

No. 24-173

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In the  
Supreme Court of the United States

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MALCOLM JOHNSON, *et al.*,  
*Petitioners,*

v.

TINA KOTEK, *et al.*,  
*Respondents.*

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On Petition for Writ of Certiorari to the  
United States Court of Appeals  
for the Ninth Circuit

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**BRIEF OF MAKE AMERICA FREE  
AGAIN AS *AMICUS CURIAE*  
IN SUPPORT OF PETITIONERS**

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### INTEREST OF *AMICUS CURIAE*<sup>1</sup>

The Wellness Forum Foundation is a tax exempt corporation created in 2001 under the laws of the State of Ohio. It conducts its charitable activities in the name of “**Make Americans Free Again**,” and it forms and organizes community groups across this country for the purpose of educating its members, participants and other Americans about health, health advocacy and health choice. In furtherance of this purpose, it assists and funds litigation related to these issues, and this is one of those cases.

*Amicus* offers this brief to provide objective information regarding the Covid-19 vaccine manufacturers, the misbranding of their EUA products, and the lack of a true Covid emergency to support Petitioners’ contention that the Oregon Governor’s imposition of a Covid-19 vaccine requirement on all executive branch, school, and healthcare workers violated their fundamental right to bodily integrity and to informed consent regarding medical treatments, and amounted to an unethical medical experiment into which they were coerced by the threat of losing their liberty *and* property interests.

This *amicus* brief is submitted in support of Petitioners Malcolm Johnson, *et al.*

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<sup>1</sup> It is hereby certified that *the amicus curiae* notified the parties of the intention to file this brief at least 10 days prior to the filing of it. No person or entity other than the named *amicus*, their members or counsel has (i) paid in whole or in part for the preparation of this brief; or (ii) authored in whole or in part this brief.

## INTRODUCTION AND SUMMARY OF ARGUMENT

The Oregon Governor has tremendous statutory powers that can be implemented during an “emergency.” When such an emergency is proclaimed, the Governor is vested with “all police powers vested in the state by the Oregon Constitution.” Oregon Revised Statutes § 401.168(1). Even the President of the United States lacks this much power. *Youngstown Sheet & Tube Co. v. Sawyer*, 343 U.S. 579 (1952). But as broad as this statutory authority may be, the Governor is not isolated from being held accountable for violations of constitutional rights protected by the U.S. Constitution. *See, e.g., Sterling v. Constantin*, 287 U.S. 378 (1932); *Scheuer v. Rhodes*, 416 U.S. 232 (1974); and *Blankenship v. Manchin*, 471 F.3d 523 (4th Cir. 2006).

During the Covid-19 “emergency” that started in early 2020, Governor Kate Brown exercised this “police power” to impose lockdowns and other restrictions on the people of Oregon via various Executive Orders (“EOs”).<sup>2</sup> Most EOs listed the number of Oregonians who had been inflicted with Covid-19 and the number of resulting deaths. The first EO, issued March 8, 2020, did not report a single death; the first death did not occur until nine days after that order. By April 1, 2021, there were only 19 deaths from Covid-19 reported. A little more than a year later, on March 12, 2021, there had been a reported 2,316 Covid-19 deaths in Oregon. The last such relevant order was dated June 25, 2021, and it declared that 2,760 deaths had occurred in Oregon as

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<sup>2</sup> All of these orders are posted on the Internet. *See* <https://www.oregon.gov/gov/pages/executive-orders.aspx>. (All Internet links cited in this brief were last visited August 27, 2024.)

a result of Covid-19. But during the same period, there were about 9,778 cancer deaths in Oregon, *i.e.*, nearly four times the number of deaths attributed to Covid-19.

After Oregon had experienced the above, the Governor decided to impose a vaccine requirement on all Oregon executive branch employees, school employees, and healthcare workers by means of EO 21-29,<sup>3</sup> dated August 13, 2021, which remained in effect until it was rescinded on March 17, 2022, by EO 22-03.<sup>4</sup> Because this vaccine mandate (as many others) was violative of their rights, Petitioners sued Governor Brown. One prominent and rational reason for opposing these vaccine mandates, however, is the fact that they have been and are manufactured without sufficient safety studies by companies who have proven track records of making and selling harmful products. Moreover, the data available even at the time of EO 21-29 already demonstrated that Covid deaths were relatively few, and that the EUA vaccines posed many risks to human health.

