLOCK

Name:		Sex:
PEREZ RO	BERT ANTHONY	M
Status:		Rank:
Active Arm	y Officer	CW2
Service:	Sponsor's SSN:	DOB:
Army	***-**-0488	13 May 1981

DD FORM 2766C (Computer Generated) - MEDPROS Web Data Entry

Generated 30 Jul 2021 11:27



Hey, so technically it's a direct order from CPT Dulce for you to to attend the formation at 1115 on Tuesday 7 SEP for the Covid Shot, and then from there you can be able to refuse the shot. MAKE SURE you are there at 11:15 or it will be a failure to report by BC directive and you will have to sign a counseling for refusing the shot. Also the Docs are looking into your shot exemption and it sounds like they will remove the exemption unless you have a medical condition to keep you from getting the shot which they are not tracking an exemption as of today. Please call me if you have any questions regarding this. 12:22 PM





Fw: Immunization Record changed without authorization (UNCLASSIFIED)

J. Perez < jessiperez 10@gmail.com>

Mon 9/13/2021 3:13 PM

To: The UPS Store #7267 <Store7267@theupsstore.com>

1 2 attachments (888 KB)

DD 2766C (2 SEP 2021).pdf; DD7266C (30 JUL 2021).pdf;

CAUTION! This email originated from outside of the organization. Please do not open attachments or click links from an unknown or suspicious origin.

Please print this email for record and the attachments separately.

----- Forwarded message -----

From: Robert Perez < rt13perez@yahoo.com >

Date: Thu, Sep 2, 2021 at 10:19 AM

Subject: Fw: Immunization Record changed without authorization (UNCLASSIFIED)

To: J. Perez < jessiperez10@gmail.com >

---- Forwarded Message -----

From: Perez, Robert Anthony CW2 USARMY SOUTHCOM JTFB 228 AVN REGT (USA)

<robert.a.perez72.mil@mail.mil>

To: Williams, Amanda A SGT USARMY 4 ID CAVN BDE (USA) < amanda.a.williams26.mil@mail.mil>

Sent: Thursday, September 2, 2021, 09:28:21 AM MDT

Subject: Immunization Record changed without authorization (UNCLASSIFIED)

CLASSIFICATION: UNCLASSIFIED

Hello SGT Williams,

I have attached 2 different copies of my immunizations records from medpros. The one dated 30 July is in compliance with my religious exemption from all vaccines and includes COVID-19. The other is dated 2 September and has COVID-19 removed. This latest record is not in compliance with my religious exemption from 2018. I am not sure who is responsible, but would you be against fixing my record so it reflects an exemption from COVID-19 immunizations as well?

Respectfully,

R. Anthony Pérez

CW2, AV

A Co 2-4 AVN REGT

FILE AS PAGE DIRECTLY BEHIND DD FORM 2766 on LEFT SIDE OF MEDICAL RECORD

VACCINE ADMINISTRATION RECORD

(THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974)

This document complies with the Article 80 of the World Health Organization International Health Regulations (IHR) of 1969. International Health Regulations call for this document to be accepted in lieu of the International Certificate of Vaccination' (PHS Form 731) when traveling outside the United States. In accordance with the IHR, this automated record is an equivalent document issued by the United States Armed Forces.

By inserting the Vaccine Information Statement (VIS) version date in the applicable field, providers verify that the vaccine(s) annotated were administered and current VISs were given to the parent, legal guardian or patient. This form complies with federal record-keeping requirements of the National Childhood Vaccine Injury Act of 1986 as amended 14 December' 1993. Parent, guardian, or patient signature is not required unless state law mandates a guardian signature and proof of informed consent.

Vaccine	Exception	Expiration Date
ANTHRAX	Medical Permanent	31 Dec 9999
JAPANESE ENCEPHALITIS, SC	Medical Permanent	31 Dec 9999
HEP B	Medical Permanent	31 Dec 9999
HEP A	Medical Permanent	31 Dec 9999
INFLUENZA	Medical Permanent	31 Dec 9999
JAPANESE ENCEPHALITIS, IM	Medical Permanent	31 Dec 9999
MMR	Medical Immune	31 Dec 9999
POLIO	Medical Permanent	31 Dec 9999
SMALLPOX	Medical Permanent	31 Dec 9999
TETANUS-DIPHTHERIA-PERTUSSIS	Medical Permanent	31 Dec 9999
TETANUS AND DIPHTHERIA	Medical Permanent	31 Dec 9999
TYPHOID	Medical Permanent	31 Dec 9999
VARICELLA	Medical Immune	31 Dec 9999
YELLOW FEVER	Medical Permanent	31 Dec 9999
		-
	LAST ITEM	

DO NOT MAKE ENTRIES BELOW THIS BLOCK

Name:		Sex:
PEREZ ROBER	T ANTHONY	M
Status:		Rank:
Active Army Office	cer	CW2
Service:	Sponsor's SSN:	DOS:
Army	***_**-0488	13 May 1981

DEVELOPMENTAL COUNSELING FORM

For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.

AUTHORITY:

DATA REQUIRED BY THE PRIVACY ACT OF 1974

PRINCIPAL PURPOSE:

5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army.

PRINCIPAL FUNFOR

To assist leaders in conducting and recording counseling data pertaining to subordinates.

ROUTINE USES: The Dot

The DoD Blanket Routine Uses set forth at the beginning of the Army's compilation of systems or records notices also

apply to this system.

Disclosure is voluntary.

PART I - ADMINISTRATIVE DATA

Rank/Grade

Date of Counseling

7 SEP 2021

Organization

DISCLOSURE:

Name (Last, First, MI)
PRADZ, ROBLAT A

Name and Title of Counselor

F PICHARD

A/2-4 65AB

PART II - BACKGROUND INFORMATION

Purpose of Counselling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling, and includes the leader's facts and observations prior to the counseling.)

Servicemember has declined mandatory COVID-19 vaccination.

PART III - SUMMARY OF COUNSELING

Complete this section during or immediately subsequent to counseling.

Key Points of Discussion:

Today you were ordered to receive a COVID-19 vaccination. As determined by the Secretary of Defense, this vaccine is mandatory and necessary to protect the Force and defend the American people.

After being advised that you were given a lawful order to receive the vaccine and that refusal could form the basis of punitive action under the UCMI Articles 92 and/or 133, or administrative action under AR 600-8-24 paragraph 4-2, you refused to allow medical personnel to provide the immunization.

If you believe that you should be granted a medical exemption, then discuss this with your health care provider immediately. If you wish to submit an administrative exemption request under AR 40-562, including a request for religious accommodation, you must request it through your chain-of-command immediately.

OTHER INSTRUCTIONS

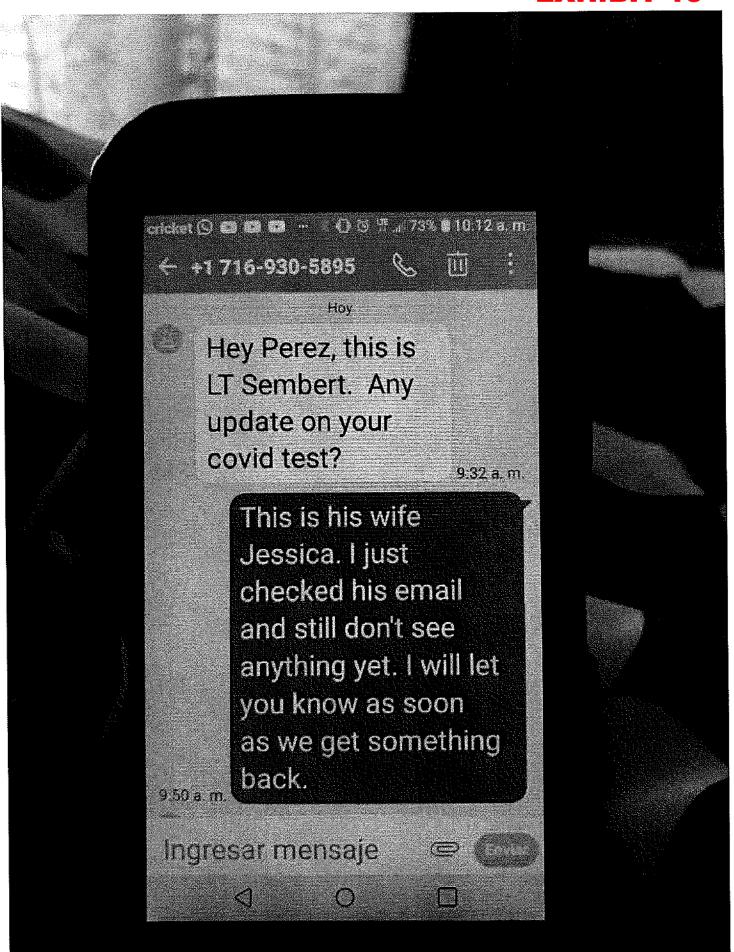
This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.

DA FORM 4856, JUL 2014

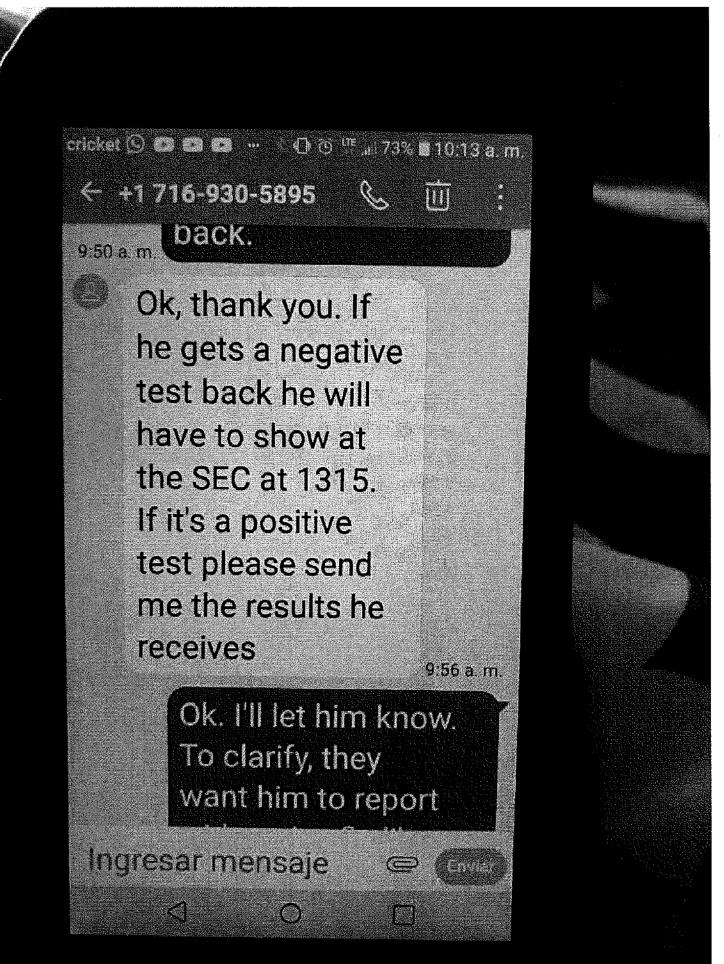
PREVIOUS EDITIONS ARE OBSOLETE.

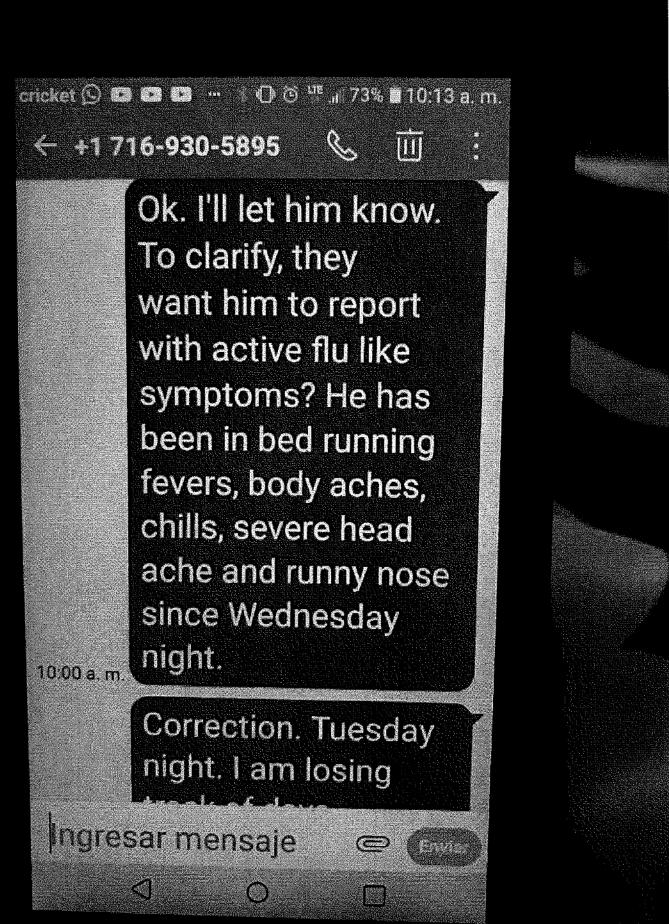
Page 1 of 2 APDLC v1 64ES

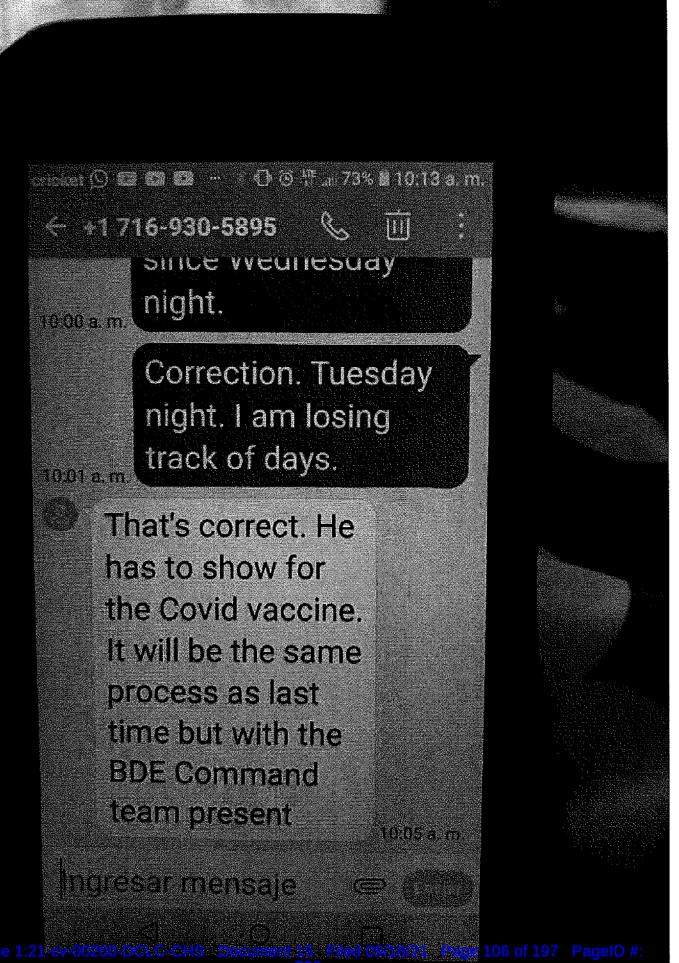
Plan of Action (Outlines actions that the subordinate will do after the counseling session to reach the agree specific enough to modify or maintain the subordinate's behavior and include a specified time line for implementa	ed upon goal(s). The actions must be tion and assessment (Part IV below)
•	
Session Closing: (The leader summarizes the key points of the session and checks if the subordinate understar agrees/disagrees and provides remarks if appropriate.)	nds the plan of action. The subordinate
agrees/disagrees and provides remarks if appropriate.) Individual counseled: I agree X disagree with the information above.	•
Individual counseled remarks:	· · · · · · · · · · · · · · · · · · ·
I've had a religious accommodation to vacci	res since
2018, It has been honored by multiple Co, B	Hand BDF
commenders.	
Signature of Individual Counseled:	Date: 7 500 2021
Leader Responsibilities: (Leader's responsibilities in impletmenting the plan of action.)	1 sep will
en de la grande de la companya de l Espaini de la companya de la company Espaini de la companya	ner dy na i lita. Talia
Signature of Counselor:	Date: 7 Sep 2071
PART IV - ASSESSMENT OF THE PLAN OF ACTION	
Assessment: (Did the plan of action achieve the desired results? This section is completed by both the lead provides useful information for follow-up counseling.)	der and the individual counseled and
Counselor: Individual Gounseled:	Date of Assessment
Counselor: Individual Counseled: Note: Both the counselor and the Individual counseled should retain a reco	Assessment:



