Testimony of James Hendon Commissioner, New York City Department of Veterans' Services (DVS)

New York City Council Committee on Finance
Topic: An Update on Implementing Recommendations from the City Council's Report Card
Initiative

Wednesday, December 3rd, 2025 – 1:00 PM

Good afternoon, Chair Holden, members of the Veterans Committee, US Military Service Members, past and present, and Veteran Community supporters, benefactors and allies. My name is James Hendon. I am proud to serve as Commissioner of the NYC Department of Veterans Services (DVS). Joining me today is Nicole Orlando, Deputy Chief of Staff and Director of Veteran Transition and Donee' Smalls, Executive Director for Housing Support Services. We are honored to appear before you in this discussion that follows up on the points made in the April 2025 City Council DVS Scorecard.

First and foremost: I would like to once again thank and acknowledge all who were apart of this process. I want to acknowledge our team at DVS, many of whom contributed to the agency's response. I would like to recognize those in the Council who were directly involved in this; by unit, I would like to call out City Council Compliance, Data Operations, Web Development, the Committee on Veterans, Event and Production Services, Oversight and Investigations, and those who contributed to the editing of this document. Last, but not least, I would like to recognize all Veterans and community advocates who contributed. Any day when we are talking about Veterans is a good day. I recognize that we all have different roles, but everyone's unified goal (who was involved in this process) is to see better outcomes and services delivered to US Military Service Members, past and present, and their loved ones in this great city.

Before getting into the weeds on certain aspects of our response to the scorecard and where the agency stands in the wake of the report at this time, I want to acknowledge certain foundational issues in what is a well-intentioned, but (in certain places), flawed analysis.

For one thing, I want to remind the Council that DVS estimates there to be more than 200,000 Veterans in New York City – especially when accounting for those who either: a) currently serve in the military (of all components – Active Duty, Guard, and Reserve) or b) are former Guardsmen and Reservists who were never placed on Active Duty status. (the Census Bureau does not count these groups). As an example: I, Commissioner of the NYC Department of Veterans' Services, have served in the military for 23 years – seven as an Active Duty Officer who deployed to Iraq and Afghanistan, 16 as a US Army Reservist. I am still serving. I am not counted in the Census Bureau's data as being a

Veteran. That said, while we estimate that more than 200,000 Veterans live in New York City, according to a City Council Spokesperson who communicated with the media when the report was released, "only 21 people were surveyed as part of the report." Twenty-one out of more than 200,000 Veterans is less than 0.01% of our community. The size, makeup, and method of selection limit what can be inferred. Repeatedly leaning on this small group throughout the report—without clearly noting those limitations—does the analysis a disservice.

- This brings me to my second point: leaders from the largest Veteran Service Organizations (VSOs) in New York City were not included in this discussion. The VSOs that have a strong enough presence in New York City to have paid, full-time staff operating in the five boroughs at the time of the Council's analysis were: the American Legion, Veterans of Foreign Wars, Disabled American Veterans, Wounded Warrior Project, Blue Star Families, Black Veterans for Social Justice, and Hope for the Warriors. No senior person from each of these VSOs participated in the Council's surveys nor its discussions to our knowledge. I am speaking of no District Commander for the American Legion or VFW, no leadership from the DAV Department of New York, no person who leads the New Yok City teams for the Wounded Project, Blue Star Families, or Hope for the Warriors, and no one at the C-Suite level from Black Veterans for Social Justice, New Yok City's largest homegrown Veteran Service Organization. We respect the views of the 21 participants; we also believe that omitting senior VSO voices—those with scale, caseload, and citywide reach—constrains the utility of the findings. For future surveys, please start with the question: Who are the largest actors in this domain, and are their senior leaders at the table? That approach will strengthen any conclusions drawn.
- The last thing I want to touch on before we discuss the scorecard is its contradictions. In many cases, one page says one thing, another page says something else, or what is said in the scorecard does not match with reality. Case and point:
 - Borden Avenue Veterans Residence is a Department of Homeless Services-run shelter—with select beds that are subsidized by the VA—that exclusively houses Veterans in New York City. One page says DVS has no presence at Borden Avenue Veterans Residence. Another page says the truth, which is that we maintain a daily presence at Borden Avenue.
 - One page says that DVS is not transparent about data. Another page points out that DVS makes information available through the Open Data Portal, Mayor's Management Reports, and Local Law reporting. I would also point the public to

- nyc.gov/vetreports, a website where we publish our data-related information, reporting, and outputs.
- One page says that DVS does not provide descriptions of roles in the agency. A description of each role in the agency along with explanations of our methods of data collection, definitions for specific terms, summaries of our programs, and DVS' overall performance information can be found in the annual report that we submit in accordance with Local Law 44 of 2019. This, too, can be found on nyc.gov/vetreports.
- Most erringly: One page says that our work "has not translated to consistent improvement of services, communication, or outreach." Meanwhile, the most recent Mayor's Management Report shows increases in each of the following metrics (when you compare the averages of FY 22 & 23 to FY 24 & 25):
 - Veterans and their families served by DVS: 345% increase, from an average of 2,203 Veterans and families served in FY 22 & 23 to an average of 9,811 served in FY 24 & 25.
 - Requests from Veterans and their families: 518% increase, from an average of 5,058 requests in FY 22 & 23 to an average of 31,262 requests in FY 24 & 25.
 - Public engagement events attended by DVS to promote Veteran resources: 48% increase, from an average of 196 events in FY 22 & 23 to an average of 291 events in FY 24 & 25.
 - Online site visits: 113% increase, from an average of 77,025 visits in FY 22
 23 to an average of 163,870 visits in FY 24 & 25.
 - Homeless Veterans and their families who received housing through DVS' Veteran Peer Coordinator Program: 59% increase, from an average of 88 who received housing in FY 22 & 23 to an average of 140 in FY 24 & 25.

I have said this before: if I am grading a student who has significantly improved their performance in key metrics, anywhere from a 48% increase to a 518% increase (518% is more than five-fold), while I can find flaws in anyone – including that student – it is difficult for me to say that the student's grade should be a C. Apart from the less than 0.01% of the community's comments (which excluded feedback from leadership of NYC's largest Veteran Service Organizations), you have to do things positively in the fields of leadership, service delivery, collaboration, workforce development, digital governance, and knowledge management to

drive an organization towards an impactful place. We believe we are accomplishing that objective.

Now, there are pro-tips and findings worthy of being acknowledged in the scorecard—many of which, we will get to. I want to make sure that we do not accept every single word written in the document as gospel. Like human beings, these things are messy. It is important to separate the wheat from the chaff in determining what is key as we look to improve the delivery of services to Veterans in the City of New York.

To reconcile the findings of the report between what select respondents communicated and how we see things at DVS, the (at most) 21 respondents, in my opinion:

- Want DVS to be at maturity with its processes and systems right now;
- Want DVS to receive enhanced resources to perform its work right now; and
- Want DVS to fill the needs which can be seen in New York City's Veteran community right now.

This is all understandable and acceptable. We agree to those challenges.

For DVS, we view things through the following lenses:

- How do we address current needs ...
 - While operating in a land of constraints, doing the best with what we have (this is in light of limited resources triggered by the 2020-2023 COVID-19 pandemic and the 2022-2025 New York City Migrant Crisis)?
 - Being mindful of our entire charter? Per Chapter 75 of the New York City Charter, the NYC Department of Veterans' Services is tasked to assist and inform Veteran and Military Families in the areas of healthcare, housing, benefits, culture, education, and employment.
 - While looking to empower all Veterans, not just those on one side of the bell curve?
- How do we galvanize partners such that the onus to serve our brothers and sisters (and their loved ones) does not fall on one entity, but on all of us city, state, federal, public, private, nonprofit, from domains including, but not limited to: academia, industry, government, the philanthropic space, entrepreneurship, and finance?

- Most significantly, while addressing current needs (which can be seen), how do we build an agency that can respond to the three existential challenges facing our community (needs that are comparatively unseen)? Those existential challenges are:
 - a. A majority of Veterans do not self-identify. A reminder that the self-identification rate according to the VA in FY 23 was 34.3% nationwide, 29.8% in New York State, and 24.1% in New York City.
 - b. The VA does market its services. The FY 26 budget for the US Department of Veterans Affairs is \$441.3 billion. It is second only to the budget for the Defense Department. A line item specific to marketing appears nowhere in the VA's budget documents. For perspective: the VA's budget consists of five volumes with a total length of 1,588 pages. Not displaying a budget for marketing is a glaring and intentional error.
 - c. The Veteran population is declining. The VA projects an annual rate of decline of 1.82% nationally and 3.19% in New York State. Year over year Census data suggests a 4.83% annual rate of decline in New York City. We need to persuade current New York City Veterans to stay and transitioning Active Duty Service Members to live, learn, and work here.

Established on April 8th, 2016, DVS is nine years old. Our first three years of existence (2016-2019) centered on logistically establishing ourselves as a department and functioning primarily as a referral agency. The last six years (2020-2025) has seen the agency expand to become a referral *and services* institution.

Our approach over the past several years to address current and existential challenges has been:

- 1) Obtain Veteran data so that we can learn who our constituents are. We have worked to obtain Veteran information at the city, state, and federal levels. We also obtain Veteran contact information from our own events and core programming. DVS leads other states in collaborating to obtain Transitioning Service Member contact information from the Defense Department. This approach has enabled us to grow from having contact information for approximately 5,000 NYC Veterans in 2019 to more than 150,000 Veterans in 2025.
- 2) Build offerings that inspire Veterans and their loved ones to self-identify. Our direct services are housing, claims, and employment. We fill gaps not being filled in the existing ecosystem in each of those areas. Further, DVS continues to make referrals

where applicable – as we have always done. Synergies (that is, programs with partners where 1+1=3), new policies, and new laws passed are ways that we create new offerings, sharing the burden all around. Our hope: one of our many offerings is strong enough to draw each Veteran community member from darkness into the light. Examples of offerings that I am speaking of include, but are not limited to:

a. Healthcare:

- i. Veteran Feeding Program. Provides food-insecure Veterans with access to meals. (nyc.gov/vetfood)
- ii. Veteran Mental Health Coalition. A community of practice for mental health and social services professionals who currently and potentially will interact with military-connected New Yorkers. (nyc.gov/vetmentalhealth)

b. Housing (nyc.gov/vethousing):

- i. Mitchell Lama Veterans Preference Transparency. Now, Veterans can see how many people are using the Mitchell Lama Veterans Preference to be housed in each Mitchell Lama development. This organically evens out the Veterans preference wait lists for Mitchall Lama housing.
- ii. Hearing, Vision, and Mobility Units in Housing Connect. DVS and the VA can sign off verifying service-connected hearing, vision, and mobility disabilities for Veterans applying for disability set aside units in Housing Connect.
- iii. Housing Connect Veterans Preference. There now exists a Veterans preference in Housing Connect. Specifically, there is a ten percent preference for municipal employees and US Military Veterans.
- iv. VS Home Loan. A Veteran who is eligible for SONYMA in the New York City region (Westchester, Long Island and the five boroughs) needs to only provide one percent of the purchase price to purchase a house, condo, or co-op. SONYMA, through participating lenders and, in some cases, the Hebrew Free Loan Society provides financing to the Veteran household to cover the remaining balance; this includes closing costs. In New York City, a household with 1 or 2 people is eligible for SONYMA if their household income is \$194,400 or less. A household with three or more people is eligible for SONYMA if their household income is \$226,800 or less. (nyc.gov/homesforveterans)

c. Benefits:

i. Vallone Veterans Initiative. A full-time Veterans of Foreign Wars (VFW)
 Veteran Service Officer works out of each City Council Member's district
 office one day per month. (nyc.gov/vetvallone)

ii. Mission: VetCheck. Volunteers call more than 15,000 Veterans per year to check in on them, thank them for their service, and make sure that they take advantage of their benefits and offerings. (nyc.gov/vetcheck)

d. Culture:

- PFC Joseph P. Dwyer Program. DVS supports more than 25 communityled, hyper-local, wellness activities throughout New York City. Activities include, but are not limited to: chess, yoga, equine therapy, and pickleball. Each activity serves to normalize help-seeking behavior amongst Veteran and Military families. (nyc.gov/vetdwyer)
- ii. Veteran Voices Project. A program which enables Veteran community members to record their oral histories and archive the recordings with the Municipal Archives and Library of Congress. (nyc.gov/vetvoices)

e. Education:

- i. Veteran Tuition Award Program Expansion. As of this year, the scholarship provided by the State of New York to Veterans has been expanded to include combat and non-combat Veterans. (nyc.gov/vetstudents)
- Military Family Advocate Program. Department of Education principals identify representatives (one per school) to be trained by DVS and serve as a liaison for military-connected students, staff, and faculty. (nyc.gov/vetmfa)

f. Employment:

- i. Vet Jobs. Vet Jobs is aggressive care coordination specific to job seekers. Vet Jobs assesses a job seeker, determines the best employment and / or workforce development option for them, then connects the person to said opportunity. In situations where no other provider is able to assist the Veteran, DVS steps in providing direct support. This is often the case with Veteran community members who are applying for public sector jobs and / or those who need to navigate New York City and New York State Programs like NY HELPS, 55 a, 55 b, and 55 c. (nyc.gov/vetjobs)
- ii. Veteran Business Leadership Association. An effort which provides Veteran business owners with professional mentorship, technical assistance, certification support, networking opportunities, and promotion through being featured in our map of Veteran and Military Spouse-owned businesses, nyc.gov/vetbizmap. (nyc.gov/vetbusiness)
- 3) Part of our approach to address existential challenges has been to continue refining our operations, processes, and core functions. There has been a great deal of growth since

DVS was first established in 2016. Back then (into our first three years), the Department of Citywide Administrative Services (DCAS) effectively held our hands as we performed administrative duties such as payroll & timekeeping, human resources, information technology, fiscal operations, equal employment opportunity, legal, logistics, and compliance. Now, we do those things independently. From a process standpoint, key milestones that DVS has reached as of late are:

- a. The department is more active in processing City Council discretionary contracts. Starting in FY 27, all City Council discretionary awards for Veteran programs valued at \$25,000 or less will be processed by the Department of Veterans' Services.
- b. In FY 26, DVS changed technology partners for our online services platform, VetConnect NYC. We now use a provider, Combined Arms, which is a for-us, byus Veteran owned and operated organization. The new VetConnect platform more easily dovetails with DVS, client, and community needs. To that point: all DVS workflows and procedures specific to client services are being captured in VetConnect.
- c. The department will execute its first multi-year master agreement contract—complete with a list of winning vendors to support the PFC Joseph P. Dwyer Program (funding Dwyer providers) starting in FY 27.

To pan back: the charter for the agency tasks DVS to assist and inform Veteran and Military Families in the areas of healthcare, housing, benefits, culture, education, and employment. Among other things, DVS has spent the past nine years building the agency and establishing offerings in each charter-mandated space. We deliver those offerings through either providing direct services (our direct services are housing, claims, and employment), making referrals, or collaborating with stakeholders to execute synergies. The meta strategy tied to our work is "connect, mobilize, empower."

- Connect: We DVS and the broader Veteran service ecosystem learn who the NYC Veteran community is.
- Mobilize: The NYC Veteran community learns who we are and what we have to offer (once again, speaking beyond DVS; the "we" includes all who provide Veteran services, benefits, and support).
- Empower: We serve them (Veterans and their loved ones).

These three phases – connect, mobilize, empower – have overlap. Some portion of them is always occurring at the same time. That being said, the principal energy of the agency in its first

nine years has been focused on "connect" (in addition to being born). We are in a period of transition as DVS shifts its focus to "mobilize." Veterans will learn who we are during "mobilize" because we now offer several things that can capture people's attention and draw them into the light; they can then be served by us. Our offerings are rooted in access, affordability, and opportunity. We have spent years building an apparatus that can absorb what comes when getting to the future state of "empower." Empower at 100% means that you have maximum self-identification coupled with maximum utilization of benefits coupled with best-in-class execution of partnerships. We have been focused like a laser on building an ecosystem capable of performing at this level.

For the scorecard on Parks, the assessment team compared New York City to San Francisco, Los Angeles, Chicago, and Minneapolis. In our space, because New York City is the only municipality with a Veterans' Services *department* – not a commission, board, or an office – and we are home to so many Veterans, the best organizations to compare us to are state level departments of Veterans Services for states with comparable Veteran population sizes. Those are: Iowa (whose Department of Veterans Affairs is 47 years old), Connecticut (80 years old), New Mexico (22 years old), and Vermont (at least 107). For context, New York State's DVS is 80.