## ARGUMENT

### I. VACCINE MANUFACTURERS' REPUTATION FOR MAKING AND EXPERIMENTING WITH HARMFUL PRODUCTS.

In 1849, two German immigrants, Charles Pfizer and his cousin Charles F. Erhart, formed a company that eventually became Pfizer, Inc. Pfizer is now an American multinational pharmaceutical and biotechnology corporation with headquarters in New

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<sup>3</sup> See <https://www.oregon.gov/gov/eo/eo-21-29.pdf>

<sup>4</sup> See [https://www.oregon.gov/gov/eo/eo\\_22-03.pdf](https://www.oregon.gov/gov/eo/eo_22-03.pdf)



York City. Its annual revenues exceed that of small countries like New Zealand.

When developing vaccines, Pfizer has engaged in harmful conduct resulting in numerous lawsuits. During 1996 in Nigeria, its antibiotic drug experiments resulted in death and other severe injuries for a number of Nigerian children. As a result, Pfizer was sued, and the Second Circuit described Pfizer's injurious conduct in *Abdullahi v. Pfizer, Inc.*, 562 F.3d 163, 169 (2d Cir. 2009):

[I]n April 1996, Pfizer, dispatched three of its American physicians to work with four Nigerian doctors to experiment with Trovan on children who were patients in Nigeria's Infectious Disease Hospital ("IDH") in Kano, Nigeria. Working in concert with Nigerian government officials, the team allegedly recruited two hundred sick children who sought treatment at the IDH and gave half of the children Trovan and the other half Ceftriaxone, an FDA-approved antibiotic the safety and efficacy of which was well-established. Appellants contend that Pfizer knew that Trovan had never previously been tested on children in the form being used and that animal tests showed that Trovan had life-threatening side effects, including joint disease, abnormal cartilage growth, liver damage, and a degenerative bone condition. Pfizer purportedly gave the children who were in the Ceftriaxone control group a deliberately low dose in order to misrepresent the effectiveness of Trovan in relation to Ceftriaxone. After approximately two weeks, Pfizer allegedly concluded the experiment and left without administering

follow-up care. According to the appellants, the tests caused the deaths of eleven children, five of whom had taken Trovan and six of whom had taken the lowered dose of Ceftriaxone, and left many others blind, deaf, paralyzed, or brain-damaged.

This case was later settled.<sup>5</sup>

In 2002, Pharmacia & Upjohn Company, a Pfizer subsidiary, developed a drug named Bextra, and started vigorously promoting its sale. The start of this sales program was described as follows in the sentencing memorandum of the AUSA who brought criminal charges against Pfizer:

Bextra was officially launched at a national meeting for sales representatives in Atlanta, Georgia, from April 9-12, 2002. During this meeting, the sales force was given a vivid message of how to promote Bextra for the “power” position. They were inundated with displays of music, light shows, acrobats and dancers. The marketing managers led the entire audience in thrusting their fists into the air (the marketing symbol of Bextra) and pounding them against their upraised hands in unison to symbolize the power of Bextra and to “Power Up” the sales force. Ultimately, simulated large steel doors crash down on the stage, and the Bextra fist symbol crashed through the doors. The events from the launch demonstrates the sales frenzy that accompanied Bextra, as the company strove to make the drug reach “blockbuster” (billion dollar a year sales)

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<sup>5</sup> See <https://www.law.com/almID/1202482854504/>

status.<sup>6</sup>

Condensing this sordid story, Pharmacia sales representatives promoted Bextra using false and misleading claims, eventually leading to civil actions filed by the United States as well as federal criminal charges in several districts. These civil and criminal charges were ultimately settled by Pfizer, and the Department of Justice press release summarized that conclusion:

American pharmaceutical giant Pfizer Inc. and its subsidiary Pharmacia & Upjohn Company Inc. (hereinafter together “Pfizer”) have agreed to pay \$2.3 billion, the largest health care fraud settlement in the history of the Department of Justice, to resolve criminal and civil liability arising from the illegal promotion of certain pharmaceutical products, the Justice Department announced today.

Pharmacia & Upjohn Company has agreed to plead guilty to a felony violation of the Food, Drug and Cosmetic Act for *misbranding* Bextra with the intent to defraud or mislead. ... The company will pay a criminal fine of \$1.195 billion, the largest criminal fine ever imposed in the United States for any matter. Pharmacia & Upjohn will also forfeit \$105 million, for a total criminal resolution of \$1.3 billion.<sup>7</sup> (emphasis added).