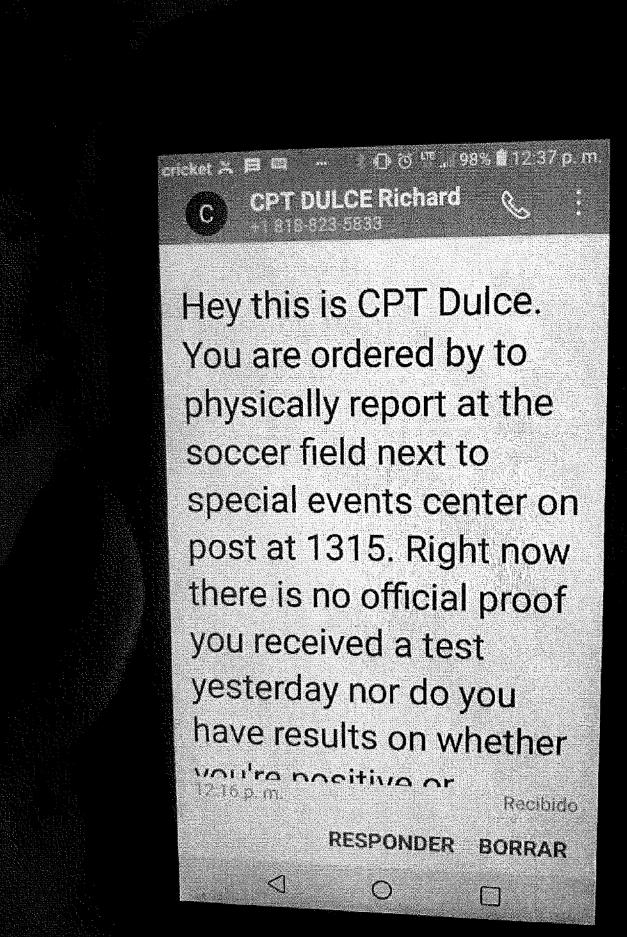
132

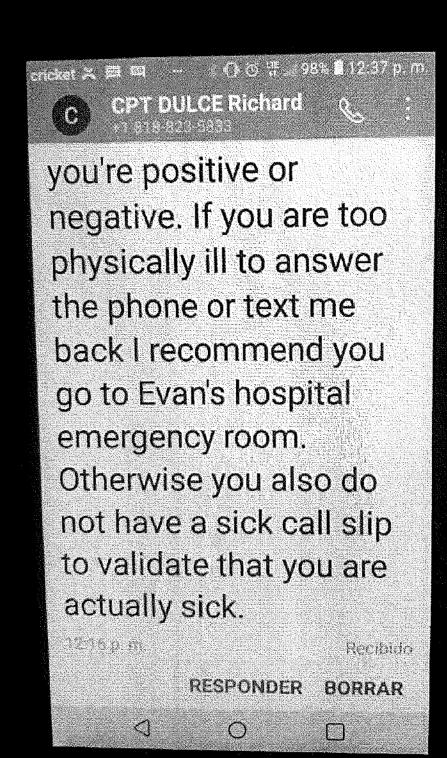


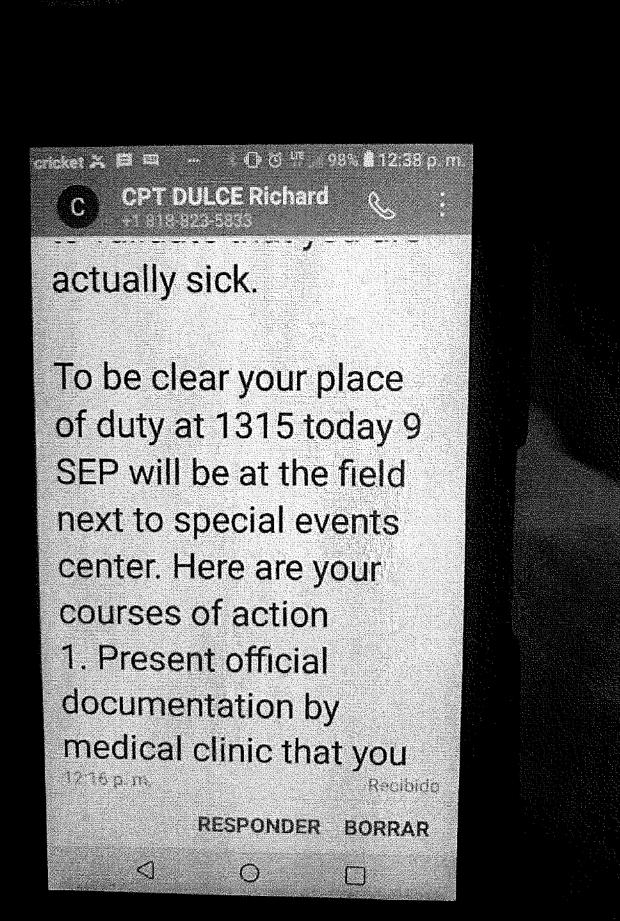


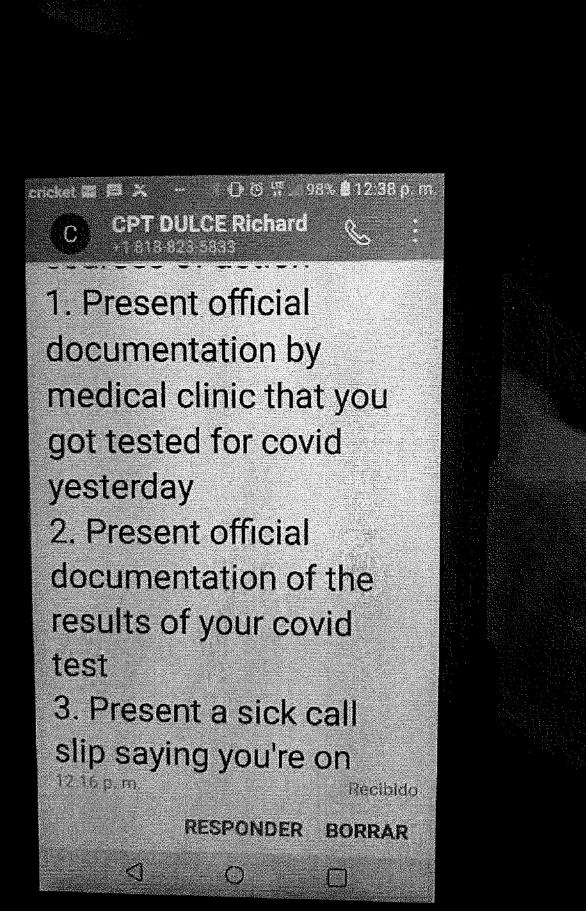


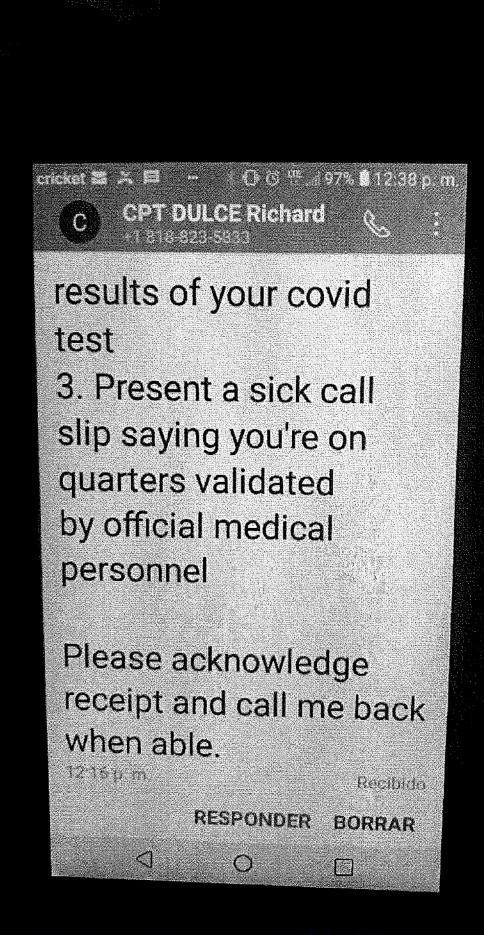
135 / 36

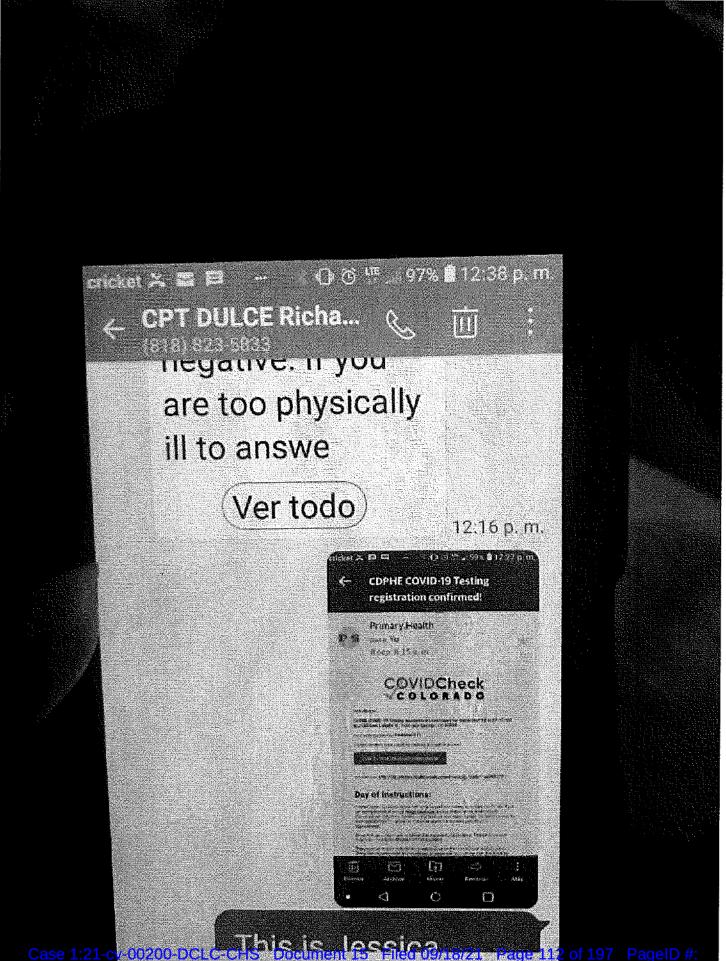












141 **7**42



4th Infantry Division and Fort Carson COVID-19 Information Sheet

As of Sept. 8, 2021

Protect the Force to Protect the Nation

Fort Carson COVID-19 Hotline: 719-524-2684
Fort Carson Official Website: https://www.carson.army.mil/



services-quick-reference.pdf

Facebook: https://www.facebook.com/USArmyFortCarson/ & https://www.facebook.com/4thID/

Note: Updates are in Red

Facilities and Services:

- Installation access is limited to DOD official business (AAFES, DeCA, DOD readiness-critical contractor work, Department of the Army (DA) civilian and military personnel). DOD-affiliated personnel (Gold Star Families, veterans, retirees, dependents). Visitors can apply online for a pass from their computer or mobile device at https://visit.gvt.us. Visitors will receive a background check, and after entering their information, including a driver's license or passport number, they will be notified if their pass is approved or denied. If approved, they can proceed to a ktosk at Visitor Control Center 1 for issuance of their pass. A sponsor is not required when applying for a pass online, but do require a valid purpose for visiting Fort Carson. This could include visiting Femily or friends, medical appointment or attending a ceremony. Passenger and food delivery drivers have the opportunity to apply for and receive a 30-day access pass, for unescorted access. https://citical.new.org/licenses/berg-formore-information.
- All gates and Visitor Control Centers (VCC) at gates 1 and 3 remain open. Gates 2, 6 and 19 are closed on weekends and federal/training holidays.
- ✓ CDC and SAC centers have resumed normal operations; contact Parent Central Services at 719-526-1101/8220.
- Main Exchange open 9 a.m. to 8 p.m., Monday-Saturday, 9 a.m. to 7 p.m. Sunday and 9 a.m. to 5 p.m. federal holidays. Commissary open Monday-Friday 9 a.m. to 8 p.m., Saturday 8 a.m. to 8 p.m., Sunday 8 a.m. to 6 p.m. and federal holidays 10 a.m. to 6 p.m.
- Army Military Pay Office (AMPO): S-1 intake in-person, building 1220, 9:30 a.m. to noon and 1-3 p.m. Monday-Wednesday and 9:30 a.m. to noon and 1-2 p.m. Friday. Statement of charges, duty status changes go through S1. For debt letters, reply to e-mail from Debt Management. PCS/Travel clearing customers go to building 1525, Column D, 9 a.m. to noon and 1-2 p.m. Monday-Wednesday and Friday; closed Thursday. Click here for information on submitting PCS Travel Supplemental packets. In-processing Soldiers report to building 1456 to sign in and schedule a Finance Brief. Finance final-out//retirement/ETS/Chapter in person at MPSC only non-4ID units clear through distro email. MPSC Finance hours: Retirement/ETS/Chapter walk-ins Monday-Wednesday and Friday 7:30 a.m. to noon and 1-2 p.m., Thursday 7:30 a.m. to noon. Currently no Finance Briefs for Retirement/ETS/Chapter.
- DEERS/ID Card facility is open to walk-ins Monday, Tuesday, Wednesday and Friday 7:30 a.m. to 4 p.m., (closes at 2 p.m. last Friday of the month), and Thursday 8:30 a.m. to 4 p.m.; schedule an appointment at https://idco.dmdc.osd.mil/lidco/. Soldiers supported through S1, Extensions of Uniformed Services ID (USID) cards that expired between Jan. 1 and July 31, 2021, are: Aug. 31 for all foreign affiliates and their dependents; Oct. 31 for dependents of active-duty service members; and Jan. 31 for Reserve and National Guard members and their dependents, retirees and their dependents, and all other populations.
- ✓ In-/out-processing by appointment only, SFL-TAP Monday-Friday 7:30 a.m. to 4 p.m. with walk-in hours 9 a.m. to 3 p.m.
- ✓ Integrated Disability Evaluation System (IDES) is operational from 7:30 a.m. to 4:30 p.m. Monday-Friday. All appointments are scheduled by the VA or the PEBLOs, as there are no walk-ins, Call the front desk at 719-526-7600.
- Dental Clinic 1 is open for DRC4 exams by appointment, Smith Dental Clinic Is open for sick call walk-ins, DRC3 exams by appointment and DCR4 exams for deploying units by appointment, and the Oral Surgery Clinic is taking oral surgery appointments. All clinics are open from 7 a.m. to 4 p.m. Monday-Friday.
- ✓ All troop-school physical examinations are postponed until further notice (i.e. Ranger, Airborne, WOCS).
- ✓ Fort Carson DMV is fully operational walk-ins only.
- Ivy Warrior Restaurant hours are: Stack Monday-Friday 7-9 a.m., 11:30 a.m. to 1 p.m. and 5:30-7 p.m. (no dinner Friday); Wolf Monday-Friday 7-9 a.m., 11:30 a.m. to 1 p.m. and 5:30-7 p.m., Saturday-Sunday brunch 9:30 a.m. to 1 p.m. and supper 5-6:30 p.m.; Warfighter Monday-Friday 7:30-9 a.m., 11:30 a.m. to 1 p.m. and 5-6:30 p.m.
- ✓ The Outpost Klosk, building 2061, is open from 8 a.m. to 3 p.m. weekdays.

Leave/Travel:

- Service members and their dependents conducting CONUS PCS to Fort Carson and service members returning to Fort Carson from a restricted installation or high-risk area as part of TDY are not required to execute a Restriction of Movement.
- International leave is not authorized; exceptions may be granted based off extreme hardships or circumstances involving immediate Family members or for any other situation endorsed by the chain of command. Approval authority for any Exceptions to Policy for international leave is the DCG-S. Company, Troop and Battery commanders are authorized to approve all CONUS leave, including hot spot locations, Battalion and Squadron commanders are approval authority for any state or U.S. territory OCONUS.

Increased Health Protection Condition Measures:

- Commanders at all echelons retain the authority to impose further restrictions to protect the force and the installation based off specific conditions within each unit
- ✓ Effective July 31, in accordance with the Deputy Secretary of Defense's Memorandum, "Updated Mask Guidance for all DoD Installations and Other Facilities," dated July 28 and guidance issued by the Centers for Disease Control and Prevention (CDC), all service members, federal employees, onsite contractor employees, and visitors regardless of vaccination status will wear a mask white inside all Fort Carson facilities. Exceptions: Masks not required in service member's residence, assigned barracks room, privately owned vehicle or office with floor-to-celling walls with closed door so long as the service member is alone, or is only with members of household; for any individual who cannot medically tolerate a mask, or when necessary to reasonably accommodate an individual with a disability. Service members must have a documented profile issued by a military medical provider.
- Unvaccinated individuals should continue to social distance, avoid crowds, avoid poorly ventilated indoor spaces and stay vigilant through frequent handwashing. Unvaccinated persons MUST adhere to the following restrictions: wear a mask at all times while indoors (except to eat or drink) and maintain 6 feet of distance between other individuals; wear a mask outdoors when unable to maintain 6 feet social distancing; sit at social distanced tables in Ivy Warrior Restaurants and wear masks except when eating; and may not use cardio equipment at on-post facilities.
- Evans Army Community Hospital (EACH) has expanded COVID-19 testing hours at the Centralized Screening and Testing Center (CSTC) and is now offering the Moderna COVID-19 vaccine at various Fort Carson locations. Click here for more information.
- Religious services are being conducted in the chapels with social distancing and limited attendance. Contact unit chaplain for additional information.
- Physical fitness formations are authorized up to platoon size.
- Service members, dependents or DOD civilian employees who feel ill related to COVID-19 symptoms should call the COVID Hotline at 719-524-2684.





UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON WASHINGTON, D.C. 20301-4000

SEP - 7 2021

MEMORANDUM FOR SENIOR PENTAGON LEADERSHIP COMMANDERS OF THE COMBATANT COMMANDS DEFENSE AGENCY AND DOD FIELD ACTIVITY DIRECTORS

SUBJECT: Force Health Protection Guidance (Supplement 23) – Department of Defense Guidance for Coronavirus Disease 2019 Vaccination Attestation and Screening Testing for Unvaccinated Personnel

References: (a) Safer Federal Workforce Task Force, "COVID-19 Workplace Safety: Agency Model Safety Principles," July 29, 2021

- (b) Secretary of Defense Memorandum, "Mandatory Coronavirus Disease 2019 Vaccination of Department of Defense Service Members," August 24, 2021
- (c) DoD Instruction 5400.11, "DoD Privacy and Civil Liberties Programs," Change 1, December 8, 2020
- (d) Acting Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 15) Revision 2 Department of Defense Guidance for Coronavirus Disease 2019 Laboratory Testing Services," July 2, 2021
- (e) Acting Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 22) – Department of Defense Guidance for Coronavirus Disease 2019 Surveillance and Screening Testing," July 21, 2021
- (f) DoD Coronavirus Task Force Diagnostics and Testing Lead Memorandum, "Optimization of Coronavirus Disease 2019 (COVID-19) Testing Resources," March 8, 2021
- (g) Acting Under Secretary of Defense for Personnel and Readiness Memorandum, "Force Health Protection Guidance (Supplement 18) Department of Defense Guidance for Protecting All Personnel in Department of Defense Workplaces During the Coronavirus Disease 2019 Pandemic," March 17, 2021
- (h) Office of the Under Secretary of Defense (Comptroller)/Chief Financial Officer of the Department of Defense, "DoD Response to the Novel Coronavirus - Cost Reporting Guidance," April 13, 2020

This memorandum provides guidance for implementing additional force health protection and workplace safety measures directed by the White House Safer Federal Workforce Task Force (reference (a)) to reduce the transmission of the virus that causes the coronavirus disease 2019 (COVID-19). In accordance with reference (a), attestation of an individual's status as fully vaccinated or presentation of a recent negative COVID-19 test is a condition of physical access to DoD buildings and DoD-leased spaces in non-DoD buildings in which official DoD business takes place (referred to jointly in this memorandum as "DoD facilities"). These additional

measures are necessary to continue protecting the health of all DoD personnel, the communities we live and work in, and to preserve total force readiness.

This memorandum applies to all individuals issued a credential by DoD that affords the individual recurring access, classified herein as "credentialed recurring access" (CRA) (e.g., Common Access Cardholders), to DoD facilities, and to non-DoD individuals seeking access, one time or recurring, in association with the performance of official DoD business ("official visitors") (e.g., to attend a meeting).

This memorandum does not apply to personnel receiving ad hoc access to DoD facilities (e.g., delivery personnel, taxi services); to individuals who have access to the grounds of, but not into the buildings on, DoD installations¹ (e.g., contract groundskeepers, fuel delivery personnel, household goods transportation personnel); to personnel accessing DoD buildings unrelated to the performance of DoD business (e.g., residential housing); or to personnel accessing DoD facilities to receive a public benefit (e.g., commissary; exchange; public museum; air show; Morale, Welfare, and Recreation resources).

Individuals other than visitors seeking access to facilities located on DoD installations but operated by other Federal Departments and Agencies will follow the policies and procedures of that other Department or Agency. Visitors will follow applicable policies and procedures of both DoD and the Department or Agency they are visiting.

In accordance with reference (b), Service members (Armed Forces under DoD authority on active duty or in the Ready Reserve, including the National Guard) are required to be vaccinated for COVID-19, and therefore are not required to complete a DD Form 3150, "COVID-19 Certification of Vaccination" (Attachments 1 and 2), nor are they subject to the COVID-19 screening testing set forth in this guidance (Attachments 3 and 4). Service members who receive an exemption from the vaccination requirement are subject to COVID-19 screening testing set forth in this guidance.

DoD civilian employees (regardless of whether they are authorized to telework or perform remote work) and DoD contractor personnel with CRA must attest to their vaccination status by completing DD Form 3150. Such civilian employees and contractor personnel who are unvaccinated for COVID-19, as defined in this guidance, or who decline to attest to their COVID-19 vaccination status will be subject to COVID-19 screening testing at least weekly as set forth in this guidance (Attachment 3). Such civilian employees and contractor personnel who refuse required screening testing, will be denied access to DoD facilities. Service members who are not on active duty and who also hold a DoD civilian personnel position or who are DoD contractor personnel are subject to the requirements in this paragraph.

For the purpose of this memorandum, a DoD installation is a base, camp, post, station, yard, center, homeport facility for any ship, or other area under the jurisdiction of the Secretary of a Military Department or the Secretary of Defense, including any leased location, or in the case of an activity in a foreign country, any area under the operational control of the Secretary of a Military Department or the Secretary of Defense, without regard to the duration of operational control.

Official visitors will be asked to complete DD Form 3150. Official visitors who are unvaccinated, as defined in this guidance, or who decline to volunteer their vaccination status, must show an electronic or paper copy of negative results from a COVID-19 test administered no earlier than 3 days prior to their visit. If an official visitor is unable to show a negative COVID-19 test result, the visitor may be provided onsite self-testing, if available, or will be denied access to the DoD facilities to which access is sought. Service members who are not on active duty at the time of their visit are subject to the requirements in this paragraph.

