Form 10
[Rule 3.25]

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COURT FILE NUMBER	2401 05557
COURT	COURT OF KING'S BENCH OF ALBERTA
JUDICIAL CENTRE	CALGARY
PLAINTIFF	CARRIE SAKAMOTO
DEFENDANTS	ATTORNEY GENERAL OF CANADA and HIS MAJESTY KING IN THE RIGHT OF ALBERTA
DOCUMENT	**Brought under the *Class Proceedings Act* AMENDED AMENDED AMENDED AMENDED <u>AMENDED</u> STATEMENT OF CLAIM**

ADDRESS FOR SERVICE AND CONTACT INFORMATION OF PARTY FILING THIS DOCUMENT	**RATH & COMPANY** Barristers and Solicitors 282050 Hwy 22 W **Foothills, AB T0L 1W2** **Attention: Jeffrey R.W. Rath/Eva Chipiuk** Phone: 403-931-4047 Facsimile: 403-931-4048 Email: [redacted] Email: [redacted]

NOTICE TO DEFENDANTS

You are being sued. You are a defendant.

Go to the end of this document to see what you can do and when you must do it.

I. INTRODUCTION

1. This is a proposed class action brought by the Plaintiff, Carrie Sakamoto (the **"Plaintiff"** <u>or **"Carrie"**</u>), on her own behalf and on behalf of other members of the proposed class. The proposed class action arises from the risks and harms resulting from the Covid-19 vaccines (the "**Covid Vaccines**") and involves the Defendants' unlawful, negligent, inadequate, improper, unfair and deceptive

practices and misrepresentation related to, *inter alia*, their warning, marketing, promotion and distribution of the Covid Vaccines to the public and to those who suffered injury and damages as a result.

2. The Defendants misrepresented the Covid Vaccines, in breach of statutory duty, as "safe and effective" and "interchangeable" to the public when in fact the Covid Vaccines were neither "safe," ~~or~~ "effective," or "interchangeable" and, misrepresented the adequacy of the regulatory process approving them as a result, many Albertans inoculated with the Covid Vaccines have suffered serious, life-threatening and even fatal consequences.

3. Health Canada negligently approved the Covid Vaccines under an expedited process which allowed manufacturers to apply for authorization for the sale and distribution of Covid Vaccines without the completion of all long-term safety studies or commitment to review new evidence about the Covid Vaccine as it become available, much less demonstrate that the Covid Vaccines were "safe and effective" or "interchangeable" for the general population.

4. By contrast, the Defendants knew, or ought to have known, that Covid Vaccines were neither safe, ~~or~~ effective or interchangeable and that standard regulatory due diligence under the *Food and Drugs Act*, RSC 1985, c F-27 (the "***Food and Drugs Act***"), had been bypassed. The Defendants knew of reports of injury and harms caused by the Covid Vaccines and had access to information from the vaccine manufacturers stating the Covid Vaccines were not warranted for safety, efficacy, or interchangeability. Information from the vaccine manufacturers demonstrated various harms and injuries expected from the Covid Vaccines, yet the Defendants:

    a. Never disclosed this information to the general public or to physicians, and censored and suppressed information relating to the adverse events and injuries from the public. The Defendants intentionally created an environment where physicians were pressured to comply, compromising their ability to be honest with patients, undermining the physician-patient relationship, and endangering the health of Albertans;

    b. Continued to market, promote and distribute the Covid Vaccines as a

"safe and effective" or "interchangeable" vaccine for the SARS-CoV-2 virus or Covid-19 ("**Covid**"); and

c. Coerced and incentivised the public to take the Covid Vaccines while deliberately withholding relevant safety information about the Covid Vaccines which interfered with the public's ability to exercise their right to full and informed consent to medical treatment.

5. The Defendants held themselves out as public health experts, reporting on behalf of health experts and public health doctors and assumed roles typically reserved for doctors and healthcare practitioners by making authoritative public statements about the Covid Vaccines hereby establishing a relationship of trust and care between themselves and the public during the Covid pandemic at a time when the public was vulnerable, and the Defendants knew or ought to have known that the public would be relying on their information for their health, safety and protection during a period of heightened vulnerability and uncertainty. In doing so, the Defendants knew or ought to have known that the public would rely on their guidance for decisions directly affecting their health, safety, and well-being. This created a duty of care, which the Defendants subsequently breached by providing misleading or incomplete information, suppressing contrary evidence, and coercing compliance without informed consent. Moreover, they did so without lawful statutory authority, further compounding the breach and exposing the Plaintiff and Class Members to foreseeable harm.

6. In public appeals meant to be relied on, the Chief Medical Officer of Health of Alberta routinely referred to all Albertans as her "patients" and issued one hundred and thirteen (113) public health orders known as Chief Medical Officer of Health Orders ("**CMOH Orders**") *ultra vires* to Section 29.(2.1) of the *Public Health Act*, RSA 2000, c P-37 (the "***Public Health Act***") which included restrictions to Albertans not vaccinated for Covid. On July 31, 2023, the Alberta Court of King's Bench determined that the CMOH Orders were *ultra vires* the *Public Health Act*.

7.~~6.~~ The Defendants misrepresented the safety, ~~and~~ efficacy, or "interchangeability" of the Covid Vaccines and encouraged, and even implored, the public to trust the

Defendants for their health, safety and protection. Further, the Defendants censored and suppressed information relating to the adverse events and injuries from the Covid Vaccines to influence public confidence in the Covid Vaccines and maintain trust in the public health authorities. The collective conduct of the Defendants to keep this information suppressed from the public in a manner which amounted to a conspiracy to commit assault and battery which deliberately interfered with the public's ability to exercise their right to informed consent to medical treatment.

8.~~7.~~ The Defendants knew, or ought to have known, that the Covid Vaccines would cause damage to the public, including the Plaintiff, and the Defendants, conspired to commit assault and battery, and failed to take adequate measures, or any measures, to prevent harm to the public, including the Plaintiff.

9.~~8.~~ The Plaintiff alleges that the Defendants acted negligently, breached their public duty, breached their fiduciary duty, or in the alternative made representations in furtherance of a conspiracy to commit assault and battery and committed malfeasance in public office in doing so.

II. FACTS

THE PARTIES

The Plaintiff

10.~~9.~~ The Plaintiff is an individual residing in the City of Lethbridge, in the Province of Alberta.

11.~~10.~~ The Plaintiff claims on her behalf and on behalf of the Class and all Class Members for an order pursuant to the *Class Proceedings Act*, SA 2003, c C-16.5 (the "***CPA***") certifying this action as a Class proceeding and appointing her or other members of the Class as representative plaintiffs of the Class.

12.~~11.~~ The Plaintiff was born November 7, 1975. At the time of filing this Statement of Claim, Carrie is 47 years old and had no prior health conditions before being inoculated by the Covid Vaccines. After being inoculated by the Covid Vaccines she almost died. The Plaintiff was hospitalized for seventeen (17) days following

experiencing stroke-like symptoms, ultimately losing her ability to walk, chew, talk and concentrate. The Plaintiff received no, or inadequate, warning from the Defendants about the severe injury and risks associated with the Covid Vaccines and was the subject of coercion and undue influence by the Defendants to take the Covid Vaccines absent her full and informed consent.

13.~~12.~~ The Plaintiff is the proposed representative of a class of individuals from across Alberta who received an inoculation of the Covid Vaccines in the Province of Alberta, and who suffered injury and damages as a result of the Covid Vaccines.

The Class

14.~~13.~~ The Plaintiff brings this action in her own right, and pursuant to the *CPA* on behalf of natural persons who:

a. Received Covid Vaccines marketed or manufactured by Pfizer-BioNTech, AstraZeneca PLC, Moderna, Inc., Janssen Inc. and Novavax Inc. (the "**Vaccine Manufacturers**") in the Province of Alberta;

b. Between December 9, 2020, and the date of certification of this action as a Class proceeding, or such other date determined to be appropriate by the Court (the "**Class Period**"); and

c. Suffered injury~~, damage and losses as a result~~.

(the "**Class**" or "**Class Members**")

The Defendants

15.~~14.~~ The Defendant, the Attorney General of Canada, is named pursuant to the *Crown Liability and Proceedings Act* R.S.C., 1985, c. C-50 as the representative of the Minister of Health and the various federal agents and agencies represented by this Minister, including but not limited to the Chief Public Health Officer of Canada, Health Canada, the Public Health Agency of Canada, National Advisory Committee on Immunization, Dr. Teresa Tam, and Dr. Celia Lourenco (collectively hereafter referred to as the "**Federal Defendant**").

16.~~15.~~ The Federal Defendant is vicariously liable for the actions of the federal Minister

of Health and the various federal agents and agencies represented by this Minister.

17.~~16.~~ The Federal Defendant oversaw the Department of Health Canada and the Public Health Agency of Canada, key agencies coordinating the Canadian government's response to the Covid pandemic and was responsible for discharging the operational role of regulatory approval, monitoring, and compliance of Covid Vaccines for use in Canada.

18.~~17.~~ The Defendant, His Majesty the King in Right of Alberta ("**Alberta**"), is named in these proceedings pursuant to the *Proceedings Against the Crown Act*, R.S.A. 2000, c P-25 as the representative of the provincial Minister of Health (the "**Provincial Minister of Health**") and the various provincial agents and agencies represented by this minister, including but not limited to Dr. Deena Hinshaw, the Chief Medical Officer of Health ("**CMOH**"), and Alberta Health Services ("**AHS**") (collectively hereafter referred to as the "**Provincial Defendant**").

19.~~18.~~ The Provincial Defendant is vicariously liable for the actions of the Provincial Minister of Health and the various provincial agents and agencies represented by this Minister.

20.~~19.~~ The Provincial Defendant is responsible for allocating health funding, administering provincial programs and overseeing public health surveillance, public health and disease control initiatives in Alberta during the Covid pandemic including all of the misinformation and withholding of relevant information by the Alberta CMOH alleged herein.

Derelict Approvals

21.~~20.~~ The *Food and Drugs Act*~~, RSC 1985, c F-27, (the "***Food and Drugs Act***")~~ exists to ensure all therapeutic products meet health, safety and quality requirements and must undergo rigorous testing prior to being approved for human use in Canada.

22.~~21.~~ The Federal Defendant has a statutory and fiduciary duty to ensure that therapeutic products sold in Canada are safe and effective for their intended purpose and has the authority under section C08.002 of the *Food and Drug*

Regulations, CRC, c. 870 (the "***Food and Drugs Regulations***"), to issue an approval for a new therapeutic product in Canada.

23.~~22.~~ Before manufacturers can market a therapeutic product in Canada, under the *Food and Drug Regulations*, they need to obtain a Drug Identification Number or a Notice of Compliance, or both. To get these, manufacturers must provide strong evidence of the product's quality, safety, and efficacy as required under Canada's *Food and Drugs Act* and the *Food and Drug Regulations*.

24.~~23.~~ Under the *Food and Drug Regulations* that were in force at the beginning of the Covid pandemic, it could take several years for a manufacturer to develop a therapeutic product and generate the information and evidence required to satisfy the regulatory requirements.

25.~~24.~~ Section 30.1 of the *Food and Drugs Act* authorizes the Minister of Health to make an interim order if the Minister of Health believes that immediate action is required to deal with a significant risk, direct or indirect, to health or safety.