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<sup>6</sup> See <https://www.cbsnews.com/news/doj-blames-pfizer-management-for-bextra-mess-the-goal-was-to-avoid-getting-caught/>

<sup>7</sup> See <https://www.justice.gov/opa/pr/justice-department-announces-largest-health-care-fraud-settlement-its-history>

It is reported that since 2000, Pfizer has paid \$11,130,383,623 in penalties.<sup>8</sup>

Johnson & Johnson/Janssen Pharmaceuticals, Inc., have had similar problems. In April, 2010, the Department of Justice announced two “Johnson & Johnson Subsidiaries to Pay Over \$81 Million to Resolve Allegations of Off-Label Promotion of Topamax Epilepsy Drug Approved by FDA Promoted for Psychiatric Uses.”<sup>9</sup>

In 2012, 37 State Attorneys General reached a similar settlement regarding the promotion and sale of the drug Risperdal. Janssen Pharmaceuticals agreed to pay \$181 million to settle claims brought against it by Oregon Attorney General Ellen F. Rosenblum and 36 other Attorneys General alleging that the drug company used unfair and deceptive practices in marketing Risperdal and three related anti-psychotic drugs.<sup>10</sup>

In November of 2013, the Department of Justice announced that “Johnson & Johnson [agreed] to Pay More Than \$2.2 Billion to Resolve Criminal and Civil Investigations.”<sup>11</sup> More recently, to address its role in assisting the opioid crisis that has plagued a number of States in this Union, the New York Attorney General announced a \$230,000,000 settlement with the company.<sup>12</sup> The company has paid a total of

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<sup>8</sup> See <https://violationtracker.goodjobsfirst.org/prog.php?parent=pfizer&sort=asc>

<sup>9</sup> See <https://www.justice.gov/opa/pr/two-johnson-johnson-subsidiaries-pay-over-81-million-resolve-allegations-label-promotion>

<sup>10</sup> See <https://www.doj.state.or.us/media-home/news-media-releases/oregon-attorney-general-and-36-others-reach-181-million-risperdal-settlement/>

<sup>11</sup> See <https://www.justice.gov/opa/pr/johnson-johnson-pay-more-22-billion-resolve-criminal-and-civil-investigations>

<sup>12</sup> See <https://ag.ny.gov/press-release/2021/attorney-general-james-reaches-230-million-settlement-treatment-and-prevention>

\$25,197,162,770 in penalties since 2000.<sup>13</sup>

ModernaTX, Inc., was formed in 2010 and has since been primarily devoted to research and development of mRNA vaccines.<sup>14</sup> The first product it has *ever* distributed to the American public was its experimental COVID-19 vaccine which is available only because of its emergency use authorization (“EUA”).

## **II. CONCEALING THE RISKS OF THE EMERGENCY USE COVID-19 VACCINES.**

On February 4, 2020, the Secretary of Health and Human Services (“HHS”) determined, pursuant to the authority under § 564 of the FDCA, that there existed a public health emergency with “significant potential to affect national security or the health and security of United States citizens living abroad” with respect to “a novel (new) coronavirus (nCoV) first detected in Wuhan City, Hubei Province, China in 2019 (2019-nCoV).” 85 Fed. Reg. 7316 (Feb. 7, 2020). Thereafter, vaccine manufacturers such as Pfizer, Johnson & Johnson, and Moderna commenced “warp speed” research on vaccines against Covid-19, culminating in applications for emergency use authorization (“EUA”) under the declared Covid emergency in early December of 2020.

On December 3, 2020, the HHS Secretary granted immunity for “covered countermeasures” to vaccine manufacturers (“covered persons”) that he might thereafter authorize to produce and distribute a vaccine. 85 Fed. Reg. 79190 (Dec. 9, 2020).

On December 11, 2020, the Pfizer-BioNTech

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<sup>13</sup> See <https://violationtracker.goodjobsfirst.org/prog.php?parent=johnson-and-johnson>

<sup>14</sup> See <https://en.wikipedia.org/wiki/Moderna>

COVID-19 Vaccine was granted Emergency Use Authorization. 86 Fed. Reg. 5200 (Jan. 19, 2021). The Secretary found that:

[I]t is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective. Additionally, it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks of the vaccine, for the prevention of COVID-19 in individuals 16 years of age and older.