Heads of DoD Components, the Director of Administration and Management (for the Office of the Secretary of Defense Components, the Chairman of the Joint Chiefs of Staff, the Defense Agencies, and DoD Field Activities), and the Commanders of the Combatant Commands will:

- publish any necessary supplemental instructions and begin implementing the
 attestation requirements of this memorandum no later than September 13, 2021,
 followed by implementation of the screening testing requirements based on the
 availability of testing supplies; and
- ensure that all contract and associated funding implications are considered.

DoD Components should engage with employee unions at their earliest opportunity as they develop agency-specific testing plans and otherwise satisfy any applicable collective bargaining obligations under the law at the earliest convenience, including on a post-implementation basis where appropriate.

This memorandum and other COVID-19 guidance memoranda are centrally located at: https://www.defense.gov/Explore/Spotlight/Coronavirus/Latest-DOD-Guidance/.

My point of contact for this guidance is Mr. Steven P. Jones, at (703) 681-7335 or steven.p.jones10.civ@mail.mil.

Gilbert R. Cisneros, Jr.

myr cif

Attachments: As stated

ATTACHMENT 1 Determining COVID-19 Vaccination Status

1. Privacy:

a. Medical and other information collected from individuals, including vaccination information and test results, will be treated in accordance with applicable laws and policies on privacy, including the Privacy Act of 1974 and DoD Instruction 5400.11, "DoD Privacy and Civil Liberties Programs," January 29, 2019 (reference (c)).

b. Such information, including vaccination status, will be accessible only to authorized DoD personnel who have a need to access the record in the performance of their duties to implement the guidance in this memorandum. DoD Components are advised to consult their Component Privacy Officer if there is a need to share this information outside of DoD.

2. Determining Vaccination Status for the Purpose of this Guidance:

a. An individual will be considered "fully vaccinated" when:

- i. at least 2 weeks have elapsed after a second dose in a two-dose COVID-19 vaccine series, such as of the Pfizer-BioNTech/Comirnaty or Moderna COVID-19 vaccines; or at least 2 weeks have elapsed after a single-dose COVID-19 vaccine, such as Johnson & Johnson's Janssen COVID-19 vaccine. The vaccine may be either authorized for emergency use or fully approved; or
- ii. he or she has completed the recommended dose series of COVID-19 vaccines authorized for emergency use by the World Health Organization (e.g., AstraZeneca/Oxford).
- b. "Unvaccinated" will apply to an individual who either:
 - i. has not completed the full COVID-19 vaccination dose series; or
 - ii. declines to attest to his or her COVID-19 vaccination status.
- c. Completion of DD Form 3150, "Certificate of Vaccination" (Attachment 2):
 - Individuals with access to Milconnect (https://milconnect.dmdc.osd.mil/) should complete the DD Form 3150 via Milconnect; otherwise use of other means is acceptable.
 - ii. For Service members (Armed Forces under DoD authority on active duty or in the Ready Reserve, including the National Guard), commanders will determine the COVID-19 vaccination status of their Service members by accessing the Service-specific Individual Medical Readiness (IMR) system. If a Service member has been vaccinated outside the Military Health System, that Service member must show written proof of his or her COVID-19 vaccination status to update the IMR system.
 - iii. For DoD civilian employees (including onsite local national employees and Service members not on active duty who are DoD civilian employees):
 - DoD civilian employees will complete DD Form 3150 and provide an electronic copy or hard copy to the appropriate commander or supervisor.
 - ➤ The appropriate commander or supervisor will maintain or access the completed DD Form 3150 in accordance with applicable law and policy, including appropriate privacy protection measures. (See paragraph 1 of this attachment).

- iv. For DoD contractor personnel with CRA (including Service members not on active duty who are employees of DoD contractors):
 - > DoD contractor personnel will complete DD Form 3150; and
 - Maintain a copy of the completed DD Form 3150 and show it to authorized DoD personnel, upon request.
 - > Failure to complete the DD Form 3150 may result in denial of access to the DoD facility to which access is sought.
 - v. For official visitors (including Service members not on active duty):
 - Official visitors will complete DD Form 3150; and
 - Maintain a copy of the completed DD Form 3150 and show it to authorized DoD personnel, upon request.
 - > Failure to complete the DD Form 3150 may result in denial of access to the DoD facility to which access is sought.

ATTACHMENT 2 DD Form 3150 - "Certification of Vaccination"

CUI (when filled in)

CERTIFICATION OF VACCINATION			OMB No. 0704-0613 Expiration: 20220228		
The public reporting burden for this collection of information is searching existing data sources, gathering and maintaining the regarding this burden estimate or any other aspect of this owners washington Headquarters Services, at whs.mc-alex.esd.mbx. other provision of law, no person shall be subject to any pena control number.	se data needed, and d lection of information, .dd-dod-informations:	e 2 minutes par respon completing and reviewing including suggestions offections@mail.mit. Re	ig the collection of information for reducing the burden, to spondents should be awa	the Department of Defense, re that notwithstanding any	
Authority: DoD is authorized to collect the information on this Mask-Wearing and E.D. 12196. Occupational Safety and Her U.S.C. 8013, 10 U.S.C	alth Program for Fede ideas 11, and 79, and maintained to impleme and protection of the 19 Workplace Safety trol and Prevention et in is intended to be us- to disclose informati- fic health emergency carry out their autho- eir duties for the Fede- with requirements for Records Notics (SOI- or Records, 75.Fed. ractor personnel, and "dipold.defense.gov/Ping this information is- sures, including with source to maintain is- sures, including with	cacutive Order (E.O.) 13 ral Employees; as well DoD Instruction 6200.0 ent Coronavirus Disease. DoD workforce, workpl : Agency Model Safety and the Occupational Sased primarily for Interna on to: a person, organior or other similar crisis, is informent; adjudicative index of the coronavirus agent ralev enforcement; or to RN) associated with the Reg. 35999 (Jun. 21, 3 other DoD-alfillated perotatis/49/Documents/Pyoluntary. However, if respect to mask-weach information may also the control of the respect to mask-weach information may also the control of the coronavirus and the coro	as 10 0,5.C. 113, 10 0.S 3. te 2019 (COVID-19) works aco, and other DoD faciliti Principles established by fety and Health Administration, or governmental exaction, or governmental exaction, or governmental exaction, or governmental exaction to comply with latabodies (e.g., the Ment Systedral employment; contises, courts, and persons a person authorized to accollection of this information), amended 80.Eqc., insons. DPR 39 DoD, DoD rivacy/SORNs/OSDJS/DF, you fait to provide this information, they are provide this information, and the second control of the second con	polace safely plans, including as and environments, the Safer Federal Workforce ation. unstances it may be notify as necessory and we governing the reporting of tem Protection Board), ractors, grantees, experts, as necessary and relevant in at on your bahalf. A complete ion, For most Federal leg. (14515 (Nex., 30, 2015).) Personnel Accountability and PR-39-DoD.pdf), rimation, you will be treated as sting, travel, quarantine, and	
safety plans, thereby increasing the health or safety risk to Di INSTRUCTIONS: This form should be completed by civilian current DaD Force Health Protection Guidance. Service mer	employees, onsite of	ontractor employees, a	nd other individuals if requ	ired in accordance with	
1. NAME (Last, First, MI):	Moore disease	2. DoD ID NUMBER:			
3. PLEASE CHECK THE BOX BELOW THAT COINCIDES WITH YOUR COVID-19 VACCINATION STATUS:					
4. DATE (YYYYMMDD)	5. SIGNATURE (F	ull Name)		And the second s	
DD FORM 3150, SEP 2021	CUI (wher	n filled in)	Controlled by: CUSD(P&R) Controlled by: ASD(HA) CUI Category: HLTH: PRVC LDC: DL(DoD Only) POC: ext. pentiagon.ousd-p	CY; OPSEC	

ATTACHMENT 3

COVID-19 Screening Testing Requirements for DoD Civilian Employees and DoD Contractor Personnel with CRA

- 1. For DoD civilian employees and DoD contractor personnel with CRA who attest that they are fully vaccinated for COVID-19 using the DD Form 3150, COVID-19 screening testing under this policy is not required. COVID-19 screening testing may be required or offered pursuant to references (d)—(f) regardless of vaccination status.
- 2. For DoD civilian employees and DoD contractor personnel with CRA, DoD Components will:
 - a. execute the screening testing requirement with COVID-19 self-collection kits or self-tests at least weekly that can be performed primarily onsite on the installation or facility with proper supervision and documentation of testing results. If onsite COVID-19 screening testing is not feasible, as an alternative the self-testing can be performed at home or in other locations (Note: these COVID-19 self-tests do not require a health care provider's clinical care order and are, therefore, considered an over-the-counter test and do not require medical support to complete);
 - b. procure and provide these COVID-19 self-tests and establish guidance for where and how these tests will be distributed and conducted and how results are to be reported.
 - i. DoD civilian employees are responsible for providing documentation of negative COVID-19 test results, upon receipt, to the appropriate commander or supervisor. DoD civilian employees may not be required to use their own personal equipment for the purpose of documenting test results; offsite tests may not be used if there is not a means to document results using government equipment. The commander or supervisor is responsible for maintaining any COVID-19 test results provided by DoD civilian employees in accordance with applicable law and policy, including appropriate privacy protection measures (See paragraph 1 of Attachment 1).
 - DoD contractor personnel with CRA will maintain a copy of their most recent COVID-19 test result and show such results to authorized DoD personnel, upon request.
- 3. After screening testing procedures are established, for COVID-19 unvaccinated DoD civilian employees and contractor personnel with CRA entering a DoD facility, COVID-19 screening testing with a Food and Drug Administration (FDA) authorized or approved test is required and a negative COVID-19 screening test result is required for entry into the worksite in the DoD facility. If the COVID-19 screening test is administered offsite, the negative result must be from a test performed in the past 3 days. If the negative result is over 3 days old, a new test is required.
- 4. DoD civilian employees and contractor personnel with CRA who have positive COVID-19 screening tests will be required to remain away from the workplace in accordance with reference (g). DoD civilian employees, and DoD contractor personnel with CRA with positive COVID-19 screening tests will be offered, but are not required to take, confirmatory laboratory-based molecular (i.e., polymerase chain reaction) testing paid for by their DoD Component. If the confirmatory test is negative, the individual is not COVID-19 positive and will be allowed into the workplace. Contact tracing will be conducted in accordance with references (d) and (e).

- 5. For DoD civilian employees, COVID-19 screening testing is expected to take no more than 1 hour of regular duty time, per test, to complete required testing as directed by the DoD Component. This includes time for travel to the testing site, time to complete testing, and time to return to work. Laboratory-based confirmatory COVID-19 testing for initial positive screening test results is expected to take no more than 2 hours of duty time. Commanders and supervisors will monitor duty time usage and keep duty time used for testing within these parameters to the extent possible.
- 6. Refusal of COVID-19 testing by unvaccinated DoD civilian employees:
 - DoD Components may initiate adverse employment action, up to and including removal, against unvaccinated civilian employees who refuse COVID-19 testing.
 - b. DoD Components may bar such employees from their worksites on the installation or facility to protect the safety of others, including while adverse action is pending. While barred from their worksites on the installation or facility, such employees may be required to telework or will be placed on administrative leave, as appropriate.
 - c. A religious or medical exemption from COVID-19 vaccination is not an exemption from the COVID-19 testing required by this policy. If a DoD civilian employee requires a religious or medical exemption from participation in COVID-19 screening tests, DoD Components should follow existing processes to determine if an appropriate flexibility or accommodation may be provided.

ATTACHMENT 4 Requirements for Obtaining Self-Collection Kits and Self-Tests

- COVID-19 self-tests must have Instructions for Use and FDA Approval, 510(K) clearance or have an FDA Emergency Use Authorization, and will be made available through the Defense Logistics Agency.
- 2. Cost reporting for the purchase of testing materials or reimbursement for member tests should be in accordance with reference (h).
- 3. Funding for COVID-19 testing: If self-collection kits or self-tests are not available:
 - a. DoD Components are responsible for funding required COVID-19 screening tests.
 - b. Each DoD Component will establish procedures to reimburse Service members and DoD civilian employees for COVID-19 screening tests that require payment for purposes of meeting the screening testing requirement (e.g., if the screening test is not available through the DoD Component and must be administered by a facility who charges for the test).
 - c. For COVID-19 testing of DoD contractor employees with CRA, DoD Components will offer COVID-19 testing similar to that offered to DoD civilian employees at the DoD Component's expense and at no cost to the employee or their employer.

DECLARATION OF MASTER SERGEANT STEVEN RACHEL, UNITED STATES AIR FORCE

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,			
Plaintiffs,)		
v.)		
FOOD & DRUG ADMINISTRATION, and	,)		
JANET WOODCOCK, Acting Commissioner of)		
Food and Drug Administration,)		
Defendants.) _)		

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of MSgt Steven J. Raethel In Support of Children's Health Defense and Amy Miller

- I, MSgt Steven J. Raethel, declare:
- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a servicemember in the United States Air Force, in the rank of Master Sergeant (MSgt), assigned to Special Operations Command, Pacific on Camp H. M. Smith, Hawaii.
- 4. I am MSgt Steven J. Raethel, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I have been active duty for 19.5 years as a Survival, Evasion, Resistance, and Escape (SERE) Specialist. I have deployed multiple times in support of the Global War on Terror, including a rotation in support of the Joint Special Operations Command (JSOC). I have

- been awarded a Joint Service Commendation Medal, 6 Air Force Commendation Medals, and 4 Air Force Achievement Medals. I have a B.A. in Emergency and Disaster Management and live on the island of Oahu where I work in the Special Operations J7 Directorate.
- 5. In regards to the COVID vaccine, there have been multiple examples of coercion. First, the Commander of Special Operations Command, Pacific, dangled two additional four-day weekends in front of the command if they were able to increase vaccination rates. The first challenge was to exceed 1-1 Special Forces Group vaccination rates, and the second was if we reached 100%. This is a blatant play to tug on the heart strings of people who have not been vaccinated, because they are would be potentially withholding time off from their co-workers. Second, after my son (2 years old) was sent home from daycare for "covid related symptoms," which was nasal discharge and a dry cough, I was ordered to go and receive a COVID test because, "after talking with the med shed, you have to get tested because you haven't been vaccinated." The fact that my medical information is being freely shared among my office, from the command doctor, is incredibly concerning. What other medical information has been shared, potentially in violation of HPAA?
- 6. If I refuse this vaccine, my career is at stake. However, it's not just my career, it is also my family's livelihood and future. I am less than 5 months from a potential retirement, where I would be eligible for 50% of my base pay, for the rest of my life. However, I do not want to get out of the military, it has been an incredible experience and I feel truly blessed to have been able to serve my country and still want to continue my service.
- 7. I am currently pursuing a religious exemption for this vaccine. However, because I am assigned to a joint command, the command Chaplain, Chaplain Eskind, does not have Air Force guidance for me. The Air Force chaplains on Joint-Base Pearl Harbor-Hickam have yet to give me firm guidance on what needs to be accomplished, even though the deadline is 15 September, 2021.
- 8. There has been a significant amount of social pressure in my directorate to accomplish fully vaccinated status. There was a huge push that we would not be able to accomplish our primary jobs, which is exercise planning and execution, without the vaccine. Because so many of our exercises are accomplished with partner nations, the understanding was that if you weren't vaccinated, you couldn't accomplish your job and attend the exercise planning conferences and execution. The only saving grace is that my GS-15 Director, has also held out and refused the vaccine due to health concerns from his over 20 years of active duty service.

- I have received direct communication from two different Flight Doctors that have stated that the
 Pfizer-BioNTech vaccination IS and EQUALS Pfizer's Comirnaty vaccine, and there is no
 difference.
- 10. I had covid in February of 2021, and have a positive test result to prove it. However, I have been told that active duty personnel will NOT be able to pursue natural immunity exceptions, which are specifically listed as exemptions in the Air Force Instruction which governs immunizations.
- 11. I am not pregnant, however with zero study on what the vaccines may do to fertility, while my wife and I are pursuing a third child, this is also a concern.
- 12. I have not been directly threatened for not receiving the vaccine, because I have fallen through the cracks of administration since I work at a joint command. However, my wife (also active duty Air Force) has been threatened with a Uniform Code of Military Justice (UCMJ) Article 92 prosecution, which is failure to follow an order.
- 13. I have text messages from two different Flight Doctors in the United States Air Force that directly say the Pfizer Vaccine IS the licensed version, Comirnaty and that there is no difference.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Steven John Raethel, MSgt, USAF Superintendent, JCS Exercise

Special Operations Command, Pacific



Raethel, Steven J MSGT USAF USSOCOM SOCPAC (USA)

From: McAdams, Kenneth C COL USAF USSOCOM SOCPAC (USA)

Sent: Friday, July 23, 2021 17:49

To: SOCPAC ALL

Cc: Whitehead, Richard A CDR USN USSOCOM SOCOM (USA); Parker, Christopher D MAJ

USAF USSOCOM SOCPAC (USA)

Subject: SOCPAC 4-Day Weekend

Team,

BG Rudd has thrown down the gauntlet. He's ready to approve two additional 4-day weekends for the staff if we achieve better COVID vaccination rates. We're currently at 85% fully vaccinated. We'll earn additional long weekends if:

- 1) We exceed COVID vaccination rate of 1-1 SFG. They're currently at 87%. We can do this!
- 2) We reach 100%. Harder, but we can do this too.

In order to earn the time off, we have to reach either/both of those conditions prior to the vaccine becoming mandatory.

If you're ready to get vaccinated and don't know how/where, check with Doc Whitehead or Maj Parker, both CC'd. You can also get your vaccine now at the NEX, just make sure our Docs are tracking that you get it.

I don't know about you, but I like time off...and not getting COVID!

v/r, Ken

Col Ken McAdams Chief of Staff Air Force Element Commander Special Operations Command Pacific

***New: COM: 808-470-1000 / DSN: 470-1000

SVOIP: 477-0967 Cell: 808-500-8270

NIPR: <u>kenneth.c.mcadams.mil@socom.mil</u> SIPR: <u>kenneth.mcadams@socom.smil.mil</u>

DECLARATION AND DOCUMENTS IN SUPPORT OF SPECIALIST CHRISTOPHER SANTOS, UNITED STATES ARMY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and)
AMY MILLER,)
Plaintiffs,)
v.	(
FOOD & DRUG ADMINISTRATION, and)
JANET WOODCOCK, Acting Commissioner of)
Food and Drug Administration,)
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of SPC Christopher A. Santos In Support of Children's Health Defense and Amy Miller

I, SPC Christopher A. Santos, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a Servicemember in the United States Army, in the rank of Specialist, assigned to Bravo Company, 1-21 Infantry Battalion, 2nd Infantry Brigade Combat Team at Schofield Barracks, Hawaii.
- 4. I am SPC Christopher A. Santos, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I enlisted into the Army infantry at 29 years old with a degree in Architecture. My military career is infantile I currently have a total of 14 months of time-in-service. I have the

privilege to have participated in the two distinct career fields of civilian engineering and military service. Within the first couple of months assigned to my first and current unit, I have distinguished myself among my peers and have received my first award – the Army Achievement Medal – for leadership in the field.