26.~~25.~~ On September 16, 2020, the Minister of Health made an interim order under s. 30.1 of the *Food and Drugs Act* to create an approval process that applied only to COVID-19 drugs (which includes vaccines) and was approved by the Governor in Council on September 25, 2020 (see P.C. 2020-682, Canada Gazette Part I, Vol. 154, No. 40 p. 2587 (the "**Interim Order**")). The Interim Order lowered the usual approval criteria for therapeutic drugs in Canada.

27.~~26.~~ In and around that same time, the Minister of Health, approved several Covid vaccines designated to protect against Covid from the Vaccine Manufacturers. The Covid Vaccines were approved after the Minister of Health concluded that the benefit of the Covid Vaccines outweighed the risks and was not based on the usual safety and efficacy standard. The Minister of Health signed supply contracts with the Vaccine Manufacturers that forced the Canadian government to keep the agreements confidential and to indemnify the Vaccine Manufacturers for negligence and against any financial liability in the event of vaccine related harm. The Defendants signed supply contracts with the Vaccines Manufacturers which stated that the Covid Vaccines were **not** warranted for safety due to being rushed to market without sufficient testing and long-term safety data.

28.~~27.~~ Moderna submitted their application for approval on October 12, 2020, and the Moderna vaccine was approved by the Minister of Health on December 23, 2020 (the "**Moderna Vaccine**").

29.~~28.~~ Jassen Inc. submitted their application for approval on November 30, 2020, and the Jassen Inc. vaccine was approved by the Minister of Health on November 30, 2020 (the "**Jassen Vaccine**") and the authorization was cancelled on June 30, 2023, in Canada. The Jassen Vaccine approval was revoked in the United States on June 1, 2023.

30.~~29.~~ Pfizer-BioNTech submitted their application for approval on October 9, 2020, and the Pfizer-BioNTech vaccine was approved by the Minister of Health on December 9, 2020 (the "**Pfizer Vaccine**").

31.~~30.~~ AstraZeneca submitted their application for approval on September 9, 2020, and the AstraZeneca vaccine was approved by the Minister of Health on February 26, 2021 (the "**AstraZeneca Vaccine**").

32.~~31.~~ Novavax Inc. submitted their application for approval on January 29, 2021, and the Novavax Inc. vaccine was approved by the Minister of Health on February 17, 2022 (the "**Novavax Vaccine**").

33.~~32.~~ The Minister of Health authorized the Covid Vaccines relying on guidance from external regulatory agencies and Vaccine Manufacturers with the knowledge that domestic independent evaluation had not been undertaken to determine that the Covid Vaccines were fit for their purpose and had an adequate safety profile.

34. The supply contract between Pfizer and the Federal Defendant for the provision of the Pfizer Covid Vaccines explicitly stated that any warranty regarding the safety or efficacy of the vaccines. The agreement further acknowledged that long-term effects and potential adverse reactions were unknown at the time of contracting. Further, the product monographs for the Covid Vaccines contained express disclaimers indicating the absence of data concerning the interchangeability of the vaccines with other Covid Vaccines, whether for completion of a primary series or for the administration of booster vaccines. These documents demonstrate that, at the time the Covid Vaccines were being

distributed, the Defendants were aware of limitations in the available data regarding long-term safety, efficacy, and interchangeability.

35. The National Advisory Committee on Immunization ("**NACI**"), which provides independent medical and public health advice to the Public Health Agency of Canada, directed that the Covid Vaccines be administered in line with the guidance provided in the product monographs from the Vaccine Manufacturers.

36.~~33.~~ The Defendants knew or should have known that the Covid Vaccines' trial data indicated that the Covid Vaccines created a risk of adverse events and death far beyond any previously approved vaccine in Canada, or that when such data became available the Defendants, collectively or individually, should have taken steps to withdraw the Covid Vaccines from public use or advise the public of the risk of injury and death associated with these products.

37.~~34.~~ As of March 16, 2021, thirteen (13) countries in the European Union suspended the authorization of the AstraZeneca Vaccine. At the time the applicable health authorities in the United States had not authorized the use of the AstraZeneca Vaccine.

38.~~35.~~ The Vaccine Manufacturers engaged in "expedited" research to obtain regulatory approvals and launch the distribution of the Covid Vaccines worldwide as quickly as possible. The Vaccine Manufacturers manipulated data, or presented misleading data, and misled regulatory authorities to secure approvals. The Minister of Health did nothing to ensure this was not the case by not requiring a proper and rigorous review of the information presented by the Vaccine Manufacturers under standard *Food and Drugs Act* processes, instead relying on the Interim Order.

39.~~36.~~ The Vaccine Manufacturers have an inherent conflict of interest in representing their products for regulatory approval as "safe and effective" and have in the past been known to manipulate data to make the drugs seem safer and more efficacious than they really are. The only safety and quality safeguards come from national regulatory authorities, such as Health Canada and the Food and Drugs Administration in the United States which were entirely ignored or set aside in regard to the Covid Vaccines.

40.~~37.~~ The Pfizer and Moderna Vaccines utilized a gene therapy (mRNA) technology which had never been successfully, or fully, tested for long-term efficacy and safety in humans (the "**mRNA Covid Vaccines**"). When the mRNA technology had been used, prior to the Covid pandemic, there were severe side effects observed, prompting the need for more safety related clinical research. Neurological complications, like Bell's Palsy, were indicated as a serious side-effect of the mRNA technology. To date, the Vaccine Manufacturers have not produced a successful coronavirus vaccine using gene therapy technology.

41.~~38.~~ The Center for Disease Control and Prevention database Vaccine Adverse Reporting System in the United States reveals that the severe adverse events and deaths from the Covid Vaccines in 2021 and 2022 were significantly higher than all other vaccines combined from 2011 to 2020. Data from Canada and around the world shows a concerning trend in excess deaths following the rollout of the Covid Vaccines that has not been researched or adequately explained by the public health authorities. The leading cause of death in Alberta was "unknown" following the rollout of the Covid Vaccines to the public and public health authorities and regulatory bodies in Canada or Alberta respectively have not been able to explain this increase in "unknown" deaths.

42.~~39.~~ If the Minister of Health believes that a product presents a serious or imminent risk of injury to health, the Minister of Health has a duty to recall the product and, in addition, may disclose confidential business information about a product without notification if the purpose of the disclosure is related to the protection or promotion of human health or the safety of the public. The Federal Defendant's lack of action in not recalling, or pausing, the Covid Vaccines or releasing the Covid Vaccine supply contracts where the manufacturers expressly stated that the products were not warranted for safety was negligence and in bad faith given the Federal Defendant acknowledged Covid Vaccine injury, and the patterns of excess unknown deaths and Covid Vaccine injury emerging in Canada and around the world.

43. The Federal Defendant established the Vaccine Injury Support Program on June 1, 2021, to provide compensation to individuals who suffered injury or death causally linked to vaccines administered in Canada on or after December 8,

2020. The Provincial Defendant knew or ought to have known about the creation and purpose of the Vaccine Injury Support Program. The Vaccine Injury Support Program was established to provide compensation for individuals injured by the Covid Vaccines, thereby demonstrating that the Defendants were aware of harms caused by the Covid Vaccines. Despite this knowledge, the Defendants continued to promote the Covid Vaccines without updating their public guidance to disclose the known risks, causing injuries to the Plaintiff and Class Members.

44.~~40.~~ As of January 5, 2024, the Federal Defendant reported four hundred and eighty-eight (488) deaths occurring after being vaccinated with a Covid Vaccine through the Canadian Adverse Events Following Immunization Surveillance System which is a federal, provincial and territorial public health post-market vaccine safety surveillance system. The Federal Defendant also reported a total of fifty-eight thousand, seven hundred and twelve (58,712) adverse events following being vaccinated with a Covid Vaccine, eleven thousand seven hundred and two (11,702) being listed as a serious adverse event. Notwithstanding the significant number of deaths and adverse events, the Federal Defendant has not paused, recalled, or taken any compliance or enforcement action against the Vaccine Manufacturers and the Provincial Defendants are still administering the Covid Vaccines to the public while not warning the public of the risk of injury and death associated with these products.

45. Despite the volume of reported adverse events through the Canadian Adverse Events Following Immunization Surveillance System, the Vaccine Injury Support Program approved compensation for only two hundred and nine (209) individuals. This limited and discretionary compensation program has failed to adequately address the scope and severity of harm experienced by the Plaintiff and Class Members.

46. All Covid-related public health emergency measures were rescinded by the Provincial Defendant by April 2022 and by the Federal Defendant by June 2023, eliminating the public health emergency basis for continued Covid Vaccine promotion. Despite the end of the Covid emergency and the known harms of the Covid Vaccines, the Defendants persisted in promoting and administering the Covid Vaccines to the public without addressing the risks, thereby causing

injuries to the Plaintiff and Class Members.

47.~~41.~~ The Defendants, individually and collectively, reassured the public that messenger ribonucleic acid (mRNA), the molecule that provides cells with instructions for making proteins, never enters the central part (nucleus) of the cell, which is where our DNA (genetic material) is found with the mRNA Vaccines. As early as October 2020 a study indicated that the mRNA spike protein can interact with tumor suppressor proteins in the body, suggesting the possibility of increased cancers and the resurgence of aggressive cancers in persons who took the mRNA Covid Vaccines.

48.~~42.~~ As early as 2022 research found the presence of mRNA spike protein from the mRNA Vaccines within the cell's nucleus along with elevated production of the enzyme "reverse transcriptase," facilitating the conversion of mRNA to DNA.

49.~~43.~~ Recently multiple independent laboratories identified DNA fragment contamination in the mRNA Covid Vaccines. To scale up production for billions of mRNA Vaccines DNA was cloned into a bacterial plasmid vector for amplification with E. Coli bacteria. Health Canada confirmed the presence of E. Coli DNA contamination in the Pfizer Vaccine.

50.~~44.~~ As early as December 14, 2023, Health Canada officials warned about a "high level of impurity" and contamination in the mRNA Covid Vaccines. They found that the mRNA Covid Vaccines could instruct cells to produce unintended, or "frameshifted proteins", potentially triggering immune responses and leading to increase in autoimmune conditions, diseases and even death.

51.~~45.~~ On February 23, 2024, the most comprehensive global study analyzing the vaccination records of over ninety-nine million (99,000,000) individuals who had received Covid Vaccines was published. The study identified significant increases in the occurrence of neurological, blood, and heart-related conditions. The following, higher-than-expected cases of "adverse events of special interest" were observed but are not limited to:

a. myocarditis (inflammation of the heart muscle);

b. Guillain-Barre syndrome (a debilitating neurological condition);

c. transverse myelitis (inflammation of the spinal cord);

d. acute disseminated encephalomyelitis (inflammation and swelling in the brain and spinal cord);

e pericarditis (inflammation of the lining around the heart); and

f. cerebral venous sinus thrombosis (a rare form of stroke).

52.~~46.~~ Despite known concerns and warnings, the Federal Defendant has not paused, recalled, or taken any compliance or enforcement action against the Vaccine Manufacturers and the Provincial Defendants have continued to administer the mRNA Covid Vaccines despite the identified issues with contamination and potential risks associated with the contaminated mRNA Covid Vaccines.