86 Fed. Reg. at 5203.

But the EUA for this vaccine imposed various requirements on Pfizer which included providing critical information about adverse reactions to the vaccine to VAERS:

Pfizer Inc. will report to Vaccine Adverse Event Reporting System (VAERS):

- Vaccine administration errors whether or not associated with an adverse event;
- Serious adverse events (irrespective of attribution to vaccination);
- Cases of Multisystem Inflammatory Syndrome in children and adults; and
- Cases of COVID-19 that result in hospitalization or death, that are reported to Pfizer Inc.

These reports should be submitted to VAERS as soon as possible but no later than 15 calendar days from initial receipt of the

information by Pfizer Inc.<sup>15</sup>

A few days after the Pfizer vaccine EUA, ModernaTX was granted EUA for its Moderna COVID-19 Vaccine on December 18, 2020. 86 Fed. Reg. 5211 (Jan. 19, 2021). The Secretary made the essential findings that “it is reasonable to believe” that this vaccine “may be effective” and that the “potential benefits of Moderna COVID-19 Vaccine outweigh the known and potential risks.” *Id.*, at 5212. A duty was also imposed on ModernaTX to make reports to VAERS similar to that for Pfizer. *Id.*, at 5216.

On February 27, 2021, Janssen Biotech, Inc., was also granted EUA for its Janssen COVID-19 Vaccine. 86 Fed. Reg. 28608 (May 27, 2021). Again, the FDA made the essential findings that this vaccine “may be effective” and that the “potential benefits of Janssen COVID-19 Vaccine ... outweigh its known and potential risks.” *Id.*, at 28620. Again, a duty was imposed on Janssen Biotech, Inc., to make reports to VAERS. *Id.*, at 28624.

These “COVID-19 vaccines authorized or approved by the [FDA] effectively protect vaccinated individuals against severe illness and death from COVID-19.” 86 Fed. Reg. 61402-03 (Nov. 5, 2021). The FDA did not claim that the Covid-19 vaccines prevented the spread of Covid.

But before these experimental vaccines had even been approved for emergency use, the FDA had already engaged in efforts to determine the risks versus effectiveness of any Covid-19 vaccine. On October 22, 2020, the FDA’s Vaccines and Related Biological Products Advisory Committee conducted a meeting for various attendees to discuss sundry

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<sup>15</sup> 86 Fed. Reg. at 5207.

matters related to the Covid pandemic. During this meeting, a slide presentation was given wherein one slide disclosed the following possible risks of the vaccines:<sup>16</sup>

- Guillain-Barré syndrome
- Acute disseminated encephalomyelitis
- Transverse myelitis
- Encephalitis/myelitis/encephalomyelitis /meningoencephalitis/meningitis/encepholopathy
- Convulsions/seizures
- Stroke
- Narcolepsy and cataplexy
- Anaphylaxis
- Acute myocardial infarction
- Myocarditis/pericarditis
- Autoimmune disease
- Deaths
- Pregnancy and birth outcomes
- Other acute demyelinating diseases
- Non-anaphylactic allergic reactions
- Thrombocytopenia
- Disseminated intravascular coagulation
- Venous thromboembolism
- Arthritis and arthralgia/joint pain
- Kawasaki disease
- Multisystem Inflammatory Syndrome in children
- Vaccine enhanced disease

However, a few months later when Pfizer, Moderna and Jansen published “Fact Sheets” in which they were obligated to provide vaccine recipients specific information about the “benefits

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<sup>16</sup> See page 17 of <https://www.fda.gov/media/143557/download>



and risks” of each vaccine, these potential risks were omitted and concealed from the public. For example, in the May 10, 2021 “Fact Sheet” published by Pfizer, the risks were identified primarily as possible allergic reactions, and as follows:

WHAT ARE THE RISKS OF THE PFIZER-BIONTECH COVID-19 VACCINE?

There is a remote chance that the Pfizer-BioNTech COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Pfizer-BioNTech COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

Side effects that have been reported with the Pfizer-BioNTech COVID-19 Vaccine include:

- severe allergic reactions
- non-severe allergic reactions such as rash, itching, hives, or swelling of the face
- injection site pain
- tiredness
- headache
- muscle pain

- chills
- joint pain
- fever
- injection site swelling
- injection site redness
- nausea
- feeling unwell
- swollen lymph nodes (lymphadenopathy)
- diarrhea
- vomiting
- arm pain

These may not be all the possible side effects of the Pfizer-BioNTech COVID-19 Vaccine. Serious and unexpected side effects may occur. Pfizer-BioNTech COVID-19 Vaccine is still being studied in clinical trials.<sup>17</sup>

In an April 23, 2021 “Fact Sheet” published by Janssen Biotech, the “risks” of its vaccine were described in the following manner:

#### WHAT ARE THE RISKS OF THE JANSSEN COVID-19 VACCINE?

Side effects that have been reported with the Janssen COVID-19 Vaccine include:

- Injection site reactions: pain, redness of the skin and swelling.
- General side effects: headache, feeling very tired, muscle aches, nausea, and fever.