When you look at those peers—and most states and territories—few are built to attack the three existential problems the way we are. Once again, the existential problems facing the Veteran community are: (1) low self-identification, (2) a lack of VA marketing, and (3) population decline.

Few departments position themselves to be proactive like us with an eye towards engaging *all Veterans*. The reason: there is a reluctance to innovate in the face of resource constraints. With partners, you can build a network that is able to receive an influx of Veteran service requests and resolve them as they come. Without partners, Veteran Service Agencies find themselves in chicken-versus-egg dynamic of "I don't want to aggressively market Veteran benefits and services because I am incapable of addressing a massive number of requests if they arrive."

Our posture at DVS is both / and. We market as we scale—so demand grows in step with capacity. We pair outreach with service readiness, then use what we learn from intake and fulfillment to tighten the loop. And we do it with partners so the system can absorb a surge, triage quickly, and keep faith with the people we bring in. Without that partner network, agencies become restrained. With it, you can create demand and meet it—responsibly. That is what it means for us to be on offense in helping Veterans and their families in New York City.

While addressing the needs of today, we are endeavoring to build an agency (and a broader Veteran support ecosystem) which will make it easier for Veterans to self-identify, live, learn, and thrive in the five boroughs decades from now – well into tomorrow.

And I want to repeat: we are doing all of these things in support of the future – and all New York City Veterans – while presently achieving more than three-fold growth in the number of Veterans and their families served, more than five-fold growth in the number of service requests we respond to, 48% growth in the number of public engagement events we attend (promoting Veteran resources), more than two-fold growth in the number of visits to the DVS website, and a 59% increase in the number of homeless Veterans and their families who receive housing through the DVS Veteran Peer Coordinator program.

Regarding the scorecard and our actions in response to its major critiques (things not already mentioned):

- The strategy for DVS along with short, mid-term, and long-term goals -- now appears on the agency's website at nyc.gov/vetmission.
- The Master Digital Strategy Plan for DVS is posted on nyc.gov/vetmedia.
- The Data Sharing Policy for DVS is posted on nyc.gov/vetreports.
- A formal feedback form can now be found on nyc.gov/vetcontact.
- A greater degree of case-related details and a smarter grouping of client requests and descriptions is incorporated in the Combined Arms technology that now undergirds VetConnect NYC.
- During this fiscal year (FY 26), six positions were added to DVS' headcount which will
 implicitly increase the level of quality assurance and quality control from an internal
 checks and balances standpoint. Those positions are three coordinators who have been
 added to our Housing Support Services team and three who have been added to our
 Veteran Support Services team (also known as the VA Claims unit).
- During this fiscal year, two positions were added to DVS' headcount which will explicitly increase the level of quality assurance and quality control of our reporting and actions.
 Those positions are:
 - a. VetConnect NYC Coordinator. One person will oversee, help optimize, and internally evaluate the flow of all of our VetConnect services and referrals.
 - b. Senior Advisor for Operations. The Senior Advisor for Operations will provide command and control over the Housing Support Services team and the Veteran Support Services team. This will be an added layer of internal oversight, quality assurance and quality control. Leaders of the VSS and HSS units will report to the Senior Advisor for Ops.

• Since the scorecard was published in April 2025, DVS has executed agreements which allow us to share Veteran contact information – broken down to the district level – with all Community Boards, Borough Presidents, and City and State legislators in New York City. One by one, we are currently executing similar agreements with federal elected officials. There are several benefits to doing this. One to point out (which addresses a scorecard criticism): if all of us – DVS, Community Boards, Borough Presidents, City Council Members, State Assembly Members, State Senators, Congressmen, Senators, etcetera – send mailings to the Veterans in our catchment areas at least one time per year, then we will have significantly amplified the level of non-digital outreach to older Veterans in the community.

I have just mentioned key areas of feedback where we were able to respond. Key areas where we were not able to respond (or did not respond) are:

- Our Veteran Support Services team meets remotely and, when needed, in person
 physically with clients who are not able to meet during traditional business hours. This
 is a more efficient use of time and resources one where we can flex to the Veteran,
 meeting them closer to where they are as opposed to having members of our VSS
 team positioned in a stationary location on nights and weekends.
- DVS is unable to share its ideal number of employees; no agency can. We do not want to get in the way of or (without knowing) negatively impact delicate budget negotiations that are ongoing between the Mayor and City Council. These types of conversations transcend DVS and have ripple effects on other agencies and efforts. For that reason, it is above our level to explicitly weigh in on these matters when it comes to us. Recognizing these constraints, we endeavor to be as open and transparent as possible on all other Veteran Services-related issues. We pray that our participation in these Veterans Committee hearings, of which there are nine to eleven hearings per year (we attend all hearings from start to finish) provides Council Members and the public with an accurate depiction of the strengths, weaknesses, opportunities, and threats for our agency and New York City's Veteran community as a whole.
- The Department of Veterans' Services follows New York City Human Rights Law. As of 2017, the law prevents discrimination on the basis of being or having been a uniformed services member. This means that DVS as an employer cannot discriminate against someone for being a member of the uniformed services. Conversely, we cannot discriminate against someone for *not being* a member of the uniformed services. We hire the best person for each job. We promote our job openings to the Veteran

community, posting them in our weekly newsletter and sharing them with Veteran and military spouse focused workforce development partners. That said, these opportunities are also found on nyc.gov/jobs. That website, City Jobs, is the official portal for all who seek employment with the City of New York. All are welcome (and encouraged) to apply to work at DVS. For perspective, when looking at the number of Veteran employees at DVS compared to our authorized strength, 34% of our headcount as of this month is filled by Veterans (that is, 17 out of 50 positions). The next closest agency to DVS in this metric is the FDNY at 8.4%, followed by the Sanitation Department at 5%, followed by the NYPD at 4.8%, followed by the Department of Corrections at 4.7%. While 34% of DVS employees have served in the US Military, 25% of US Department of Veteran's Affairs employees have served in the armed forces as of September 2024 (based on the most recent available data). Seventy percent of the Veterans employed at DVS are Community Coordinators. Three of our employees, or six percent, are Military Spouses.

 As mentioned in the report, DVS holds annual Veteran summits, roundtables with specific groups (ie: Veteran street vendors, housing advocates, mental health providers, Hispanic Veterans, etc.), we attend community board meetings, we have a "Contact the Commissioner" page on the DVS website, we proctor a military community survey every 2-4 years, we participate in all NYC Veterans Advisory Board meetings, and we hold three to five community engagement sessions each year. For community engagement sessions, along with advertising the virtual sessions in our newsletter, on social media and the DVS website, we invite more than 240 community benefits organizations, more than 160 Veteran Service Organizations, and the staffs of all city, state, and federal legislative officials who represent New York City to attend. Separate from individual stakeholder meetings, we attended more than 300 public events in FY 25. The Council engaged 21 people about DVS. For the subset of those 21 respondents who have issues with the agency, there are several forums through which that feedback can be shared (including completing our newly-created feedback form which is located at nyc.gov/vetcontact). The NYC Veterans Advisory Board is an example of a group that had feedback about DVS operations which we responded to; the City Council hearing held on September 22nd, 2025 about the VAB illustrated our response (our memo responding to the 2024 Veterans Advisory Board Report can be found at nyc.gov/vetboard). If these advocates – and I do not believe I have seen all of the people referenced in the report attend City Council hearings (we do not know who they are) – do not want to meet with us, do not wish to engage DVS directly, and do not wish to attend DVS-connected activities (or other Veteran forums where they can provide feedback and we will be present), then we encourage them to continue communicating

with us through the Council. We have no issues if you choose to do it discreetly. We ask that you continue to be part of the conversation. To all who offered feedback to the agency through this scorecard: there is value in saying something. Thank you for what you did. Look no further than the developments that have arisen from this report to see that you have a voice.

Reflecting on all that is been said thus far, the long view (to me) ...

First: A child is a different person every six months. DVS – relatively a child in New York City government – is nine years old. We are a growing, learning, and self-correcting organization. Add to that: building programs where government is involved and there are resource constraints is a process. This is not to mention that a majority of our clients do not self-identify as Veterans. In growing to each maturity, these things take time. For an advocate who took issue with something they saw from DVS at a specific moment at age three, we need to acknowledge that age three is not the same as age five which is not the same as seven which is not the same as nine or ten (or beyond). For those observing us, please ask the rhetorical questions: Is DVS listening to feedback? Is the agency correcting itself? Are they improving?

Second, in public service and in government, historically, there is a lag between when a policy innovation is executed and when it penetrates and is fully realized by those who would benefit from it. I think that is where we are right now. You will see a situation very soon where more Veterans come to us ("us" equals all in the Veteran services ecosystem) for help getting money from the VA, for access to Veterans affordable housing, and for life-changing employment & entrepreneurial opportunities – among other amenities. This is already happening in real time.

Viewing it from the outside, it is hard for some to distinguish a direct service from a referral from a synergy. Based on how things traditionally work, it is easy to say "all of this should – and likely is – being done by DVS" when, in actuality, we are executing a team approach. An outsider views these synergies and offerings and assumes "DVS is doing too much; they are spread too thin," when, in reality, our partners are performing the heavy lifting.

Moreover, if all that we did was focus on the basics and not put these offerings together, then at best, we could increase New York City's Veteran self-identification rate from 24.1% to the national average of 34.3% -- putting aside the issue of Veteran population decline. But we are not putting that issue aside. And we are not settling for 34.3%. Our goal is to punch *through* the target and reach 100% Veteran self-identification. As surely as a goal in the Veteran community is to bring the Veteran unemployment rate to zero, the Veteran suicide rate to zero, and the Veteran homeless population to zero, we will settle for nothing less when it comes to

the number of Veterans in New York City who *do not* self-identify. We want that number to be zero as well. This means that all Veterans will tell people that they have served. They will allow themselves to receive earned benefits, honors, and services. We are committed to accomplishing that goal. We are playing for the long term. We are coming for everybody.

To the Veterans: you committed to protect all of us. We commit to serve all of you.

We are so grateful to the Speaker and the Council for being on this journey with us. Despite some of our issues with the report, it means the world to us that you have dedicated these resources and time towards DVS being our best. It was an honor to us to be the first in this process.

As I said, any day when we are talking about Veterans is a good day.

A separate topic:

Recognizing that this is the end of the year – and the end of the administration's term – for the record, things that the City Council has done well and things where (collectively) there can be improvement in the eyes of DVS follow:

The great things:

- Expanding the Veterans Advisory Board to include Veteran family members.
- Codifying VetConnect NYC.
- Passing Local Law 37, which includes Veteran-identifier questions on client-facing City forms.
- Creating the Vallone Veterans Initiative, which has a VFW-accredited Veteran Service
 Officer work in each Council Members' District Office delivering services to their
 constituents once per month.
- Passing Intro 740 of 2024, the Cold War Veterans Property Tax Exemption, which will become law this month. Valued at \$10 million per year, this is the largest City investment into the Veteran community since the creation of DVS (it is larger than that).
- Growing DVS by 25% manpower-wise with the adopted FY 26 budget.
- The City Council Scorecard process.

Areas of improvement:

- To Council Members who have not done so yet, please reach out to DVS or the Council Connect team to obtain contact information for the Veterans in your district.
- Ask the Local Law 37 questions on constituent intake forms at your district offices. Those questions are (paraphrasing):
 - a. Have you or a member of your household ever served in the US Armed Forces?
 - b. If so, then do you consent to being contacted by DVS?
- Formally add Veteran representation to the Street Vendor Advisory Board.
- Codify the Veteran Business Leadership Association.
- Increase Council discretionary funding to Veteran-serving nonprofits. With the
 exception of the Vallone Veterans Initiative (which we are eternally grateful for), there
 was no increase to the level of Schedule C funding disbursed in the field of Veterans
 Services from FY 23 through FY 26.
- Have all groups that receive City tax levy dollars to serve Veterans communicate with DVS so that, at a minimum, we can work with them to enhance their outreach. Beyond that, we can also provide those who need it with military cultural competency training and other support.
- For the few City Council district offices that have not yet scheduled recurring office hours with the VFW in support of the Vallone Veterans Initiative, please do so.

Lastly, I want to thank the Veterans Committee of the City Council for its service.

Acknowledging Committee Members - Chair Robert Holden, Council Member Kristy Marmorato, Council Member Vickie Paladino, Council Member Joann Ariola, Council Member Sandy Nurse, and Council Member Simcha Felder: Thank you for your leadership!

To the departing members - Chair Holden and Council Marmorato: Thank you for your service. This is not goodbye. Once a member of the Veteran community, always a member. Please continue to contribute to the conversation about what we can do to help US Military Service Members – past and present – along with their caregivers, survivors, and families.

Finally, the NYC Department of Veterans' Services can be reached via telephone at 212-416-5250, email at connect@veterans.nyc.gov, online at nyc.gov/vets, and through social media using the handle @nycveterans.

God Bless You, God Bless the City of New York, and God Bless America.

Thank you.

TESTIMONY OF JOSEPH BELLO NY METROVETS

BEFORE

NEW YORK CITY COUNCIL COMMITTEE ON VETERANS

Oversight - "An Update on Implementing Recommendations from the City Council's Report Card Initiative."

December 3, 2025

Chair Holden and members of the Veterans Committee. Thank you for the opportunity to submit written testimony regarding today's hearing, "An Update on Implementing Recommendations from the City Council's Report Card Initiative."

I want to begin by stating that this topic should not have been the final subject of oversight taken up by this committee.

While the committee report states that the Municipal Report Card was released in late March, both the Council's <u>official press release</u> and City&StateNY's <u>coverage</u> are dated April 21st. The initial committee oversight hearing, at which I also testified, was held on April 28th. <u>Barely six months have passed since then.</u>

This is too short of a period for any meaningful update or evaluation of system-wide changes, and certainly not enough time for the veteran's community to see or feel any sustained improvements.

Since that April hearing, veterans and community advocates have received no regular updates, no public progress reports, no meaningful outreach, and no structured mechanisms for feedback from DVS regarding implementation of the Report Card recommendations.

To date, DVS has not demonstrated any measurable or clear engagement with the broader veteran population on issues raised in April – whether related to staffing, service delivery, outreach, data transparency, or strategic planning. The Commissioner's travels across the boroughs, particularly for events, should not be conflated with substantive, issue-focused engagement or follow-through.

The veteran's community relies on this committee's oversight. We cannot afford this hearing to function as a concluding checkpoint or, worse, as a matter of optics for an agency that has yet to show meaningful progress. This is a direct barrier to accountability and undermines veterans' trust in the agency.

For these reasons, it is critical that the councilmembers newly appointed to the Veterans Committee in January hold a follow-up hearing on this matter sometime in 2026, allowing the Commissioner, or a newly-appointed Commissioner, adequate time to demonstrate measurable, verifiable action.

Thank you, councilmembers, for the opportunity to provide testimony and for your commitment to ensuring that New York City's veterans receive the accountability, communication, and support we deserve.

Written Testimony of Timothy Pena

Founder, Veterans Justice Project, LLC Submitted to the New York City Council Committee on Veterans [Insert Hearing Date]

Chairperson and Honorable Members of the Committee,

Thank you for the opportunity to submit testimony on behalf of New York City's underserved veteran community.

My name is **Timothy Pena**, and I am the founder of the **Veterans Justice Project**, an advocacy organization dedicated to ensuring dignity, safety, and lawful treatment for veterans navigating homelessness and housing transition in our city.

Today, I submit this testimony with urgency and concern. At the **Borden Avenue Veterans Residence** (BAVR)—the only VA-funded **Grant & Per Diem (GPD)** transitional housing program in New York City—VA-eligible veterans are living in **conditions that violate federal GPD policy**, and in many cases, their basic human rights.

BAVR currently houses veterans in a co-mingled environment with non-veteran residents experiencing active addiction and severe mental illness under the city's MICA (Mentally Ill Chemically Addicted) framework. This endangers veterans in recovery, especially those with PTSD or a history of substance use disorder, and undermines the federal intent of GPD as a structured, sober program for stabilization.

Veterans who report violence, drug use, or unsafe conditions are often punished, not protected. Many are removed from the GPD program, and therefore disconnected from the HUD/VASH permanent housing pipeline, effectively restarting their homelessness journey. The exclusion of women veterans from BAVR altogether further illustrates how discriminatory and outdated this model has become.