53.~~47.~~ The Defendants knew or ought to have known by February 2021 that the Covid Vaccines were the cause of substantial increased serious adverse events and deaths yet continued to advertise the Covid Vaccines as “safe”, ~~and~~ “effective” or “interchangeable” when they knew or ought to have known otherwise. Instead, the Defendants disregarded expert opinion and scientific evidence demonstrating increased and concerning adverse events and death from the Covid Vaccine. When foreign authorities suspended their Covid Vaccines’ approvals, in light of the risks known, the Federal Defendant did not, and the Defendants continued to promote the Covid Vaccine to the Plaintiff and Class Members despite the known risk and dangers.

Coordinated Vaccine Campaigns

54.~~48.~~ The *Food and Drugs Act* prohibits advertising any therapeutic product in a manner that is false, misleading, or deceptive or is likely to create an erroneous impression regarding the character, value, composition, merit or safety of the therapeutic product. Any person that promotes the sale of therapeutic product is subject to the *Food and Drugs Act*.

55.~~49.~~ One of the roles of Health Canada is to provide health information to the public to make informed decisions about their health care. One of the roles of the Provincial Defendant through AHS is to deliver safe, high-quality health care in

Alberta. One of the obligations on medical professionals is to obtain consent and ensure the patient is fully informed and understands a medical procedure or treatment before it takes place.

56. In relation to the Covid Vaccines, the Defendants interfered with the professional autonomy of medical practitioners by exerting undue influence and micromanaging their medical practice. The Defendants provided negligent medical advice to the public and the medical profession, which undermined doctors' ability to conduct a thorough risk-benefit analysis and secure proper informed consent from their patients. Furthermore, the Defendants permitted or encouraged regulatory bodies to pursue disciplinary actions and sanctions against physicians who raised legitimate concerns about the Covid Vaccines or issued medical exemptions to their patients based on their professional judgment.

57.~~50.~~ The Defendants, in a coordinated and strategic manner, launched a comprehensive false, misleading and deceptive misinformation campaign that created an erroneous impression regarding the character, value, composition, merit and safety of the Covid vaccines to entice and coerce the public to take the Covid Vaccines (the "**Vaccine Campaigns**").

58.~~51.~~ The Defendants, individually and collectively, engaged in negligent, false, misleading, and deceptive Vaccine Campaigns designed to censor, entice, shame, cause fear and coerce the public to take the Covid Vaccines without fully informing the public, including the Plaintiff of the risks. The risks from Covid Vaccines were known but not clearly laid out for the public, and in fact intentionally censored and suppressed, which did not allow people to make an independent, informed assessment about whether the Covid Vaccines were a necessary or safe therapeutic intervention.

59.~~52.~~ The actions of the Defendants in preventing the Plaintiff, and Class Members, from accessing information which would have allowed her to provide full and informed consent amounts to a conspiracy by the Defendants to commit assault and battery upon the Plaintiff and Class Members. The Defendants, by agreement, or with a common design or intention, presented false information

about the safety and efficacy of the Covid Vaccines to the public while supressing factual information from the public about the risks and dangers of the Covid Vaccine. The Defendants know or ought to have known that these actions ~~was~~ were likely to result in injury or harm from the Covid Vaccine and did in fact cause injury and harm to the Plaintiff and the Class Members.

60.~~53.~~ The objective of the Vaccine Campaigns was to vaccinate everyone, young and old, without any regard to the risk that Covid actually presented to such persons versus the risk of the Covid Vaccines.

61.~~54.~~ The Vaccine Campaigns include, but are not limited to:

a. the “safe and effective” campaign;

b. the “we are in it together” campaign;

c. #ThisIsOurShot campaign;

d. the “first vaccine is the best vaccine” campaign;

e. the “mix-and-match” campaign;

f. #ShotofHope campaign; and

g. the “trust the science” campaigns.

62.~~55.~~ On or about March 15, 2021, the Defendants marketed the Covid Vaccines with various Vaccine Campaign slogans like, “the first vaccine, is the best vaccine”. Specifically, the Defendants represented that all the approved vaccines for Covid are highly effective at preventing severe disease and reducing transmission none of which was objectively verifiable.

63.~~56.~~ The Vaccine Campaigns included official government announcements, television and radio advertisements, social media messaging, and statements made by public officials, all of which strongly urged Albertans to receive the Covid Vaccines. The Vaccine Campaigns were disseminated widely across multiple platforms by the Defendants. During the Vaccine Campaigns, the Defendants made the following public statements, including, but not limited to:

a. On January 20, 2021, Dr. Hinshaw, Alberta CMOH publicly stated: “We will continue to monitor every dose that is administered to make sure we’re protecting Albertans health. I am providing regular updates on this because I want Albertans to understand that we are watching closely and that the benefits of these vaccine far outweigh the risks. I hope this information helps Albertans understand what the options are and make the informed choice to get immunized when it’s their turn. That choice will help protect them, their loved ones and their community. That choice will save lives.”

b. On or about April 15, 2021, Premier Kenny publicly stated: “Getting vaccinated is safe and easy… Book your free shot online at ahs.ca by calling 811.”

c.~~b.~~ On or about May 4, 2021, Prime Minister Justin Trudeau publicly stated “The impacts of catching Covid are far greater and far deadlier, as we’ve seen across the county, than potential side effects. Let me remind everyone that every vaccine administered in Canada is safe and effective, as evaluated by Health Canada.”

d.~~c.~~ On or about May 17, 2021, the federal Minister of Health, Patty Hajdu publicly stated that the Government of Canada is supporting Canadians to make informed Covid-19 vaccines choices and announced the launch of a new national campaign to encourage vaccine uptake which will appear on television, radio, print, out-home and online.

e. On or about June 1, 2021, Dr. Theresa Tam, Chief Public Health Officer of Canada publicly stated: “The National Advisory Committee on Immunization (“**NACI**”) has updated its recommendations on the interchangeability of #COVID19vaccines for second doses…”

f.~~e.~~ On or about June 15, 2021, Dr. Theresa Tam, Chief Public Health Officer of Canada publicly stated: “Having safe and effective vaccines along with informed, confident and motivated people getting vaccinated are key to Canada’s success for widespread and long-term control of Covid-19. Through the ‘Ask the Experts’ campaign, trusted Canadian health experts

listen and provide answers to your important questions about Covid-19 vaccination that are fundamental to vaccine confidence and informed decision making for you and your loved ones."

g. On or about June 21, 2021, Dr. Hinshaw publicly stated: "Our AB data shows that both Pfizer and Moderna have 90+% effectiveness with two (2) doses. Pfizer is about 90% effective and Moderna 93% after two (2) doses. Bottom line: both are safe and both work very well… Both Pfizer and Moderna are mRNA vaccines. They're not identical but extremely similar and it's perfectly okay to get one dose of each. In fact, there's some evidence that suggests this may actually boost your immune response."

h.~~g.~~ On or about June 29, 2021, Dr. Hinshaw publicly stated: "It has been a tremendous privilege to support Albertans over the last 16 months and to help keep you informed. This pandemic has tested us and at time it has polarized us. It has challenged all of us in ways we never could have expected. But it has also made clear one indisputable fact, we are stronger and safer together."

i.~~h.~~ On or about July 27, 2021, the office of the Prime Minister published the following public statement: "The best way to end this pandemic is for everyone to get their shots as soon as they can."

j.~~i.~~ The Canadian military acknowledged employing propaganda techniques (otherwise known as "information operations campaigns") on the public as early as April 2020 and it is alleged that the Federal Defendant was aware of and directed the propaganda plan employed by the Canadian military on the public.

64.~~57.~~ The Defendants failed to ensure that the information they disseminated to the public was credible, reliable, and accurate and instead acted in a false, misleading, and manipulative manner to the public, including the Plaintiff and Class Members. The Defendants censored and suppressed information relating to the adverse events from the Covid Vaccine to influence public confidence in Covid Vaccines and maintain trust in the public health authorities.

65.~~58.~~ The Vaccine Campaigns had the effect of violating the Plaintiff's and the Class Members' right to informed consent to accept or reject a medical treatment, freedom from coercion to accept a medical treatment not voluntarily chosen and freedom from medical or scientific experimentation and amounts to a conspiracy to commit assault and battery by the Defendants.

66. For at least two (2) years, the Provincial Defendant systematically imposed *ultra vires* CMOH Orders, including the Vaccine Exemption Restriction Program, to coerce unvaccinated individuals into vaccination by restricting their access to public and private spaces, employment, and fundamental freedoms. These unlawful measures, later deemed *ultra vires*, limited unvaccinated persons' participation in everyday life. Simultaneously, the Federal Defendant, through Transport Canada, enforced a systemic, multi-year campaign of Interim Orders to pressure unvaccinated individuals into compliance by prohibiting them from traveling by plane, train, or boat, effectively barring them from domestic and international travel (collectively the "**Vaccine Orders**"). The Defendants' Vaccine Orders were aimed at coercing compliance and restricting the civil rights of individuals who declined or refused vaccination.

67.~~59.~~ The Vaccine Campaigns prevented access to the information necessary for members of the public to understand and assess critical issues about the safety, ~~and~~ efficacy or interchangeability of the Covid Vaccines, the medical consequences of refusing the Covid Vaccines, alternative treatments to the Covid Vaccines and the application of each of these factors to individual personal medical profiles.

68.~~60.~~ Further, the Defendants provided the Covid Vaccines to the public at no cost and the Provincial Defendant offered monetary incentives to entice and coerce the public to take the Covid Vaccines under false assurances. In addition, Alberta's CMOH issued numerous public health orders *ultra vires* the *Public Health Act* which were unlawful in an effort to coerce and restrict the civil rights of persons who failed or refused to take the Covid Vaccines against their will.

69.~~61.~~ The Vaccine Campaigns provided false, misleading, and deceptive information to the public and did not allow individuals to access or receive information

necessary for informed consent thereby eviscerating informed consent by the public, including the Plaintiff and the Class Members.

The Plaintiff

70.~~62.~~ Starting around March of 2020, Carrie was continuously exposed to the Defendants' fear-based messaging regarding the Covid pandemic. From around December of 2020, Carrie was inundated by the Defendants' imploring her to take claiming the Covid Vaccines will protect her health and safety, and the health and safety of others.

71.~~63.~~ On April 21, 2021, Carrie was administered a vaccine manufactured by AstraZeneca by an AHS representative in Lethbridge, Alberta. On June 18, 2021, Carrie was administered a vaccine manufactured by Pfizer by an AHS representative in Lethbridge, Alberta. The representations made by the Defendants instilled fear in Carrie regarding the Covid pandemic causing her to take the Covid Vaccines in the belief that it would protect her health and safety, and the health and safety of those around her.

72.~~64.~~ Immediately following the administration of the Pfizer Vaccine, the Plaintiff experienced severe flu-like symptoms including nausea, dizziness, and fever. Her symptoms continued to get worse throughout the week.

73.~~65.~~ On July 1, 2021, the Plaintiff's husband took her to the Chinook Regional Hospital in Lethbridge, Alberta (the "**Hospital**") because her symptoms were becoming increasingly severe. On the way to the Hospital, the Plaintiff noticed that the right side of her face began to droop and she experienced stroke like symptoms. The Plaintiff was discharged that day from the Hospital and~~,~~ was told her symptoms would resolve themselves. She was told to go home.