- Military coercion of the COVID-19 vaccines and the mandates imposed by the Department of Defense stand against the freedoms of which our country holds dear, including medical freedom.
- 6. My military career is infantile in its stages. By choosing to refuse this vaccine, I compromise both the opportunity to serve my country and the welfare and comforts of my wife and 4 year old daughter. I risk financial security for my family and the education of my daughter.
- In light of these events, I have initiated a religious accommodation request to be exempt from this
 vaccine and exempt from any punishments attached to my refusal. The process is still ongoing.
- 8. In the face of this mandate, there is constant pressure to get the vaccine or face separation from the military.
- 9. In this declaration, it is fact that an Army medical officer whose intention was to attempt to address concerns from individuals who initially refused the injection consulted with me. The officer states that despite being "legally distinct," the two products in question are the same. The "fully licensed vaccine that we have on hand" was later confirmed to be the BioNTech variety, and not COMIRNATY.
- 10. Despite constant exposure to infected (vaccinated and unvaccinated) individuals, I have always tested negative for COVID-19 multiple times. I currently have no documentation to prove that I have ever tested positive for COVID-19. However, within the past month, my unit recently completed a training rotation to Indonesia, and the requirement to attend this rotation was vaccination. Despite being vaccinated, it is fact that several Servicemembers still contracted COVID-19 and, in some cases, more than once after vaccination.
- 11. Being married, my spouse and I both share concerns for fertility in both males and females. In our attempts to further expand our family, we have met extreme difficulty, as my wife is currently receiving hormone treatment for: 1. Premature-menopause, 2. Polycystic ovary syndrome (PCOS), and 3. Female climacteric states. In the face of this adversity, we actively strive to expand our family. Recent claims of miscarriages and suspicions of other negative effects on the menstruation cycle of females the vaccine(s) may or may not have, along with incomplete trials and the lack of adequate research into the subject matter, indicate that not enough time was dedicated to these

- concerns. It is within reason for us two individuals to share the common suspicion for the effects these vaccines may impose and how those effects may compromise the reproductive system.
- 12. Servicemembers in my unit who actively choose to refuse the vaccine are threatened with administrative separation from the U.S. Army.
- 13. In several instances, my current unit has attempted to offer unlicensed vaccines and has stated that they are "interchangeable" with licensed ones, or in contrast, has stated outright that they are offering the licensed vaccines. A social media post (screenshot attached) from U.S. Army Garrison Hawaii indicates this, affirming their stance that they "are the same." One enlisted Army medic even claimed that the two products were mixed together on-site, so, in effect, administering either/or were both acceptable courses of action.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. Jexecuted this declaration on September 13, 2021.

SPC Christopher A. Santos

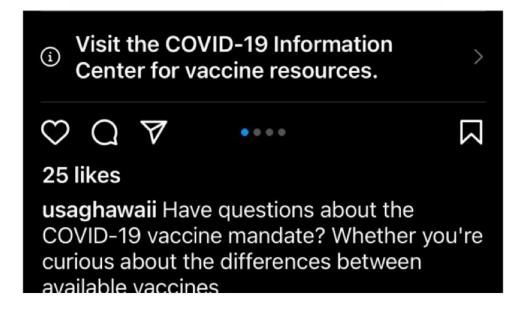
VAX FAQS

1/4

COMIRNATY VS PFIZER-BIONTECH

THE COMIRNATY COVID-19 VACCINE AND THE PFIZER-BIONTECH COVID-19 VACCINE ARE THE SAME AND CAN BE USED INTERCHANGEABLY. THE ONLY DIFFERENCE BETWEEN THE TWO VACCINES IS THE NAME, WHICH IS LEGALLY RELEVANT FOR MARKETING PURPOSES. SOLDIERS CAN RECEIVE THE PFIZER-BIONTECH VACCINE UNDER THE VACCINE MANDATE ANNOUNCED BY SECRETARY OF DEFENSE AUSTIN ON AUGUST 24TH.

HHTTPS://WWW.FDA.GOV/NEWS-EVENTS/PRESS-ANNOUNCEMENTS/FDA-APPROVES-FIRST-COVID-19-VACCINE



DECLARATION AND DOCUMENTS IN SUPPORT OF LIEUTENANT JONATHAN SHOUR, UNITED STATES NAVY



IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and)
AMY MILLER,)
)	
Plaintiffs,)
)	
V.)
)	
FOOD & DRUG ADMINISTRATION, and	
JANET WOODCOCK, Acting Commissioner of	
Food and Drug Administration,	
Defendants.)
)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of LT Jonathan C Shour, CHC, USN In Support of Children's Health Defense and Amy Miller

I, LT Jonathan C Shour, CHC, USN, declare:



- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- I am currently a service member in the United States Navy, in the rank of Lieutenant, assigned to
 Officer Development School (ODS), Officer Training Command Newport (OTCN) on Newport
 Naval Station, RI.
- 4. I am LT Jonathan C Shour, CHC, USN, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I am a military chaplain. I have a wife and three children under six years old as well as one on the way. I have been serving in the military since 2005. I was



enlisted for six years and then went to school to become a chaplain. I have been serving in the chaplain or since 2014, first in the Air Force where my work connecting base agencies and local charities led to recognition with a local 20 Under 40 award for my volunteer efforts. I served with distinction on stateside and overseas tours, as well as a recent deployment. This past year I made the transfer to the United States Navy this year. I am now in training at Officer Training Command Newport, Newport Naval NS, Rhode Island. I am in Naval accession training to continue my career as a military chaplain, serving members in need wherever God has need of me.

- 5. I have chosen as of yet to remain unvaccinated and because of this I have been: counseled that I stand to lose my career, retirement, and benefits from my service, separated from the vaccinated population, subjected to 'short term enhanced monitoring' only for the unvaccinated, made to submit the COVID testing every other day for a period of time while the vaccinated were not, made to eat separately from others or not able to utilize the galley for meals with the vaccinated, made to wear a mask differently that the vaccinated, threatened to be delayed in training simply because of my vaccination status, threatened to have my orders cancelled because I am not vaccinated, refused medical testing for COVID antibodies, told I am an "issue" and that I have a "rigorous road" ahead of me because I am unvaccinated, disallowed from having my wife come see my course graduation, pulled out of class to get counseling regarding vaccinations, and more. The vast majority of this has occurred within the last three weeks since the FDA approval has emboldened mandates and other leadership to push the issue further.
- 6. According to the counseling that I am receiving, I stand to lose my career in the military if I refuse. I have been our family's sole source of income since we had our first child; our primary income is at stake. I am over half way to retirement and stand to lose any pension and benefits. The calling that I have worked toward and in for the past 13 years is at stake.
- 7. I have requested time to see a specialist in allergy and immunology to get medical care regarding prior adverse vaccine reactions that I have had the past few years. I spoke to the immunizations nurse on or around 23 Aug 21 here as well as the student clinic medical provider on 7 Sep 21 to pursue this. I discussed my concerns and was referred to a specialist off-base. It was later that day (7 Sep 21) that I was called in to my class team leadership to receive administrative counseling for not being vaccinated and given 10 days to have any waiver, exemption, or accommodation request completed and submitted. In that meeting, I told them of my concerns



and that I had already spoken to a provider about immunization concerns. In response, my leadership reasserted the 10 day timeline. I told them that according to the provider, I may not even have an appointment with the specialist by then, let alone the information I am seeking before making any final decision about exemption or accommodation requests. My leadership reasserted the arbitrary 10 day deadline with no concern for my situation. I declined to sign the acknowledgment, after which I was called in to speak with the Deputy Director of ODS, LCDR Cagley. I restated my concerns. My leadership restated the 10 day deadline.

- 8. In the counseling received on 7 Sep, I was told that I would be held at my current training after graduation until I get the shot, a medical exemption/religious accommodation is granted, or I am separated for refusing the vaccine after the 28 Nov deadline. The ODS course should have run from 23 Aug to 24 Sep 21. From here I would have gone to another school here in Newport for the Chaplain Basic Leadership Course from 27 Sep to 18 Nov 21. We were planning to have my wife and mily come and join me out here during the chaplain school training. After chaplain school, I would have been moving down to Camp Lejeune, NC. What should have been about a month here without family could be many months. They say I will not be able to be with my family, I will be restricted to base, in student status, etc. ... all the things they say 'are not a punishment' and 'are not an attempt to coerce you.' I say it is a distinction without a difference.
- 9. I have been offered the COVID vaccine at least 5 times while here. The unvaccinated students (11 at that time), including myself, were called out in one of our first days here and told that the Secretary of Defense mandate had come down and we were offered the vaccine; six said they would get it or were in the process. About a week later, the remaining unvaccinated students (five at that time) and I were called out of class again and told about the Secretary of the Navy's mandate and asked who would take the vaccine; one more person said they would take it. We were also offered the vaccine during the standard immunizations briefing and on the two immunizations days. This count does not include the offers when given the counseling referenced in item 7. To date, I have respectfully declined.
- 10. To my knowledge I have not had COVID. There was a time last July 2020, while in quarantine for deployment that I felt ill. In retrospect I may have had COVID. My wife and a couple family members did receive positive PCR tests for COVID around that same time. I did not seek treatment at the time. However, I requested an antibody test earlier this year (July 2021) from my



- previous duty station's base clinic and was denied. I was told I would have to go to an off-base hospital and pay out of pocket.
- 11. My wife and I desire to have more children and are concerned about the unknown effects that could cause fertility issues, complications, or other unknown possibilities that could impact the quality of our children's lives.
- 12. On 7 Sep 21, I was brought before my leadership and they attempted to pressure me to sign an acknowledgement regarding the Navy's new vaccination mandate. It said, "Unless medically or administratively exempt, any refusal to be vaccinated may constitute a Failure to Obey a Lawful Order and may be punishable under the Uniform Code of Military Justice (UCMJ) and/or administrative action for Failure to Obey a Lawful Order (UCMJ, Article 92)." Shortly after a meeting I was approached by the Director of ODS, CDR Woody and she stated that I have a "rigorous road ahead." Her overall comment and discussion may have been intended to be in the context of a compassionate approach, but it showed that at the highest level of my course leadership that I was on the wrong side of their intent. In a later meeting with the command legal officer, I was told that I was the first one that they have had an "issue with." These comments show me that I am squarely in the other side of the command direction and make it clear that there will be an execution of the UCMJ at the first opportunity.
- 13. I was sent a copy of a Department of the Navy's memorandum for medical forces on the "Interchangability (sic) of Food and Drug Administration-approved Pfizer-BioNTech vaccine Comirnaty® and Food and Drug Administration-authorized Pfizer-BioNTech vaccine under Emergency Use Authorization" from 3 Sep 21.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Jonathan C Shour



DEPARTMENT OF THE NAVY BUREAU OF MEDICINE AND SURGERY 7700 ARLINGTON BOULEVARD FALLS CHURCH VA 22042

EXHIBIT 13

IN REPLY REFER TO 6300
Ser M00/21M00035
3 Sep 21

MEMORANDUM FOR COMMANDER, NAVAL MEDICAL FORCES ATLANTIC COMMANDER, NAVAL MEDICAL FORCES PACIFIC COMMANDER, NAVAL MEDICAL FORCES SUPPORT COMMAND

Subj: INTERCHANGABILITY OF FOOD AND DRUG ADMINISTRATION-APPROVED PFIZER-BIONTECH VACCINE COMIRNATY® AND FOOD AND DRUG ADMINISTRATION-AUTHORIZED PFIZER-BIONTECH VACCINE UNDER EMERGENCY USE AUTHORIZATION

Ref: (a) Comirnaty® Biologics License Application

- (b) Emergency Use Authorization for Pfizer-BioNTech COVID-19 vaccine of 23 Aug 2021
- 1. <u>Purpose</u>. Address the interchangeability of the Food and Drug Administration (FDA)-approved Comirnaty® and FDA-authorized Pfizer-BioNTech Coronavirus Disease 2019 (COVID-19) vaccine.
- 2. <u>Background</u>. On 23 August 2021, the FDA approved the Biologics License Application submitted by Pfizer-BioNTech for individuals 16 years of age and older, reference (a). On the same day the FDA revised the Emergency Use Authorization (EUA) for the Pfizer-BioNTech COVID-19 vaccine for individuals 12-15 years of age and for a third dose in immunocompromised individuals, reference (b).
- 3. The FDA-approved vaccine, and the vaccine used under the EUA, have the same formulation, and can be used interchangeably to provide the COVID-19 vaccination series without presenting any safety or effectiveness concerns. Navy medical providers can use Pfizer-BioNTech doses previously distributed under the EUA to administer mandatory vaccinations.

B. L. GILLINGHAM

Copy to: COMPACFLT COMUSFLTFORCOM OPNAV (N3N5) HQMC HS Memorandum for Record

8 Sep 21

To: ALCON From: Jonathan Shour, LT, CHC (USN)

Shi: Mandatony could 19 Vaccination Notes

- 1. This memo will keep a running log or ongoing information that has been misgiven, directed improperly, or sooms to be coercine in nature.
- Design of needed. I afficer Training Command Newport, access to a computer for peopler documentation to not often evailable. I will compile info here that cannot be captured effectives in another median. This to not an all-indision list.
- 3. Method while indications for subsequent entries and sign/date additions.

Jonathan Shour

1st Ind

85 cp 21

1. To clute, all unvaxed members have been pulled out of class 2-3 times to be offered the Shot. It is understood that it is required to be offered and unvaried are to be counsoled. However, now that was done appropriately with the immunications noise during the immunications in briefing. Additional offerings seem clearly an affering to coerce people. The coercion was effective to. Each time, more people.

said they wanted to or reluctantly said they would get the shot.

2. The page 13 how also highly coercine. Going against the 90 day mandate deadling, it says unvasted model have 10 days to get the shot of submit a statement / naive request. This seems to attempt to reduce the gudare and take away our rights.

183 9- The pg 13 was ginean on 7 sep 21 by Lis Sander + Assello + spelly?

b- When dectining to sign, I had to nect the LCDR Peputs Dredo of ODS, Casley

c-Being told multiple times there is not to coerce you! and there is not a punishment! seems clearly to be coercion by planting the seed. They seemed to feel they were being coercion because they kept script M. Seems like they think it so.

In the ODS Directory, COR Worsh, some me.

Waiting. She seried 'I have a rough road ahead. An intendeding statement course, from such a direct superior there were no place for the comment to be been as smy assignate given the circumstant and lack of relationship.

112

2nd Ind.

8 Sep 21

1. Met with CNO Woodward - Logal Officen

- a. Re: Being held over at ODS. Discussions are hyprenny at CO, OTCN + the above. CO, CAPT Huzenburg discussing with Director of Chaplain School + Center, CAPT Cash, CHC.
- b. Said I was the "first one they've had an "issue with". The language and verbiage of the discussions continues to reveal a seeming bias against me in the situation. Command is not with me and figuring out a way ahard in this new situation. In stead I been nearing that they are doing this, not we are trying to figure out... I hear they are not, instead of we cam't... I don't hear you are the first case and we are figuring this out with you; I get, that I am the first one that they have an "issue with"
- c. I requested written policy. There is still no new policy. Nothing is written at this paint.
 - i. Told they are trying to mave me on . (paraphrace). This is in conflict with . What Class LTs & said yesterday, 7 sep.
 - ii. In considert and wrong of nistending information is given consistently.

- (cont) -9

(cont)

3rd Ind.

3 Sep 21

1. On 7 Sep, the 4 invasced personell were called into the class LTs office W/ Lts Sinder + Assello.

a We were postricted on the OTEN pg 13.

- recents the vaccine. AD+Res. Consequent varged.
- C. AD Said I would be held one here at OPS, poss. in 'student pool,' Restricted to base
 - in Not discussed, but reasonably intered: couldn't see family, restrictions similar
 - boing sorted out, mainer and appeals are being done, separation or courts muchal plays out and is of course challenged.

 Months.
 - I don't know what is. It is certainly coercine and soons clark, the a punishment for not inweducted being vaccinated.
- all and time to speak to legal or any corned before signing. There was no discussion on how or why I was hesited to sign that mattered.
- 3. The leader his staff on that day bept saying that they are just "doing what they were told" co to say.

(Cort) -2

They kept saying that they were getting thing from 'about'. They are Just following order,' as they they say. They are following what I believe are and hope will turn out to be unlawful orders. And in the face of any question, they do not evaluate what they are doing. Instead they blindly or knowingly follow the orders hundred down to them. They are just as culpable and own the same responsibility as those above that are giving the orders or Jikewise passing on everything from above.

4th Ind

8sep 21

1. Additional Coercine measures to mention: Graduation policies (See LCOR Roadal Welcom email for more details)

- q. Unvarsed Family cannot come to class graduation. No exceptions.
 - i. Even those meed tilly mable to recow a vax are mable to come,
 - ii. Seems Clearly a way to coece family or friends to get the vax. Palicres across the board punish the invarient and their families. Forcing someone to miss an important life moment is a negative or adverse action, no question.

(4/12 (cont) 9

5th End

7 sep 21

- 1. Policy re covid raccine inconsistent with proviously established policies regarding vaccine examplian or 15sives.
 - When talking to a provider (IT. Joya) on our class imminization day (75p21), I asked about seeking further modical analysis of my past adver reactions before rectiving the Menniquened viccin fact I was being told I needed. I described what I believe has been happening the part few years and boyand. I asked for evaluation with an allegist or immunologist to get more information. The LT agreed and put in for a netheral for ne to get schedled with the specialist. He asked me about how long I would be here and when I said I would be in the oven for chaplain school; he was fine because I would have the time to get seen. He inducted that I haddn't how time, most littly, to get the appointment. In time for or before ans graduation. Because I would be here for chap. School, I could get the appointment and continue the process after graduation. There was no discussion of holding me over at ODS white the process happened, no deadlies a rush for the process to occur.
 - b. I an told for cavid, I would be held here; for another vax, I would continue on . Incomental
 - C. For the could vax, they are mareleting a reduced timeline for a stertiment, have,

the was no rush. He said to follow up with TRICARD for the reflect if I had n'L "P heard after -10 days. No rush.

- d. for the could var everything must be done in 10 days. For anothe vax, I dutil the even need to have an appointment scheduled for 10 days.
- e. Horgestantine for For could vax they have quemphine and texting and monitoring and ...; for another vax, nathers.
- of For could vax, people are called out and randed up to be counciled, talked to, etc... for another vax, nothing.
- g. For courd vas they went additioned paperwate.

 signed regarding the process and possibilition. For another vax, nothing similar, possibly of you consider the immunizations introofing, but it is not at.
- The policies that have applied in the part an being changed and not for the benefit of the member. Arguebly, many of the changes do not benefit anyone, even the 'greater good,' but simply make things more difficult or restrictive on issues regarded could vax. For unvex personnel or people seeked medical information are evaluation as religious insedual. Accommodation, the policies give adverse actions against them companed to promise policies for other vax.

3. Continue from pal page for signichman

Mar

6th Ind.

N des 6

- 1. In an 6003 course briefing on Ethics, falce and misleading information was shared by the 005 Deputy Priector, LCDR Cagley.
 - a. Cacley has giving examples of 'ethical' behavior. He tried to us getting the could vave as an example at doing sandly extract occarity to the utilitarian concept of the 'greedy good'
 - b. In his example, he gave misintormation about the vax. He sould the the "vax wald stop the wax and we could carry on smartly with our lines." This is not information put out there from the vax manufactories, CDC, or any entity of repute as the showing neuro possibled information or date that the vax world stop vivos transmission; they only attempted to claim that the disease of cours ig would be reduced. His instructional attempted to be coercine in the affect to

(cons) =>

(cont)

EXHIBIT 13

7th Ind.