There are currently **no veterans serving on the New York City Council**. This makes it even more imperative that the Council appoint **pro-veteran members to the Committee on Veterans**—members who will **consistently show up** and hold DHS and its contractors accountable for how veterans are treated under city oversight.

I respectfully urge this Committee to:

- 1. Hold formal oversight hearings into DHS and its contracted administration of GPD programs.
- 2. Mandate separate, trauma-informed housing models for VA-eligible veterans only.
- 3. **Introduce legislative protections** for whistleblower veterans and ensure eligibility continuity for HUD/VASH.
- 4. Expand access to transitional programs for women veterans, ensuring equal treatment under federal and city guidelines.
- 5. **Establish a second, veteran-exclusive GPD site** in New York City operated by qualified, compliance-based nonprofits.

Veterans should not have to fight for safety and housing after fighting for their country. I ask this Council not to let this moment pass without action.

Thank you for your time and leadership.

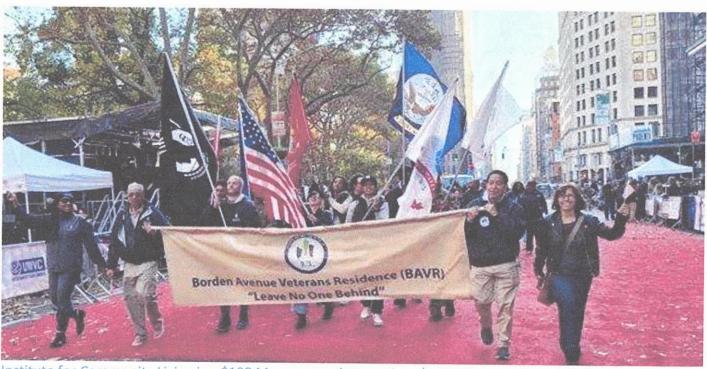
Respectfully, **Timothy Pena** Founder, Veterans Justice Project, LLC tim.pena@outlook.com | (602) 663-6456

A Call to Action for Veterans: Before It's Too Late

By Timothy Pena

Founder, Veterans Justice Project, LLC November 27, 2025 — New York City

NYC Council Committee on Veterans Must Confront the Veteran Transitional Program Housing Crisis



Institute for Community Living is a \$188 M company that receives \$4.6 M in pass-through federal funding for 154 Veterans Affairs eligible veterans yet spends just \$6.60 a day on meals. This as CEO Jody Rudin pulls in nearly \$500,000 a year in salary and bonuses.

New York, NY -- As New York City enters a new legislative cycle with a new Speaker-designate



at the helm, one crisis continues to grow, largely unacknowledged: the City's systemic failure to protect veterans in transitional housing. At the center of this crisis is the **Borden Avenue Veterans Residence (BAVR)**—the only VA-funded

<u>Grant & Per Diem (GPD)</u> site in NYC—where federal policy is being violated and veterans are being retraumatized rather than restored.

The GPD program is a federal initiative designed to give VA-eligible homeless veterans a structured, time-limited transitional environment on their path to independence. But at BAVR, operated by the Department of Homeless Services (DHS) and the Institute for Community Living (ICL), that mandate has been replaced with a co-mingled "MICA" model—housing veterans side-by-side with residents suffering from active drug use and untreated psychiatric



Despite thousands of dollars in donations, veterans are left to dependent on community churches for clothing and hygiene

disorders. This not only violates federal GPD policies, it endangers veterans, many of whom are already living with PTSD or recovering from substance abuse.

Veterans who report misconduct or security violations at BAVR aren't protected—they're punished. Many are transferred out of the

GPD program, and therefore removed from the HUD/VASH housing track, the federal permanent housing pipeline for veterans. This retaliatory cycle severely hampers their ability to access sustainable housing, often returning them to square one or forcing them into general shelters unfit for their needs.

It's no surprise, then, that only 1 in 4 veterans in New York City self-identify as veterans when accessing city services. One reason is the "one-size-fits-all" approach that treats veterans the same as the general homeless population—stripping away community engagement, housing prioritization, and VA transitional programs such as transportation to/from healthcare appointments. When the system fails to recognize or protect their unique status, many veterans simply opt out of declaring it altogether.

Equally alarming is that the transitional housing program at BAVR is not available to women veterans at all—an exclusion that is discriminatory and unacceptable in a city committed to equity. As a result, VA-eligible women are left without access to GPD support in New York City, further marginalizing a population already underrepresented in service access.

With Speaker-designate Julie Menin preparing to appoint members to the Committee on Veterans, the time for action is now. This is not a programmatic flaw—it is a moral failure.

What the NYC Council Committee on Veterans must do:

- Hold immediate oversight hearings on the city's management of GPD and the conditions at Borden Avenue Veterans Residence.
- Pass legislation to prevent co-mingling of non-VA residents in federally funded city veteran transitional housing programs and shelters.
- Protect whistleblower veterans who report safety and compliance violations.
- Establish a second, veteran-exclusive GPD facility operated by a qualified nonprofit, with trauma-informed standards and full federal compliance.



The NYC Council Committee on Veterans complains about veterans not attending council hearings; but neither do they.

If New York City cannot protect its veterans—those who served, sacrificed, and swore an oath—it raises larger questions about whom the City is truly willing to fight for. The Veterans Affairs and federal government have provided the funding and the framework. What's missing is city oversight, enforcement, and empathy.

Every Council Member should see this as a call to action. Not a partisan issue. Not a bureaucratic debate. A human crisis, solvable with courage to confront DHS and force compliance. Veterans deserve structure, safety, and a real chance. Let's make sure the Council gives it to them.



Timothy Pena is a service-connected disabled Navy veteran living with PTSD and has chronicled his transition into the NYC while also advocating for better treatment of other veterans in transition. He has written extensively about his experiences with mental health and suicide ideation, homelessness, and the judicial system. Because of his mental health struggles, Pena often relies on ChatGPT for his writing but maintains all his opinions are his. Email: tim.pena@outlook.com

Lead In



As the Mamdani administration ushers in a new era of leadership for New York City, veterans are calling for a transformation of their own: meaningful representation and accountability within the City Council. With **no veterans** currently serving on the Council, transitional housing policies continue to be shaped without direct insight from those who've served.

This article outlines urgent failures at the Borden Avenue Veterans Residence—and why new, **pro-veteran council appointments** are essential to **hold DHS accountable** for its treatment of vulnerable, transitioning veterans.

Testimony of Eric Andrew Perez

Before the

New York City Council - Committee on Veterans

Hearing Date: December 3, 2025 – 1:00 PM

26 November 2025

Good afternoon, Chair, Members of the Committee, and fellow veterans.

My name is Eric Andrew Perez, and I am a service-connected disabled, formerly homeless United States Marine Corps veteran. I am appearing today as a whistleblower who has endured direct adversarial government retaliation for exposing what I have already proven to be corruption involving the AstraZeneca vaccine program within the Veterans Affairs Administration.

My documentation is detailed across multiple federal cases, including:

- SDNY 21-cv-04844,
- SDNY 24-cv-356, and
- Second Circuit Court of Appeals 25-02397.

These cases present evidence of medical harm, cyber interference, retaliation, and obstruction. I state clearly today: **the corruption is proven**, and the institutional response to my disclosures has been retaliation rather than accountability.

I. Background – Proven Corruption in the AstraZeneca / VA Program

I participated in the AstraZeneca COVID-19 vaccine program at a VA facility and suffered serious medical injury. When I began reporting those injuries and seeking transparency, I uncovered and documented:

- Suppression of adverse event data,
- Alteration and manipulation of electronic medical records,
- Misrepresentation of clinical outcomes,
- Coordination between VA officials and outside actors to avoid disclosure.

The supporting exhibits and evidence submitted in federal court demonstrate misconduct, cover-up, cyber tampering, and retaliatory targeting.

This is not speculation—it is proven by the documented pattern in my filings and the government's adversarial response.

II. Notification to Congress, Senate, and Oversight Bodies – and the Retaliation That Followed

I took every responsible step expected of a whistleblower. I notified:

- Every relevant congressional committee,
- Senate Veterans' Affairs and Judiciary Committees,
- House oversight bodies,
- Multiple Inspectors General (including VA OIG and DoD OIG),
- The Office of Special Counsel,
- Federal ethics and civil rights offices, and
- Other government oversight agencies.

Despite alerting all appropriate authorities, I **received no responses**, no acknowledgements, no follow-ups, and no protections.

Instead, what I received was retaliation.

Direct Adversarial Actions After My Notifications

Following my outreach:

- VA officials attempted to reduce my service-connected disability rating and compensation,
- My electronic access was interfered with,
- Evidence was altered or disappeared,
- My filings were obstructed,
- I was subjected to cyber intrusions and surveillance,
- I experienced administrative and procedural barriers designed to deter or punish me.

These actions did not begin until I notified Congress, OIGs, and Senate committees. They were a direct and adversarial reaction to my whistleblowing, not isolated mistakes.

III. Cyber Intrusion, Obstruction, and Systemic Retaliation

My devices, communications, and legal work were repeatedly targeted. I experienced:

• Unauthorized access to my MacBook and iPhone,

- Replication of my data on servers linked to government and private entities,
- Interference with court filings, including false "electronic signature" errors,
- Delays and misrouting of legal submissions,
- Attempts to deny or prevent electronic filing privileges.

These patterns align with known retaliation against federal whistleblowers—particularly those exposing corporate misconduct intertwined with government operations.

IV. Retaliation Inside the Courts

Within the SDNY and Second Circuit proceedings, there were:

- Unjustified removals of key defendants,
- Returned filing fees without explanation,
- Motions not docketed or delayed without cause,
- Attempts to undermine the legitimacy of my filings,
- Sudden procedural hurdles after notifying federal officials.

This sequence demonstrates not impartial review, but obstruction aligned with protecting the interests of powerful actors.

V. Why NYC Needs to Act

New York City has an obligation to protect its veterans where federal structures have failed. My experience demonstrates:

- A breakdown of medical transparency at VA facilities,
- A breakdown in whistleblower protections,
- A breakdown in federal oversight response,
- And a clear risk to thousands of NYC veterans who rely on VA care.

If a **disabled**, **formerly homeless Marine veteran** can face this level of retaliation merely for reporting harm, then the system is profoundly unsafe for all veterans.

VI. Requests to the NYC Council Committee on Veterans

I respectfully ask this Committee to:

1. Conduct a city-level investigation into VA misconduct in New York

Including EMR tampering, adverse event concealment, cyber intrusions, and retaliation.

2. Hold hearings with VA leadership, AstraZeneca officials, and federal oversight representatives

3. Establish a New York City Veteran Medical Integrity and Oversight Task Force

With the authority to review whistleblower complaints independently of the VA.

4. Pass local protections for veteran whistleblowers

To prevent disability reduction, retaliation, or cyber harassment as a response to disclosures.

5. Formally request a GAO and Inspector General review

Based on the evidence established in my federal cases.

VII. Closing

I have fought through homelessness, disability, and years of adversity. But nothing compares to the retaliation I faced when I reported **proven corruption** involving a major pharmaceutical entity and the VA.

No veteran should be punished for telling the truth.

No veteran should lose disability benefits as revenge for whistleblowing.

And no veteran should have to stand alone after notifying every federal body with zero response.

I ask this Committee to ensure that what happened to me does not happen to any other veteran in New York City.

PRAC ANDROW PORCZ

Thank you for your time.

Respectfully submitted, Eric Andrew Perez

Service-Connected Disabled Veteran

U.S. Marine Corps

December 3, 2025

DISTRICT COURT SDNY 500 PEARL NEW YORK, NY 10007

ERIC ANDREW PEREZ

SAN ANTONIO, FL 33576

3 NOVEMBER 2024

RE: 24-CV-356 RESPONSE TO DEFENADANTS OPPOSITION TO AMENDED

COMPLAINT

DEAR CHIEF CLERK:

PRESENT THE ENCLOSED TO THE JUDGE FOR REVIEW.

SINCERELY,

ERIC ANDREW PEREZ

CAP

ENCLOSED: RESPONSE

EXHIBITS TO RESPONSE

STATUTES

- 5 U.S.C. § 552a (PRIVACY ACT of 1974)
- 15 U.S.C. § 45(a)(45)
- 18 U.S.C. § 1001
- 18 U.S.C. § 2510 (ELECTRONIC PRIVACY ACT)
- 18 U.S.C. 1030 (COMPUTER FRAUD & ABUSE ACT)
- 18 U.S.C. 1030(a)(1)
- 18 U.S.C. 1030(a)(4)
- 21 U.S.C. Chapter 9 (Federal Drug & Cosmetic Act)
- 21 U.S.C. § 301-399f
- 21 U.S.C. § 331(e)
- 21 U.S.C. §§ 351-360
- 21 U.S.C. § 352
- 21 U.S.C. § 355(c)(5)
- 28 U.S.C. §535
- 31 U.S.C. §§ 3729 3733
- 41 U.S.C. §§ 2101-2107
- 42 U.S.C. § 1983

CFRS

5	CFR	2635
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- 21 CFR 54
- 21 CFR 312.6
- 21 CFR 312.32(a)
- 21 CFR 312.32(c)
- 21 CFR 312.32(c)(1)
- 21 CFR 312.66
- 36 CFR 1230
- 36 CFR 1230.3.b 5
- 38 CFR 0.601
- 38 CFR 1.15 (a)-(i) (f)
- 38 CFR 1.201
- 38 CFR 1.204
- 38 CFR 1.205
- 38 CFR 1.220
- 45 CFR 689.1

CASES

Bivens v. Six Unknown Named Agents of Fed. Bur. of Narc., 456 F.2d 1339 (2d Cir. 1972)

UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

ERIC ANDREW PEREZ,

Plaintiffs,

V.

1:24-CV-356 Jury Trial Demanded

Dr. Neil C. Evans, et.al.,

Defendants

PLAINTIFF RESPONSE TO FEDERAL & PRIVATE DEFENDANTS **INTRODUCTION**

Plaintiff's response to the federal & private defendants' response.

CONGRESSIONAL MEMBERS & SENATORS IGNORED ALERTS OF OVERT CORRUPTION PERTAINING TO THE AZD¹ STUDY

- 1. Since 2021, Plaintiff EAP has been notifying Congressional and Senate Members about his experience with the AZD administered within the VA 423 East 23 St New York, NY 10010. My first email 28 November 2021 was too Congressional Member Gerardo Bonilla Chief of Staff Alexandria Ocasio Cortez about the challenges he faced with the PREP Act and his ongoing litigation in the SDNY 21-CV-04844.
- 2. 23 July 2024 communication to U.S. Senate Judiciary Committee Plaintiff EAP has sent the following email and attachments aka exhibit 2, AZ² W Subpoenas, Proof of all service 7-22-24, Denial Pre motion discovery, Covance Laboratory Subpoena, Professional Misconduct MJS to the U.S. Senate Judiciary Committee after observing the illegal administration of Justice evinced as illegal modification of plaintiff's legal work product submitted to the SDNY, illicit service of subpoenas & complaint via illegal unwarranted electronic monitoring & censorship for

¹ AZD122 herein known as AZD & AZD STUDY herein known as AZDS

² AZ herein known as AZ

profit, illegal judicial decisions based on fabricated & engineered processes perpetrated throughout various geographical areas mainly Tennessee, SDNY sending of official printed materials to a fabricated PO Box aka Unit #8 within the USPS United Postal Service facility located at 11231 Main St San Antonio, FL 33576, and failure to investigate or respond to Judicial Complaint placed against Judge Netburn 4 June 2024 complaint # 02-24-90042-jm. 3. The current members of the U.S. Senate Judiciary Committee for 2024 are as follows: Majority (Democratic) Members: 1. Dick Durbin (Chair)—Illinois, 2. Sheldon Whitehouse—Rhode Island, 3. Amy Klobuchar–Minnesota, 4. Chris Coons–Delaware, 5. Richard Blumenthal-Conn, 6. Mazie Hirono-Hawaii, 7. Cory Booker-New Jersey, 8. Alex Padilla-California, 9. Jon Ossoff-Georgia, 10. Peter Welch-Vermont, 11. Laphonza Butler-California. Minority (Republican) Members: 1. Lindsey Graham(Ranking Member)—South Carolina, 2. Chuck Grassley—Iowa, 3. John Cornyn-Texas, 4. Mike Lee-Utah, 5. Ted Cruz-Texas, 6. Josh Hawley-Missouri, 7. Tom Cotton-Arkansas, 8. John Kennedy–Louisiana, 9. Thom Tillis–North Carolina, 10. Marsha Blackburn– Tennessee This committee handles oversight of the Department of Justice and is responsible for judicial nominations, including Supreme Court nominations, among other legal and constitutional issues (ChatGPT, personal communication, October 3, 2024).