74.~~66.~~ Throughout the night and into the next day the Plaintiff's symptoms got worse, and she went back to the Hospital. She was admitted to the Hospital on July 2, 2021. Her symptoms got increasingly worse and she was put on a feeding tube because she was unable to properly chew and swallow her food.

75.~~67.~~ On or about July 9, 2021, the doctors at the Hospital informed the Plaintiff that her injuries were caused by the Pfizer Vaccine administered to the Plaintiff on

June 18, 2021. The right side of her throat was paralyzed and she had to relearn how to swallow. The right side of her face and tongue were paralyzed making chewing and swallowing without choking extremely difficult. Her speech was slurred. Her right eye was paralyzed open so it had to be covered and taped shut. She experienced pain in her face, ear and head at all times. She experienced hearing loss in her right ear. Her balance was affected such that she needed a walker to move around. She constantly experiences vertigo. She takes four different medications every day. She has memory loss and sleeping is difficult for her. She is still in pain and has swelling in her face, ear and head, and experiences constant headaches. She was advised that the damage is permanent.

76.~~68.~~ As a result of being administered the Covid Vaccines, the Plaintiff has suffered the following injuries ("**Injuries**"):

a. Severe and permanent Bell's Palsy;

b. Anxiety;

c. Depression;

d. Memory loss;

e. Vision loss;

f. Hearing loss;

g. Cognitive impairment;

i. Synkinesis;

j. Loss of sleep;

k. Speech impairment;

l. Facial disfigurement;

m. Facial paralysis;

n. Tinnitus; and

o. Vertigo; and

p. Such further and other injuries as will be proven at a trial of this action.

77.~~69.~~ On July 15, 2021, the Plaintiff was discharged from the Hospital.

78.~~70.~~ On August 30, 2021, the Plaintiff was sent a letter from the Vaccine Injury Support Program.

79.~~71.~~ On November 1, 2021, the Plaintiff and her family put their home and farm up for sale. She could not perform household tasks, she experienced fatigue, lack of concentration, was on several medications and required constant medical treatment. She lost her independence and ability to maintain her farm and family home.

80.~~72.~~ In the fall of 2021 and into early 2022, two separate AHS representatives called the Plaintiff at home and specifically advised her to take the Covid Vaccine as a booster and told her that it was “safe” for her to do so.

81.~~73.~~ In the fall of 2021 and into early 2022, the Plaintiff reached out to many Canadian mainstream media networks, including the Canadian Broadcasting Corporation, to tell them her story so they could share the impacts of adverse events from the Covid Vaccines with the public and medical doctors. She was advised that they could not report on information that negatively reported on the Covid Vaccines.

82.~~74.~~ On April 13, 2022, her family sold their family farm because she could not drive and live independently on the farm with her three children and husband due to the Injuries and increased medical appointments in Lethbridge. The rushed sale caused the Plaintiff and her family a significant financial loss.

83.~~75.~~ On August 10, 2022, upon her request, the Plaintiff received a letter from her medical doctor stating that it is not safe for her to take additional Covid Vaccines.

84.~~76.~~ On March 3, 2023, the Plaintiff ~~is~~ was informed by letter that she ~~is~~ was accepted into the Vaccine Injury Support Program confirming that the Pfizer Vaccine likely caused her serious and permanent Bell’s Palsy. Carrie was offered a modest

compensation from the Vaccine Injury Support Program limited to losses for the following injuries: (i) hearing, (ii) mimic (facial paralysis), and (iii) esthetic of the face.

III. CLAIMS

Public Duty

85.~~77.~~ The Defendants employed medical doctors, among others, to give the Plaintiff and Class Members advice, and held themselves out to the public as medical and public health experts, reporting on behalf of medical doctors and health experts and stepping into roles typically reserved for healthcare practitioners establishing a relationship of trust between themselves and the public during the Covid pandemic at a time when the public was vulnerable. The Defendants knew or ought to have known that the public, including treating physicians, nurses, pharmacists, the Plaintiff and Class Members, would be relying on their information for their health, medical advice, safety and protection. Further, the Defendants, through these governmental agents and agencies encouraged, and even implored, the public to trust the Defendants for medical advice and their health, safety, and protection during the Covid pandemic and specifically with respect to the Covid Vaccines. In so doing, the Defendants actions must be held to the standard and duty of care of medical doctors and other medical practitioners.

86.~~78.~~ The Federal Defendants failed to follow previous practices of the Government of Canada in withdrawing unsafe vaccines from the market upon confirmation that the vaccine products caused death or injury.

87.~~79.~~ Traditionally, for therapeutic product approvals in Canada the Minister of Health has a legal duty to:

a. Ensure that the therapeutic products approved for use in Canada are safe and effective under s. C.08.002(2)(g) and (h) of the *Food and Drugs Regulations*;

b. Recall therapeutic products from distribution where it is believed that a

therapeutic product presents a serious or imminent risk of injury to health under s. 21.3(1) the *Food and Drugs Act*;

c. Ensure that advertisement of therapeutic products are not false, misleading or deceptive or is likely to create an erroneous impression regarding its design, construction, performance, intended use, quantity, character, value, composition, merit or safety under s. 9(1) of the *Food and Drugs Act*; and

d. Disclose confidential business information about a therapeutic product without notifying the person to whose business or affairs the information relates or obtaining their consent, if the Minister believes that the product may present a serious risk of injury to human health under s. 21(2) of the *Food and Drugs Act*.

88.~~80.~~ However, the Minister of Health's traditional legal duty regarding safety and efficacy was removed for approval of the Covid Vaccines under the Interim Order. The Minister of Health did not have a legal duty to ensure that the Covid Vaccines approved for use in Canada were safe and effective. Instead, the duty of the Minister of Health in regard to the Covid Vaccine approval test was based on whether there was "sufficient evidence to support the conclusion that the benefits associated with the drug outweigh the risks, having regard to the uncertainties relating to the benefits and risks and the necessity of addressing the urgent public health need related to COVID-19" (s. 5(c) of the Interim Order). In all of the circumstances the Minister of Health was negligent, or in the alternative, intentionally failed in his duty.

89.~~81.~~ In respect of the Covid Vaccines, the Minister of Health maintained a legal duty to:

a. Recall therapeutic products from distribution where it is believed that a therapeutic product presents a serious or imminent risk of injury to health; ~~Ensure that advertisement of therapeutic products;~~

b. Ensure that advertisement of therapeutic products is not false, misleading or deceptive or is likely to create an erroneous impression regarding its

design, construction, performance, intended use, quantity, character, value, composition, merit or safety; and

c. Disclose confidential business information about a therapeutic product without notifying the person to whose business or affairs the information relates or obtaining their consent, if the Minister believes that the product may present a serious risk of injury to human health.

90.~~82.~~ The Minister of Health retained a public duty with respect to the Covid Vaccines, as described above, which it could not abrogate simply by the Interim Order. The Minister of Health had a legal duty to monitor, recall and update the public messaging and disclose confidential business information about the safety, ~~and~~ efficacy and interchangeability of the Covid Vaccines and the adequacy of their regulatory approval, and failed to do so when a serious or imminent risk of injury to health was perceived and in doing so fettered its discretion and was negligent and breached fiduciary duties in failing to carry out his duties.

91. Under the *Department of Health Act*, S.C. 1996, c. 8 (the "***Department of Health Act***"), the Minister of Health is obligated to promote and preserve the physical, mental, and social well-being of Canadians. This includes a statutory duty to collect, analyze, publish, and distribute public health data (Section 4(2)(h)) and to cooperate with provincial authorities to improve public health (Section. 4(2)(i)). The Minister of Health owed a duty of care to the Plaintiff, Class Members and all Canadians to provide accurate, timely, and comprehensive public health information, including data related to Covid Vaccines, to support informed decision-making and prevent foreseeable harm.

92. The Canadian Adverse Events Following Immunization Surveillance System was created to monitor the safety of marketed vaccines in Canada and to provide timely, transparent data to the public. However, the Canadian Adverse Events Following Immunization Surveillance System has not updated its website since January 5, 2024. Further, the data is not clearly presented, is difficult to locate on the government's website, and uses confusing death categorizations making it difficult to ascertain reported deaths. The lack of updates and confusing

reporting, suggests a deliberate effort by the Defendants to obscure critical information and mislead the public.

93. Informed consent requires access to accurate and current information. By failing to update safety reporting, revise public messaging, or respond transparently to emerging evidence of Covid Vaccine-related injuries, the Federal Defendant breached both its statutory duties and its duty of care to act in the public interest. This failure misled Canadians about the safety of the Covid Vaccines and caused foreseeable harm to the Plaintiff and Class Members. The Provincial Defendant further owed a duty of care under the *Public Health Act* to ensure that public health powers were exercised lawfully and within the limits prescribed by statute. However, for a period of at least two (2) years, the Provincial Defendant systematically imposed CMOH Orders that were later declared *ultra vires*. In doing so, the Provincial Defendant exceeded its statutory authority and breached its duty to the public by enforcing unlawful public health measures that caused foreseeable harm to the Plaintiff and Class Members.

94.~~83.~~ Meanwhile the Defendants engaged in Vaccine Campaigns that deceived the public by telling the public that the Covid Vaccines were “safe”, “effective” and/or of “high quality” rather than candidly telling the public the truth about the novel approval process for the Covid Vaccines. All Defendants were promoting the Covid Vaccines and were subject to the *Food and Drugs Act*. The Defendants had a legal duty to monitor and update the public messaging about the safety, ~~and~~ efficacy and interchangeability of the Covid Vaccines which ~~it~~ they failed to do. The Minister of Health failed to exercise his duty to ensure the advertisements regarding the Covid Vaccines were not false, misleading or deceptive and in doing so fettered its discretion and was negligent in not protecting the public from the Covid Vaccines.

95.~~84.~~ The Defendants established a relationship of trust with the Plaintiff and the Class Members, breached their legal duties ~~and~~ owed to the Plaintiff and the Class Members, and the Plaintiff and the Class Members relied on the representations made by the Defendants when taking the Covid Vaccine and the Plaintiff and Class Members have suffered significant physical, emotional, psychological damages and other damages as a result.

96.~~85.~~ The Defendants acted negligently, or in the alternative, deliberately manipulated Covid Vaccine adverse event data by either refusing to allow physicians to submit adverse reports or deleting such reports to the Adverse Events Following Immunization ("**AEFI**") or taking the AEFI website offline.

97.~~86.~~ The Defendants negligently, or in the alternative intentionally, advised the public that they could mix-and-match the Covid Vaccines without any information, evidence or assurances from the Covid Manufacturers about the Covid Vaccine mix-and-match immunization strategy. There was no scientific basis or evidence that a mix-and-match immunization strategy was safe, effective or appropriate. The Defendants knew, or ought to have known that the Plaintiff, and some of the Class members relied on the Defendants representations that the mix-and-match Covid Vaccine strategy was safe, effective or appropriate and were harmed and injured as a result.

Negligent Misrepresentation

98.~~87.~~ The Defendants breached the standard of care by making representations regarding the safety of the Covid Vaccines that the Defendants knew or ought to have known were inaccurate. Alternatively, the Defendants made the representations recklessly when the Defendants had insufficient information, while representing themselves to the public as having sufficient information.