13 Sept 21

1. Scanned on 13 sep. Sending to MFK. for CHD N FDA.

1192

OFFICER TRAINING COMMAND NEWPO	RTRI		
SUBJECT:		X PERMANENT	TEMPORARY
COLUMN TO A STATE OF THE STATE		AUTHORITY (IF PERMANENT):	
COVID-19 Vaccination Administrative Counseling/Warr	ing	BUMEDINST 6230 15B and NAVAD	DMIN 190/21
1. On 24 August 2021, all U.S. service membindicate that you have not been vaccinated ag 2. The following information is provided for a. Your health and safety are the Navy's n b. The COVID-19 vaccines are safe and e c. The threat from COVID-19 is deadly at d. Vaccination has proven to be the most e e. Healthcare providers are available to di f. DoD will administer COVID-19 vaccin practice. g. Administration of the COVID-19 vaccin vaccine helps protect your family and depend 3. Unless medically or administratively exem may be punishable under the Uniform Code of Order (UCMJ, Article 92). 4. The following corrective action is required	your consideration: umber one concern. ffective. d real. effective defense again ations consistent with ne is in the interest of ents, as well as fellow pt, any refusal to be v f Military Justice (UC)	nst serious illness caused by COVID-19 related objections/concerns with the CO FDA approved dosing schedules and cu national security and protection of the f Sailors and Marines and associated Do accinated may constitute a Failure to O	. VID-19 vaccines. Irrent standards of medica Force. Receiving the D civilians. bey a Lawful Order and
Within 90 days of this administrative coun	seling, you will comp	lete receipt of the COVID-19 vaccination	on using an FDA approve
record.	hot series. Proof of v	accination is required and must be enter	ed into your medicar
record.	rning and understand mit a statement in resp vill submit my statement.	its contents. conse to this counseling/warning (initial ent within 10 days of this date.	
frecord. 5. Member must initial all that apply below: I acknowledge the above counseling/wa I have been informed of my right to sub I intend to submit a statement. I was a statement of the submit a statement of the submit a statement.	rning and understand mit a statement in resp vill submit my statement. Inption request will be	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date.	
fecord. 5. Member must initial all that apply below: I acknowledge the above counseling/wa I have been informed of my right to sub I intend to submit a statement. I was a statement of the submit a statement.	rning and understand mit a statement in resp will submit my statement. Inption request will be M. C. HAZENBE	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date.	
for the second of the second o	rning and understand mit a statement in resp will submit my statement. Inption request will be M. C. HAZENBE	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date.	
for Member must initial all that apply below: I acknowledge the above counseling/wa I have been informed of my right to sub I intend to submit a statement. I want in the submit a statement. I want in the submit a statement. I want in the submit a statement in the submit a statement. I want in the submit in t	rning and understand mit a statement in resp vill submit my statement. nption request will be M. C. HAZENBEI CAPT U	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date.	
record. 5. Member must initial all that apply below: I acknowledge the above counseling/wa I have been informed of my right to sub I intend to submit a statement. I v I do not intend to submit a statem I intend to seek an exemption. My exen	rning and understand mit a statement in resp vill submit my statement. nption request will be M. C. HAZENBEI CAPT U	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date.	l one below).
I have been informed of my right to sub I intend to submit a statement. I v I do not intend to submit a statement.	rning and understand mit a statement in resp vill submit my statement. aption request will be M. C. HAZENBEI CAPT US	its contents. conse to this counseling/warning (initial ent within 10 days of this date. submitted within 10 days of this date. RG SN Witness' Signature & Date	l one below).

× **Heads Up!** To complete your profile, **VERIFY** your email address. COMPOSE Appointments webVisit® □ Inbox (10) Sent ■ Draft Archive Date ▼ Jonathan Shour ▼ Jul 20 Optometry Closure 19-23 July Micha Golden for Ms. Iveth Galvez Guzman PA / Air Force Medicine-Goodfellow Dear 17 MDG Beneficiaries, The Optometry Clinic will be closed from 19-23 July and will re-open on Monday, 26 July. For any questions please contact your PCM, or call the Optometry clinic at 325-654-3120/3632 on 26 July. Information Jun 16 **RE: Antibody Test** Brianna Arranaga for Ms. Iveth Galvez Guzman PA / Air Force Medicine-Goodfellow Good Afternoon Sir, Per Major GG- please inform pt we currently only perform that type of testing if medically indicated by our SGH, Lt Col Kopp due to the test not changing any medical treatment. You can get the test **RE: Antibody Test** Jun 16 Brianna Arranaga for Ms. Iveth Galvez Guzman PA / Air Force Medicine-Goodfellow I will forward your message to the provider for review. You will be contacted once a response is received. Thank you for using Relay Health. V/R Brianna Arranaga RN 2 () 1 () 3 () 4() 5 ()

1/3

므

σ

1202, 2021

Search by subject

6/16/2021 12:12:45 PM

From: Brianna Arranaga

For: Ms. Iveth Galvez Guzman PA at Air Force Medicine-Goodfellow

To: Jonathan Shour

RE: Antibody Test

Sood Afternoon Sir,

due to the test not changing any medical treatment. You can get the test off-base at Shannon but would have to pay out Per Major GG- please inform pt we currently only perform that type of testing if medically indicated by our SGH, Lt Col Kopp

of pocket.

rianna Arranaga RN

Collapse all

Erom: Jonathan Shour

Good Evening Ma'am,

□MESSAGE THREAD

vaccine. The test can provide information to help with that decision and so I would argue that it would be relevant to $\frac{1}{2}$ $\frac{1}{2}$ Can you send this back please: I am trying to gather more information about my decision to get or not get a COVID-19

medical treatment.

From: Brianna Arranaga 1202, 2021

Good Afternoon Sir,

due to the test not changing any medical treatment. You can get the test off-base at Shannon but would have to pay out Per Major GG- please inform pt we currently only perform that type of testing if medically indicated by our SGH, Lt Col Kopp

of pocket.

o Lyauks

■Brianna Arranaga RN

From: Brianna Arranaga 1202, 2021

#I will forward your message to the provider for review. You will be contacted once a response is received. Thank you for

using Relay Health.

Brianna Arranaga RM

1502 ,81 nul From: Jonathan Shour



Good Afternoon Ma'am,

I would like to get an antibody test for SARS-CoV-2 (COVID-19) to see if I have had it at some point in the past without knowing. How can I do that?

You cannot reply to this message because your relationship with this provider or care team member has been declined or deactivated.



Help (JavaScript:ShowHelp('/resourcelibrary/help/patient');) | Privacy (Javascript:openPopup('https://www.changehealthcare.com/security/privacy-policy', 'legal', 800,600)) | Terms of Use (Javascript:openPopup('https://www.changehealthcare.com/security/use-policies', 'legal', 800,600)) | 508 Compliance (Javascript:openPopup('/Legal/LegalContent.aspx?docID=statement_of_508&lang=en-US', 'legal', 800,600)) | Contact Us (/PatientSelectContact.aspx) | © 2020 Change Healthcare LLC and/or one of its subsidiaries. All Rights Reserved.

DECLARATION AND DOCUMENTS IN SUUPORT OF GUNNERY SERGEANT JOHN STANZIONE, UNITED STATES MARINE CORPS

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiffs,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,)
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of Gunnery Sergeant John M. Stanzione In Support of Children's Health Defense and Amy Miller

- I, Gunnery Sergeant John M. Stanzione, declare:
- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a servicemember in the United States Marine Corps, in the rank of Gunnery Sergeant, assigned to Marine Corps Embassy Security Group Region 1 posted abroad at the U.S. Embassy in Tbilisi, Georgia.
- 4. I am Gunnery Sergeant John M. Stanzione, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I enlisted in the Marine Corps in 2009, with nearly 13 years of continuous active service I served have in various technical fields supporting training and



warfighting abroad to protect the birth right freedoms of all Americans. I served aboard ship on a Marine Expeditionary Unit deployment in 2016 receiving a Navy and Marine Corps Achievement medal for my efforts. I am currently enrolled in my junior year with Delta State University in Mississippi pursuing a Bachelor of Science degree in geospatial technologies, applications, and intelligence awareness. I currently live in Tbilisi, Georgia and work as the Marine Security Guard Detachment Commander at the US Embassy.

- 5. Coercion. On 13 September, I received an order to receive the Pfizer COVID-19 injection at a local clinic in Tbilisi, Georgia or be relieved of my duties as the Detachment Commander at the US Embassy. My request for administrative exemption based on the unknown condition on the local facility, the proficiency of the administrators, the proper storage of the vials, and overall concern for whether or not I would actually receive the licensed vaccine was cause for my decision refuse the ordered vaccination appointment. The US Embassy in Tbilisi, Georgia has its own health unit capable of administering the injections but does not have any stock and is not scheduled to receive anymore until later this year. I was told I would not be allowed to wait until then and that I needed to receive the injection at soonest availability regardless of circumstance.
- 6. Consequence. My refusal thus far has led to me being relieved of my duties as Detachment Commander for cause, explained to me as a "loss of faith and trust in confidence" for failure to obey the order. My entire Marine Corps career hangs in the balance and there is potential for me to be subject to general court-martial and subsequent discharge after 13 years of faithful service.
- 7. Exemption. I requested for verbal administrative exemption based on the current non-availability of the FDA licensed vaccine at the US Embassy health unit. This was denied because there is availability through the local Georgian health system.
- 8. Discrimination/Intimidation. Prior to the release of approval for Comirnaty, I was subject to repeated questioning and pressure from my commanding officer and senior enlisted to receive any of the COVID-19 vaccines under EUA. As an unvaccinated SM during the times that masks were not mandatory, we were still ordered to wear them. Visitation to shared housing was suspended for all unvaccinated Marines in my charge.
- To date, I have not been offered Emergency Use Authorization (EUA) Pfizer-BioNTech
 vaccination while being told that the vaccine is "licensed"? (Only Pfizer's Comirnaty vaccine is
 licensed.



- 10. Immunity. I have not been diagnosed with COVID-19 to date, part of my plea to my command is to request for medical exemption for natural immunity pending required serological testing per the joint service document "Immunizations and Chemoprophylaxis for the Prevention of Infectious Disease".
- 11. Pregnancy. My wife and I both have concerns for impact the vaccine could have on fertility.
- 12. Threats. I have already been relieved of my duties as the Marine Security Guard Detachment Commander at the US Embassy in Tbilisi and per MARADMIN 462/21 "Mandatory COVID-19 Vaccination of Marine Corps Active and Reserve Components" dated 1 September 2021 could be subject to general court-martial and subsequent discharge.
- 13. I do not have any additional documents pertaining to being offered unlicensed vaccines and being told that they are "interchangeable" with licensed ones or what I have been offered is licensed. However, I was told by my senior enlisted advisor in a verbal conversation that there is only one Pfizer COVID-19 vaccine, and anything manufactured by Pfizer is FDA approved.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

John Matthew Stansjone [Signature full name]

From: Stanzione, John M (Tbilisi)

To: Gibson, Robert A;

Subject: RE: vaccine refusal

Date: Thursday, March 25, 2021 12:02:00 PM

Copy that Sir, I will ensure the Marines watch the video and have their explanations sent to you by the deadline.

Resepectfully,
John M. Stanzione
Gunnery Sergeant USMC
Detachment Commander
MCESG Region 1 Detachment Tbilisi, Georgia

Office: +995 32 227 7504 Cell: +995 591 115 819

IVG: 997 7704

Open Net: StanzioneJM@state.gov

From: Gibson, Robert A < GibsonRA1@state.gov>

Sent: Thursday, March 25, 2021 11:40 AM



Subject: RE: vaccine refusal

Marines,

The health unit in Tbilisi must have all people who want to take the vaccine registered by this Friday, due to prioritization of vaccines. Therefore, I am now required to move up my timeline for your homework. The MARADMIN requires that you've consulted with an "informed healthcare provider on the risks, benefits, and side effects of the vaccine." This guidance has been standing since mid-December, and now that the vaccine is in Tbilisi, the medical unit is very busy so cannot meet with you Marines until next Wednesday. Therefore, to accomplish this requirement, you must watch the 18-minute video linked below. Although I would prefer that you speak directly with a health care provider, that is simply not an option now due to the procrastination of this requirement.

The new deadline for your written explanation is <u>tomorrow at noon</u>, <u>Tbilisi time</u>. I'll read them as quickly as I can, and then call each of you to discuss. You still need to read the two articles as well.

CO

From: Gibson,	Robert A
---------------	----------

Sent: Wednesday, March 24, 2021 1:39 PM

To: Stanzione, John M (Tbilisi) < StanzioneJM@state.gov;

Cc:

Subject: vaccine refusal

Good Afternoon Marines,

I understand each of you have decided to refuse the COVID vaccine, now that it's available in Tbilisi. I respect your decision, but I need to ensure that it is a fully informed decision, and want to understand your viewpoint. As you know, I encourage everyone to take the vaccine, and have taken it myself. This is not a political statement or something that I am gaining anything from. This is entirely a mission readiness plea, that if all Marine are vaccinated, it allows us to accomplish the mission with less friction. We've had Marines stopped at airports and held up while PCS'ing because they've tested positive for COVID. Getting the vaccine drastically reduces the likelihood that you will catch the virus, which gives greater assurance for mission accomplishment. I realize that all of you are leaving the MSG program after Tbilisi, but whether you are going back to the fleet, or the civilian world, being vaccinated offers many benefits, beyond just health benefits. If you are going to the fleet, it will allow you to participate in exercises and drills—1stSgt Karasik just heard from one of his mentors this morning that one of the Geographic Combatant Commands are having issues with getting some training and exercises with partner nations because not all Marines are vaccinated. In the civilian world, I was reading an article yesterday that some companies are giving benefits to vaccinated employees.

As the MARADMIN 754/20 states, this is ultimately your decision, but you must first be "counseled by an informed healthcare provider on the risks, benefits, and side effects of the vaccine." I understand GySgt Stanzione has made appointments for each of you to speak with a medical provider from the health unit. You also need to watch this 18 minute video: https://usdos.sharepoint.com/sites/KnowledgePortal/Lists/Featured%20Stories/Item/displayifs.aspx

<u>List=c91780e9%2D171d%2D4705%2Dae3d%2D1d5867c97244&ID=595&Source=https%3A%2F%2Fusdos%2Esharepoint%2Ecom%2Fsites%2FKnowledgePortal%2FLists%2FFeatured%2520Stories%2FAllItems%2Easpx&ContentTypeId=0x01003EE829E05DAB3841850D0420AE59EDA2</u>

And I've attached 2 articles, each one explaining the testing process for the Pfizer and Moderna vaccines, respectively. By next Wednesday, 31 March at 1700 local Tbilisi time, I need to you to send me a written explanation about your concerns in taking the vaccine. Minimum length is one sentence; maximum length is two pages. I also need you to confirm that you spoke with the Medical Officer, Sarah Cummings. After I receive your explanation, I'll call each of you to discuss it. This will not be a confrontational discussion. You are all smart and accomplished Marines, and I respect your intelligence and decision-making skills. That's why I want to understand your decision—to better educate myself, and provide you a possible counter-point on why the vaccine is safe and effective. I will also ask you about the attached articles, so make sure you read them.

Very Respectfully Yours, CO

LtCol Bob Gibson, USMC
Commanding Officer, Region 1, MCESG
Eastern Europe and Eurasia
U.S. Consulate, Frankfurt am Main, Germany
gibsonra1@state.gov

Office: +49 69 7535 3836 DSN: (314) 568 3836

Mobile: +49 151 1132 3963

Region 1 Team Ball:

Leave your ego at the door, do your job, nobody cares who gets the credit!

KHIBIT

(Signature)

DATE	DATE	DATE
Articles UCMJ explained to me this date as required by Article 137, UCMJ.	Articles UCMJ explained to me this date as	I have been counseled concerning SBP and fully understand the automatic enrollment and future enrollment provisions on the Plan.

(Signature)

ADMINISTRATIVE REMARKS (1070)

20210325: Counseled this date concerning MARADMIN 754/20, COVID-19 Vaccine Guidance for Active and Reserve Components. I have read MARADMIN 754/20 and been briefed on its contents. I understand that in accordance with published guidance, I have the option to receive or decline the COVID-19 vaccine released under emergency use authorization (EUA). I further understand that declining to receive this vaccine could impact the command's ability to assign me due to host nation travel restrictions.

(Signature)

I am volunteering to receive the COVID-19 vaccine as soon as the opportunity is afforded to me.

I am exercising my option to decline the vaccination under the EUA understanding MCESG reserves the option to relieve me for the Good of Service if I cannot be assigned due to host nation restrictions.

STANZIONE, JOHN M.	1379755840
NAME (last, first, middle)	EDIPI

NAVMC 118(11) (REV. 05-2014) (EF) PREVIOUS EDITIONS ARE OBSOLÉTE

11. _

FOUO - Privacy sensitive when filled in

Adobe LiveCycle Designer 9



From: <u>Stanzione, John M (Tbilisi)</u>

To: Gibson, Robert A

Subject: GySgt Stanzione Vaccine Refusal Explanation **Date:** Friday, March 26, 2021 12:29:14 AM

Attachments: GySgt Stanzione Vaccine Refusal Explanation.docx

Good evening Sir,

Attached is my refusal of vaccine explanation.

Respectfully, John M. Stanzione Gunnery Sergeant USMC Detachment Commander Tbilisi Georgia

Get Outlook for iOS

Why I refuse to receive the COVID-19 Vaccine

My stance on the decision to refuse the vaccine is solidified by a multitude of factors ranging from personal experience and the information I've researched. I personally do not believe in the philosophy of the virus or the vaccine based on the social and economic effect it has had on the world, and the histories of the professionals and companies that continue to press the urgent necessity to vaccinate the population. I was in Milan at the onset of the European outbreak and suffered through lockdowns, restrictions of movement and multiple changes in policy on how to infection from this virus. I continued to see MED move the goal posts as their "understanding" of the COVID environment came into focus.

At first the Italians recognized the "threat" as it was explained to them, but in recent news there has been backlash and upheaval after the deaths of 4 high ranking Carabinieri attributed to the AstraZeneca vaccine. You would think this event might change the Italian government's view on continuing vaccination? No, they locked the country down and are pushing the vaccine even harder. Take the events of last week that occurred in Georgia, where there is video documentation of nurse receiving the AstraZeneca vaccine and shortly after falling into a coma and dying a few days later. The list goes on of victims receiving the vaccine no matter what flavor. Tbilisi received the Pfizer vaccine, though interesting fact is that all three major vaccine manufacturers (Moderna, Pfizer, AstraZeneca) have merged under Glasko Smith Kline so from my perspective the vaccines are all the same in different packaging harboring the same risks. This is only the result of short-term effects, as even in Dr. Martin's video he states that they "don't have any reason to believe that these vaccines will present any long term or latent serious side effects." Although there is a small possibility of serious effects, the list of these potential effects to include palsy, heart attack, stroke, convulsions, infertility etc. are enough for me not to roll the dice on something that has not had the time to be properly studied, and to now has remained ultimately voluntary.

I've viewed this pandemic environment as another opportunity for big Pharma to continue to profit from the fear exacerbated by the media. Forced testing, quarantining otherwise healthy people, restrictions of movement and haste to vaccinate the whole world populations by "philanthropists" like Bill Gates who is heavily involved in eugenics philosophy will continue to raise red flags in my book. As I am told, receiving the vaccine will not eliminate the need for PCR testing during travel, does not eliminate the need for mask wearing or social distancing, and will not eliminate the possibility of contracting the virus! Another red flag!

Dr. Martin states that the mRNA technology has been in development for decades. The pandemic has been going on for over a year now, and the EUA came out in December. I researched how long it should take for FDA to approve a vaccine, average could be six months to a year, but they note that there is a special pathway for vaccines to be approved in special cases such as this. The fact that the vaccine is still being administered under EUA and hasn't been fully approved by now is another red flag for me.

I read through the medical journals provided, and as I waded through all the technical jargon, I realized that if it was so important for my safety to understand it then it should have been presented in plain language. I neglected to mention in our earlier conversations that the entire detachment was present for a Townhall with the Ambassador and MED on Monday discussing vaccine, the conduct of the vaccine clinic, and a Q&A with Sarah. Though not an individual discussion, I believe now that this would have met the requirement per MARADMIN 754/20. I understand that your requirement per MARADMIN 754/20 is to ensure that all Marines have received all information materials, and that everyone is provided counseling by a qualified medical professional. This speaks nothing of individual counseling.