There is a remote chance that the Janssen

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<sup>17</sup> See <https://www.childrensmedgroup.com/cm-g-media/uploads/2021/05/Covid-Fact-Sheet-for-patient-Pfizer-COVID-19-Vac-5-21.pdf>

COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Janssen COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing,
- Swelling of your face and throat,
- A fast heartbeat,
- A bad rash all over your body,
- Dizziness and weakness.

Blood clots involving blood vessels in the brain, abdomen, and legs along with low levels of platelets (blood cells that help your body stop bleeding), have occurred in some people who have received the Janssen COVID-19 Vaccine. In people who developed these blood clots and low levels of platelets, symptoms began approximately one to two-weeks following vaccination. Most people who developed these blood clots and low levels of platelets were females ages 18 through 49 years. The chance of having this occur is remote. You should seek medical attention right away if you have any of the following symptoms after receiving Janssen COVID-19 Vaccine:

- Shortness of breath,
- Chest pain,
- Leg swelling,
- Persistent abdominal pain,

- Severe or persistent headaches or blurred vision,
- Easy bruising or tiny blood spots under the skin beyond the site of the injection.

These may not be all the possible side effects of the Janssen COVID-19 Vaccine. Serious and unexpected effects may occur. The Janssen COVID-19 Vaccine is still being studied in clinical trials.<sup>18</sup>

In the “Fact Sheet” published by Moderna dated March 26, 2021, the “risks” of its vaccine were described in the following manner:

#### WHAT ARE THE RISKS OF THE MODERNA COVID-19 VACCINE?

There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination. Signs of a severe allergic reaction can include:

- Difficulty breathing
- Swelling of your face and throat
- A fast heartbeat
- A bad rash all over your body
- Dizziness and weakness

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<sup>18</sup> See [https://www.rvu.edu/ut/wp-content/uploads/2021/04/Janssen COVID-19Vaccine-Recipient-fact-sheet-revised-04-23-21-8pt.pdf](https://www.rvu.edu/ut/wp-content/uploads/2021/04/Janssen_COVID-19Vaccine-Recipient-fact-sheet-revised-04-23-21-8pt.pdf)

Side effects that have been reported in a clinical trial with the Moderna COVID-19 Vaccine include:

- Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
- General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

Side effects that have been reported during post-authorization use of the Moderna COVID-19 Vaccine include:

- Severe allergic reactions

These may not be all the possible side effects of the Moderna COVID-19 Vaccine. Serious and unexpected side effects may occur. The Moderna COVID-19 Vaccine is still being studied in clinical trials.<sup>19</sup>

### **III. THE COVID-19 VACCINES ARE MISBRANDED.**

Vaccines have proven to be dangerous and harmful to health. An early case of a party awarded workmen's compensation as a result of death caused by the vaccines offered during the 1918 Spanish flu epidemic was *Freedman v. Spicer Mfg. Corp.*, 97 N.J.L. 325, 116 A. 427 (1922). Since then, workmen's compensation laws have been enacted nationwide and injuries caused by vaccines are typically

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<sup>19</sup> See <https://www.pullmanregional.org/hubfs/Moderna%20Fact%20Sheet-Mar2021.pdf>

compensated.<sup>20</sup> Congress has also created a vaccine court to handle such cases. See *Camerlin v. Sec’y of the HHS*, 2003 U.S. Claims LEXIS 362. After all, vaccines are unavoidably unsafe. See *Bruesewitz v. Wyeth LLC*, 562 U.S. 223, 234 (2011).