99. When the Covid Vaccines were publicly released by the Defendants', the NACI issued formal directives and warnings stating the following:

a. Individuals receiving Covid Vaccines should be informed of all risks;

b. There should be no mixing of Covid Vaccines; and

c. Informed consent should include discussion about risks and symptoms.

100. The Defendants' public communications regarding the Covid Vaccines omitted the NACI cautions and recommendations.

101. As early as April 2021, the Defendants knew or ought to have known, based on Pfizer's trial data, that the Covid Vaccines were not safe, which revealed:

a. The Pfizer Covid Vaccine caused one thousand two hundred and twenty three (1,223) deaths and forty two thousand and eighty six (42,086) injuries, most occurring within four days of vaccination;

b. 45% of the injured were aged 18 to 50, with 71% being female, a group at negligible risk of death from Covid;

c. 96.875% of pregnant women reported losing their babies post-Pfizer Covid Vaccine injection; and

d. Adverse events spanned nine pages, listing one thousand two hundred and thirty six (1,236) different diseases caused by the Pfizer Covid Vaccine.

102. At all material times the Defendant knew or should have known that:

a. Evidence from Covid Vaccine Manufacturers and credible scientific and medical sources demonstrated harm following the Covid Vaccines and only modest reducing of the Covid infection;

b. The Covid Vaccines were not designed to stop the transmission from the Covid virus;

c. mRNA Covid Vaccines cause significant harm, including myocarditis and pericarditis in males aged 12 to 24, with lifelong and potentially fatal consequences;

d. The Covid Vaccine clinic trials were not designed to detect rare or long-term adverse impacts, leaving such risks undetermined;

e. Children faced extremely low risk of severe Covid infection, with insufficient evidence that Covid Vaccines provided meaningful protection for them;

f. Naturally acquired immunity was superior to vaccine-induced immunity.

103. By presenting themselves as health experts, the Defendants prevented physicians from fully informing patients of the risks, benefits, and alternatives to

the Covid Vaccines, compromising informed consent. Physicians and the public were led to believe that the Defendants' orders and recommendations were medically sound and reliably advanced public safety. In doing so, the Defendants misled the public, and the medical profession, by overstating the safety and efficacy of the Covid Vaccines and suppressing reasonable dissent. These representations and guidance persisted well after the Covid pandemic.

104. Additionally, the Defendants misrepresented the fundamental nature of the Covid Vaccines to the public. Specifically, they should have disclosed that the Covid Vaccines did not function as vaccines in the traditional sense—intended to confer immunity and halt transmission—and clarified that, particularly with the introduction of boosters, they constituted an ongoing medical intervention rather than a conventional vaccine.

105. This duty not to misrepresent the Covid Vaccines extended to the Defendants' characterization of the mRNA technology. The Defendants knew, or ought to have known, that the "m" in "mRNA" referred to "modified" RNA, a novel approach distinct from the more traditionally understood and studied "messenger" RNA. Nevertheless, the Defendants negligently persisted in misrepresenting both the nature of the vaccines and the significance of the "m" in mRNA, thereby misleading the public and medical professionals alike and undermining informed decision-making.

106. Mixing drugs, including vaccines, is generally advised against due to the risks of unpredictable side effects and harmful interactions. Despite this, and without conclusive scientific evidence supporting the safety or efficacy of mixing Covid Vaccines, the Defendants publicly endorsed and promoted interchangeability. The Defendants intended for health care providers, including doctors, nurses, and pharmacists, to rely on their guidance that mixing Covid Vaccines was safe and effective. Health care providers administered mixed Covid Vaccines based on this guidance. The Defendants knew, or ought to have known, of the risks of mixing drugs and the lack of verified evidence supporting its safety. The Defendants instead publicly promoted and directly encouraged the practice of mixing different manufacturers' Covid Vaccines, knowing and intending that the public would rely on their assurances. Specifically, the Federal Defendants had

access to information in the supply contracts with Vaccine Manufacturers and none of them stated it was safe to interchange their vaccine with another manufacturer's Covid Vaccine.

107. The Minister of Health breached the duty of care owed to the Plaintiff and all Canadians by negligently failing to publish accurate and timely Covid Vaccine data, as required under the *Department of Health Act*. The Minister of Health knew or ought to have known that Canadians, including the Plaintiff and Class Members, relied on such information to assess health risks and make decisions affecting their health and well-being. Specifically, the Minister of Health omitted or delayed the release of regular, transparent data on vaccination outcomes and adverse vaccine reactions, providing incomplete or misleading information that misrepresented the severity of the adverse impacts from the Covid Vaccines.

108. The Plaintiff and Class Members trusted and relied on the Defendants' assurances that the Covid Vaccines were "safe", meaning there would not be serious adverse events, and that mixing Covid Vaccines was safe and medically endorsed. The Defendants assumed a duty of care to the public by deliberately usurping and supplanting the NACI recommendations and the express statements of Covid Vaccine Manufacturers prohibiting the interchangeability of their vaccines, thereby negligently overriding authoritative guidance and manufacturer-specific warnings, along with direct medical advice from professionals, intended to ensure public safety. In so doing, the Defendants knowingly or recklessly disregarded established standards of care, intending to be relied upon, and were so relied on by the Plaintiff and Class Members, exposing them to foreseeable risks of harm.

109. It was reasonable for the public to trust and rely on the Defendants' advice, as the statements were made by the Defendants who were perceived as having the expertise and authority to provide sound medical guidance. The Defendants knowingly and purposefully misled the public regarding Relative Risk Reduction rather than Absolute Risk Reduction, even in the face of clear evidence that this approach was misleading. They misrepresented Relative Risk Reduction as unequivocal "risk reduction" in plain language, whereas Absolute Risk Reduction, a more accurate and reliable metric, measures the actual risk reduction

experienced by individuals and is essential for discussions between doctors and patients to ensure the Plaintiff and Class Members can make informed health decisions. In contrast, Relative Risk Reduction reflects only proportionate risk reduction, irrespective of individual risk levels. By deliberately omitting Absolute Risk Reduction and failing to disclose associated risks, the Defendants misled Class Members about the true benefits and safety of the Covid Vaccines.

110. Despite all the information to the contrary, the Defendants promoted the Covid Vaccines indiscriminately, treating all individuals as equally at risk. The Defendants usurped the duty of medical doctors to ensure informed consent and to disclose risks and dangers and instead issued broad medical guidance to all, assuming a duty of care to the public not to cause harm and to ensure the Covid Vaccines were safe, yet they breached this duty by aggressively promoting vaccination for all, including infants, children, and pregnant women. This approach failed to incorporate a proper risk-benefit analysis, misrepresented the safety, efficacy, and interchangeability of the Covid Vaccines, and disregarded the need to protect those most vulnerable to Covid infection.

111. The Defendants' statements, even if intended as public health policy, were presented to the public as medical advice or scientific fact without appropriate qualification. Having assumed a duty of care by positioning themselves as authoritative sources of health guidance, and enforcing coercive public health orders, the Defendants breached this duty by misrepresenting the nature and basis of their statements, creating the false impression that they were grounded in medical expertise or scientific research rather than policy objectives. This misrepresentation was intended to compel the public to comply under a mistaken belief in the statements' scientific validity, exposing them to foreseeable harm to the point where most people complied and at rates far in excess of vaccination programs, thereby negating any consent.

112. The Defendants owed a duty of care to the public when they compelled the public to participate in the government-mandated and government-sponsored Covid vaccination programs. The Defendants' direct intervention in mandating and compelling the Plaintiff and Class Members to receive the Covid Vaccines, created a proximate relationship and a foreseeable risk of harm. By undertaking

these measures and assuming these roles, the Defendants assumed responsibility for ensuring the safety and efficacy of the Covid Vaccines and for mitigating foreseeable risks of harm. Despite this, they failed to adjust their guidance even after the Provincial and Federal Defendants rescinded all Covid-related emergency measures by April 2022 and June 2023, respectively, long after the justification for such coercive interventions had ceased to exist.

113. This duty was further reinforced by the Federal Defendant's creation of the Vaccine Injury Support Program, which acknowledged the high potential for Covid vaccine-related harm and the government's responsibility to address injuries resulting from the Covid Vaccines.

114. Moreover, the Defendants made negligent representations promoting the safety, effectiveness and interchangeability of the Covid Vaccines, despite lacking statutory authority to compel vaccination. These representations were made without lawful mandate, further breaching the duty of care owed to the public.

115.~~88.~~ The Defendants, individually and collectively, made false, inaccurate, or misleading representations, including but not limited to:

a. The Covid Vaccines were safe and fit for ~~its~~ their intended use;

b. The Covid Vaccines were effective for ~~its~~ their intended use;

c. The Covid Vaccines were of merchantable quality;

d. The Covid Vaccines had been adequately tested to ensure that the risks or adverse reactions were likely to occur with the appropriate range of tolerance;

e. The mix-and-match Covid Vaccine strategy or "interchangeability" was safe, effective and appropriate;

f. The Covid Vaccines were subject to standard regulatory due diligence under the *Food and Drugs Act*;

g.~~f.~~ The representations made in the Vaccine Campaigns; and

h.g. Such further and other representations as will be particularized in the course of this proceeding.

(collectively the "**Representations**").

116.~~89.~~ The Representations were made by the Defendants when the Defendants knew or ought to have known they were inaccurate. Alternatively, the Representations were made negligently or recklessly when the Defendants had insufficient information, while representing themselves to the public as having sufficient information. Further the Defendants had a duty to update the Representations and messaging about the safety and efficacy of the Covid Vaccines which they also failed to do.

117.~~90.~~ The Defendants breached the standard of care and negligently misrepresented the safety of the Covid Vaccines and did not disclose the risks associated with the Covid Vaccines or the bypassing of standard regulatory due diligence which included serious injury and death.

118.~~91.~~ The Defendants' Representations deceived the public and abused their special relationship of trust by making the Representations rather than candidly telling the public the truth about the Covid Vaccines. The Defendants intentionally misled the public about the Covid Vaccines claiming they were "safe", "effective" and of "high quality" despite not being required to pass any formal safety or efficacy testing. In addition to making the Representations, the Defendants urged the Plaintiff and the Class Members to obtain any available vaccine at the very first opportunity.

119.~~92.~~ The Defendants acted negligently and recklessly by suppressing information related to adverse events from the Covid Vaccines and suppressing opinions of medical and scientific experts, from Canada and around the world, who raised concerns about the Covid Vaccines and disagreed with the Representations made by the Defendants.

120.~~93.~~ The Defendants engaged in strategic and coordinated messaging, which was false, misleading, and deceptive. They also engaged in fear and censorship-based Vaccine Campaigns, designed to entice, implore, shame and coerce

Canadians to take the Covid Vaccines. Because the Defendants, and each of them, agreed on a common purpose to brand and advertise the Covid Vaccines as “safe”, ~~and~~ “effective” and “interchangeable” they are jointly and severally liable.

121.~~94.~~ The Defendants provided the Covid Vaccine to the public at no cost, and the Provincial Defendant even offered monetary rewards, in an effort to entice and encourage the public to take the Covid Vaccines thereby vitiating the informed consent required to treat the Plaintiff and the Class.