4. The following email with attachments exhibit#2 were sent 23 July 2024:1:24-CV-356

Subject line: Judiciary Corruption complex censorship, special processes, and data Duplication To: Dick.Durbin@dickdurbin.senate.gov, Dianne.Feinstein@diannefeinstein.senate.gov, Sheldon.Whitehouse@sheldon.whitehouse.senate.gov, Amy.Klobuchar.@amyklobuchar.senate.gov, Chris.Coons@chriscoons.senate.gov, Richard.Blumenthal@richardblumenthal.senate.gov, Mazie.Hirono@maziehirono.senate.gov, Cory.Booker@corybooker.senate.gov, Alex.Padilla@alexpadilla.senate.gov, Jon.Ossoff@jonossoff.senate.gov, Peter.Welch@peterwelch.senate.gov, Laphonza.Butler@lephonzabutler.senate.gov, Lindsey.Graham@lindsaygraham.senate.gov, Chuck.Grassley@chuckgrassley.senate.gov, John.Cornyn@johncoryn.senate.gov, Ted.Cruz@tedcruz.senate.gov, Mike.Lee@mikelee.senate.gov Dear Senators, I am a service connected disabled formerly homeless drug & alcohol vaccine injured honorably discharged Marine veteran facing an adversarial system and scheme to cover up and defraud the United States of over a billion dollars related to the AZD held in Veterans Affairs Administration and active duty facilities. The SDNY AG Williams and his office have entered into a covert cover up scheme and covert harassment scheme involving a complex system of data duplication with special processes attached, rerouting of phone calls to cell phones, deleting records, and deployment of multiple waves of provocateurs and spies linked to various clear channel networks and law enforcement. Plaintiff states that he has been denied legal counsel in such a magnificent undertaking and continuously denied in his attempts to obtain counsel based on law enforcement interception of phone calls and emails based on the rerouting of his communications through a network of computers from DHS, FBI, and DARE and well as NYPD. The same applies to his cell phone calls being rerouted and special data bases and rules being set upon his data set and live access at root level data with AI and multiple programs set to alter legal work product, emails, and media sent from this plaintiff. The AG who has all access to my data has been engineering the defense of these defendant criminals and even covering up a Dr.

Misconduct complaint. Since 2021 these behaviors have been continuously employed against plaintiff and rules have been established upon the handling of this plaintiff's complaints and communications not limited to complex censorship and a covert harassment scheme managed internationally within Epperson North property where I purchased my 1 st home and they have deployed a number of foreign agents and scumbags who have been employed by Kew Forest HS in Queens where I worked part time. These individuals are part of an ongoing covert harassment scheme and enforcing of entrapment with access to all of my information. Essentially, they have created a socio economic and identity theft scheme that limits my socio economic ability and allows those deployed and involved in said scheme to profit from a secret laundromat dividing up a pie. Plaintiff states that this court is corrupt and decisions are made to enforce this scheme against the plaintiff and the cover up. These defendants have engineered an illegal surveillance and covert scheme against plaintiff hoping that I could not continue. Please feel free to contact this veteran. I am attaching the necessary files demonstrating this corruption and scheme.

Sincerely, Eric Andrew Perez 8137784354

5. Plaintiff EAP has emailed each member of the **Select Subcommittee on the Coronavirus**

Pandemic³ consisting of the following: The Select Subcommittee on the Coronavirus Pandemic consists of members from both parties. Here is a list of the current members:

Republican Members:1.Brad Wenstrup(Chair)—Ohio,2.Nicole Malliotakis—New York,3.

Mariannette, Miller-Meeks—Iowa,4.Debbie Lesko—Arizona,5.Michael Cloud—Texas,6.John

Joyce—Pennsylvania,7.Marjorie Taylor Greene—Georgia,8.Ronny Jackson—Texas,9.Rich

McCormick—Georgia Democratic Members:1.Raul Ruiz(Ranking Member)—California,2.Debbie

Dingell—Michigan,3.Kweisi Mfume—Maryland,4.Deborah K. Ross—North Carolina,5.Robert

Garcia—California,6.Ami Bera—California,7. Jill N. Tokuda—Hawaii. This subcommittee is

tasked with investigating various aspects of the COVID-19 pandemic, including government
responses and public health measures. It operates under the U.S. House Committee on Oversight
and Accountability (Personal Communication, Chat GPT, October 3, 2024).

6. 3 July 2024 plaintiff sent the following email and attachments labelled docket sheet 21-cv-04844, docket sheet 22-cv-01560, revised complaint CICP 4-23-24, Exhibits CICP Lawsuit-1 and AZ List including China 2, aka exhibit 1 to each member of the Select-Subcommittee-on-the-Coronavirus-Pandemic. The following email was sent 3 July 2024 the subject line: 1:24-cv-356 Covid 19 Select Subcommittee on the Coronavirus Pandemic Information AZ AZD Veterans Affairs racket To: brad.wenstrup@mail.house.gov, nicole.malliotakis@mail.house.gov,

mariannette.miller.meeks@mail.house.gov, debbie.lesko@mail.house.gov, michael.cloud@mail.house.gov, john.joyce@mail.house.gov,

majorie.taylor.greene@mail.house.gov, ronny.jackson@mail.house.gov, richard.mccormick@mail.house.gov, raul.ruiz@mail.house.gov, ronny.jackson@mail.house.gov, richard.mccormick@mail.house.gov, raul.ruiz@mail.house.gov, ronny.jackson@mail.house.gov, richard.mccormick@mail.house.gov, raul.ruiz@mail.house.gov, ronny.jackson@mail.house.gov, richard.mccormick@mail.house.gov, raul.ruiz@mail.house.gov, raul.ruiz.gov, raul.ruiz.gov,

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³ https://oversight.house.gov/subcommittee/select-subcommittee-on-the-coronavirus-pandemic/

debbie.dingell@mail.house.gov, kweisi.mfume@mail.house.gov, deborah.ross@mail.house.gov, robert.garcia@mail.house.gov, ami.bera@mail.house.gov, iill.n.tokuda@mail.house.gov states the following:

Dear Congressional Members: I am a service connected disabled formerly homeless drug & alcohol free honorably discharged Marine who would to officially inform the members of this committee about a truly outrageous and egregious scheme responsible for injuring veteran participants in an ongoing cover up known as the AZ 1222 Study. I have notified several other members of the Senate and Congress of this same situation and have received no response. My fight against the most fined and overtly corrupt biopharmaceutical company, the Veterans Affairs Administration, and the Southern District of New York began in May of 2021 when I filed the pro se lawsuit 21-cv-04844.

AZ covid 19 vaccine has never received emergency use authorization or any other official authorization for use in the United States and has proved to be the most fined and corrupt biopharmaceutical company that the United States has been in business with yet this disabled vaccine injured Marine has been forced to fight this fight without any representation, under the illicit control of the engineers & perpetrators of my injuries, and others who are actively involved in an ongoing cover up & obstruction of discovery being orchestrated by federal & other law enforcement authorities stationed in my neighborhood and outlying areas as part of an ongoing scheme & laundromat they set up here. Plaintiff Perez's multiple complaints 21-cv-04844 contains several notifications to the VAOIG and other authorities that he never received a response to as part of their scheme & cover up. 2024 Plaintiff Perez was forced again to file a second lawsuit against these defendants because of their deletion of test results, vital signs, and medical records in my Veterans Affairs Administration electronic medical record. These individuals have illegal electronic surveillance upon this plaintiff, illicit access to my surveillance cameras to delete and control who appears in my surveillance, illegal access to my ADT alarm, engineering of my neighbors who act in concert, illegal control of interstate commerce not limited to USPS mail legal documentation return receipts, and have set up an illegal obstruction apparatus to include illicit illegal gathering of plaintiff's information and illegal use of information by persons that are involved in this crime against veterans and are receiving various rewards from grants and other funds for their crimes from television and radio stations all over the nation connected to an ongoing media scheme. Plaintiff is actively being prevented from discovery in this case and the discovery of the veterans who were injured and participated in this study as part of an ongoing racketeering scheme while plaintiff is forced to struggle these individuals are going on vacation, receiving famous treatment, and false titles and privileges & access to federal agencies or make it appear that they do due to their access to this system and plaintiff's email, MacBook. And iPhone as part of their coercive covert scheme. Plaintiff has also discovered that AZ has several offices in China and other places. These individuals are abiding by and using a separate system and narratives, false links to persons, and handling my claims according to their requirements of social - economic classifications that I am to be treated a certain way and looked down upon as a person who is held in subservience to dope feens, crackheads, informants, and other undesirables, instead of being recognized for my own personal habits, genetics, intelligence, and talent I am being falsely associate and seen as a lunatic and being held under the boot of them. I have been through several years of this control scheme that involved and was initiated by my illegal convictions to attain the illegal goals of several corrupt law enforcement individuals and I am not a criminal but their criminals are being rewarded to this scheme.

I am being treated adversarially for their rewards and part of this ongoing scheme that has displaced this plaintiff 6 times previously and includes his direct family members & extended family members. For your review I am attaching the following: Docket sheet 21-cv-04844, 22-cv-01560 DC, Amended complaint 1:24-cv-356, and AZ Company listing including China Locations. Sincerely, Eric Andrew Perez Dishonored Marine Veteran Honor Theft 813-778-4354

- 7. The Plaintiff has also notified and emailed Senate Homeland Security and Governmental Affairs Committee for the 118th Congress includes the following members:

 Majority (Democratic) Members:1. Gary Peters (Chairman)—Michigan,2. Thomas Carper—Delaware,3.Maggie Hassan—New Hampshire,4.Kyrsten Sinema—Arizona(Independent),5.Jacky Rosen—Nevada,6.Richard Blumenthal—Connecticut,7.Jon Ossoff—Georgia,8.Laphonza Butler—California Minority (Republican) Members:1.Rand Paul (Ranking Member)—Kentucky,2.

 Ron Johnson—Wisconsin,3. James Lankford—Oklahoma,4. Mitt Romney—Utah,5. Rick Scott—Florida,6. Josh Hawley—Missouri,7. Roger Marshall—Kansas. This committee has a broad oversight responsibility, including issues related to national security, governmental affairs, and investigating responses to crises like COVID-19 (ChatGPT, personal communication, October 3, 2024).
- 8. Plaintiff states the emails that he sent to the **Senate Homeland Security and Governmental Affairs Committee** consist of a similar content with attachments to all members of upon a similar date have all been deleted from the plaintiff's iCloud email address. The only way that this deletion is possible is if there have been special permissions from Apple granted to the United States government or that plaintiff's iCloud and other email addresses are maintained on government or proxy servers.
- 9. The current members of the U.S. House Committee on Oversight and Accountability for The 118th Congress (2023-2024) include: Republican side, the committee is chaired by James Comer (KY-01), Pat Fallon (TX-04), Byron Donalds (FL-19), Marjorie Taylor Greene (GA-14), Lauren Boebert (CO-03). The Democratic members are led by Ranking Member Jamie Raskin (MD-08), Alexandria Ocasio-Cortez (NY-14), Katie Porter (CA-45), Cori Bush (MO-01), and Raja Krishnamoorthi (IL-08). This committee is responsible for overseeing federal

operations, ensuring government accountability and investigating matters of public concern. It has broad jurisdiction over numerous issues, ranging from national security to economic policy. (Personal Communication Chat GPT in October of 2024).

10. 21 August 2024 Plaintiff sent the following email to all the members of the U.S. House Committee on Oversight and Accountability for the 118th Congress (2023-2024): Subject Line:

Oversight necessary SDNY 1:24-cv-356, 1:21-cv-04844 Overt Corruption 1 billion dollar scheme AZ AZD overt Corruption

To: James.Comer@mail.house.gov, Jamie.Raskin@mail.house.gov, Jim.Jordan@mail.house.gov, Mike.Turner@mail.house.gov, Paul.Gosar@mail.house.gov, Virginia.Foxx@mail.house.gov, Glenn.Grothman@mail.house.gov, Michael.Cloud@mail.house.gov, Gary.Palmer@mail.house.gov, Clay.Higgins@mail.house.gov, Pete.Sessions@mail.house.gov, Andy.Biggs@mail.house.gov, Nancy.Mace@mail.house.gov, Jake.LaTurner@mail.house.gov, Pat.Fallon@mail.house.gov, Byron.Donalds@mail.house.gov, Scott.Perry@mail.house.gov, William.Timmons@mail.house.gov, Tim.Burchett@mail.house.gov, Marjorie.Taylor.Greene@mail.house.gov, Lisa McClain@mail.house.gov, Lauren Boebert@mail.house.gov, Russell.Fry@mail.house.gov, Anna Paulina Luna@mail.house.gov, Nick.Langworthy@mail.house.gov, Eric.Burlison@mail.house.gov, Mike.Waltz@mail.house.gov, Eleanor.Holmes.Norton@mail.house.gov, Stephen.Lynch@mail.house.gov, Gerald.E.Connolly@mail.house.gov, Raja.Krishnamoorth@mail.house.gov, Ro.Khanna@mail.house.gov, Kweisi.Mfume@mail.house.gov, Alexandria.Ocasio.Cortez@mail.house.gov, Katie.Porter@mail.house.gov, Cori.Bush@mail.house.gov, Shontel.Brown@mail.house.gov, Melanie.Stansbury@mail.house.gov, Robert.Garcia@mail.house.gov, Maxwell.Frost@mail.house.gov, Summer.Lee@mail.house.gov, Greg.Casar@mail.house.gov, Jasmine.Crockett@mail.house.gov, Dan.Goldman@mail.house.gov, Jared.Moskowitz@mail.house.gov, Rashida.Tlaib@mail.house.gov, Ayanna.Pressley@mail.house.gov Dear Members, I am a service connected disabled formerly homeless honorably discharged Marine veteran. Since 2021 I have been fighting the most corrupt and most fined biopharmaceutical company in the world known as AZ after participating in the AZD and being injured by AZ Covid 19 vaccine. Damian Williams of the SDNY has launched an all out cover up and bribery operation at the SDNY as well as deploying millions of dollars of equipment and assets to my area. This scheme and artifice developed and deployed by the SDNY has transpired over at least 3 years and taken place in over 6 geographical areas of where I lived to include and not limited to the following zip codes:10304, 10461, 10459,11368, 43545 where they have repeated the same deprivations and tradecraft against this plaintiff using conscripts & proxy groups including Jehovah Witnesses, Israel Defense Forces, and of course extremist groups that they are using in this program. I have emailed dozens of Congressmen about this and have been trying to prove my case even though Judge Newborn is the Judge and is clearly on the side of AZ and the shows from Stein & Weinstein Productions. Weinstein was my orthopedist and Melanie Jay Stein is the dishonorable employee of the VA that has beeb taking checks from Astra and the VA while killing our veterans using AZ. This scheme deployed to my neighborhood and includes a few federal agents who have been assigned to my name with their nasty ugly hores serving the participants of this scheme and assisting in achieving their goals that are subsequently attached to the negative decisions I am receiving from the Court and are under direct supervision of the Department of Justice. I am a former database administrator of the Company Nester Incorporated where we ran, protected, monitored the internet as well as issued all the cell phone numbers in North America. This court and the DOJ has direct access to my iCloud email server, iCloud contents, and other email services meaning they are maintaining and have deployed a special server with my information and the functionality off Apple products which I know to be possible with the technology available which is totally illegal. The decisions that are made are being made and perpetrated from a remote location and by individuals known as Dave a former employee of the AKC American Kennel Club where I was an employee and others who have been allowed to make decisions in this case as well as having access to government systems and apps that have been set up with alerts about this veteran to act adversarially with database administrators and federal agents in charge like Nicole Hoighon, Donnie Brasco Joe Pistone, Bob Kraft, Sandusky, and others all of whom have had direct contact and control of members of my family which is familiar interference as well as using individuals in the witness protection program and other programs like DARE. This Court also refuses to enforce a valid subpoena to solve the number 1 controversy in this case created by Dr. Melanie Jay Stein. This scheme is engineered and perpetrated through various groups who have contact with the persons stationed here that report about this case and plaintiff without ever contacting this plaintiff. This has been ongoing for over a year and I have been controlled by these groups for years. I noticed that in this latest decision the Judge stated that she was denying my motion 11 based on lack of filings while I asked for sanctions baed on failure to perform and investigation. It appears that there is a deliberate scheme and operation with Stein and Weinstein Weinstein is a Doctor and NYPD member and I have personally scene him in uniform. I am attaching my latests declaration for sanctions and the FOIA denial to prevent a class action lawsuit for your review. It is unfortunate that they have been abler to perpetrate this for so long at the cost of billions of dollars without even acknowledging this veteran and those that they have injured with AZ. Sincerely, Eric A. Perez8137784354

Attachments: Declaration 2 in Support of sanctions, Amended Complaint AZ AB,

FOIA Denial 7-23-24, exhibit #3

11. 21 August 2024 Additionally, plaintiff has sent similar individual emails and attachments to various members of Congress such as Jim Jordan, and Trey Gowdy 1:24-cv-356 DKT #91 illegal

Administration of Justice SDNY Overt Court Corruption Judiciary Committee Referral To: jim.jordan@mail.house.gov

Dear Honorable Congressman: I am a service connected disabled formerly homeless honorably discharged Marine veteran. Since 2021 I have been fighting the most corrupt and most fined biopharmaceutical company in the world known as AZ after participating in the AZD and being injured by AZ Covid 19 vaccine. Damian Williams of the SDNY has launched an all out cover up and bribery operation at the SDNY as well as deploying millions of dollars of equipment and assets to my area.