Although this assignment was meant to be non-confrontational as you mentioned in your initial email, I find this interaction to be extremely confrontational and I don't feel that you do respect my decision to refuse the vaccine. This decision is personal, and to pull an excerpt from Ambassador Degnan's email from this evening addressing the community states "I would like to remind everyone that getting the vaccine is a personal choice and a person's vaccination status is private medical information."

20210326

Gunnery Sergeant Stanzione

UNITED STATES MARINE CORPS



REGION 1 (EASTERN EUROPE AND EURASIA)
MARINE CORPS EMBASSY SECURITY GROUP
AMERICAN CONSULATE GENERAL FRANKFURT GERMANY
7900 FRANKFURT PL WASHINGTON DC 20521



IN REPLY REFER TO: 6230 CO 13 Sep 21

From: Commanding Officer, Marine Corps Embassy Security Group Region 1

To: Gunnery Sergeant John M. Stanzione 1379755840/0241 USMC

Subj: ORDER TO RECEIVE COVID-19 VACCINE INOCULATION

(a) U.S. Navy Regulations, Article 1144

(b) ALNAV 062/21

(c) MARADMIN 462/21

(d) NAVADMIN 190/21

(e) MARFORPAC COVID-19 Vaccination EXORD of 1 Sep 21

(f) MOD 002 to I MEF Novel Coronavirus (COVID-19) Outbreak EXORD 21-001 of 1 Sep 21 (U//CUI)

(g) MCO 1730.9

(h) BUMEDINST 6230.15B

- 1. Pursuant to references (a) through (f), you are hereby ordered to submit to inoculation for COVID-19 no later than Thursday, 16 September 2021, specifically through receipt of a COVID-19 inoculation using a U.S. Food and Drug Administration (FDA) licensed and approved COVID-19 vaccine. If you voluntarily receive a complete series of an FDA Emergency Use Authorization (EUA) COVID-19 vaccine, or a vaccine included in the World Health Organization (WHO) Emergency Use Listing, these vaccination series will satisfy the inoculation requirement of this order.
- 2. Tha FDA licensed and approved Pfizer vaccine is available through coordination with the US Embassy, Tbilisi, Georgia Health Unit immediately.
- 3. If you intend to submit an administrative or medical request for exemption from vaccination in accordance with the processes contained in references (c) through (h), you must submit your request within three calendar days of this order. You may request an extension from me in writing of this three-day deadline for good cause. If you fail to submit an exemption request or an extension request within three calendar days, and do not otherwise submit to inoculation using an available licensed and approved COVID-19 vaccine, you will be in violation of this order.

R. A. GIBSON

Copy to: MCESG Legal



FIRST ENDORSEMENT

20210913 Date

From: Gunnery Sergeant John M. Stanzione 1379755840/0241 USMC

To: Commanding Officer, Marine Corps Embassy Security Group Region 1

Subj: ORDER TO RECEIVE COVID-19 VACCINE INOCULATION

- 1. I have read and understand this order, and am aware of my responsibility to receive COVID-19 vaccine inoculation or submit an administrative or medical exemption request within three calendar days of the date of this acknowledgment.
- 2. I (do) / (do not) intend to submit an exemption request.
- 3. If I am not submitting an exemption request, I (do) / (do not) intend to receive the vaccine.

J. M. STANZIONE



From: Stanzione, John M (Tbilisi)

To: Gibson, Robert A
Subject: RE: vaccine orders

Date: Monday, September 13, 2021 5:39:00 PM

Received Sir.

Respectfully,
John M. Stanzione
Gunnery Sergeant USMC
Detachment Commander
MCESG Region 1, Tbilisi Georgia

Work: +995 591 115 819

Email: StanzioneJM@state.gov

SBU - HEALTH

From: Gibson, Robert A < GibsonRA1@state.gov> **Sent:** Monday, September 13, 2021 5:33 PM

To: Stanzione, John M (Tbilisi) <StanzioneJM@state.gov>

Subject: vaccine orders

Gunny,

Please print off the attached and sign the second page with your intention. Also please print off the one for Cpl Williams.

I'll get it from you later--if you want to go home, please just leave it with Post 1.

Thanks,

CO

SBU - HEALTH

MANDATORY COVID-19 VACCINATION OF MARINE CORPS ACTIVE AND RESERVE COMPONENTS

Date Signed: 9/1/2021 | MARADMINS Number: 462/21

MARADMINS : 462/21

R 011400Z SEP 21

MARADMIN 462/21

MSGID/GENADMIN/CMC WASHINGTON DC PPO//

SUBJ/MANDATORY COVID-19 VACCINATION OF MARINE CORPS ACTIVE AND RESERVE

COMPONENTS//

REF/A/GENADMIN/CMC/17DEC20//

REF/B/DOC/SECDEF/24AUG21//

REF/C/DOC/USN/30AUG21//

REF/D/DOC/DHA WASHINGTON DC/6MAY21//

REF/E/DOC/DHA WASHINGTON DC/10MAY21//

REF/F/DOC/DODI/23JUL19//

REF/G/DOC/USN/07OCT13//

REF/H/GENADMIN/USN/31AUG21//

REF/I/DOC/USC/12JAN21//

REF/J/DOC/USN/14SEP90//

REF/K/DOC/CMC/15FEB19//

REF/L/DOC/USN/22NOV16//

REF/M/DOC/ASD (HA) WASHINGTON DC/03JUN2021//

REF/N/DOC/MANUAL FOR COURTS MARTIAL (2019 ED)//

NARR/ REF A IS MARADMIN 754/20, COVID-19 VACCINE GUIDANCE FOR ACTIVEAND RESERVE COMPONENTS (HEREBY CANCELED) REF B IS OSD MEMO, MANDATORY CORONAVIRUS DISEASE 2019 VACCINATION OF DEPARTMENT OF DEFENSE SERVICE MEMBERS REF C IS ALNAV 062/21 2021 2022 DEPARTMENT OF NAVY MANDATORY COVID 19 VACCINATION POLICY. REF D IS DEFENSE HEALTH AGENCY INTERIM PROCEDURES MEMORANDUM 20 004, DEPARTMENT OF DEFENSE (DOD) CORONAVIRUS DISEASE 2019 (COVID-19) VACCINATION PROGRAM IMPLEMENTATION. REF E IS DEFENSE HEALTH AGENCY PROCEDURAL INSTRUCTION 6205 01, MEDICAL LOGISTICS GUIDANCE FOR THE DOD CORONAVIRUS DISEASE 2019 (COVID-19) VACCINATION PROGRAM. REF F IS

DODINST 6205.02, DOD IMMUNIZATION PROGRAM. REF G IS BUMEDINST 6230.15B, IMMUNIZATIONS AND CHEMOPROPHYLAXIS FOR THE PREVENTION OF INFECTIOUS DISEASES. REF H IS NAVADMIN 190/21, 2021-2022 NAVY MANDATORY COVID-19 VACCINATION AND REPORTING POLICY. REF I IS 10 U.S.C. CHAPTER 47, UNIFORM CODE OF MILITARY JUSTICE. REF J IS U.S. NAVY REGULATIONS, PARAGRAPH 1144. REF K IS MARINE CORPS ORDER 1900.16 CHAPTER 2 (MARCORSEPMAN). REF L IS OPNAVINST 3710.7V, NAVAL AIR TRAINING AND OPERATING PROCEDURES STANDARDIZATION GENERAL FLIGHT AND OPERATING INSTRUCTIONS. REF M IS ASSISTANT SECRETARY OF DEFENSE (HEALTH AFFAIRS) MEMO, CO-ADMINISTRATION OF CORONAVIRUS DISEASE 2019 VACCINES WITH OTHER VACCINES. REF N IS MANUAL FOR CORTS MARTIAL UNITED STATES (2019 EDITION).//

POC/OWINGS, ALFRED/CDR/HQMC/HS/DIRECTOR OF PUBLIC HEALTH/TEL: 703-604-4602/EMAIL: ALFRED.OWINGS@USMC.MIL//

POC/MARINE CORPS COVID-19 CELL/HQMC/PP&O/MCCC/TEL: 703-604-5307/EMAIL: SMB HQMC MCCAT@USMC.MIL//

POC/MARINE CORPS OPERATIONS CENTER/HQMC/PP&O/MCOC WATCH OFFICER/TEL: 703-695-5454/EMAIL: HQMC.MCC2@USMC.MIL//

POC/PULITANO, MATTHEW/HMC/HQMC/PP&O/MRRS COORDINATOR/TEL: 703-571-

1050/EMAIL: HQ MRRS@USMC.MIL//

POC/JUDGE ADVOCATE DIVISION/HQMC/DEPUTY BRANCH HEAD, JCA, JAD/TEL: 703-614-2510/EMAIL: JENNIFER.PARKER@USMC.MIL//

GENTEXT/REMARKS/1. This MARADMIN provides guidance to Marine Corps active and reserve components to implement Secretary of Defense (SECDEF)-directed mandatory Coronavirus Disease 2019 (COVID-19) vaccination of Department of Defense (DoD) service members. This MARADMIN cancels and replaces ref (a).

- 2. Background. COVID-19 is a disease caused by infection with the SARS-CoV-2 virus. Ref (b) mandates vaccination of all DoD service members in order to mitigate risk to the Department's national security mission. Maximum vaccination of the force will reduce transmission of disease, reduce severity of disease among personnel who become infected, preserve medical resources, and facilitate mission accomplishment at the individual, unit, and organizational levels.
- Execution
- 3.a. Per refs (b) and (c), all Marine Corps active and reserve component (Active Reserve, Selected Marine Corps Reserve, and Individual Mobilization Augmentee) service members shall be fully vaccinated against COVID-19, unless medically or administratively exempt. All non-exempt active component personnel will achieve full vaccination no later than 90 days from the date of ref (c), and all non-exempt reserve component personnel will achieve full vaccination no later than 120 days from the date of ref (c).
- 3.b. COVID-19 vaccines that have received Food and Drug Administration (FDA) licensure are mandated for all DoD service members by ref (b). FDA Licensed vaccine(s) are the only vaccine(s) that can be mandated for DoD personnel at this time. However, service members who voluntarily receive a complete initial series of an FDA Emergency Use Authorization (EUA) COVID-19 vaccine, or a vaccine included in the World Health Organization (WHO) Emergency Use Listing, will meet the requirements of refs (b) and (c) and this MARADMIN. Service members are considered

fully vaccinated two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose COVID-19 vaccine.

- 3.c. Any requirement for Marine Corps personnel to receive one or more additional doses of COVID-19 vaccine (e.g., "boosters"), will be promulgated separately in a follow-on MARADMIN.
- 3.d. Additional guidance regarding vaccination of Marine Corps civilian employees and contractors will be promulgated in a follow-on MARADMIN as required.
- 3.e. Marine Corps commanders and surgeons shall coordinate with their supporting Military Treatment Facilities (MTFs), and/or other supporting approved DoD Vaccination Sites, to ensure rapid full vaccination of all Marine Corps service members. Supply of COVID-19 vaccine is not expected to be constrained; however, if supply is initially constrained locally, commanders will coordinate locally to prioritize vaccination based on operational and training requirements.
- 3.f. Reserve component commanders should encourage members to seek vaccination via the civilian healthcare network if they do not have access to an MTF.
- 3.g. Marine Corps active and reserve component commands shall monitor COVID-19 vaccination compliance via the Medical Readiness Reporting System (MRRS). If a command does not have a designated MRRS representative with appropriate system access, immediately contact the local MRRS security officer or the HQMC Health Services MRRS POC listed in this message for assistance in acquiring appropriate access.
- 3.h. Documentation of Vaccination
- 3.h.1. Commanders will coordinate with supporting MTFs and/or other Vaccination Sites to ensure the following vaccine administration information is documented in each service member's Electronic Health Record (EHR): date of administration, vaccine name or CVX code, manufacturer and lot number, dose administered, route and anatomic site of vaccination, and name of healthcare provider administering the vaccine.
- 3.h.2. Marine Corps units administering COVID-19 vaccines (as a Vaccination Site or Remote Site, per paragraph 4.a.) will document administration of vaccine in the EHR to the maximum extent practical. Units that do not have access to the EHR may document vaccination directly in MRRS.
- 3.h.3. Vaccination will be documented within 24 hours of administration to enable timely and accurate daily monitoring of Force compliance with this MARADMIN.
- 3.h.4. Personnel who receive COVID-19 vaccination from approved non-DoD facilities (e.g., civilian pharmacies, health departments, or civilian healthcare providers) shall provide documented verification (e.g., a signed authorized vaccination card or healthcare provider note) to their command no later than 1600 on the next regular duty day. The documentation shall include the information listed in paragraph 3.i. Commands will immediately transcribe that information completely and accurately into the EHR, or into MRRS if unable to access the EHR. If commands require assistance with MRRS access or documentation, contact the local MRRS security officer or the HQMC Health Services MRRS POC.
- 3.i. Documentation of Exemptions. Medical and administrative exemptions will be documented IAW ref (g) and existing EHR and MRRS business rules. Medical exemptions will be documented in the EHR to the maximum extent practical, but may be documented directly in MRRS if access to the EHR is not readily available. Administrative exemptions will be documented directly in MRRS to the maximum extent practical.
- 3.j. Medical Exemptions



- 3.j.1. Permanent medical exemptions will be granted only when an individual has a medical contraindication to the required COVID-19 vaccine(s). For COVID-19 vaccination, a permanent medical exemption must be approved by the first O-5 or O-6 Command Surgeon in the member's chain of command, after initial recommendation by a licensed DoD healthcare provider, and after evaluation by an appropriate medical specialist when appropriate. Marine Corps commands without a Command Surgeon will refer any permanent medical exemption requests to the Director of Health Services, Headquarters Marine Corps, after appropriate initial recommendation by a licensed DoD healthcare provider.
- 3.i.2. Temporary medical exemptions must be authorized by a licensed DoD healthcare provider, and may be granted when there is a temporary medical reason for postponing vaccination.
- 3.i.3. Healthcare providers should refer to the following for detailed guidance regarding vaccine medical contraindications and precautions, and required screening and evaluation of recipients: ref (d); Centers for Disease Control and Prevention (CDC) COVID-19 Vaccine Information Statements (VIS); FDA EUA Fact Sheets for Healthcare Providers; and CDC Advisory Committee on Immunization Practices (ACIP) Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States.
- 3.j.4. Per CDC, COVID-19 vaccination is strongly encouraged for pregnant women due to the safety of the vaccine, and the risk of COVID-19 disease to these individuals and their unborn children. At this time, a temporary medical exemption may be granted by a licensed DoD healthcare provider for pregnant service members, after individual consultation with that provider. Further guidance will be promulgated as indicated.
- 3.i.5. A history of COVID-19 disease and/or positive serology is not a valid exemption from COVID-19 vaccination, per ref (b). Vaccination of individuals with confirmed current SARS-CoV-2 infection should be deferred until the individual has met criteria to discontinue isolation.
- 3.i.6. Testing to assess for current or prior infection, or for current or prior immunity, is not recommended or required at this time for the purposes of determining whether to vaccinate for COVID-19.
- 3.j.7. Service members who are actively enrolled in COVID-19 clinical trials are exempted from mandatory vaccination against COVID-19, per ref (b), until their participation in the trial is complete. 3.k. Administrative Exemptions
- 3.k.1. Exempting personnel from vaccination for an administrative reason is a non-medical decision. These exemptions will be granted only when the commander determines that an individual service member has a valid reason to remain unvaccinated, typically for a brief (30 days or less) period.
- 3.k.2. Per ref (g), proximity to separation or retirement is not a valid exemption for COVID-19 vaccination for Marine Corps service members.
- 3.I. The provisions contained within paragraph 3.a of this MARADMIN constitute a lawful general order and any violation of these provisions is punishable as a violation of Article 92 of ref (i). Marines shall take action to fully immunize themselves against COVID-19 per ref (j). Paragraph 3.a is punitive and applies without further implementation. Commanders, commanding officers, and officers in charge shall issue appropriate orders to ensure that their Marines and Sailors are fully vaccinated. In accordance with Rule for Court Martial 306 of ref (n), initial disposition authority for cases arising from COVID-19 vaccine refusals is withheld to the general court-martial convening

authority level except that administrative counseling pursuant to paragraph 6105 of ref (k) may be issued at the special court martial convening authority level.

- 4. Vaccine Storage, Handling, and Administration
- 4.a. Marine Corps units administering COVID-19 vaccine shall comply with all requirements of refs (d) – (h), to include being approved as a Vaccination Site, in accordance with refs (d) and (e), if those units are ordering and storing COVID-19 vaccine doses. Units which are not approved Vaccination Sites IAW refs (d) and (e) may operate as Remote Sites under the authority and direction of an approved Vaccination Site (typically the supporting MTF). Those units will comply with refs (d) and (e), and with the direction of their parent Vaccination Site
- 4.b. Marine Corps units which are approved Vaccination Sites will order vaccines IAW refs (e) and (h).
- 4.c. Distribution and redistribution of COVID-19 vaccines at the local level will be the responsibility of the approved Vaccination Site (typically the supporting MTF), who will coordinate all ordering, distribution, and redistribution IAW refs (d), (e), and (h).
- 4.d. Safe receipt, storage, transportation, handling, and administration of COVID-19 vaccines is the responsibility of the approved Vaccination Site, any Remote Sites operating under their authority and direction, and any personnel involved with any aspect of those vaccine processes.
- 4.e. COVID-19 vaccines shall be stored, transported, prepared, and administered IAW all requirements of refs (d) and (e), and IAW manufacturer-specific requirements.
- 4.f. Whether operating as an approved Vaccination Site or a Remote Site, all medical personnel assigned to Marine Corps units who handle and/or administer COVID-19 vaccines shall complete all required training IAW Appendix 1 of ref (d), and their competencies shall be documented.
- 4.g. Only appropriately trained and qualified medical personnel, working under signed orders of an appropriately privileged healthcare provider, will administer COVID-19 vaccines, IAW ref (d).
- 4.h. Commanders will ensure that all vaccine evolutions incorporate appropriate COVID-19 mitigation measures (e.g., social distancing, mask wear, etc.) and comply with Installation Health Protection Condition (HPCON) requirements.
- 4.i. All COVID-19 vaccines will be administered IAW the applicable vaccine specific Package Insert or EUA Fact Sheet for Healthcare Providers, and ACIP Interim Clinical Considerations for Use of COVID 19 Vaccines Currently Authorized in the United States (see paragraph 8 c)
- 4.j. Vaccine co-administration. Per CDC guidance, COVID-19 vaccines and other vaccines may be administered without regard to timing This includes administration of COVID 19 vaccine and other vaccines on the same day. Every effort should be made to deliver the COVID-19 vaccine, and all other required vaccines (to include Seasonal Influenza) as soon as possible to service members Administering units will comply with ref (m) until rescinded.
- 4 k Prior to receiving the COVID 19 vaccine, service members will have access to healthcare providers at DoD administration sites to address questions or concerns with COVID-19 vaccination.
- 4 I Prior to vaccination at a DoD administration site, all individuals being vaccinated shall be screened by medical personnel using DHA Form 207 (version 13 or subsequent), and shall be provided the current Vaccine Information Statement (VIS) or EUA Fact Sheet for Vaccine Recipients for the specific vaccine product being administered. Individuals receiving vaccine from a non DoD site will comply with the site specific required screening
- Vaccine Reactions

- 5.a. COVID-19 vaccines are extremely safe and effective. To date, millions of Americans, and DoD-affiliated individuals, have safely received COVID-19 vaccines under the most intense safety monitoring in U.S. history. The CDC, and the Defense Health Agency Immunizations Healthcare Directorate (DHA-IHD), closely monitor all adverse event reporting. The measures outlined in paragraphs 4 and 5 are intended to ensure the safety of all Marine Corps personnel.
- 5.b. Local reactions (pain, redness, swelling at injection site) and systemic reactions (e.g., fatigue, headache, muscle aches, or fever) may occur after COVID-19 vaccination. These reactions generally resolve within 1-3 days after onset. Local and systemic reactions that resolve without medical intervention are not required to be reported in the Vaccine Adverse Event Reporting System (VAERS).
- 5.c. Extremely rare cases of severe reactions have occurred following COVID-19 vaccination. Personnel should seek medical attention immediately if they experience symptoms concerning for a severe reaction, as-listed in the vaccine-specific VIS or EUA Fact Sheet for Vaccine Recipients. 5.d. In accordance with ref (d) and CDC guidance, commands will ensure that all clinically important adverse events, to include severe reactions, following COVID-19 vaccination are evaluated by a medical provider. Medical personnel will ensure these events are reported to the VAERS system at www.vaers.hhs.gov. Adverse events will also be reported via the local patient safety reporting system. Additional detailed guidance regarding adverse event reporting can be found in ref (d), but at a minimum, the following events are required to be reported:
- 5.d.1 Vaccine administration errors.
- 5.d.2. Serious adverse events (e.g., severe reactions).
- 5.d.3. Cases of Multisystem Inflammatory Syndrome.
- 5.d.4. Cases of COVID-19, following vaccination, that result in hospitalization or death.
- 5.e. Navy and Marine Corps personnel in a flight duty status have a recommended self-limited grounding period of 48-hours after any dose in a COVID-19 vaccine series, per ref (I) and the current Navy Aeromedical Reference and Waiver Guide. Personnel in a dive duty status should follow the guidance of their medical specialty leader.
- 5.f. Commanders are authorized to grant Sick In Quarters or convalescent leave, as needed, for personnel who experience symptoms after vaccination.
- 5.g. All Marine Corps units administering COVID-19 vaccine will ensure the following, IAW ref (d):
- 5.g.1. A written plan for emergency response, and standing orders for the management of anaphylaxis and fainting, are present.
- 5.g.2. Staff are trained on the equipment and proper response to anaphylaxis.
- 5.g.3. Units have the minimum emergency supplies for managing anaphylaxis, per CDC guidance found at https:(slash)(slash)www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/anaphylaxis-management.html.
- 6. Commanders Critical Information Reports (CCIRs)
- 6.a. COVID-19-related hospitalization or death, post-vaccination. In addition to the requirements of paragraph 5.e, commands will report to the Marine Corps COVID-19 Cell, at
- SMB_HQMC_MCCAT@USMC.MIL all instances of a vaccinated service member, regardless of the number of doses received, who is subsequently hospitalized with, or dies from, COVID-19 disease.
- 6.b. Other COVID-19 CCIRs remain in effect. Units will continue reporting all service member, dependent, civilian employee, and contractor positive cases, regardless of vaccination status, along

with appropriate case updates, via the M&RA COVID-19 Tracker.