122.~~95.~~ The Plaintiff and the Class state~~s~~ that they were in a proximate relationship of trust to the Defendants as a citizen, taxpayer and consumer of the information offered by the Defendants.

123.~~96.~~ The Plaintiff and the Class claim~~s~~ that the Defendants owe a duty of care to accurately inform the Plaintiff and the Class about the harms and dangers of the Covid Vaccines.

124.~~97.~~ Each of the Defendants knew, or ought to have known, that the Plaintiff and the Class would rely upon the Representations made. Opting to be administered the Covid Vaccines, the Plaintiff and the Class relied upon the Representations made by each of the Defendants, to their detriment.

125.~~98.~~ Given that the information about the Covid Vaccines was negligently misrepresented by the Defendants to the public, including the Plaintiff and the Class Members, it vitiated the Plaintiff’s and the Class Members’ ability to provide informed consent.

126.~~99.~~ But for the negligent Representations made by the Defendants, the Plaintiff and the Class Members would not have taken the Covid Vaccines. But for the negligent Representations made, the Plaintiff and the Class Members would not have suffered injury or death.

Negligence and Wrongful Death

127.~~100.~~ The Federal Defendant owed a duty of care to the Plaintiff and Class Members when exercising its operational function of independent review of submission by

the Vaccine manufacturers to determine, based only on scientific and medical evidence that the Covid Vaccines were safe, ~~and~~ effective and interchangeable.

128.~~101.~~ The Federal Defendant owed a duty of care to the Plaintiff and Class Members when exercising its operational function authorizing use of the Covid Vaccines in Canada.

129.~~102.~~ The Defendants owed a duty of care to the Plaintiff and Class Members regarding the safety, and efficacy and interchangeability of the Covid Vaccines.

130.~~103.~~ The Defendants owed a duty to warn the Plaintiff and Class Members of the risks associated with the safety~~, and~~ efficacy and interchangeability of the Covid Vaccines and the bypassing of standard regulatory due diligence.

131.~~104.~~ The Defendants owed a duty to the Plaintiff and Class Members to accurately inform them of all risks associated with the Covid Vaccines.

132.~~105.~~ The Defendants owned a duty of care to the Plaintiff and Class Members to inform them of the risks and dangers associated with being administered two, or more, Covid Vaccines from two, or more, different Vaccine Manufacturers.

133. The Defendants breached the standard of care, either jointly or severally, by:

a) Minimizing and misrepresenting the dangers and adverse effects that Class Members would experience from receiving the Covid Vaccines;

b) Failing to issue recalls or warn the Plaintiffs and Class Members about known or emerging dangers and adverse effects associated with the Covid Vaccines, undermining the informed consent process for individuals receiving the Covid Vaccines;

c) Failing to adequately monitor the use and adverse effects of the Covid Vaccines through ongoing, unbiased, and independent data gathering and studies;

d) Encouraging widespread Covid Vaccine uptake using coercive measures and incentives;

e) Funding the supply and administration of Covid Vaccines to promote broad distribution and public acceptance;

f) Recklessly promoting the widespread use of Covid Vaccines through negligent misrepresentations about their safety, efficacy, interchangeability, and due diligence of the regulatory approval and fear-based messaging designed to compel public compliance.

134. The Defendants assumed a duty of care by making public health statements intended to be relied upon by the public bypassing and usurping the role of the medical profession. The Federal Defendant further assumed this duty by establishing the Vaccine Injury Support Program, a publicly funded initiative to compensate individuals harmed by Covid Vaccines. The Provincial Defendant similarly assumed a duty of care, as it knew or should have known of the program since its inception.

135. The Defendants knew or ought to have known that their negligence would result in harm to the Plaintiff and Class Members. But for the Defendants' breaches of their duty of care, the Plaintiff and Class Members would not have received the Covid Vaccines. As a direct result of the Defendants' breaches, the Plaintiff and Class Members suffered injuries and damages. The harm caused was foreseeable, and the Defendants' actions caused the injury and harm to the Plaintiff and Class Members.

Misfeasance/Abuse of Public Office

136.~~106.~~ As a department, Health Canada is responsible for administering acts and regulations, and for implementing government-wide regulatory initiatives. Health Canada was responsible for discharging the operational role of regulatory approval, monitoring, and compliance of Covid Vaccines for use in Canada.

137.~~107.~~ The Plaintiff and Class Members plead that Health Canada was recklessly indifferent or willfully blind in discharging its responsibilities of regulatory approval and oversight of the Covid Vaccines by, *inter alia*:

a. Failing to reasonably and accurately review, interpret and report on the clinical data presented by the Vaccine Manufacturers in relation to the

approval of the safety~~, and~~ efficacy and interchangeability of the Covid Vaccines;

b. Recommending the Covid Vaccines for approval for use in Canada;

c. Failing to regulate, monitor, review, interpret and report on data presented by the Vaccine Manufacturers in relation to new data which became available following the approval of the safety~~, and~~ efficacy and interchangeability of the Covid Vaccines; and

d. Failing to recommend or issue revocation of compliance to the Vaccine Manufacturers following public release of data showing that the risks of the Covid Vaccines were outweighed by the minimal efficacy of the Covid Vaccines.

138.~~108.~~ The Plaintiff and Class Members plead Health Canada's reckless indifference or wilful blindness produced the foreseeable result of providing false representation to the public that the Covid Vaccines were "safe", and "effective" or "interchangeable" and caused people to undergo a medical treatment or procedure without having the opportunity to provide informed consent.

139.~~109.~~ The Minister of Health is responsible for the oversight and direction of the Department of Health Canada and the Public Health Agency of Canada which were key agencies coordinating the Canadian government's response to the Covid pandemic.

140.~~110.~~ The Plaintiff and Class Members plead the federal Minister of Health was recklessly indifferent or willfully blind in discharging its responsibilities of approval, oversight, direction, and control over the vaccine approval process and Health Canada in relation to the regulatory approval and oversight of the Covid Vaccines by, *inter alia*:

a. Issuing a certificate of compliance to the Vaccine Manufacturers allowing the Covid Vaccines to be purchased and distributed to persons in Canada for use;

b. Failing to maintain oversight and control over Health Canda in relation to

its regulatory responsibility for oversight, monitoring, evaluation, and assessment of the Covid Vaccines;

c. Representing to Canadians in public statements and press releases that the Covid Vaccines were safe~~, and~~ effective and interchangeable, despite the Defendants possessing data to the contrary; and,

d. Failing to revoke the certificate of compliance issued to the Vaccine Manufacturers following the release of clinical data showing that the risks of the Covid Vaccines were outweighed by the minimal efficacy of the vaccination.

141. The Defendants, through coordinated public health messaging, created a narrative of fear and uncertainty surrounding the Covid pandemic. This narrative heightened public vulnerability and led individuals to rely heavily on the statements and directives issued by the Defendants. In response to the fear they helped foster, the Defendants presented the Covid Vaccine as the solution to alleviate the public's concerns, further entrenching reliance on their guidance. By positioning the Covid Vaccine as the sole remedy to the crisis they had amplified, the Defendants coerced compliance, effectively removing individuals' ability to make fully informed decisions without duress in a manner that constitutes misfeasance in public office.

142. Dr. Theresa Tam and Dr. Deena Hinshaw, acting as agents of the Defendants, represented themselves to the public as doctors, and as such, provided medical advice regarding Covid Vaccines. This medical advice was, on its face, negligent. Furthermore, by positioning themselves as the sole authoritative source on Covid Vaccine safety and efficacy, Dr. Tam and Dr. Hinshaw effectively suppressed dissenting medical opinions and contributed to an environment where informed consent was not meaningfully obtained.

143. By holding themselves out as medical professionals, Dr. Tam and Dr. Hinshaw led the public to rely on their guidance rather than consulting their own physicians. When individuals sought medical advice from their own doctors, many physicians feared professional penalties for providing recommendations that contradicted the guidance issued by the Defendants'. The Defendants now

assert that no duty of care existed for medical advice given by Dr. Tam and Dr. Hinshaw.

144. The Minister of Health, as a public officer responsible for disseminating public health information, knowingly or recklessly disregarded the statutory duty to provide transparent Covid Vaccine data, including statistics on adverse reactions and vaccination outcomes as required under the *Department of Health Act*. This deliberate or reckless omission constituted an abuse of power, as the Minister of Health's failure undermined public trust, prevented informed decision-making, and exposed the Plaintiff and Class Members to foreseeable health risks and injuries. The Minister of Health's conduct, in the context of coordinated federal-provincial messaging, was in bad faith or with deliberate indifference to the harm caused to Canadians relying on incomplete or misleading Covid Vaccine information.

145. On January 28, 2025, the Provincial Defendant issued a report entitled "Alberta's COVID-19 pandemic response: Alberta COVID-19 Pandemic Data Review Task Force: Final Report" (the "**Alberta Government Covid Task Force**"), commissioned by Premier Danielle Smith to evaluate the Alberta government's handling of the Covid pandemic. The Alberta Government Covid Task Force on behalf of the Alberta government made alarming admissions, including, but not limited to:

1) Pfizer's trial data revealed a 96.875% spontaneous abortion rate in pregnant women injected with the Pfizer Covid Vaccine;

2) Covid Vaccines were linked to deaths, injuries, and a risk of myocarditis, with long-term safety remaining unknown due to rapid rollout and insufficient follow-up;

3) That far from being safe and effective, the interchangeability of the Covid Vaccines created exponentially higher risk of myocarditis in certain populations;

4) Covid Vaccines did not prevent the transmission of the Covid virus;

5) Public messaging promoted coercive Vaccine Orders and downplayed

infection-acquired immunity, falsely prioritizing vaccination over natural immunity;

6) In order to obtain informed consent the risks must be discussed when the Covid Vaccines are administered;

7) There was secretive decision-making process, in which the CMOH and Cabinet tightly controlled data, limiting external input and disrupting data-sharing between Alberta Health and AHS;

8) Servants and employees of the Provincial Defendant obstructed or refused to provide information to the Alberta Government Covid Task Force deliberately concealing evidence related to Covid Vaccine safety;

9) Physicians' independence was undermined by the College of Physicians and Surgeons of Alberta, restricting their ability to ensure informed consent by limiting disclosure of Covid Vaccine risks, benefits, and alternatives; and

10) The Provincial Defendant failed to protect physicians from interference with individualized medical care and people being able to provide informed consent.

146. The Alberta Government Covid Task Force made recommendations to the Provincial Defendant regarding Covid Vaccine policies, including:

1) Halting the administration of mRNA Covid Vaccines unless healthcare providers fully disclose the risks and benefits to the public;

2) Discontinuing the use of Covid Vaccines in healthy children and teenagers, consistent with policies in Denmark, Sweden, Norway, Finland, and the United Kingdom;

3) Conducting further research into the safety and effectiveness of Covid Vaccines before allowing continued use;

4) Establishing dedicated support services for Albertans who have sustained vaccine-related injuries;

5) Allowing the Government of Alberta to opt out of federal health policies pending provincial review; and

6) Initiating a public inquiry into external influences on regulatory bodies, including funding sources, partnerships, and collaborations with pharmaceutical companies in shaping public health policies and guidelines.