This scheme and artifice developed and deployed by the SDNY has transpired over at least 3 years and taken place in over 6 geographical areas of where I lived to include and not limited to the following zip codes:10304, 10461, 10459,11368, 43545 where they have repeated the same deprivations and tradecraft against this plaintiff using conscripts & proxy groups including Jehovah Witnesses, Israel Defense Forces, and of course extremist groups that they are using in this program. I have emailed dozens of Congressmen about this and have been trying to prove my case even though Judge Newborn is the Judge and is clearly on the side of AZ and the shows from Stein & Weinstein Productions. Weinstein was my orthopedist and Melanie Jay Stein is the dishonorable employee of the VA that has beeb taking checks from Astra and the VA while killing our veterans using AZ. This scheme deployed to my neighborhood and includes a few federal agents who have been assigned to my name with their nasty ugly hores serving the participants of this scheme and assisting in achieving their goals that are subsequently attached to the negative decisions I am receiving from the Court and are under direct supervision of the Department of Justice.

I am a former database administrator of the Company Nester Incorporated where we ran, protected, monitored the internet as well as issued all the cell phone numbers in North America. This court and the DOJ has direct access to my iCloud email server, iCloud contents, and other email services meaning they are maintaining and have deployed a special server with my information and the functionality off Apple products which I know to be possible with the technology available which is totally illegal. The decisions that are made are being made and perpetrated from a remote location and by individuals known as Dave a former employee of the AKC American Kennel Club where I was an employee and others who have been allowed to make decisions in this case as well as having access to government systems and apps that have been set up with alerts about this veteran to act adversarially with database administrators and federal agents in charge like Nicole Hoighon, Donnie Brasco Joe Pistone, Bob Kraft, Sandusky, and others all of whom have had direct contact and control of members of my family which is familiar interference as well as using individuals in the witness protection program and other programs like DARE. This Court also refuses to enforce a valid subpoena to solve the number 1 controversy in this case created by Dr. Melanie Jay Stein. This scheme is engineered and perpetrated through various groups who have contact with the persons stationed here that report about this case and plaintiff without ever contacting this plaintiff. This has been ongoing for over a year and I have been controlled by these groups for years. I noticed that in this latest decision the Judge stated that she was denying my motion 11 based on lack of filings while I asked for sanctions baed on failure to perform and investigation. It appears that there is a deliberate scheme and operation with Stein and Weinstein Weinstein is a Doctor and NYPD member and I have personally scene him in uniform. I am attaching my latests declaration for sanctions

It is unfortunate that they have been abler to perpetrate this for so long at the cost of billions of dollars without even acknowledging this veteran and those that they have injured with AZ. Sincerely, Eric A. Perez 8137784354

Attachments:" Declaration 2 in support of sanctions, Amended complaint AZ AB 7-1, FOIA Denial FDA 7-23-24, exhibit 3.

- 12. Plaintiff has received no response from Jim Jordan and the emails I sent to Trey Gowdy have been deleted from my iCloud email sent box.
- 13. September of 2024 plaintiff planned and executed a self-funded trip to the Capitol of Washington DC exercising his rights to become politically active and alert various Congressional Members to this billion-dollar fraud against the United States government perpetrated by Astra Zeneca and unknown federal agents acting in collusion with them. 9 May 2024 plaintiff checked into his hotel located just under a mile from the 2157 Rayburn House Office Bldg. and planned to attend the Oversight Committee meeting titled, "Where Do We Go From Here⁴?
- 14. Morning of 10 September 2024 plaintiff set off to the free breakfast in his best tailor made suit. After breakfast plaintiff walked over to 2154 Rayburn Capitol Bldg. and was directed

7

⁴ https://oversight.house.gov/hearing/where-do-we-go-from-here-examining-a-path-forward-to-assess-agencies-efforts-to-prevent-improper-payments-and-fraud-2/

where to find the Oversight Subcommittee Room. Plaintiff located the room and spotted a picture of the 13 victims of the Abbey Gate bombing located directly opposite the room. Immediately, plaintiff felt a shiver traveling up his spine and a taste of hypocrisy in his mouth. Out of respect, honor and reverence for those scarified at Abbey Gate the plaintiff stood at parade rest guarding the Oversight Committee door staring at those brave women and men of honor who made the ultimate sacrifice for our freedoms. Plaintiff reflected upon his experiences in the Marines and observed the passersby until OIG Horowitz passed him in the hall with his entourage.

15. Plaintiff attended the meeting which was mostly about Covid 19 fraud and the future prevention of the \$350-\$500-billion-dollar industry without incident and decided to send an assortment of legal work product in the form of the Amended Complaint and Declaration in support for Sanctions to The Honorable Michael E. Horowitz via email upon my return home. While in the Rayburn Capitol Building plaintiff did deliver this legal work product to the Congressional Office of Gus Bilirakis of his hometown of Florida's 12th District. Plaintiff has not had a response from Congressional Member Bilirakis.

16. 18 September 2024 Plaintiff EAP sent the following email to the Honorable Michael E.

Horowitz Inspector General of the United States Department of Justice

michael.e.horowitz@usdoj.gov Subject Line: Covid 19 fraud AZ 1222 study fraud

1:21-cv-04844 & 1:24-cv-00356 SDNY Attachments: Amended Complaint, Declaration in support of Motion for Sanctions, Letter to Judge Broderick SDNY, exhibit #4

Dear Honorable Sir:

Honorable Michael E. Horowitz

950 Pennsylvania Ave N.W.

Washington, DC 20530

202-514-3435

ERIC ANDREW PEREZ

11231 MAIN ST #813

SAN ANTONIO, FL 33576

experttrainers@icloud.com

813-788-4354

12 September 2024

RE: SDNY file # 1:21-cv-04844 1:24-CV-356 Eric Andrew Perez v AZ et. al

Dear Honorable Michael E. Horowitz:

My name is Eric Andrew Perez, I am a service-connected disabled vaccine injured formerly homeless Marine Corps veteran. I was in attendance of your oversight meeting of 10 September 2024, 2154, Rayburn titled "Where do we go from here?". I was deeply disturbed by the facts discussed in this meeting and the astounding amount of fraud perpetrated against the

United States citizens through Covid 19 pandemic schemes.

I could have watched the meeting on C-span but then I would have missed the opportunity to experience the political process in person. I was the first to arrive at the Oversight Committee doors and stood at parade rest in front of the picture of the 13 brave servicemembers who perished at Abbey Gate Afghanistan for most of the time awaiting your arrival. I have

deliberately been placed in the fight of my life in a deliberately perpetrated 'Covid 19 pandemic scheme' in the form of what is commonly known as the AZ Phase 3 randomized double-blind study that was administered at the Department of Veterans Affairs Harbor Health Care 423 East 23 St. New York, NY 10010.I was an essential worker during the Covid 19 pandemic in New York City and was honored to serve the city of my birth during the worse pandemic in its history. After being injured by the AZ vaccine and then reporting it to the Study Investigator and the VA employee Dr. Melanie Jay Stein I was informed by Dr. Stein that I had not received the vaccine

and told to schedule an appointment to be inoculated with the Pfizer covid 19 vaccine. The details of my injuries are contained in the SDNY file number 21-cv-04844 and 24-cv-356. I am a former employee of the "Company" known as Neustar Incorporated as

- a <u>Salesforce.com</u> Administrator. Neustar Incorporated is the internet and issues every cell phone number in North America. I have discovered that a group of individuals with illegal access to my data and perpetrating this and other schemes of socio-economic prism against me using their network of computers and protocols they have established to racketeer using this plaintiff without responding to him. These individuals have deliberately perpetrated this situation to secretly profit to my battle against AZ and their partners acting in collusion at the SDNY with AG Damion Williams and have engineered and arranged my whole neighborhood of switches and snitches who all receive payments from various organizations. This scheme which has been replicated and perpetrated on the other veteran participants dozens of times. This criminal syndicate of thieves' doctors and staff acting in concert and collusion with these federal officers and the SDNY have been covering up and acting adversarial to this veteran and an undisclosed number of other veterans as part of their scheme to defraud the government of over a billion dollars. Throughout my battle to be compensated for
- my injuries I have discovered that they are using a special system and program to illegally administer justice by issuing illicit illegal decisions in my cases in support of their scheme from various places where they operate from with "DARE" and other elements of the DOJ. I have written to each member of The Covid 19 Congressional committees and received no response.

Sincerely, Eric Andrew Perez Enclosures: Amended Complaint Declaration in support of Motion for Sanctions Letter to Judge Broderick SDNY

- 17. 17 October 2024 Plaintiff Perez received the following response from the Department of Justice 950 Pennsylvania Ave NW, Washington, DC 20530-0001, ex 9.
- 18. After plaintiff emailed DOJ OIG Horowitz about the above response, he received plaintiff received the following response: 18 October 2024, note COVID 19 was misspelled, ex 10.
- 19. As part of this scheme and ongoing operation involving several agencies and programs under the direction of the FBI, DOJ, and Clandestine Services such as the witness protection program plaintiff has experienced and been in the vicinity of several high-level informants and officials who run this scheme. December of 2023, Plaintiff relocated from Queens NY 11101 formerly of 11368 (Alexandria Ocasio Cortez's District) to Tampa Bay Florida as he purchased a newly constructed townhouse. EAP spotted AOC on his block leaving a UC under cover officer's house on his block. EAP has also spotted the White House Press Secretary Karine Jean-Pierre Congressional Member Speaker of the House Nancy Pelosi, Congresswoman Rashida Tlaib and US Attorney General Merrick Garland in his area after emailing him. Since 2016 while living in Staten Island plaintiff has spotted Sammy the Bull Gravano and then his mortal enemy John Gotti Jr. within the same block.

- 20. 2018 2020 while at Fresh Direct EAP spotted AOC in Fresh Direct Headquarters securing food deliveries for her constituents. Plaintiff also spotted the AOC within the confines and operating out of Harbor Health Care 423 E. 23 st NYC. Plaintiff used to attend AOC Townhall meetings in person. AOC's security used to ice grill EAP who was the best dressed & looking in her audience and ignore what EAP perceived as threats.
- 21. December 2020, EAP emailed AOC at her Townhall meeting address three questions about labor and workers rights. The email contained no threats of any kind in any form. 11 December 2020 EAP received a call from a person identifying himself as Jay Banks of the Threat Assessment Group United States Secret Service. EAP had a very pleasant conversation with the agent and took his contact information and name Jay Banks 2022241495. EAP recorded the conversation and was told that he was no threat to AOC. This conversation was illegally deleted from his iCloud.
- 22. EAP states that this threat assessment was perpetrated under false pretenses to gain enhanced access to the plaintiff and to initiate the MY MIA (Missing In Action) & Soggy Dollar group scheme at the Veteran Affairs involving the AZD and an ongoing operation pertaining to operation Warp Speed and the Coronavirus Pandemic. EAP reported this to the OIG Capitol Police. EAP believes that AOC knows MJS personally and was working with the Ad Astra group at Harbor Healthcare.
- 23. 12/22/2020 8:14 am EAP received email from Ronald Gregory Assistant Inspector General⁵
 Office of the Inspector General United States Capitol Police 202 593-3868 Office
- Cell who referred EAP to the Capitol Police Threat Assessment Group.
- 24. 22 December 2020 EAP attended his appointment at the Vaccine Center with MJS⁶12:30pm at Harbor Health Care VA. EAP believes that these unusual and illegal tradecrafts used against

10

⁵ Most likely a fake name to insulate the "clandestine criminals" involved in this scheme.

EAP was done vindictively & with malice to covertly exploit, injure, maim, and cause his life altering & permanent injury while denying any of this transpired. The deliberate depraved indifference and illegal covert scheme executed against plaintiff has been this groups primary source of intelligence, counterintelligence, and socio-economic success for well over a decade.

AZ COVID VACCINE CAUSES SERIOUS LIFELONG SIDE EFFECTS

25. Deep vein thrombosis (DVT) and persistent peroneal vein thrombosis have been linked to some COVID-19 vaccines, including the AstraZeneca vaccine, though these occurrences are rare. Early in the vaccine's rollout, reports of blood clotting incidents led to investigations into a condition called vaccine-induced immune thrombotic thrombocytopenia (VITT). VITT is a rare, serious condition involving unusual blood clotting and low platelet counts that can lead to thrombotic events, such as deep vein thrombosis or thrombosis in other veins, including the peroneal veins. AZ AZD vaccine have documented thrombotic, neurological, and liver injuries associated to it. Here's a summary of what research and health authorities have noted: 1. Vaccine-Induced Immune Thrombotic Thrombocytopenia (VITT): -Some individuals experienced rare thrombotic events, particularly with the AstraZeneca and Johnson & Johnson vaccines. VITT was predominantly observed within 4 to 28 days after vaccination and was associated with thrombosis in unusual sites, like the cerebral venous sinuses and, less commonly, in deep veins (e.g., peroneal or deep leg veins). 2.Deep Vein Thrombosis (DVT): DVT is a more common location for thrombosis in VITT cases than other types of clots. However, these instances are still rare relative to the number of vaccinations administered. Certain populations may have a higher risk, including younger adults and women, although additional risk factors such as smoking, obesity, or a history of clotting disorders can play a role.

⁶ Dr. Melanie Jay Stein herein known as MJS

3. Relative Risk and Precautions: DVT and similar clotting conditions after AstraZeneca vaccination were infrequent. When they did occur, health professionals often performed additional assessments for VITT. Since the early reports, many countries have restricted the AstraZeneca vaccine for younger populations or those at increased risk of clotting disorders to mitigate this rare side effect. (Personal Communication GPT Oct. 28, 2024). Neurological injuries: Yes, the AstraZeneca COVID-19 vaccine has been associated with rare cases of neurological injuries. While the vaccine is generally safe and effective, some individuals experienced neurological side effects, which led to investigations into the potential risks. Here are the primary neurological conditions linked to the AstraZeneca vaccine: 1. Guillain-Barré Syndrome (GBS)-Description: Guillain-Barré Syndrome Association: Some cases of GBS have been reported following AstraZeneca vaccination. While this side effect is extremely rare, it was noted as a potential adverse effect, especially among older adults. Monitoring: Regulatory agencies, such as the European Medicines Agency (EMA), added GBS as a potential side effect and have closely monitored cases. However, the risk remains low, and the benefits of vaccination continue to outweigh the risks. 2. Transverse Myelitis (TM)-Description: Transverse myelitis is an inflammation of the spinal cord that can cause pain, muscle weakness, sensory problems, and, in some cases, paralysis. Association: A few cases of transverse myelitis were reported during early trials of the AstraZeneca vaccine, which prompted temporary pauses in the trials. 3. Cerebral Venous Sinus Thrombosis (CVST) with Vaccine-Induced Immune Thrombotic Thrombocytopenia (VITT)- Description: CVST is a rare type of blood clot in the veins of the brain, which can lead to neurological symptoms like severe headache, vision changes, and even stroke. Association: CVST in combination with VITT (a condition of low platelet counts and abnormal clotting) has been documented following AstraZeneca vaccination. This condition led

to regulatory warnings and adjustments to vaccine guidance, particularly for younger individuals.