Without doubt, Pfizer, Johnson & Johnson, and Moderna are large pharmaceutical companies engaged in interstate commerce. The federal laws regulating the manufacture, sale and distribution of vaccines are predicated on Congress’s power to regulate interstate commerce. See 21 U.S.C. § 331. Further, the crime of “misbranding” is the subject of 21 U.S.C. § 352(j), and it provides that a vaccine is misbranded “[i]f it is dangerous to health when used in the dosage or manner, or with the frequency or duration prescribed, recommended, or suggested in the labeling thereof.” Thus, if there has been concealment of the harms of these vaccines, such constitutes “misbranding.” *United States v. Dotterweich*, 320 U.S. 277 (1943); *Kordel v. United States*, 335 U.S. 345 (1948); and *United States v. Marschall*, 82 F.4th 774 (9th Cir. 2023).

In a study published on August 31, 2022, titled “Serious adverse events of special interest following

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<sup>20</sup> See, e.g., *Guillory v. St. Jude Med. Ctr.*, 675 So.2d 1198 (La. Ct. App. 1996); *Monette v. Manatee Mein. Hosp.*, 579 So.2d 195 (Fla. App. 1991); *Lampkin v. Harzfeld’s*, 407 S.W.2d 894 (Mo. 1966); *Suniland Toys and Juvenile Furniture v. Karns*, 148 So.2d 523 (Fla. 1963); *Lee v. Wentworth Mfg. Co.*, 240 S.C. 165, 125 S.E.2d 7 (1962); *Cole v. Pa. Power & Light Co.*, 180 A.2d 272 (Pa. Super. 1962); *Alewine v. Tobin Quarries*, 206 S.C. 103, 33 S.E.2d 81 (1945); *Spicer Mfg. Co. v. Tucker*, 127 Ohio St. 421, 188 N.E. 870 (1934); *Smith v. Brown Paper Mill Co.*, 152 So. 700 (La. App. 2nd Cir. 1934); *Matter of Sanders v. Children’s Aid Society*, 238 App.Div. 746, 265 N.Y.S. 698 (1933), affm’d. 262 N.Y. 655, 188 N.E. 107 (1933); *Texas Employers’ Ins. Ass’n v. Mitchell*, 27 S.W.2d 600 (Tex.Civ.App. 1930); and *Neudeck v. Ford Motor Co.*, 249 Mich. 690, 229 N.W. 438 (1930).

mRNA COVID-19 vaccination in randomized trials in adults,” the authors concluded:

Pfizer and Moderna mRNA COVID-19 vaccines were associated with an excess risk of serious adverse events of special interest of 10.1 and 15.1 per 10,000 vaccinated over placebo baselines of 17.6 and 42.2 (95 % CI –0.4 to 20.6 and –3.6 to 33.8), respectively. Combined, the mRNA vaccines were associated with an excess risk of serious adverse events of special interest of 12.5 per 10,000 vaccinated (95 % CI 2.1 to 22.9); risk ratio 1.43 (95 % CI 1.07 to 1.92). The Pfizer trial exhibited a 36% higher risk of serious adverse events in the vaccine group; risk difference 18.0 per 10,000 vaccinated (95 % CI 1.2 to 34.9); risk ratio 1.36 (95 % CI 1.02 to 1.83). The Moderna trial exhibited a 6 % higher risk of serious adverse events in the vaccine group: risk difference 7.1 per 10,000 (95 % CI –23.2 to 37.4); risk ratio 1.06 (95 % CI 0.84 to 1.33). Combined, there was a 16 % higher risk of serious adverse events in mRNA vaccine recipients: risk difference 13.2 (95 % CI –3.2 to 29.6); risk ratio 1.16 (95 % CI 0.97 to 1.39).<sup>21</sup>

The results of another study, “Serious harms of the COVID-19 vaccines: a systematic review,” dated March 23, 2023, stated:

We included 18 systematic reviews, 14 randomised trials, and 34 other studies with

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<sup>21</sup> See <https://www.sciencedirect.com/science/article/pii/S0264410X22010283>

a control group. Most studies were of poor quality. The most reliable one was a systematic review of regulatory data on the two pivotal randomised trials of the mRNA vaccines. It found significantly more SAEs [severe adverse events] of special interest with the vaccines than with placebo, and the excess risk was considerably larger than the benefit, measured as the risk of hospitalisation. The adenovirus vector vaccines increased the risk of venous thrombosis and thrombocytopenia, and the mRNA based vaccines increased the risk of myocarditis, with a mortality of about 1–2 per 200 cases. We also found evidence of serious neurological harms, including Bell’s palsy, Guillain-Barre syndrome, myasthenic disorder and stroke, which are likely due to an autoimmune reaction, as has been suggested also for the HPV vaccines. Severe harms, *i.e.* those that prevent daily activities, were hugely underreported in the randomised trials. These harms were very common in studies of booster doses after a full vaccination and in a study of vaccination of previously infected people.<sup>22</sup>