147. To this day, notwithstanding the end of all Covid-related public health emergency measures, the Defendants have not implemented the recommendations set out in the Alberta Government Covid Task Force. Instead of acting on the Task Force's findings, the Defendants have ignored critical safety concerns and failed to take corrective action, issue warnings, and continue to conceal relevant Covid Vaccine safety data including adverse vaccine related harms within days of injection with any Covid Vaccine related product in a manner amounting to a breach of a public duty and malfeasance by both the current CMOH of Alberta and Dr. Theresa Tam.

148. The Defendants implemented widespread Vaccine Campaigns over several years, enacting Vaccine Orders that failed to adhere to established evidence-based decision-making. This approach undermined informed consent and resulted in preventable harm. By suppressing known and potential risks of the Covid Vaccines, enforcing Vaccine Orders without demonstrable benefit, silencing dissenting voices, and withholding critical data, the Defendants endangered public welfare, conduct that constitutes misfeasance in public office.

149. The Defendants did not possess statutory authority to mandate vaccination. This approach undermined informed consent and resulted in preventable harm. Rather than enacting legislation, the Defendants imposed public health measures through Vaccine Orders, repeated the Representations and launched Vaccine Campaigns asserting the safety, efficacy, and interchangeability of the Covid Vaccines. They did so knowing that a fearful and uncertain public would follow their orders and rely on their guidance.

150. The Defendants exercised authority they did not lawfully possess and used their positions of influence to direct personal medical decisions at a time when the

public was vulnerable due to the fear-driven messaging propagated by the Defendants themselves. These actions fundamentally violated the principle of informed consent, which requires individuals to receive accurate, complete, and balanced information before making medical decisions voluntarily and without coercion.

151. Forcing or coercing individuals to undergo medical treatment, including vaccination, is unlawful without clear statutory authority or the preservation of informed and voluntary consent. The Defendants' actions, including the implementation of the Vaccine Orders, were so coercive that individuals were effectively compelled to be vaccinated. By threatening or removing civic liberties, such as limiting access to public and private spaces, and prohibiting travel by plane, train, or boat, the Defendants eliminated the conditions necessary for voluntary medical choice. This state-imposed pressure, driven by misinformation and fear, constitutes a serous and egregious abuse of power.

152. In doing so, the Defendants engaged in an abuse of power, acting in bad faith and with reckless disregard for the legal limits of their authority. Neither the Federal nor the Provincial Defendant enacted legislation to authorize mandatory vaccination, and as a result, neither had the statutory authority to mandate or compel it. The Defendants nonetheless promoted and supported coercive Vaccine Orders that interfered with individual medical autonomy. The misconduct of the Provincial Defendant is further compounded by the fact that the CMOH Orders, including the Vaccine Exemption Restriction Program, were declared *ultra vires*.

153. Although the Vaccine Injury Support Program exists, the Defendants have failed to provide full restitution or transparency to individuals injured by the Covid Vaccines. As a result, the Plaintiff and Class Members have been left without an adequate or timely remedy for their losses.

154.~~111.~~ The Plaintiff and Class Members plead the Defendants' reckless indifference or willful blindness produced the foreseeable result of instilling a false representation to the public that the Covid Vaccines were safe, ~~and~~ effective and interchangeable.

155.~~112.~~ The Plaintiff and Class Members plead the Defendants' reckless indifference or willful blindness produced the foreseeable result of injury to the public, including the Plaintiff and the Class Members.

156.~~113.~~ The Plaintiff and Class Members plead that the conduct of the Defendants ~~were~~ was recklessly indifferent or willfully blind in the exercise of public functions.

157.~~114.~~ The Plaintiff and Class Members state that the Defendants were reckless or willfully blind as to the fact that this conduct was unlawful and likely to injure the public, including the Plaintiff and Class Members. As such, the Plaintiff pleads that the Defendants are liable for misfeasance in public office.

Breach of Fiduciary Duty

158.~~115.~~ The federal Minister of Health abused its public office, acted in bad faith and intentionally misled the public about the Covid Vaccines by way of a novel approval scheme that did not require evidence that the Covid Vaccines be either "safe", "effective" or of "high quality". In direct contradiction with the public messaging from the Minister of Health, the novel Covid Vaccines approvals, in fact, lowered the approval standards.

159.~~116.~~ Under the Interim Order, the requirements for approval of the Covid Vaccines were altered such that the approvals were given based on the conclusion that the benefits associated with the Covid Vaccines outweigh the risks making the new Covid Vaccines approval a subjective test. There must be strict objective evidence of ~~both~~ safety, ~~and~~ efficacy and interchangeability. It must also be objectively clear that the benefits outweigh the risks before a new drug is approved. It can only be objectively clear that the benefits of a drug outweigh the risks when the benefits and risks are objectively known.

160.~~117.~~ Further, in the novel approval process for the Covid Vaccines, the Minister of Health relied on Relative Risk Reduction over Absolute Risk Reduction metrics. In communicating the risks and benefits associated with the Covid Vaccines, the more accurate and reliable measure for providing medical information to the public, and the Plaintiff and Class Members so they could make informed health decisions is Absolute Risk Reduction. Relative Risk Reduction analysis is the

same generally irrespective of their level of risk and therefore suggests higher benefits than really exist. The Minister of Health abused its public office, acted in bad faith and intentionally mislead the public about the risk and benefit metric used for approving the Covid Vaccines.

161.~~118.~~ The Minister of Health and Alberta's CMOH abused their public office, acted in bad faith and intentionally mislead the public in stating that the Covid Vaccines would stop the public from getting infected and stop transmission. The Vaccine Manufactures did not study these clinical endpoints and there was no data to support such representations.

162.~~119.~~ The Minister of Health and Alberta's CMOH abused their public office, acted in bad faith, and negligently, or in the alternative intentionally, advised the public that they could mix-and-match the Covid Vaccines, which the Plaintiff and some of the Class Members did, with absolutely no evidence of such a practice was safe, effective or appropriate. There was no scientific basis on which to recommend such a practice. In fact, the World Health Organization issued a strong warning against Canada's mix-and-match approach for the Covid Vaccines and called it a "dangerous trend".

163.~~120.~~ A fundamental safeguard for therapeutic products allows the Minister of Health to pause or recall therapeutic product approval if new evidence raises a safety or efficacy concern or if fraud is discovered. The Minister of Health should not have relied on misleading representations from the Vaccine Manufacturers. The Minister of Health ignored the Vaccine Manufacturers' own evidence which demonstrated that the harm caused by the Covid Vaccines could exceed its benefit. The Minister of Health acted in bad faith for not recalling or pausing the Covid Vaccines and continuing to recommend the Covid Vaccines despite increased safety and efficacy concerns.

164.~~121.~~ The Interim Order allowed unapproved Covid Vaccines to be imported into Canada as long as the Canadian Government was the purchaser. The rationale was to deal with the Covid pandemic by purchasing the unproven Covid Vaccines so that they would be available for distribution once approved for use, thereby creating a serious conflict of interest. Meanwhile, the Minister of Health

abused its public office, acted in bad faith, and intentionally coordinated with the Vaccine Manufacturers to keep the Covid Vaccine agreements confidential and to indemnify the Vaccine Manufacturers for negligence and against any financial liability in the event of vaccine related harm.

165.~~122.~~ The Defendants~~, and all of them,~~ intentionally censored and suppressed data relating to adverse events and injuries from the Covid Vaccines to influence public confidence in Covid Vaccines and maintain trust in the public health authorities. The Defendants knew or ought to have known of the increased risk from the Covid Vaccines through information submitted by the Vaccine Manufacturers, and from medical and scientific experts that raised this issue, but that information was not provided to the public, and in fact it was intentionally censored and suppressed, which did not allow the public, including the Plaintiff and Class Members, to make an independent, informed assessment about whether the Covid Vaccines were a necessary or safe therapeutic intervention.

166.~~123.~~ Further, the Minister of Health and Alberta's CMOH made it difficult for the public to report severe adverse events and injuries from the Covid Vaccines to the public health authorities in an effort to censor and suppress data relating to adverse events and injuries from the Covid Vaccines.

167. Despite the establishment of the Vaccine Injury Support Program, which implicitly acknowledges Covid Vaccine injuries, the Defendants failed to fully disclose the extent of these risks or provide adequate compensation through this program to individuals harmed by the Covid Vaccines. By failing to act transparently and in the best interest of those harmed, the Defendants breached their fiduciary duty to those harmed by the Covid Vaccine necessitating a court process for objective and transparent redress by the Defendants.

168.~~124.~~ The Minister of Health and Alberta's CMOH intentionally engaged in conduct that it knew was unlawful or was negligent in a manner likely to cause harm to the public, including the Plaintiff and Class Members.

Conspiracy to Commit Assault and Battery

169.~~125.~~ At all material times, the Defendants conspired or acted in concert to prevent the

public from acquiring knowledge of the risks and dangers associated with Covid Vaccines, and conspired to commit assault and battery in circumstances where they knew or ought to have known that harm and healthcare costs would result from acts done in furtherance of the conspiracy, concert of action and common design.

170.~~126.~~ This conspiracy, concert of action and common design was entered into or continued at or through various public health offices and officers representing the Defendants.

171.~~127.~~ The conspiracy, concert of action and common design was continued when:

a. Some, or all, of the Defendants agreed to suppress, or did suppress, adverse events data related to the Covid Vaccines so as to avoid any admission, directly or indirectly, concerning the risks of the Covid Vaccines; ~~and~~

b. Some, or all, of the Defendants misrepresented to the public that the Covid Vaccines were safe, ~~and~~ effective and interchangeable along with the other Representations made to the public, including the Plaintiff and Class Members;

c. Some, or all, of the Defendants maintained a united front minimizing the dangers and risk of injury and death from the Covid Vaccines; and

d. Some, or all, of the Defendants misrepresented to the public, including the Plaintiff and Class Members, that there was no causal connection between the Covid Vaccines and injury and death.

172.~~128.~~ ~~Some, or all~~ One or both of the Defendants, coordinated with international governing bodies and pharmaceutical companies to recommend, encourage and promote the pharmaceutical industry's positions on vaccines and health issues in order to mislead the Plaintiff and Class Members on the safety, ~~and~~ efficacy or interchangeability of the Covid Vaccines.

173. A medical intervention, such as vaccination, constitutes a civil assault and battery under the law of Canada unless performed with lawful authority or informed

consent. The Defendants acted in a coordinated manner to coerce compliance by enacting restrictive Vaccine Orders, disseminating misleading information, and withholding critical information about the risks of the Covid Vaccines. These actions were caried out through unified federal and provincial public health messaging, while simultaneously restricting the civil liberties of those who declined vaccination. Canadians were injected under pressure and through undue influence, without being provided accurate and complete risk information, in a manner that nullified informed consent and amounted to a conspiracy to commit assault and battery.

174. Despite having the legislative authority to enact laws explicitly mandating vaccination, the Defendants deliberately chose not to do so. Instead, they coordinated efforts to impose indirect mandates, systematically suppressed reports of Covid Vaccine-related injuries by failing to establish accessible adverse event reporting mechanisms and delayed public acknowledgment of harms. They withheld critical data on the scope, severity, and prevalence of these injuries from the public. Instead of providing transparency, they deliberately concealed key information under the guise of public health measures and protecting the public health.