4. Peripheral Neuropathy and Other Minor Neurological Symptoms Description: Some individuals have reported symptoms such as tingling, numbness, or minor nerve pain in the extremities following vaccination. Summary of Safety and Risk Management - The AstraZeneca vaccine's neurological risks are rare, with most neurological side effects observed in less than 1 in 100,000 cases. Public health agencies continue to monitor and study these risks closely, providing treatment protocols and patient guidelines to manage adverse effects. In response to these rare but serious risks, some countries have recommended alternative vaccines for certain populations (e.g., younger adults) who may have a slightly higher susceptibility to these conditions. (Personal Communication Chat GPT October 28, 2024).

Hepatomegaly, or enlargement of the liver, has not been widely reported as a known side effect directly associated with the AstraZeneca COVID-19 vaccine. The more commonly recognized adverse effects of the AstraZeneca vaccine are related to blood clotting disorders, such as vaccine-induced immune thrombotic thrombocytopenia (VITT), and rare neurological issues, as discussed previously. However, some points to consider regarding liver-related effects are: 1. Immune Response and Inflammation: Like other vaccines, the AstraZeneca vaccine can trigger an immune response, which may cause mild, temporary inflammation. In rare cases, certain vaccines can lead to liver enzyme elevations, but these are generally short-lived and not typically associated with physical liver enlargement or hepatomegaly. 2. Autoimmune Hepatitis (Rare Cases): There have been a few isolated reports of autoimmune hepatitis following COVID-19 vaccination, including with the AstraZeneca vaccine. (Personal Communication Chat GPT October 28, 2024).

PREP ACT IMMUNITY DOES NOT APPLY TO AZ, FEDERAL DEFANDANTS OR MULLIGAN DUE TO THE WILLFUL MISCONDUCT CLAUSE

26. AZ has exploited what is known as the PREP Act scheme to defraud the United States of over 1.2 billion dollars citing total immunity under HHS (Health & Human Services) guidelines outlining the rules for Pandemics & threats to national security. Immunity protections under the PREP Act are unavailable for AZ, federally defended defendants, or Dr. Mulligan due to their "willful misconduct" pertaining to the design & perpetration of the AZD inflicting these known significant lifelong physical and mental injuries: liver disease plaintiff's liver has become enlarged by 6 inches, initial diagnosis of a 'DVT' Deep Vein Thrombosis evolving to persistent peroneal vein thrombosis, neurological damage in the form of memory; motor function; thought processing; and daily migraine headaches all while participating and deploying a complex cover up in an ongoing civil criminal conspiracy against him and thousands of fellow veteran AZD participants.

27. Initially, AZ AZD perpetrated the AZD under the Investigational New Drug (IND)

Application⁷ while pursuing Emergency Use Authorization⁸ which AZ withdrew in November

2021 (Personal Communication Chat GPT in October of 2024). Since withdrawing its Emerency

Use Authorization aplication in the United States AZ has withdrawn their Covid 19 vaccine

globally siting lack of demand⁹8 May 2024. AZ has admitted its Covid vaccine can cause rare

side effects¹⁰ which include but not limited to blood clots. AZ has received over 1.2 billion dollars

in funding from the United States. Dec 22, 2021 Additionally, the US government awarded

US\$125.6 million and over US\$1.2 billion in funding to AstraZeneca for vaccine trials,

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 $^{^7\} https://www.fda.gov/drugs/types-applications/investigational-new-drug-ind-application$

⁸ https://www.fda.gov/drugs/emergency-preparedness-drugs/emergency-use-authorizations-drugs-and-non-vaccine-biological-products

https://www.reuters.com/business/healthcare-pharmaceuticals/astrazeneca-withdraw-covid-vaccine-worldwide-telegraph-reports-2024-05-07/

https://www.telegraph.co.uk/news/2024/04/28/astrazeneca-admits-covid-vaccine-causes-rare-side-effect/

manufacturing¹¹, ... AZ AZD Covid 19 vaccine is so dangerous that the United States has donated millions of doses to third world countries like Brazil.¹²

AZ HAS HISTORY OF FINES & LAWSUITS

28. Several class action lawsuits against AZ have been initiated in the following regions of the world based on mass claims of injuries directly caused by AZ Covid 19 vaccine. AstraZeneca has faced several class action lawsuits worldwide related to its COVID-19 vaccine, primarily due to rare adverse effects such as blood clotting events and vaccine-induced immune thrombotic thrombocytopenia (VITT). Here's an overview of notable class actions filed against AstraZeneca for its COVID-19 vaccine: 1. United Kingdom Basis of Lawsuit: A class action lawsuit in the UK includes claimants who allege they suffered serious health issues after receiving the AstraZeneca vaccine, particularly cases of VITT and other blood clotting disorders. Plaintiffs argue that AstraZeneca and regulatory bodies did not provide adequate warnings regarding these rare side effects. 2. Australia-Basis of Lawsuit: Australian claimants have filed a class action for adverse effects, including blood clots, that they associate with the AstraZeneca vaccine. The lawsuit claims that AstraZeneca and the Australian government failed to adequately warn the public of these risks 3. Canada-Basis of Lawsuit: In Canada, individuals reportedly affected by AstraZeneca vaccine side effects, such as blood clotting conditions, have considered or initiated class actions. Some claimants argue there was insufficient transparency about the risks, and a few legal actions have been in development, particularly in provinces that used the AstraZeneca vaccine widely. 4. European Union (Various Countries)-Basis of Lawsuit: Across the EU, various lawsuits and compensation claims have emerged, with a focus on rare adverse effects such as VITT and other thrombotic events. In countries like Germany, individuals filed lawsuits to seek

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¹¹https://nortonsafe.search.ask.com/web?omnisearch=yes&q=astra+zeneca+receives+money+from+us+for+astra+zeneca+covid+19+vaccine

¹² https://br.usembassy.gov/u-s-donates-more-than-2-million-doses-of-astrazeneca-vaccines-against-covid-19-to-brazil/

damages for health complications post-vaccination. Each lawsuit often addresses whether AstraZeneca or the relevant health authorities adequately communicated potential risks and compensated those impacted. Because these legal proceedings are ongoing, it may take time before settlements or verdicts are reached. (Personal Communication Chat GPT October 28, 2024).

29. AZ has a history of criminal conduct within the United States. AZ is operating over 150 separate entities in 30 different countries including 3 located on mainland China. AZ has been one of the most fined biopharamceutical companies operating in the United States. Here are some of the most notable fines and violations against AstraZeneca by the United States, including amounts and dates: 1.2003 Zoladex Misbranding and Overcharging- Amount: \$355 million - Date: June 2003. AstraZeneca settled civil and criminal charges for misbranding its prostate cancer drug Zoladex and overcharging Medicaid. This case included both civil penalties and criminal fines., 2. 2010 - Seroquel Off-label Marketing and Kickbacks - Amount: \$520 million - Date: April 2010 - Details: AstraZeneca paid this amount to settle allegations that it illegally promoted its anti-psychotic drug Seroquel for uses that were not approved by the FDA. The settlement included allegations of paying kickbacks to physicians to encourage the drug's prescription., 3. 2015 - Nexium and Other Drugs Kickback Scheme - Amount: \$46.5 million Date: February 2015 - Details: AstraZeneca resolved claims under the False Claims Act, which alleged that it engaged in a kickback scheme with Medco Health Solutions to promote the use of Nexium and other drugs by providing concessions to Medco in return for preferential formulary treatment., 4. 2018 - Foreign Corrupt Practices Act (FCPA) Violations - Amount: \$5.5 million -Date: August 2018 - Details: AstraZeneca agreed to pay \$5.5 million to settle U.S. Securities and Exchange Commission (SEC) charges for violating the Foreign Corrupt Practices Act. This

involved allegations of improper payments by its subsidiaries in China and Russia to boost drug sales. These fines represent some of the major instances where AstraZeneca faced legal and financial consequences in the United States for regulatory and compliance violations. (Personal Communication Chat GPT 8 October 2021)

30. The AZ vaccine AZD or Vaxzevria was not distributed throughout the United States and did not receive Emergency Use Authorization (EUA). The United States is unwiling to distribute the AZD coronavirus vaccine due to the well known "Blood Clotting" issue: Cases of thromboembolic events in 2021 flared up the discussion about the safety of AZ's AZD vaccine. We hereby report three cases of pulmonary embolism (PE), one case of extended portal vein thrombosis, and one case of combined portal vein thrombosis and PE within 2 weeks after vaccination with the AZ AZD vaccine in a 60-year-old, a 50-year-old, a 33-year-old, a 30-yearold, and a 40-year-old male in that year¹³. All patients were healthy before. In three patients, we observed thrombocytopenia and to some extent unusually low antibody levels for the Spike Protein (S-protein), while the other two had normal thrombocyte counts. Only one patient had anti-platelet factor 4 (PF4)-antibodies detectable as it has been described in the "heparin-induced thrombocytopenia (HIT)-like" disease of "vaccine-induced prothrombotic immune thrombocytopenia" (VIPIT) and we therefore assume that heterogeneous mechanisms led to PE. Therefore, we advise to collect and report more cases, in order to determine the age-related risks of vaccination balanced against the benefits of immunity to SARS-COV-2 for the AZD vaccine in order to gain knowledge for the next pandemic ¹⁴.

In 2021 several European countries had temporarily suspended vaccination with AZ's COVID-19 vaccine (AZD) for persons under 60 years because of the occurrence of more than 60 cases of

¹³ https://pmc.ncbi.nlm.nih.gov/articles/PMC10478733/

¹⁴ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10478733/

thromboembolic events after AZD vaccination until the middle of the year. These include pulmonary embolism (PE), deep vein thrombosis (DVT), and sinus vein thrombosis (SVT)¹⁵.

MULTIPLE AZD HAULTS DUE TO SIDE EFFECTS

31. The first reports of rare blood clotting events (thrombotic events) potentially associated with the AstraZeneca COVID-19 vaccine (AZD, also known as Vaxzevria) emerged in early March 2021. Specifically:1. March 9, 2021: Austria was one of the first countries to suspend the use of a specific batch of the AstraZeneca vaccine as a precaution after a 49-year-old nurse died of severe blood clotting days after receiving the vaccine. This prompted other countries to investigate similar cases., 2. March 11, 2021: Denmark reported a death due to a rare blood clot in a recipient of the AstraZeneca vaccine and temporarily suspended its use. Other countries, including Norway and Iceland, soon followed suit, pausing the vaccine's administration to investigate the issue further., 3. March 15, 2021: Germany and several other European countries paused the use of AstraZeneca's vaccine in response to these reports. Around this time, the European Medicines Agency (EMA) began a formal review to investigate the link between the vaccine and these rare thrombotic events. By March 18, 2021, the EMA had completed a preliminary review, concluding that while the vaccine's benefits continued to outweigh its risks, there was a possible link between the vaccine and rare blood clotting events, particularly in younger adults. The EMA and other health authorities recommended including a warning for these rare side effects in the vaccine information, and many countries restricted AstraZeneca's use to older age groups as a result. Ultimately, while AstraZeneca's vaccine was widely distributed globally, it was not granted emergency use authorization by the FDA in the U.S. (Personal Communication Chat GPT 8 October 2024).

COERCION & EXPLOITATION OF VETERANS & DOD PERSONNEL

¹⁵ https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10478733/

32. AZ deliberately misrepresented the AZ 1222 Study Phase III Doubleblind, Placebo-controlled Study of AZD for the Prevention of COVID-19 in Adults Clinical Trials.gov ID NCT04516746¹⁶through the illicit and illegal use of military, veteran, and national guard installations to experiment on unwhitting and coerced veteran, active duty, disabled, service connected, veteran family members, and other protected status veterans in its study. AZ and the Department of Defense utilized an undiclosed number of veteran participants and veteran family members to test and study the result of their inferior and dangerous vaccine known as AZD. AZ and the DOD Department of Defense marketed and carried out this study as being administered through civilian research facilities when in fact this study was carried out in 78 domestic government facilities and 5 foreign military facilities as part of their experiment. A total of 32,451 participants underwent randomization, in a 2:1 ratio, to receive AZD (21,635) participants) or placebo (10,816 participants)¹⁷. The majority of these test subjects are veterans or maintain affiliations with the DOD through their employment or status as a veteran. Since withdrawing its inferior and dangerous product from the global market AZ and the Department of Defense has executed a global cover up through the use of a deliberate unwarranted invasion of privacy and a scheme to turn the neutral United States government apparatus into an adversary through complex censorship to thwart and repel any attempts at the dicovery of the number of injured through their participation in the AZD. Its treament of honorable veterans anad their families is disgraceful.

33. There are 84 listed locations where the AZD were administrated from. ¹⁸Plaintiff has discovered that the zip codes of the study locations correspond with Active Duty, Veteran Affairs, National Guard, Reservist, and active duty facilities within the United States. The White

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¹⁶ https://clinicaltrials.gov/study/NCT04516746

¹⁷ ttps://www.nejm.org/doi/full/10.1056/NEJMoa2105290

¹⁸ https://clinicaltrials.gov/study/NCT04516746

House and the Department of Defense only listed the following locations as part of Operation Warp Speed to produce and distribute an effective countermeasure to combat the Covid 19 pandemic in conjuction with AstraZeneca COVID-19 vaccine (AZD) study involving veterans and active-duty military personnel in the United States these sites included: 1. Naval Medical Center San Diego(California), 2. Brooke Army Medical Center (San Antonio, Texas), 3. Wilford Hall Ambulatory Surgical Center (San Antonio, Texas), 4. Walter Reed National Military Medical Center (Bethesda, Maryland), 5. Fort Belvoir Community Hospital (Fort Belvoir, Virginia). These sites were selected to enroll participants for the AstraZeneca vaccine trial, aiming to support vaccine safety and efficacy evaluation. (Personal Communication Chat GPT 8 October 2024).

34. The actual number of veteran and active duty participants in the AZD is much higher than listed facilities would suggest. ¹⁹The 78 facilities listed by city & zip code correspond with an veteran, active or national guard military facility. In the interest of time and space the plaintiff will not list the names and addresses of each corresponding military, veteran, or national guard facility that corresponds with the Study facilities, but an in depth discovery of the addresses these locations are necessary to prove the illegal practices of AZ and the Department of Defense.

35. Veterans make the perfect guinneau pigs because we are highly patriotic/easily coerced through years of indoctrination & programming, highly documented with thousands of pages of documented occurrences and medical information all electronically categorized, and easily disregarded as nuts; conspiracy theorists; or extremists. AZ perpetrated one the biggest frauds in the history of the United States through the exploitation and abuse of veterans.

36. The development and deployment of the AZ AZD Covid 19 vaccine in the United Kingdom was also handled differently from the AZD in the United States. There were 20 locations where

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¹⁹ https://clinicaltrials.gov/study/NCT04516746

AZ held the AZD within the United Kingdom²⁰ Investigating a Vaccine Against COVID-19 ClinicalTrials.gov ID NCT04400838

Sponsor University of Oxford Information provided by University of Oxford (Responsible Party)

Last Update Posted 2023-08-0. The majority of the facilities appear to be civilian research

facilities affilliated with AZ and not military in nature.

37. The perpetration of the AZD in the United States has been one of the grandest schemes perpetrated against the United States with the support of a wide range of DOD Department of Defense, foreign & domestic Federal agents, and a cast of thieves and thieves doctors & staff employed at Veteran facilities throughout the United States operating with unwanton disregard of the dangers posed to its veteran participants.

AZ HAS ENGAGED IN A PATTERN OF RICOH ACTIVITIES

38. This study was engineered, designed, and perpetrated based on principals of gaming the law around breaking points of each workflow processes specifically designed with foreknowledge of the known injuries that AZD would cause to recipients as evinced through 20 years of research about the novel virus Covid 19.²¹Asta Zeneca employees, MJS, and Dr. Mulligan easily manipulated, modified, and deleted data from the AZD to engineer outcomes to receive monetary rewards from the United States. The AZ covid-19 vaccine's risks of use at Harbor Health Care VA and other facilities outweighed its benefits placing various populations of vulnerable minority and economically disenfranchised veterans at higher levels of danger.