In yet another study dated July 19, 2024, titled “Spatiotemporal variation of excess all-cause mortality in the world (125 countries) during the Covid period 2020-2023 regarding socio-economic factors and public-health and medical interventions,” the authors concluded:

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<sup>22</sup> See <https://www.medrxiv.org/content/10.1101/2022.12.06.22283145v2.full.pdf>



Using the median value of all-ages vDFR for 2021-2022 for the 78 countries with sufficient data gives an estimated projected global all-ages excess mortality associated with the COVID-19 vaccine rollouts up to 30 December 2022: 16.9 million COVID-19-vaccine-associated deaths.

The spatiotemporal variations in national excess all-cause mortality rates allow us to conclude that the Covid-period (2020-2023) excess all-cause mortality in the world is incompatible with a pandemic viral respiratory disease as a primary cause of death.<sup>23</sup>

Within the last few months, a noteworthy cardiologist “has just raised the alarm after uncovering bombshell data showing that Covid mRNA shots have caused a staggering 112,000% increase in brain clots.”<sup>24</sup> This report has been published and is available on the Internet.<sup>25</sup> And Professor Angus Dalglish has stated:

[We are] now facing a tsunami of mounting evidence that the mRNA based covid vaccines not only cause cancer progression but also inhibit current treatments in controlling so-called “turbo cancers,” sudden and aggressive either first time or relapsed cancers, which are on the rise.<sup>26</sup>

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<sup>23</sup> See <https://correlation-canada.org/covid-excess-mortality-125-countries/>

<sup>24</sup> See <https://slynews.com/news/top-cardiologist-drops-bombshell-covid-shots-caused-112000-spike-brain-clots/>

<sup>25</sup> See <https://www.preprints.org/manuscript/202406.1236/v2>

<sup>26</sup> See <https://www.conservativewoman.co.uk/this-strong-evidence-of-the-link-between-covid-vaccines-and-cancer-can-no-longer-be->

Some might contend that what the American people have experienced in the last several years via the Covid pandemic borders on genocide, in violation of 18 U.S.C. § 1091.

The CDC compiles annual statistics regarding various diseases that affect Americans, including those living in Oregon. Its reports include annual statistics for people dying from heart disease in Oregon; for 2020, there were 7,371 deaths resulting from this disease, 7,823 in 2021, and 8,152 in 2022, a steadily rising rate. Thus, in 2020, there were on average 614.25 monthly deaths in Oregon from heart disease, 651.9 in 2021, and 679.3 in 2022.<sup>27</sup>

Clearly, the vaccine manufacturers, Pfizer, Johnson & Johnson, and Moderna, have represented in official documents submitted to government agencies that the vaccines they would produce to address the pandemic known as Covid-19 were safe and effective. Both Pfizer and Johnson & Johnson certainly know what misbranding is, because they have been prosecuted for such crimes, pled guilty and paid some of the largest fines in American history. They certainly have not learned from that experience and have again engaged in misbranding. Moreover, while Moderna may be a novice in this game, it appears to have been closely following the footsteps of the other two.

Petitioners in this case sued their Governor who imposed a vaccination requirement on them because they were employees of the State of Oregon or teachers or healthcare workers. Certainly, the Governor had access to the information showing that the pandemic led to far less deaths than cancer; why

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ignored/

<sup>27</sup> See [https://www.cdc.gov/nchs/pressroom/sosmap/flu\\_pneumonia\\_mortality/flu\\_pneumonia.htm](https://www.cdc.gov/nchs/pressroom/sosmap/flu_pneumonia_mortality/flu_pneumonia.htm)

did she impose vaccine EUA countermeasures that had a high risk of causing injury? Discovery might reveal a deliberate indifference to the risks versus the touted public benefit.

It is known that vaccine manufacturers make substantial campaign contributions for the election of both state and federal officials. What associations did the above companies have with Governor Brown? Did they make substantial campaign contributions for her election campaign? Are there other sinister connections between these companies and the Governor? Discovery might reveal such, and such connections could cause the Governor to lose her qualified immunity.

### CONCLUSION

For the foregoing reasons, *Amicus* requests that the Court grant a writ of certiorari.

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