- 7. Communication Strategy and Operations. HQMC Communication Directorate will provide and amplify information regarding all COVID-19 mitigation efforts, to include the imperative that all DoD service members be vaccinated against COVID-19 as soon as possible. Communications Directorate will also continue to communicate the progress of Marine Corps vaccination efforts, as appropriate, to external stakeholders.
- Additional Information and Resources.
- 8.a. Defense Health Agency (DHA) Immunizations Healthcare Directorate (IHD) COVID-19 Vaccine Resource Center for Healthcare Personnel: https:(slash)(slash)www.health.mil/Military-Health-Topics/Health-Readiness/Immunization-Healthcare/IHD-COVID-19-Vaccine-Resource-Center-for-Health-Care-Personnel.
- 8.b. DHA-IHD Immunization Healthcare Support Center: 1-877-GET-VACC (1-877-438-8222, option 2); or via email at: DoDvaccines@mail.mil. Provides clinical consultation, to include assistance with questions regarding vaccine screening and potential vaccine-related adverse events.
- 8.c. CDC Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States: https:(slash)(slash)www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc,gov%2Fvaccines%2Fcovid-19%2Finfo-by-product%2Fclinical-considerations.html.
- 8.d. CDC Frequently Asked Questions about COVID-19 Vaccination: https:(slash) (slash)www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html.
- 8.e. MCCC SharePoint: https:(slash) (slash)eis.usmc.mil/sites/hqmcppo/MCCAT/SitePages/Home.aspx. Additional information regarding COVID-19 and COVID-19 vaccine-related information can be found at https:(slash) (slash)www.marines.mil/Coronavirus/.
- 9. This MARADMIN is applicable to the Marine Corps total force.
- This MARADMIN remains in effect until canceled.
- 11. Release authorized by General David H. Berger, Commandant of the Marine Corps.//

DECLARATION AND DOCUMENTS IN SUPPORT OF COMMANDER JOSEPH SWEGER, UNITED STATES NAVY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and)
AMY MILLER.)
Plaintiffs.)
V.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,)
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of CDR Joseph F. Sweger In Support of Children's Health Defense and Amy Miller

I, CDR Joseph F. Sweger, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a servicemember in the US Navy, in the rank of Commander, assigned to VP-69 on Naval Air Station Whidbey Island (NASWI).
- 4. I am CDR Joseph F. Sweger, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I graduated from the US Naval Academy as a distinguished graduate in 2003 and completed a MS in Aerospace Engineering at GA Tech in 2005 before earning my

- Navy Pilot Wings. Over the course of 18 years combined active duty and reserve service, I have earned numerous awards including 6 Air Medals and a Navy Commendation Medal.
- 5. This week, my scheduled drills were cancelled on short notice because of a policy change that unvaccinated must quarantine before being allowed to come to work. I was given a written warning threatening punitive action if I was not fully vaccinated by 28 November 2021.
- 6. I am being threatened with administrative separation or an other than honorable discharge if I refuse vaccination. This would forfeit my healthcare and pension.
- 7. I have submitted a request for religious exemption and am waiting for it to be routed up the chain of command. The Wing Chaplain, LCDR Simonsen told me exemptions are being denied and my Commanding Officer, CDR McKinnie said he would not recommend approval.
- On September 8th, ALNAVRESFOR 010/21 announced effective October 2021 all normal reserve scheduling options and telework would be prohibited until fully vaccinated. This same order proclaims the Comirnaty and Pfizer-BioNTech to be interchangeable.
- 9. I don't know which vaccine NASWI is offering.
- 10. I tested positive for COVID-19 with symptoms including loss of smell in Dec, 2020.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Joseph F. Sweger



ADMINISTRATIVE REMARKS NAVPERS 1070/613 (REV. 08-2012) PREVIOUS EDITIONS ARE OB	SOLET	E SUPPORTING DIRECT	IVE MILPERSMAN 1070-320
SHIP OR STATION:			
Patrol Squadron 69			
SUBJECT:		X PERMANENT	TEMPORARY
COVID 10 Vascination A Intrinstation Community (Warning	А	UTHORITY (IF PERMANENT):	
COVID-19 Vaccination Administrative Counseling/Warning	В	UMEDINST 6230.15B and [Implen	nenting Service Directive]
 On August 31, 2021, all U.S. service members were mandated to be indicate that you have not been vaccinated against COVID-19. The following information is provided for your consideration: Your health and safety are the Navy's number one concern. The COVID-19 vaccines are safe and effective. The threat from COVID-19 is deadly and real. Vaccination has proven to be the most effective defense against see. Healthcare providers are available to discuss your medically related. DoD will administer COVID-19 vaccinations consistent with FDA practice. Administration of the COVID-19 vaccine is in the interest of nativaccine helps protect your family and dependents as well as fellow Sail Unless medically or administratively exempt, any refusal to be vaccinary be punishable under the Uniform Code of Military Justice (UCMJ) Order (UMCJ, Article 92). This may include, but is not limited to, remove reenlistment, or continuation, consistent with existing regulations, or office. 	serious A appr sonal so ors and inated and/o	illness caused by COVID-19 ections/concerns with the CO oved dosing schedules and co ecurity and protection of the d Marines and associated Do may constitute a Failure to O or administrative action for Fa qualification for advancement	O. DVID-19 vaccines. current standards of medical force. Receiving the D civilians. Subey a Lawful Order and cuilling to Obey a Lawful ont, promotions,
appropriate.4. The following corrective action is required:Once Pfizer vaccinations are received locally, you will be assigned a			•
that has priority over other scheduled events. Proof of vaccination is re must be fully vaccinated no later than November 28, 2021.			
5. Member must initial all that apply below:			
I acknowledge the above counseling/warning and understand its c I have been informed of my right to submit a statement in respons I intend to submit a statement. I will submit my statement to I do not intend to submit a statement. I intend to seek an exemption as indicated in para. 3 above. My endate.	se to th within	is counseling/warning (initial 10 days of this date.	
Commanding Officer	_		
Member's Signature Date/Signed	Witn	ness' Signature Date/Signed	
ENTERED AND VERIFIED IN ELECTRONIC SERVICE RECORD:			
VERIFYING OFFICIAL RANK OR GRADE/TITLE: DATE:	SI	IGNATURE OF VERIFYING OFF	FICIAL:
NAME (LAST, FIRST, MIDDLE):	s	OCIAL SECURITY NUMBER:	BRANCH AND CLASS:

-----OFFICIAL INFORMATION DISPATCH FOLLOWS-----RTTUZYUW RHOIAAA0017 2511950-UUUU--RHSSSUU. **ZNR UUUUU** R 082022Z SEP 21 MID200001110845U FM COMNAVRESFOR NORFOLK VA TO NAVRESFOR INFO ASSTSECNAV MRA WASHINGTON DC CNO WASHINGTON DC COMNAVRESFORCOM NORFOLK VA COMNAVPERSCOM MILLINGTON TN COMNAVAIRFORES SAN DIEGO CA COMNAVIFORES FORT WORTH TX COMNAVRESFOR NORFOLK VA BT UNCLAS ALNAVRESFOR 010/21 // MSGID/GENADMIN/COMNAVRESFOR NORFOLK VA/N9/SEP// SUBJ/MANDATORY VACCINATION CORONAVIRUS DISEASE 2019 FOR NAVY RESERVE FORCE PERSONNEL// REF/A/DOC/SECDEF/24AUG21// REF/B/NAVADMIN/OPNAV/319113Z21// REF/C/DOC/DODINST 6205.02/23JUL19// REF/D/DOC/BUMEDINST 6230.15B/7OCT13// REF/E/LTR/CNRF/24AUG21// REF/F/NAVADMIN/OPNAV/042044MAY21// REF/G/MSG/MMQC/MMQC 21-1463/24AUG21// REF/H/DOC/BUPERSINST 1730.11A/16MAR20// REF/I/DOC/MILPERSMAN 1730-020/15AUG20// REF/J/ALNAV/SECNAV/30AUG21// REF/K/DOC/BUMED 6300/03SEP21// REF/L/DOC/BUMED 6300/03SEP21// NARR/REF A is SECDEF Memorandum for Senior Pentagon Leadership, Commanders of the Combatant Commands and Defense Agency and DOD Field Activity Directors, Mandatory Coronavirus Disease 2019 Vaccination Department of Defense Service Members. REF B is NAVADMIN 190-21, 2021-2022 Navy Mandatory COVID-19 Vaccination and Reporting Policy. REF C is DoD Instruction 6205.02, DoD Immunization Program. REF D is BUMEDINST 6230.15B, Immunizations and Chemoprophylaxis for the Prevention of Infectious Disease. REF E is CNRF DON Tracker-165, COVID Vaccination that outline actions necessary for NRAs/NOSCs to ensure timely and accurate ordering, receipt, storage and administration of vaccinations. REF F is NAVADMIN 088/21, SARS-COV-2 Vaccination and Reporting

REF G is Medical Material Quality Control Message, FDA Approves Licensure of Pfizer-BioNTech and Shelf Life Extension and EUA Fact

Sheet Update.

REF H is BUPERS Instruction 1730.11A, Standards and Procedures Governing the Accommodation of Religious Practices.

REF I is the MILPERSMAN 1730-020, Immunization Exemptions for Religious Beliefs.

REF J is ALNAV 062/21, 2021-2022 Department of the Navy mandatory COVID-19 vaccination policy.

REF K is BUMEDNOTE 6300, Navy Coronavirus Disease 2019 vaccine medical temporary, and medical permanent exemption for medical contraindication approval process.

REF L is BUMED Memo 6300, Interchangeability of food and drug administration-approved Pfizer-BioNTech vaccine Comirnaty and Food and DrugAdministration-authorized Pfizer-BioNTech vaccine under emergency use authorization.//

POC/BOWES, BRIAN/CAPT/COMNAVRESFORCOM/TEL (757) 322-5645/E-MAIL: BRIAN.N.BOWES(AT)NAVY.MIL//

RMKS/1. Per ref (a) the Secretary of Defense determined that mandatory vaccination against coronavirus disease 2019 (COVID-19) is necessary to protect the Force and defend the American people. Refs (b), (j) and (l) describe the Navy policy and process for executing the mandatory vaccinations and shall be read in their entirety. Navy Reserve Commands and leadership shall immediately begin full vaccination of all Navy Reserve military personnel who are not fully vaccinated against COVID-19. Commanders will be creative and aggressively develop plans to get Sailors vaccinated using all available civilian and military resources. Commanders will notify their Sailors on the requirement to vaccinate against COVID-19 and the availability of the COVID-19 vaccinations from local commercial sources IAW ref (f); have 100% of eligible Sailors fully vaccinated NLT 24 December 2021; and per ref (e) order, receive, store and administer COVID-19 vaccinations as needed to ensure all Sailors are vaccinated.

- 2. IDT/Active Duty Policy.
- 2.A Beginning October 2021, reschedules, authorized absences, and virtual/telework drills are not authorized until fully vaccinated. Only exceptions are for extenuating circumstances such as family death, serious injury/illness, or hospitalization. NRA/NOSC Commanders can direct non-fully vaccinated Sailors who drill at off-site locations to report to their assigned NRA/NOSC in order to complete required notifications, counseling, and vaccine administration.
- 2.B. The use of paid or non-paid IDT drills are authorized in order to maximize opportunities to receive the vaccination at civilian or military sites. Every effort will be made to support drilling reservists who are willing to receive the vaccine through a civilian or local program.
- 2.C. Active Duty commands may have immunization requirements. Non-fully vaccinated Sailors should coordinate with unit leadership and Reserve Program Director prior to executing orders.

- 3. COVID vaccination. Per ref (g) the Food and Drug Administration (FDA) approved Pfizer-BioNTech as the first fully licensed COVID-19 vaccine. Per ref (I), the FDA-approved Comirnaty vaccine, and the FDA-Emergency Use Authorization (EUA) Pfizer-BioNTech vaccine, have the same formulation, and can be used interchangeably to provide the COVID-19 vaccination series without presenting any safety or effectiveness concerns. Navy medical providers can use Pfizer-BioNTech doses distributed under the EUA to administer mandatory vaccinations. Per ref (a) licensed vaccines are mandatory, however, individuals may elect to receive an FDA-EUA COVID vaccine in lieu of the mandatory vaccine. A complete course of COVID-19 vaccines under FDA licensure or FDA EUA or Expanded Availability (EA), including 2 doses of Pfizer-BioNTech or Moderna, or 1 dose of Janssen/Johnson & Johnson COVID-19 vaccines are required to be considered fully vaccinated.
- 4. Implementation. Mandatory vaccination requirements for Navy Reserve personnel will be implemented consistent with refs (a) through (d). Navy Reserve personnel are considered fully vaccinated two weeks after completing the second dose of a two-dose COVID-19 vaccine or two weeks after receiving a single dose of a one-dose vaccine. Navy reserve personnel with previous COVID-19 infection are not considered fully vaccinated.
- 5. Exemptions/Waivers. The following guidance regarding mandatory vaccination exemptions/waivers is provided IAW refs (b) and (k).
 5.A. The process for obtaining medical and administrative exemptions/waivers for mandatory vaccinations is provided in ref (d) and in refs (h) and (i) for religious accommodations and exemptions. Specifically for the COVID-19 vaccination, in addition to the processes in refs (d), (h), and (i), per reference (b) the authority to grant approval of permanent medical exemption/waiver is the first medical Flag Officer. All exemption/waiver requests must be submitted by the conclusion of a Sailors regularly scheduled October drill.
- 5.B. A history of COVID-19 disease and/or positive serology does not exempt a Navy Reserve member from receiving a COVID-19 vaccine. Navy Reserve personnel who previously received a medical exemption from COVID-19 vaccine while the vaccines were authorized under an Emergency Use Authorization will be reevaluated per paragraph 5.A to determine whether the medical exemption remains valid.
- 5.C. Navy Reserve personnel who are actively participating in COVID-19 clinical trials are exempted from mandatory vaccination against COVID-19 until the trial is complete in order to avoid invalidating clinical trial results.
- 6. COVID-19 Vaccination Reporting. Per ref (b) the following COVID-19 reporting is required.
- 6.A. Navy Reserve vaccination compliance will be monitored via the Medical Readiness Reporting System (MRRS).

6.B. Vaccine administration errors, serious adverse vaccine reactions or clinically significant adverse events will be reported in the Vaccine Adverse Event Reporting System, (https://vaers.hhs.gov/resources/infoproviders.html).
6.C. Vaccine administrators will ensure COVID-19 vaccine administration is accurately coded to reflect the type of vaccine given.

6.D. To ensure vaccination is appropriately recorded in MRRS, FTS/AC must provide documentation of any COVID-19 vaccination to their medical department the next duty day. Drilling reservists who receive the vaccination from a retail network pharmacy or other non-DoD vaccine administrator must provide documentation of any COVID-19 vaccination to their NRA/NOSC within 7 days of receipt. 6.E. For Navy Reserve service members without a pending exemption request or whose exemption request was denied, commands will provide counseling regarding refusal to take the COVID-19 vaccine. This counseling will include access to a healthcare professional to answer questions regarding the risks of COVID-19 and the benefits of COVID-19 vaccinations. Commands will then issue a uniform NAVPERS 1070/613 (Page 13) ordering initiation of the COVID-19 vaccine series, to be completed within the time requirements of paragraph 6.E.1 below. The NAVPERS 1070/613 can be found at: https://portal.secnav.navy.mil/cop/crc/COVID/Documentationand PDFTraining/Forms/Allitems.aspx.

- 6.E.1 Vaccination will be initiated within 7 days for FTS/AC and no later than the next drill weekend for drilling reservists.
- 6.E.2 FTS/AC counseling and Page 13 issuance shall occur NLT 15 September 2021 for members without a pending exemption request. FTS/AC whose exemption request was denied will be counseled and issued the Page 13 within 7 days of the denial.
- 6.E.3 For drilling reservist counseling and Page 13 issuance shall occur prior to conclusion of the October drill weekend for members without a pending exemption request. Drilling reservists whose exemption request was denied will be counseled and issued the Page 13 no later than the drill weekend after denial. The administrative NRA/NOSC is responsible for the counseling and Page 13.
 6.E.4 The Strategic Sealift Officer Program Office will provide guidance sepcor for the Strategic Sealift Officers in the Individual Ready Reserve (IRR).
- 7. Legal. IAW Ref (b) any Navy Reserve personnel who refuse to receive the COVID-19 vaccine, absent an approved exemption/waiver, will constitute a failure to obey a lawful order and may be punishable under the Uniform Code of Military Justice and/or result in administrative action.
- 7.A. IAW ref(b), Navy Service Members who remain unvaccinated, and who have or are expected to exceed the time requirements of ref(b), their ultimate disposition will be determined by the designated COVID Consolidated Disposition Authority (CCDA). The CCDA will

serve as the central authority for adjudication and will have at his or her disposal the full range of administrative and disciplinary actions. Until further notice, authority is withheld for non-judicial punishment, courts-martial, administrative separation or administrative unsatisfactory drill participation in cases of Navy Service Members refusing vaccination. The assigned CCDA and specific required reporting procedures and information will be promulgated via separate message.