39. AZ's partnership with the VA was illegal:

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²⁰ https://clinicaltrials.gov/study/NCT04400838

²¹ The Oxford–AstraZeneca COVID-19 vaccine (ChAdOx1 nCoV-19, Vaxzevira or Covishield) builds on two decades of research and development (R&D) into chimpanzee adenovirus-vectored vaccine (ChAdOx) technology at the University of Oxford. This study aimed to approximate the funding for the R&D of ChAdOx and the Oxford–AstraZeneca vaccine and to assess the transparency of funding reporting mechanisms. https://pmc.ncbi.nlm.nih.gov/articles/PMC8704023/

A. AZ's partnership with the Veterans Affairs Administration & the DOD requires evaluation. AZ's relationship with the Veterans Affairs Administration was detrimental to the veterans that it was meant to serve. AZ illegally exploited and endangered veterans in its administration of the AZD at Veterans Affairs Administration facilities through various means of illicit data manipulation to illicitly 36 CFR Part 1230 obtain & distribute veteran data, alteration to data, and deletions of veteran electronic medical records to cover up veteran injuries. The Veterans Affairs Administration disregarded the safety, health, and privacy of its veterans by allowing AZ to facilitate the AZD within its facilities. The AZ AZD was not fairly or impartially evaluated by the Veterans Affairs Administration as per 38 CFR 1.15 (a)-(i) Specifically (f) Each program evaluation requires a systematic research design to collect the data necessary to measure the objectives.

B. AZ was willfully negligent in the administration and deployment of the AZD in the VA. The AZD was paused multiple times and they were fully aware of the danger posed to active duty and other status of veterans participating in the AZD administered at multiple Veterans Affairs and DOD facilities and still continued to inject veterans with AZD covid 19 vaccine.

Events Related to the Halts: September 2020 Halt: The most notable pause occurred in September 2020 when AstraZeneca halted all global trials of the vaccine due to a participant in the UK developing an unexplained illness. The participant was diagnosed with transverse myelitis, a rare neurological disorder involving inflammation of the spinal cord, which can cause paralysis. AstraZeneca paused the trial to investigate whether the vaccine had caused the condition or whether it was unrelated. After an independent review, regulators in the UK, the US, and other countries allowed the trials to resume after concluding that the vaccine's benefits outweighed the risks and that the illness was likely unrelated to the vaccine. Earlier Pauses in

2020: The trial was briefly halted in July 2020 as well when another participant showed similar neurological symptoms, but it was determined that this person had previously undiagnosed multiple sclerosis and the condition was not related to the vaccine. (Personal Communication Chat GPT October 23, 2024). The AZD (AstraZeneca) COVID-19 vaccine trial in the United States was temporarily paused on **September 6, 2020**. This pause was due to a serious adverse event that occurred in one of the study participants. The trial was resumed on **November 23, 2020**, after a thorough review of safety data by independent experts.

C. AZ employees and their proxies were granted Illegal & continuous access to Veterans

Affairs Administration located at 423 East 23 St New York, NY 10010 as well as other VA

facilities that AZ administered AZD out of, under 38 CFR 1.220 & VHA DIRECTIVE 1108:

Scope: This regulation covers in-person promotional activities, including educational presentations, by pharmaceutical company representatives at VA medical facilities.

- 1. AZ illegally promoted the administration of the AZD Coronavirus vaccination and illegally advertised the AZD at Harbor Health Care VA 423 East 23 St. Promotional restrictions:
 Promotions must be accurate, have significant educational value, and should not inappropriately divert VA staff from other duties.
- 2. AZ AZD at the VA Harbor Health was detrimental to the ongoing operation and purpose of the Veterans Affairs Administration which is the care of veterans due to the diversion of Veterans Affairs employees & assets.
- 3. AZ provided no education on adverse side effects of AZD vaccine.

Focus on education: The primary emphasis is on providing educational information about drugs, not solely marketing or sales pitches. AZ provided no educational materials or training about Coronavirus pandemic or the inoculation of veterans with the poison designated AZD.

- **a. AZ Misrepresented the AZD**. There was no reference or mention of life-threatening adverse effects of the AZD coronavirus vaccine ie. thrombotic events vaccine-Induced Immune Thrombotic Thrombocytopenia (VITT), myocarditis, or neurological conditions within the study participant agreement, exhibit 5. Even after the pausing of the AZD in Europe and the United States AZ did not advertise or advise the participants of the AZD of the potential side effects of AZD.
- b. Unexpected Injury classified in (21 CFR 312.32(a)) BLOOD CLOTS NOT LISTED IN BROSCHURE An adverse event or suspected adverse reaction is considered "unexpected" if it is not listed in the investigator brochure or is not listed at the specificity or severity that has been observed; or, if an investigator brochure is not required or available, is not consistent with the risk information described in the general investigational plan or elsewhere in the current application, as amended. Even after several pauses to the AZD due to unexpected or adverse events veteran participants were not advised of the possible risks of unexpected or adverse reactions they could face by their participation.
- c. AZ maintained unfettered illegal and illicit physical access to the Harbor Health Care

 Veterans Affairs Administration & other VA facilities where the AZD was administered

 contrary VHA DIRECTIVE 1108.10.6.a-j VA MEDICAL FACILITY ACCESS FOR

 PHARMACEUTICAL COMPANY REPRESENTATIVES a.(8) PCRs (Pharmaceutical

 Company Representatives) must comply with VA security requirements and VISN procedures

 for accurately monitoring their whereabouts when visiting VA medical facilities (e.g., log-in and log-out-sheets, photo identification badges).
- d. AZ deliberately violated the privacy rights of veteran participants by illegally obtaining copies of their electronic medical record & private information. Violations of Privacy Act

of 1974, 18 U.S.C. 1030(a)(4), 18 U.S.C. 1030(a)(1), 18 U.S.C. 1030(a)(1), 5 U.S.C. § 552a and VHA DIRECTIVE 1108.10.8 AZ illegally gained access to millions of veteran electronic health records and other information on veterans for their illicit and illegal use.

e. The distribution of the AZD covid 19 vaccine is illegal as per VHA DIRECTIVE 1108.10.9.b. - b. Criteria-for-Use. Criteria-for-use is a document developed by VA at a national level that describes the patient populations that would most likely benefit from use of the drug through inclusion and exclusion criteria based on available clinical evidence related to safety and efficacy. VA criteria-for-use documents may exist for both formulary and non-formulary drugs and are available to the public at the PBM website: https://www.pbm.va.gov/. NOTE: Exceptions may be applied at the local level for operational reasons. VHA DIRECTIVE 1108.10.9.e. New Molecular Entity. NME is a drug product containing an active ingredient that has never before received FDA approval. The distribution and inoculation of veterans with AZD covid 19 vaccine

was detrimental to Veteran health care.

D. AZ deliberately misrepresented & illegally promoted its AZD coronavirus vaccine to veterans causing foreseeable injuries to unwitting veteran participants. 21 U.S. Code § 352 21 - Misbranded drugs and devices and 15 USC § 45(a)(45) unfair or deceptive acts or practices (4) (A) For purposes of subsection (a), the term "unfair or deceptive acts or practices" includes such acts or practices involving foreign commerce that— (i) cause or are likely to cause reasonably foreseeable injury within the United States; or (ii) involve material conduct occurring within the United States. (B) All remedies available to the Commission with respect to unfair and deceptive acts or practices shall be available for acts and practices described in this paragraph, including restitution to domestic or foreign victims.

E. AZ paid Investigator DR. Mulligan & VA employee Sub investigator Dr. MJS secret financial awards to obtain desired study results.

AZ violated of 21 CFR Part 54 & Federal Drug and Cosmetic Act 21 U.S.C. § 301-399f through structuring & perpetrating secret financial rewards & kickbacks to AZD supervisors and sub investigators employed by the Veterans Affairs Administration. AZ presented multiple misrepresentations of financial interests to the FDA (Federal Drug Administration) through these payments to the Study Supervisors Dr. Mulligan & sub investigator Dr. MJS²² to illegally determine the outcome of the AZD at Harbor Health Care Veterans Affairs Administration and other undisclosed Veteran Affairs, active-duty stations, and reserve facilities.

F. AZ administered plaintiff's doses of AZD that were stored and labeled improperly 21

U.S.C. §§ 351-360 (FDCA) – Adulterated and Misbranded Products: Vaccines that are stored improperly can be considered adulterated under the Federal Food, Drug, and Cosmetic Act (FDCA), as they may no longer meet the safety and efficacy standards. (Personal Communication Chat GPT October 22, 2024).

AZD vaccine to veteran participants. AZ violated **21 CFR 312.32(c)** and **21 U.S.C. § 331(e),** it is unlawful to refuse to permit access to records, or to refuse to make reports or provide information to the FDA, which includes data from IND studies. AZ deliberately failed to report the plaintiff's life-threatening injury known as a 'DVT' Deep Vein Thrombosis²³ Veterans Affairs Harbor Health Care ER 12/29/2020 see below. Sponsor is

G. AZ failed to report all classes of injuries caused by the inoculation of

required to notify FDA and all participating investigators in an IND safety report (i.e., 7- or 15-

²² Dr. Melanie Jay Stein known as 'MJS' herein.

²³ **Deep vein thrombosis (DVT)** can potentially be a **life-threatening condition**, depending on how it progresses and whether complications arise. DVT refers to the formation of a blood clot (thrombus) in a deep vein, most commonly in the legs. On its own, DVT is not necessarily life-threatening, but it becomes dangerous if the clot breaks loose and travels to other parts of the body, particularly the lungs. (Personal Communications Chat GPT October 22, 2024).

day expedited report) of potentially serious risks from clinical trials or any other source as soon as possible, but no later than 15 calendar days after the sponsor receives the safety information and determines that the information qualifies for reporting under paragraph (c)(1)(i), (c)(1)(ii), (c)(1)(iii), or (c)(1)(iv) of this section.

PEREZ, ERIC ANDREW Date of Birth: 27 Jun 1

CONFIDENTIALPage 528 of 804

Is this a COVID related AE? No

Date AE met criteria for SAE:

Date Investigator made aware of SAE: AE is serious due to:

Date of hospitalization:

Date of discharge:

Date of hospitalization:

Probable cause of death:

Date of death:

Autopsy performed:

Investigator (MD/LIC) Documentation -----

 $Relationship\ to\ study\ treatment: Related\ Relationship\ to\ non-study\ treatment: Not\ Related\ Relationship\ to\ study\ procedure: Not\ Rela$

Was this event an AE of Special Interest (AESI)?: No Was this event a medically-attended AE (MAAE)?: No

*** Please add the Research Data Associates (RDA) as ADDITIONAL SIGNER to this note so that they can enter the AE into Medidata. *** /es/ Robert J. Ulrich, MD ATTENDING, INFECTIOUS DISEASES Signed: 12/29/2020 12:23

Receipt Acknowledged By:

01/21/2021 12:34 /es/ EMILIE E GEESEY

12/30/2020 09:19 /es/ TIAIRAH C MCNEILL

(21 CFR 312.32(a) and 312.32(c)(1)). We note that the definition of "serious" differs slightly from the ICH E2A guidance7 (i.e., FDA

definition uses "and" rather than "or" in the sentence "Important medical events that may not result in death, be life-threatening, or require hospitalization may be considered serious when, based upon appropriate medical judgment, they may jeopardize the patient or subject and may

require medical or surgical intervention to prevent one of the outcomes listed in this definition"). We will accept application of either the FDA definition (i.e., "and") or the ICH E2A guidance criteria (i.e., "or") in determining the seriousness of an event. Willful Misconduct failure to report serious injury to FDA ******

Life-Threatening (21 CFR 312.32(a)) An adverse event or suspected adverse reaction is considered "life-threatening" if, in the view of either the investigator or sponsor, its occurrence places the patient or subject at immediate risk of death.

H. AZ has secretly manipulated plaintiff's electronic medical data to limit

their liabilities and commit known Ricoh crimes against the United States to receive payments through fraudulent practices **FALSE Claims Act (FCA)**, 31 U.S.C. §§ 3729 – 3733. This is evinced by deletion & fabrication of patient data manipulation of the above entry made to plaintiff EAPs electronic health record as outlined in EAP's Amended Complaint Dkt# 37 is the secret to the fabrication of the AZD. Plaintiff does not have any experience in the

evaluation or examination of medical records. Plaintiff can use his observations to conclude that the first line of the above ER entry pertains to COVID 19 related adverse event. Veterans Affairs Harbor Health Care Emergency Room staff was aware of the plaintiff's participation in the AZD and trained on the programmatic changes to their medical reporting system due to COVID 19. Plaintiff's life threatening 'DVT' was not documented as an adverse event. Entry

I. AZ maintained illegal access to an undisclosed number deliberate of electronic health records of veterans, active-duty personnel in violation of the following: 36 CFR 1230.3.b, 5 U.S. Code § 552a, internal Veterans Record Management VA HANDBOOK 6300.1, VHA Directive 1605.01, this Veterans' Health Administration (VHA) directive maintains policy for a VHA-wide Health Information Management (HIM) program which manages paper, electronic health information and health records at Department of Veterans Affairs (VA) medical facilities, AUTHORITY: 38 U.S.C. § 7301(b) and 44 U.S.C. § 3102(1). AZ illegally provided an undisclosed number of active and veteran medical records, service record books to a foreign company known as **Research Data Associates**, ²⁵ as evinced by the entry above.

J. AZ committed Research Misconduct 45 CFR 689.1through illegally altering, modifying, and deletion of veteran participant data. AZ illegally falsified participants data certifications 21 USC § 355(c)(5) qualified data summary (5) (A) provided to the FDA Food & Drug Administration for approval of supplemental applications.

K. AZ in collusion with the SDNY AG Damion Williams, Dr. MJS, and

Dr. Mulligan entered into an agreement to manipulate clinical trial data and cover up of the deletion, modification, and fabrication of thousands of Veteran participants in the AZD

^{***} Please add the Research Data Associates (RDA) as ADDITIONAL SIGNER to this note so that they can enter the AE into Medidata. ***Medidata²⁴ is an adverse event system integrated into the VA medical system specifically for use of clinical trial data. Meaning that Veterans are routinely experimented on and used within clinical trials.

 $^{^{24}\} https://www.medidata.com/en/clinical-trial-products/clinical-data-management/safety-data-management/safet$

²⁵ https://www.rd-alliance.org/how-the-rda-works/

Study administered at the Harbor Health Care Veterans Affairs and at least 78 other veteran and DOD domestic facilities to receive payments from the United States government in the amount of at least 1.2 billion²⁶. AZ and MJS deleted multiple medical record entries as described in EAP's amended claim in violation of 36 CFR 1230.1 and 44 U.S. Code § 3105.

L. Presently AZ has organized & participated in EAP's covert harassment

through deploying several foreign, domestic agent provocateur groups, and money to pay the rents and bills of personnel they deployed to plaintiff's neighborhood to assist local and federal authorities in the covert harassment of plaintiff Perez in a continuous covert harassment prism scheme to perform 'cointelpro' enforcing ongoing illegal and illicit narratives of entrapment to limit their monetary liabilities. This covert harassment includes acting in concert and is not limited to the illicit use of federal agencies, and proxy groups of informants from hundreds of districts involving dispatching assets from Ft. Jackson, SC Army facility and the continuation of an ongoing 'My BVI' "British Virgin Island Soggy Dollar personnel who participated in plaintiff's illegal conviction and control as chattel after the fact for their own profit.

M. AZ engineered, perpetrated, and carried out disinformation campaign

Against Plaintiff. AZ illegally prepared & deployed several databases of false identifications & synthetic identities maintained by NYPD assets and released this information too various people finder sites for the express purpose of establishment of criminal activities and affiliations to the plaintiff to justify warrantless invasion of privacy and establishment of 'false' probable cause as well as establishment of socially engineered adverse mistreatment and targeting of plaintiff Perez for their 'law enforcement' coercion schemes for profit, ie to obtain housing, food, business opportunities while secretly defaming and controlling plaintiff Perez to

²⁶ In summary, the U.S. government committed \$1.2 billion to AstraZeneca for the development and production of the AZD vaccine, which

included support for the clinical trials and the purchase of 300 million doses

29

manipulate the outcome of this case.