175. The Defendants knowingly coordinated efforts to mislead the public about the Covid Vaccines, suppress evidence of harm, and coerce vaccination without lawful authority or informed consent. This coordinated campaign to deceive the public, conceal information, and coerce compliance resulted in Canadians being subjected to a medical intervention under duress and false pretenses that amounts to a conspiracy to commit assault and battery.

176.~~129.~~ In furtherance of the tort of conspiracy, concert of action and common design, ~~some, or all~~ one of both of the Defendants:

a. Disseminated false and misleading information regarding the risks of the Covid Vaccines including making false and misleading submissions to the public;

b. Refused to admit that the Covid Vaccines caused injury or death;

c. Suppressed and concealed material facts, research and data regarding the risks of the Covid Vaccines such that all limitation of actions are suspended;

d. Participated in a public relations program on vaccines and health issues with the object of promoting the Covid Vaccines, protecting uptake of Covid Vaccines and protecting Covid Vaccines from attack by misrepresenting the link between Covid Vaccines and injury or death; and

e. Offered financial and other initiatives in order to induce uptake of the Covid Vaccines.

177.~~130.~~ Further particulars of the manner in which the conspiracy, concert of action and common design was entered into or continued, and of the Covid Vaccine related wrongs committed by the Defendants in Canada in furtherance of the conspiracy, concert of action and common design are within the knowledge of the Defendants.

178.~~131.~~ The Defendants through repeated representation and the expenditure of millions of dollars in campaigns to promulgate the Representations intended that the public, including the Plaintiff and the Class Members, should act in reliance upon the Representations.

179.~~132.~~ The public, including the Plaintiff and the Class Members, acted in reliance of the Defendants Representations when obtaining the Covid Vaccines.

180.~~133.~~ The public, including the Plaintiff and the Class Members, acting in reliance upon the Defendants' repeated Representations, obtained the Covid Vaccines which led to injury and death to some.

181.~~134.~~ As a result of the aforementioned conspiracy, concert of action and common design, persons in Alberta consented to the Covid Vaccines approved, distributed and promoted by the Defendants and thereby suffered injury or death from the Covid Vaccines.

182.~~135.~~ The Defendants' tortious conduct and breaches of fiduciary duty as plead above herein were the legal cause of the Plaintiff's and the Class Members' damages and the damages suffered are compensable in law.

Concealment of Facts

183.~~136.~~ The Defendants willfully concealed the fact of their wrongdoing from the Plaintiff and Class Members, and the fact that the injuries suffered by the Plaintiff and the Class from the Covid Vaccines were caused or contributed to by the Defendants' acts or omissions. Under the *Department of Health Act*, the Minister of Health is required to publish public health information to enable informed decision-making and protect Canadians from health risks. The Minister of Health's deliberate omission of data regarding adverse reactions to the Covid Vaccines supressed critical risks information from the public. The Provincial Defendant enacted *ultra vires* CMOH Orders that effectively compelled vaccination, presenting politically driven decisions as public health mandates and concealing their true nature from the public. The Defendants' failure to provide accurate, complete, and essential public health information left the Plaintiff and Class Members deprived of their ability of make informed medical decision and understand the true risks of the Covid Vaccines. The Plaintiff and Class Members plead and rely on the doctrine of concealment and equitable fraud.

184.~~137.~~ In addition, or in the alternative, the injuries suffered by the Plaintiff and the Class Members from the Covid Vaccines have a latency period and do not arise until years after exposure. The Plaintiff and Class Members had no way of knowing about the risk of serious illness associated with the use of and/or exposure to the Covid Vaccines until the Plaintiff was injured.

185.~~138.~~ The Plaintiff and Class Members rely on the doctrines of postponement and discoverability to postpone the running of any applicable limitation period. The Plaintiff and Class Members plead and rely on *Limitations Act*, R.S.A. 2000, c L-12, s. 4, to assert that the limitation period did not commence until they knew or ought to have known of their injuries and the Defendants role in causing or contributing to them due to the absence of or false public health data.

IV. DAMAGES

186.~~139.~~ The Plaintiff and Class Members claim that the Defendants' actions and breaches, as set out above, caused the Plaintiff and Class Members extensive damages.

187.~~140.~~ As a result of the Defendants' actions and breaches, the Plaintiff and Class Members have~~s~~ suffered from severe physical, psychological, and emotional harms, and other related health problems.

188.~~141.~~ The psychological damages caused by the Defendants' actions and breaches have caused the Plaintiff and Class Members to suffer significant mental distress and loss of enjoyment of life.

189.~~142.~~ The Plaintiff and Class Members have incurred and will continue to incur medical expenses, lost income, and other expenses due to the Defendants' actions and breaches.

190.~~143.~~ Continuously since June 18, 2021, the Plaintiff has been unable to complete many of her activities of daily living, her housekeeping duties, her farm responsibilities, and family responsibilities.

191.~~144.~~ The Plaintiff's Injuries, including but not limited to paralysis, hearing loss, vision loss, speech impairment, vertigo and memory loss have impaired her from staying focused, and have left her able to perform daily tasks.

192.~~145.~~ The Plaintiff has, and Class Members have, as a direct and proximate result of the Defendants' actions and breaches suffered damages, such as past and future loss of income, out-of-pocket expenses, past and future medical expenses, as well as non-pecuniary damages arising from the harms suffered.

193.~~146.~~ As a result of the Defendants' actions and breaches, the Plaintiff and Class Members have suffered and will continue to suffer the following damages and loses, but not limited to:

1. Personal injury;

2. Pain and suffering and loss of enjoyment of life;

3. Infliction of psychological harm;

4. Past and future loss of future income earnings, earning capacity and competitive advantage;

5. Past and future loss of housekeeping capacity;

6. Past and future cost of care;

7. Pecuniary loss due to the expedited sale of the Plaintiff's farm;

8. Out-of-pocket expenses; and

9. Other such damages as will be proven at the trial of this action.

194.~~147.~~ The Plaintiff and Class Members claim~~s~~ that the Defendants, and each of them, are liable for the negligence and breach of fiduciary duty of their employees, agents, or servants, acting within the scope of their employment or agency.

195.~~148.~~ The Plaintiff and Class Members claim~~s~~ that the Defendants, and each of them, are vicariously liable for the actions of their employees, agents, or servants.

Exemplary or Aggravated Damages

196.~~149.~~ The Plaintiff and Class Members claim exemplary, or aggravated damages from the Defendants. A high standard of conduct is expected from the government for Canada and the government of Alberta toward its citizens, including promoting accurate and factual information to the public, which was not provided, and the Defendants conduct towards the Plaintiff, the Class Members and the public at large was reprehensible, high handed and oppressive.

Punitive Damages

197.~~150.~~ The Defendants knew or should have known that the Covid Vaccines were not safe, ~~or~~ effective or interchangeable. Despite their knowledge, the Defendants continued aggressively to market, distribute and promote the Covid Vaccines to the public, including the Plaintiff and Class Members, without disclosing its dangerous and fatal side-effects. The Defendants' conduct was high-handed,

reckless, egregious, deliberate, wilful, callous, and in wanton disregard of the rights and safety of the Plaintiff and Class Members.

198. The Federal Defendant established the Vaccine Injury Support Program, and the Provincial Defendant was aware of its existence, demonstrating that both Defendants recognized the potential for harm and liability arising from the Covid Vaccines. Government documents, including the Alberta Covid Task Force report released in January 2025, identified Covid Vaccine-related injuries and called on the Provincial Defendant to take specific actions, none were implemented.

199. By April 2022 and June 2023, the Provincial and Federal Defendants, respectively, had rescinded all Covid-related public health emergency measures, removing any justification for ongoing promotion of the Covid Vaccines. Despite the end of the emergency and the growing evidence of vaccine-related harm, the Defendants continued to assert that the Covid Vaccines were safe, effective, and interchangeable. Their refusal to revise this guidance in light of known injuries constitutes reckless and egregious misconduct.

200. The Defendants' sustained course of action breached their duty to protect the Plaintiff and Class Members from foreseeable harm. The Vaccine Injury Support Program offers limited, discretionary, and opaque compensation and fails to provide adequate redress to those affected. As a result, a transparent and impartial judicial process is necessary to obtain appropriate relief. Given the Defendants' persistent and willful disregard for the safety of the Plaintiff and Class Members, an award of punitive damages is justified to punish the misconduct and deter similar future behavior.

201.~~151.~~ The Plaintiff and the Class Members proposes that the trial of this action take place at the Calgary Courthouse, in the Province of Alberta.

202.~~152.~~ In the opinion of the Plaintiff and the Class members, the trial of the within action will not exceed twenty-five (25) days.

V. REMEDY SOUGHT

203.~~153.~~ The Plaintiff, personally and on behalf of the Class Members, claims:

A. An Order certifying this action as a class proceeding and appointing Carrie Sakamoto as the Representative Plaintiff for the Class pursuant to the CPA;

B. General damages in an amount to be proven at trial:

C. Special and punitive damages in an amount to be proven at trial:

D. Punitive damages in the amount to be proven at trial:

E. Exemplary, or aggravated damages in an amount to be proven at trial:

F. Costs of this action pursuant to the CPA, or alternatively, on a full or substantial indemnity basis, plus the cost of administration and notice pursuant to the CPA, plus applicable taxes:

G. The Plaintiff claims prejudgment interest in accordance with the provisions of the *Judgment Interest Act*, RSA 2000, c J-1, as amended: and

H. Such further and other relief as counsel may advise and this Honourable Court may deem just.

204.~~154.~~ The Plaintiff pleads and relies on the following:

a. The *Alberta Rules of Court,* Alta Reg 124/2010;

b. *Class Proceedings Act, SA 2003,* c C-16.5;

c. *Conflict of Interest Act,* SC 2006, c 9, s 2;

d. *Conflicts of Interest Act,* RSA 2000, c C-23;

e. *Food and Drugs Act,* RSC 1985, c F-27;

f. *Food and Drug Regulations,* CRC, c 870;

g. *Judgment Interest Act*, RSA 2000, c J-1;

h. *Public Service Employment Act*, SC 2003, c 22, ss 12, 13;

i. *Public Service Employee Relations Act*, RSA 2000, c P-43;

j. *Regional Health Authorities Act*, RSA 2000; ~~and~~

k. *Department of Health Act*, S.C. 1996, c. 8,

l. *Canada Health Act,* RSC 1985, c C-6;

m, *Public Health Act, RSA 2000, c. P-37;*

n. *Public Health Agency of Canada Act,* SC 2006, c5;

o. *Fatal Accidents Act*, RSA 2000, c F-8; and

p.~~k.~~ Such other enactments and legislation as the Plaintiff may advise and this Honourable Court may consider given the circumstances.

NOTICE TO THE DEFENDANT(S)

You only have a short time to do something to defend yourself against this claim:

- 20 days if you are served in Alberta
- 1 month if you are served outside Alberta but in Canada
- 2 months if you are served outside Canada.

You can respond by filing a statement of defence or a demand for notice in the office of the clerk of the Court of King's Bench at Calgary, Alberta, AND serving your statement of defence or a demand for notice on the plaintiff's(s') address for service.

WARNING

If you do not file and serve a statement of defence or a demand for notice within your time period, you risk losing the law suit automatically. If you do not file, or do not serve, or are late in doing either of these things, a court may give a judgment to the plaintiff(s) against you.