8. Points of contact.

A. For medical questions commands should contact CAPT Brian N. Bowes, Force Surgeon, (757) 322-5645 or e-mail at brian.n.bowes(AT)navy.mil

- B. For legal questions command and members should contact CAPT Bill Bailey, Force Judge Advocate, (757-322-5649) or e-mail at william.j.bailey(AT)navy.mil.
- 9. Released by RADM J.A. Schommer, Deputy Commander, Navy Reserve Force.//

BT

#0017

NNNN

<DmdsSecurity>UNCLASSIFIED//</DmdsSecurity>

<DmdsReleaser>BIERLEY.JOHN.FITZGERALD.JR.1276268542</DmdsReleaser>

CLASSIFICATION: UNCLASSIFIED//

DECLARATION AND DOCUMENTS IN SUPPORT OF LIEUTENANT COMMANDER MARK ZITO, UNITED STATES NAVY

IN THE UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF TENNESSEE

CHILDREN'S HEALTH DEFENSE and AMY MILLER,)
Plaintiff's,)
v.)
FOOD & DRUG ADMINISTRATION, and JANET WOODCOCK, Acting Commissioner of Food and Drug Administration,))))
Defendants.)

PLAINTIFFS' MOTION FOR STAY OF THE FOOD & DRUG ADMINISTRATION'S BIOLOGIC LICENSE FOR PFIZER'S COMIRNATY COVID-19 VACCINE

Declaration of LCDR Mark P. Zito, USN In Support of Children's Health Defense and Amy Miller

I, LCDR Mark P. Zito, USN, declare:

- 1. I am over 18 years of age and am competent to testify in this matter.
- 2. All of the statements made in this declaration are true to the best of my own personal knowledge.
- 3. I am currently a service member in the US Navy, in the rank of Lieutenant Commander, assigned to Assault Craft Unit 4 on Joint Expeditionary Base Little Creek/Fort Story, VA.
- 4. I am LDCR Mark P. Zito, and I make this declaration in support of Children's Health Defense's and Amy Miller's motion for stay of the FDA biologic license for Pfizer's Comirnaty COVID-19 vaccine. I began my career at the US Naval Academy and graduated in 2009 with a B.S. in History. Following graduation, I served aboard four ships in four different locations and went on three deployments to Central/South America, the Western Pacific, and the North Atlantic. I also

- hold a Master's of Engineering from Cornell University in Operations Research and Information Engineering, and am trained as a nuclear operator working onboard aircraft carriers.
- 5. I have not been directly confronted about taking the vaccine; however, my choice to not take the vaccine has resulted in significant discrimination towards myself and my comrades. In July, we, the un-vaccinated, were issued N95 masks for mandatory wear. I bought KN95 masks but these are not much of an improvement. In August, un-vaccinated sailors were further restricted to their quarters and limited social function per HPCON C measures. These emails are included in my submission. I know the members sending the emails had nothing to do with the decisions made.
- 6. If I refuse to get vaccinated and do not get a waiver, I will be subject to the full weight of the UCMJ per the Secretary of Defense's memo dated 24AUG21. Regardless of the waiver status, I expect to lose my livelihood-but this is the hill to lose it on.
- 7. I intend to submit my religious exemption upon SURFLANT's deadline. The deadline is 10 days after we signed a "Page 13" counselling form. My day is 17SEP21. I initially declined to sign the form; however, today (13SEP21), my Commanding Officer pulled me into his office to discuss. He said the order for 10 days is legal per his conversation with SURFLANT. I expressed that this was not enough time to put together the paperwork for a package. He annotated on the form that I had been informed that I had 10 days to submit my exemption and I initialed. I do not believe that my Commanding Officer intends to artificially tighten the timeline. The form came from SURFLANT. I recorded this conversation.
- 8. To this point in time, the only discrimination I've received was noted in line 5. Notably, I am senior enough that no one would personally try to intimidate me. Professional decorum plays a larger role in my interactions with senior officers. The amount of mental space the vaccination policies have taken from myself and my comrades is significant. Because the Navy seems to be holding off on making real decisions on the outcome of our personal medical decisions, our minds have become our own worst enemies. I believe this is the worst intimidation a fellow service member could possibly levy on their brothers and sister in arms-how are we to feed our families, how long until we are discharged in any capacity? While the personnel managers and public affairs people are determining the impact of losing a significant portion of Sailors, those same sailors are left to languish in their own thoughts.

- 9. I have been specifically told that the vaccines are equivalent and that the legal argument that the vaccines are distinct is invalid via memorandum from BUMED.
- 10. I have not had COVID and do not carry the anti-bodies.
- 11. I am not pregnant. My wife and I would like to continue expanding our family. To my knowledge, there is no data on fertility impacts to men.
- 12. I have not received any threats.
- 13. The BUMNED document referenced in LINE 9 is attached.

I declare under penalty of perjury of the laws of the United States of America that the foregoing is true and correct. I executed this declaration on September 13, 2021.

Mark Paul Zito, Jr.





DEPARTMENT OF THE NAVY BUREAU OF MEDICINE AND SURGERY 7700 ARLINGTON BOULEVARD FALLS CHURCH VA 22042

IN REPLY REFER TO 6300 Ser M00/21M00035 3 Sep 21

MEMORANDUM FOR COMMANDER, NAVAL MEDICAL FORCES ATLANTIC COMMANDER, NAVAL MEDICAL FORCES PACIFIC COMMANDER, NAVAL MEDICAL FORCES SUPPORT COMMAND

Subj: INTERCHANGABILITY OF FOOD AND DRUG ADMINISTRATION-APPROVED PFIZER-BIONTECH VACCINE COMIRNATY® AND FOOD AND DRUG ADMINISTRATION-AUTHORIZED PFIZER-BIONTECH VACCINE UNDER EMERGENCY USE AUTHORIZATION

Ref: (a) Comirnaty® Biologics License Application

- (b) Emergency Use Authorization for Pfizer-BioNTech COVID-19 vaccine of 23 Aug 2021
- 1. <u>Purpose</u>. Address the interchangeability of the Food and Drug Administration (FDA)-approved Comirnaty® and FDA-authorized Pfizer-BioNTech Coronavirus Disease 2019 (COVID-19) vaccine.
- 2. <u>Background</u>. On 23 August 2021, the FDA approved the Biologics License Application submitted by Pfizer-BioNTech for individuals 16 years of age and older, reference (a). On the same day the FDA revised the Emergency Use Authorization (EUA) for the Pfizer-BioNTech COVID-19 vaccine for individuals 12-15 years of age and for a third dose in immunocompromised individuals, reference (b).
- 3. The FDA-approved vaccine, and the vaccine used under the EUA, have the same formulation, and can be used interchangeably to provide the COVID-19 vaccination series without presenting any safety or effectiveness concerns. Navy medical providers can use Pfizer-BioNTech doses previously distributed under the EUA to administer mandatory vaccinations.

B. L. GILLINGHAM

Copy to: COMPACFLT COMUSFLTFORCOM OPNAV (N3N5) HQMC HS

Off Installation

Not Vaccinated

Prohibited from:

- RECREATIONAL SWIMMING POOLS, GYMS, FITNESS FACILITIES, EXERCISE CLASSES, SAUNAS, SPAS, AND SALONS
- TATTOO/BODY ART/PIERCING PARLORS
- BARBER SHOPS, HAIR OR NAIL SALONS, AND MASSAGE PARLORS
- CINEMAS/THEATERS
- PARTICIPATION IN TEAM/ORGANIZED SPORTS
- DINE-IN RESTAURANTS (TAKE-OUT AUTHORIZED), BARS, NIGHT CLUBS, CASINOS, CONFERENCES, SPORTING EVENTS, CONCERTS, PUBLIC CELEBRATIONS, PARADES, PUBLIC BEACHES, AMUSEMENT PARKS OR OTHER EVENTS DESIGNED TO PROMOTE LARGE GATHERINGS, TO INCLUDE INDOOR RELIGIOUS SERVICES
- OUTDOOR RECREATION WHERE COMMON USE FACILITIES ARE USED AND IF A MINIMUM OF SIX FEET PHYSICAL DISTANCING CANNOT BE MAINTAINED
- NON-ESSENTIAL COMMERCIAL RETAIL ESTABLISHMENTS AND SHOPPING MALLS

Authorized:

- USE OF MASS TRANSIT (BUS, RAIL, OR FERRY)
- AUTO REPAIR, MAINTENANCE, AND ANNUAL INSPECTION
- CURB-SIDE AND DRIVE THROUGH SERVICES
- IN-HOME DOMESTIC SERVICES (HOME MAINTENANCE/REPAIR AND LAWN SERVICES)
- BANKING SERVICES
- PET CARE AND VETERINARY SERVICES
- POST OFFICE
- LAUNDRY SERVICES, DRY CLEANING
- IN-RESIDENCE SOCIAL GATHERINGS THAT INCLUDE MORE THAN TEN (10)
 GUESTS THAT DO NOT RESIDE IN THE RESIDENCE

Other:

- MEMBERS MAY ATTEND RELIGIOUS SERVICES AND PLACES OF WORSHIP PROVIDED THEY COMPLY WITH CDC MITIGATION MEASURES

(FRAGORD 20-032)

Immunized

IMMUNIZED SAILORS WILL BE SUBJECT TO INDIVIDUAL RESTRICTIONS NO HIGHER THAN THOSE CORRESPONDING TO HPCON B, REGARDLESS OF THE HPCON STATUS OF THE INSTALLATION TO WHICH THEY ARE ASSIGNED.

(NAVADMIN 086/21)

CLOSE CONTACTS WHO HAVE BEEN FULLY VACCINATED AND INDIVIDUALS WHO HAVE TESTED POSITIVE IN THE PAST THREE MONTHS DO NOT NEED TO QUARANTINE. $(NAVADMIN\ 110/21)$

SYMPTOMATIC PERSONNEL REGARDLESS OF IMMUNIZATION STATUS SHALL FOLLOW LOCAL MEDICAL AND CDC GUIDANCE ON WHAT TO DO WHEN YOU ARE SICK. (NAVADMIN 110/21)



HPCON C Talking Points

On Installation

All Personnel Regardless of Vaccination Status

In areas of substantial or high community transmission, DoD requires all Service members, Federal employees, onsite contractor employees, and visitors, regardless of vaccination status, to wear a mask in an indoor setting in installations and other facilities owned, leased or otherwise controlled by DoD (NAVADMIN 161/21)

HPCON C: LESS THAN 25% OF NORMAL OCCUPANCY IN THE WORKPLACE and Gatherings limited to 10 people

THE FOLLOWING ACTIVITIES HAVE BEEN GRANTED EXEMPTIONS FROM THE OCCUPANCY RATES:

- MEDICAL TREATMENT FACILITIES AND EXPEDITIONARY MEDICAL FACILITIES,
- NAVY INSTALLATION FIRST RESPONDER UNITS,
- FORCES SUPPORTING CRITICAL NATIONAL CAPABILITIES,
- NAVY OPERATIONAL UNITS,
- COMMAND HEADQUARTERS,
- SHIPYARDS,
- FLEET READINESS CENTERS,
- AND UNITS PROVIDING ESSENTIAL MISSION SUPPORT.
- AUTHORITY TO GRANT ADDITIONAL OCCUPANCY EXEMPTIONS IS DELEGATED TO THE RESPONSIBLE NCC, WITH FURTHER DELEGATION AUTHORIZED IN WRITING TO A LEVEL NO LOWER THAN A GENERAL/FLAG OFFICER IN THE GRADE OF O-7, SENIOR EXECUTIVE SERVICE MEMBER (OR EQUIVALENT).

(NAVADMIN 086/21)

Gyms and installation MWR services will remain open in HPCON C, but will return to a more restrictive posture similar to what was in place previously in HPCON C. 25% occupancy and 100% mask mandate will be in effect regardless of individual immunization status.

	Personnel Movement and Travel
Not Vaccinated	A local PCS move may be executed without a waiver since it does not involve travel outside of the local area. Execution of PCS orders, Navy Service Members traveling to attend formal training, Other Official Travel (Meetings, Conferences, Site Visits,
	etc.) from or to locations where travel is restricted requires a waiver - PCS travel waiver requests shall be submitted for all Service Members with written orders if either gaining or losing command have travel restrictions in place (i.e.*red*). Gaining and losing commands will endorse concurrence or non-concurrence. If both the gaining and losing command concur with the waiver (i.e. waiver is uncontested), the gaining command, at a level no lower than O-6 or civilian equivalent, is delegated the authority to approve travel. All contested waivers will be adjudicated by PERS-4.
	- Authority to approve or deny travel waivers for Navy Service Members in the case of: (1) official travel in paragraph 4.B., and (2) official training, not associated with a PCS, in paragraph 4.C. is delegated to the echelon 2 commander. The echelon 2 commander may further delegate waiver authority, but no lower than the first 0-6 or a civilian equivalent in the chain of command of the Service Member. (NAVADMIN 073/21)
Immunized	Do not restrict mission essential travel by immunized individuals unless unusual conditions call for immunized travel to be restricted (e.g. close contact with a COVID positive greater than 3 months after immunization) (NAVADMIN 073/21)

HPCON C Talking Points

All Personnel Regardless of Vaccination

Status

Mask Guidance

In areas of high substantial or high community transmission, the DoD requires all Service members, Federal employees, onsite contractor employees, and visitors, REGARDLESS OF VACCINE STATUS, to wear a mask in an indoor setting in installations and other facilities owned, leased or otherwise controlled by DoD.

- Installation masking requirements shall be determined by the respective Commanding Officer after assessing the current community transmission levels IAW CDC guidance.
- Masking requirements shall be communicated by signage, command websites, social media, and other appropriate methods for installations, other facilities, and worksites.
- Organizations should consult should with servicing Labor Relations Office for guidance regarding implementation for bargaining unit employees.
- Ships/units in port will adhere to shore installation guidance.
- Ships/units at sea will be governed by Health Protection measures outlined in the NAVADMIN referenced below.
- All DoD personnel should continue to comply with CDC guidance regarding areas where masks should be worn, including within airports.
- Personnel coming on to a DoD installation, other facility or workspace who do not have a mask may be provided one by DoD.

(DEPSECDEF MEMO DTD 28JUL21) (COMUSFLTFORCOM MSG DTG 012000Z AUG 21) (NAVADMIN 110/21)

Not Vaccinated

Service members, federal employees, onsite contractor employees, and visitors who are not fully vaccinated also need to continue to physically distance consistent with applicable CDC and DoD force Health Protection guidance.

(DEPSECDEF MEMO DTD 28JUL21) (COMUSFLTFORCOM MSG DTG 012000Z AUG 21)

ADMINISTRATIVE REMARKS NAVPERS 1070/613 (REV. 08-2012) PREVIOUS EDITIONS ARE OBS	SOLETE SUPPORTING DIR	ECTIVE MILPERSMAN 1070-320
SHIP OR STATION:		
SUBJECT:	X PERMANENT	TEMPORARY
COVID-19 Vaccination Administrative Counseling/Warning	AUTHORITY (IF PERMANENT): BUMEDINST 6230.15B, ALNA	V 062/21, NAVADMIN 190/21
1. On 30 Aug 2021 all U.S. service members were mandated to be vaccindicate that you have not been vaccinated against COVID-19.	inated against COVID-19. Yo	ur current medical records
2. The following information is provided for your consideration:		
 a. Your health and safety are the Navy's number one concern. b. The COVID-19 vaccines are safe and effective. c. The threat from COVID-19 is deadly and real. d. Vaccination has proven to be the most effective defense against see. Healthcare providers are available to discuss your medically related. f. DoD will administer COVID-19 vaccinations consistent with FDA practice. g. Administration of the COVID-19 vaccine is in the interest of nation vaccine helps protect your family and dependents as well as fellow Sailed. 3. Unless medically or administratively exempt, any refusal to be vaccine may be punishable under the Uniform Code of Military Justice (UCMJ) 	ed objections/concerns with the a approved dosing schedules are onal security and protection of ors and Marines and associated mated may constitute a Failure	c COVID-19 vaccines. and current standards of medical the force. Receiving the DoD civilians.
Order (UMCJ, Article 92). 4. The following corrective action is required:	and/or administrative action to	or Failure to Obey a Lawful
Within 90 days (28 Nov 2021), you will complete receipt of the COV optionally and alternatively, a vaccine authorized under an Emergency Uvaccine, now marketed as Comirnaty, is a two-shot series. Proof of vacrecord.	Jse Authorization. Of note, the	Pfizer-BioNTech COVID-19
5. Member must initial all that apply below:		
I acknowledge the above counseling/warning and understand its counseling. I have been informed of my right to submit a statement in response I intend to submit a statement. I will submit my statement with I do not intend to submit a statement. I intend to seek an exemption as indicated in para. 3 above. My extraction and the statement in the	e to this counseling/warning (in rithin 10 days of this date.	
Commanding Officer	-	
Member's Signature Date/Signed	Witness' Signature Date/Sign	ned
ENTERED AND VERIFIED IN ELECTRONIC SERVICE RECORD:		
VERIFYING OFFICIAL RANK OR GRADE/TITLE: DATE:	SIGNATURE OF VERIFYING	OFFICIAL:
NAME (LAST, FIRST, MIDDLE):	SOCIAL SECURITY NUMBE	R: BRANCH AND CLASS:



ACU4 MASK REUSE INSTRUCTIONS

Due to changes made by CNSL to the mask policy for non-immunized personnel, you have now been issued TWO N95 Masks. Because you have elected to decline the COVID Vaccine or are not past the 14 days after the completion of a vaccine series, you are required to wear a mask. That mask will be a <u>KN95 or an N95 ONLY</u>. The N95 or KN95 mask will be worn upon entering any CNSL installation, building, or craft. <u>It will only be removed upon exiting the CNSL Installation</u>.

Reuse of N-95 Facemasks

Due to a nationwide shortage of N-95 facemasks, reuse of non-soiled, intact N-95's is expected. Reuse refers to the practice of using the same N-95 respirator for multiple days but removing it ('doffing') after leaving a CNSL installation.

Maximum number of uses: A single clean, intact N-95 can be used up to 5 days.

Storage: Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a paper bag between uses. To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified. Storage containers should be disposed of or cleaned regularly.

When NOT to reuse an N-95 Facemask:

- Discard N95 respirators following use during aerosol generating procedures (ex: intubation).
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
- Discard N95 respirators following close contact with any patient co-infected with an infectious disease requiring contact precautions.
- Discard N95 respirator if the mask becomes damaged, soiled or difficult to breathe through, it should be removed from circulation and disposed following local protocols.

Mask Replacement

- Masks will be re-issued every 10 days and they will be signed for.
- If a mask becomes unserviceable, **DO NOT** dispose of it. Bring it to medical for a One-for-one swap.
- If the mask is lost, you must fill out a DD200 and route it through your Department Head and back to the Medical department.
- Do not lose or forget your mask.

A mask will no longer be required 14 days after you have completed your COVID vaccine series.

How to Get Vaccinated:

- <u>STEP ONE:</u> Log into the DHA Appointing Portal (DAP) at: https://informatics-stage.health.mil/COVAX/
- <u>STEP TWO:</u> Open the enclosed User Guide for navigating the DHA Appointing Portal (DAP); this guide walks you through each step to book an appointment with screenshots included as visual aids. <u>The user guide uses a</u> <u>different mil base and MTF as an example. Please follow these instructions for our AOR: Select "VIRGINIA" → Select appropriate MTF base ("Joint Expeditionary Base Little Creek") → Select auto-populated MTF for that base ("NMRTU Boone").</u>
- <u>STEP THREE:</u> Schedule your second dose at the same time.
- STEP FOUR: BE A GROWN AND RESPONSIBLE ADULT AND DO NOT MISS YOUR APPOINTMENTS!

Or

 By going to your nearest local pharmacy and getting the vaccine and bringing the documentstion back to the medical department for inclusion into your record.