N. AZ deployed a cover up in mass using Computer Espionage (18 U.S.C.

1030(a)(1)). Establishing illegal & illicit customs and policies toward veteran participants in AZD administered at DOD and Veteran facilities to limit their liabilities. Astra Zeneca has entered into an illegal agreement with SDNY AG Damian Williams, the DOD, Veterans Affairs and other Federal Districts to cover up their secret exploitation, abuse, and injury of veterans who participated in the AZD through the establishment of a "playbook" of known illegal behaviors carried out against veteran participants.

PREP ACT IMMUNITY DOESN'T APPLY TO MJS DUE TO HER WILLFUL MISCONDUCT

40. To prove willful misconduct under the PREP Act, all three of the following conditions must be proven with clear and convincing evidence: 1) The act was intentional and intended to achieve a wrongful purpose, 2) The act was done knowingly without legal or factual justification, 3) The act disregarded a known or obvious risk that made it highly probable that harm would outweigh the benefit.²⁷MJS engineered & perpetrated a "bait & switch" scheme using the plaintiff.

41. MJS is not eligible for qualified immunity under the PREP Act due to the following: 1) MJS & Dr. Mulligan in collusion with unknown conspirators from the NYU vaccine Program manipulated & fabricated AZD research data acquired from various sources to control the outcome of the AZD, 2) MJS knowingly administered two doses of AZ AZD to plaintiff which was obtained from a source outside of the Veterans Affairs Administration which could have been expired contained or contained harmful contaminants, or

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 $^{^{27}}$ https://aspr.hhs.gov/legal/PREPact/Pages/PREP-Act-Question-and-Answers.aspx#:~:text=Willful%20misconduct%20is%20misconduct%20that,seven%20days%20of%20its%20discovery.

dose that was part of an alternate reality or meant to be given to someone else; 2) Conflicts of Interests with the Veterans Affairs Administration MJS was engaged in secret agreements not limited to obtaining undisclosed financial rewards from AZ to engineer the desired test results to obtain payments from the United States government, 3) Cover Up MJS & Dr. Mulligan with other conspirators fabricated and switched documentation and entries into database to cover up the injury to Plaintiff EAP, 4) MJS failed to notify AZ and the FDA Federal Drug Administration of the Unexpected/Adverse event that plaintiff EAP experienced because of his participation in the AZD, 5) MJS failed to follow "unblinding" procedures and didn't notify the Veterans Affairs; AZ; or the FDA of plaintiff's possible adverse event, 6) to the plaintiff's knowledge MJS failed to report biopharmaceutical fraud, research misconduct, veteran data breaches to her employer Veterans Affairs Administration VAOIG or the FDA, and 7) MJS made false statements to representatives of the DOJ SDNY, Veterans Affairs Administration, and supervisors at Harbor Healthcare.

42. MJS participated and supervised a cover up of EAP's injuries from the AZD

Vaccine - Willful Misconduct failure to report serious injury to FDA. MJS is employed as a physician and federal employee at the VA 423 East 23 St NYC. MJS has a duty to provide the highest level of care for veterans throughout her duties at the VA²⁸. MJS breached her duty to care for EAP, entering a cover up after being informed of the circumstances and type of injury EAP suffered from. MJS was aware that the doses of AZD originated from the NYU vaccine clinic and may have been expired, contained contamination or been stored illegally. MJS was aware that AZ AZD Study was halted for thrombotic events and that AZD caused various thrombotic events known as TTS & VITT.²⁹MJS failed to report EAP's injury as an adverse event and entered a cover up and fabrication.

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²⁸ https://vacareers.va.gov/careers/physician-jobs/

²⁹ https://pubmed.ncbi.nlm.nih.gov/38302339/

21 CFR 312.32(a) and 312.32(c)(1)). We note that the definition of "serious" differs slightly from the ICH E2A guidance? (i.e., FDA definition uses "and" rather than "or" in the sentence "Important medical events that may not result in death, be life-threatening, or require hospitalization may be considered serious when, based upon appropriate medical judgment, they may jeopardize the patient or subject and may require medical or surgical intervention to prevent one of the outcomes listed in this definition"). We will accept application of either the FDA definition (i.e., "and") or the ICH E2A guidance criteria (i.e., "or") in determining the seriousness of an event. Willful Misconduct failure to report serious injury to FDA ******

43. There was a <u>conflict of interest</u> in her employment as a physician with the VA and her employment with AZ as a Sub Investigator and administrator of the AZD

Study through the financial agreements and incentive pay that she received and did not disclose as well as secret agreements to ensure positive results of the AZD, as per 21 CFR Part 54 &

Federal Drug and Cosmetic Act 21 U.S.C. § 301-399f non-disclosure of financial agreements with AZ. These financial rewards and agreements with AZ gave MJS motive

to cover up plaintiff's injury.

November 4, 2015 VHA HANDBOOK 1660.03 1 CONFLICT OF INTEREST FOR THE ASPECTS OF CONTRACTING FOR SHARING OF HEALTH-CARE RESOURCES (HCR), exhibit ____

4. DEFINITIONS

a. Conflict of Interest. A conflict of interest exists when an employee participates personally and substantially in a particular matter, e.g., a contract, that would have a direct and predictable effect on the employee's own financial interest, or the financial interest of the employee's spouse, minor child, general partner, any person or entity VHA HANDBOOK 1660.03 November 4, 2015 2
MJS is required to acknowledge this agreement and is provided a

5. RESPONSIBILITIES

- a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring receipt of an annual certification from each medical facility Director that an annual reminder of the requirements of this Handbook, including any significant changes to policy, has been sent to all employees specified by paragraph 5.b.(1).
- b. VA Medical Facility Director. Each VA medical facility Director is responsible for ensuring that:
- (1) Each Chief of Staff, physician, clinician, researcher and allied health supervisor or manager, and any individual who assumes these duties in the future receives a copy of this Handbook, and Conflict of Interest Acknowledgment (see Appendix A). A copy of the signed acknowledgment must be placed in the employee's electronic Official Personnel Folder (eOPF). In addition, the medical facility Director will ensure that all employees in these positions receive an annual reminder of the requirements of this Handbook, including any significant changes to policy.

 (2) An annual certification is sent to the Under Secretary for Health confirming that the annual reminder of the requirements this Handbook including any significant changes was sent to all affected employees.

6. EXPLANATION OF FEDERAL LAWS

b. A contract is a "particular matter" that could result in conflict of interest. Individual payment vouchers on the contract are also particular matters. A financial interest is "directly and predictably affected" by a particular matter whenever there is a close causal link between any official decision or action to be taken in the matter and any expected effect (i.e., gain or loss, regardless of amount) on the financial interest. "Personal and substantial" participation is a direct action that is of significance to the matter. This statute applies to all VA employees, all particular matters, and all covered financial interests. NOTE: The conflict of interest restriction here is given in the context of contracts or agreements for sharing of HCR because these areas have produced concerns in the past. The prohibition summarized in the previous paragraph may arise in other VA contracts as well. Other laws and regulations, such as the procurement integrity statute (41 U.S.C. 2101-2107) and the Executive branch Standards of Ethical Conduct (5 CFR Part 2635), may apply to specific conduct.

44. MJS also committed several ethics violations 38 CFR 0.601through entering illicit

financial agreements with AZ as well as the cover up of plaintiff's injury. MJS also

has direct knowledge and real time experience with the tradecraft, methods, and strategies used to manipulate, alter, delete, and substitute data of study participants and failed to report these

violations to the Veterans Affairs OIG.

38 CFR§ 1.201 Employee's duty to report.

All VA employees with knowledge or information about actual or possible violations of criminal law related to VA programs, operations, facilities, contracts, or information technology systems shall immediately report such knowledge or information to their supervisor, any management official, or directly to the Office of Inspector General.

38 CFR 1.204§ 1.204 Information to be reported to the Office of Inspector General.

Criminal matters involving felonies will also be immediately referred to the Office of Inspector General, Office of Investigations. VA management officials with information about possible criminal matters involving felonies will ensure and be responsible for prompt referrals to the OIG. Examples of felonies include but are not limited to, theft of Government property over \$1000, false claims, false statements, drug offenses, crimes involving information technology systems and serious crimes against the person, *i.e.*, homicides, armed robbery, rape, aggravated assault and serious physical abuse of a VA patient.

VA police and/or the OIG, whichever has primary responsibility within VA for investigation of the offense in question, will be responsible for notifying the appropriate United States Attorney's Office, pursuant to 28 U.S.C. 535

45. MJS also failed to follow correct unmasking procedures as outlined ^{28 U.S.C. 535} or the IRB Institutional Review Board (21 CFR 312.66).

C Unblinding

The blind should ordinarily be broken for IND safety reports submitted to FDA and all participating investigators. Knowledge of the treatment received is necessary for interpreting the event, may be essential for the medical management of the subject, and may provide critical safety information about a drug that could have implications for the ongoing conduct of the trial (e.g., monitoring, informed consent). The Agency does not believe that unblinding single or small numbers of serious and unexpected adverse event cases will compromise the integrity of the study, in part because such unblinding should be infrequent. For example, because the requirement under § 312.32(e)(5) specifically describes different reporting requirements for study endpoints, in a trial evaluating death, myocardial infarctions, and strokes as endpoints, a case of liver injury, if unblinded, would have no effect on overall study integrity. In general, if the blind is broken and a subject with an adverse event that would meet the criteria for reporting as a single event was receiving placebo, the event should not be reported in an IND safety report because there is not a reasonable possibility that the drug caused the adverse event. If the blind is broken and this subject was receiving drug treatment (test drug or active comparator), it must be reported in an IND safety report (21 CFR 312.32(c)(1)(i)(A)). For those adverse events that would not be reported unless an aggregate analysis indicated that they are occurring more frequently in the drug treatment group than in the placebo group, a determination that the adverse event is a suspected adverse reaction would require analysis and reporting of the event rates in both the drug-treatment and placebo groups.

46. MJS later provided the SDNY AAG Farber with false statements False Statements 18 U.S.C. § 1001 pertaining to the service of SDNY 21-cv-04844, see Case 1:21-cv-04844-VEC-RWL Document 39 Filed 11/04/21 Page 1 of 2. MJS made false statements that she did not receive the Amended Complaint. Plaintiff has reason to believe that MJS has been involved in an illegal sting operation pertaining to the AZD and the SDNY refuses to advise plaintiff to her status as an informant. The SDNY will not respond to any requests for information on promises of immunity or information provided to the SDNY pertaining to this or the previous case 21-cv-04844, exhibit #8.

47. MJS placed EAP in further danger after incorrect unblinding to cause Controversies.

After the plaintiff informed MJS of his injury and she allegedly unmasked him, she then advised him to schedule an appointment to receive the Pfizer covid 19 vaccines. EAP complied and scheduled his vaccine. The blatant disregard to the health and well-being of plaintiff EAP and the disregard of the risks of plaintiff's participation in the study caused him serious bodily harm and possibilities of death. MJS's instructed plaintiff EAP to receive the Pfizer vaccine to cast further doubt and complications should the plaintiff execute litigation against AZ

or MJS. MJS deliberately failed to protect the rights, safety, and welfare of subjects under her care 21 CFR 312.6.

PREP ACT IMMUNITY DOES NOT APPLY TO DR. MULLIGAN DUE TO WILLFUL MISCONDUCT AS STUDY SUPERVISOR

- 48. The standard test of liability for private Doctors is vicarious liability.
- 49. In the context of an Investigational New Drug (IND) clinical research study, a supervisor (such as a principal investigator or research director) has a range of critical responsibilities to ensure the study's integrity, regulatory compliance, and the safety of study participants. Here are key duties of a clinical research supervisor: 1. Protocol Adherence, 2. Compliance with Regulations, 3. Informed Consent, 4. Participant Safety, 5. Study Oversight and Coordination -Oversee the day-to-day operations of the study, including data collection, management, and documentation. - Coordinate with study staff, ensuring that they are trained and adhere to the study protocol and regulatory requirements. - Conduct regular meetings and reviews to ensure the study is running smoothly and address any issues promptly., 6. Data Integrity and Record Keeping, 7. Monitoring and Auditing, 8. Communication with Regulatory Authorities, 9. Training and Education, 10. Quality Control Summary The role of a clinical research supervisor in an IND study is crucial for ensuring participant safety, regulatory compliance, and data integrity. Supervisors are responsible for overseeing all aspects of the research and must be proactive in managing risks, addressing issues, and ensuring ethical standards are upheld. (Personal Communication, Chat GPT, 11-2-24).
- 50. Mulligan maintains employment as a Study Investigator at the NYU Vaccine Center making him a privately employed. As such Dr. Mulligan receives no federal immunities or protections. This RICOH Racketeering conspiracy pertaining to this action dates back over 3 years with plaintiff's filing of SDNY 21-CV-04844 31 May 2021in which Dr. Mulligan was

listed as an original defendant. Within this action plaintiff received Poor Man's status and the Federal Marshall's Office was placed in charge of the service of the complaints. 10/04/21 DKT # 34 plaintiff filed amended complaint 11-9-21 DKT# 44 FCRP4 US Marshall's Service states complaint service executed FRCP 4 SERVICE PACKAGE HAND DELIVERED TO U.S.M.: on 11/9/2021 Re: Judge Alison J. Nathan 41 Order of Service. The following document(s) were enclosed in the Service Package: Complaint, Amended Complaint, Summons, IFP, Order of Service, Completed U.S.M. form(s) for defendant(s) Melanie Jay, Michael J. Missa, Martina A. Parauda. (aan) (Entered: 11/09/2021).

51. The Marshall's Office states that VAOIG Missel, VA Secretary Parauda were all served the EAP's amended complaint DKT#34. EAP's original complaint included 3 separate exhibits of reports to the VAOIG about the AZD and the service to VA Secretary Parauda.

VAOIG Secretary and VA Secretary were aware through service of complaint with exhibits by Marshall Service. An internal investigation and inquiry into the AZD administered at Harbor Health Care must have been initiated and generated by statutory law and procedure.

- 52. Dr. Mulligan is listed as Study Supervisor of AZD by the NEJM New England Journal of Medicine. ³⁰In the original publication MJS is listed as a sub investigator and is no longer listed within this publication. Dr. Mulligan filed a disclosure 17 August 15:29:57 stating that he is receiving a grant from Eli Lilly, meissa vaccines, Pfizer, Sanofi Pasteur Inc, see exhibit #6. Dr. Mulligan could not commit his full time to the supervision of the AZDV Study administrated at Harbor Health Care VA and his failings as a supervisor directly contributed to EAP's lifelong injuries.
- 53. Mulligan was a direct participant in the fabrication of EAP's participation documents and in a cover up of EAP's injuries Dr. Mulligan provided several documents to EAP stating that these are the only documents that he as Study Investigator had access to or are in possession of documentation that has all been fabricated to resemble a subject that participated in

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³⁰ https://www.nejm.org/doi/full/10.1056/NEJMoa2105290

the placebo group of the AZD when in fact these documents clever fabrications are illicitly placed into EAP's participation records, ex#7 WRONG DOB 7-1-76 PINK FORMS. 54. This fabrication is more than likely the creation of an extremely vindictive and sociopathic group of "clandestine criminals" in the employment of "Clandestine Services" and government offices to obtain monetary rewards for false claims to the United States as well as continuously using EAP over a decade to attain their illicit goals of economic rewards, career advancement, and even secret occultic punishment of plaintiff EAP judging on the nature; location; and cause of his thrombosis being his calf it is more than likely to have secret Christian Judeo origins in animal sacrifice.

- 55. The physical evidence evinced in the drop in blood pressure and the extreme flu like symptoms that EAP suffered have been documented and these fabricated documents further support that EAP's participation was a carefully plotted "bait & switch" where another veteran or a person who was operating out of the Veterans Affairs Administration Harbor Health Care. This unknown subject most likely received the placebo and EAP received the AZD vaccine.
- 56. **Mulligan is not ensuring the accuracy of data collected** within the AZD documents provided to EAP by Mulligan are not complete, exhibit #7 do not contain the blood test results of EAP.
- 57. EAP is willing to submit to a lie detector test and will testify under oath to the facts given and sworn in his complaints.
- 58. **Dr. Mulligan is not immune from Supervisory Liability as he is a private citizen**. Supervisors, such as principal investigators or research directors, are responsible for ensuring that the clinical study complies with all applicable regulations outlined in the Code of Federal Regulations (CFR), particularly 21 CFR Part 312 (Investigational New Drug Application

regulations). (Personal Communication, Chat GPT, 11-2-24).

59. Mulligan failed effectively oversee AZD participants. As Study Supervisor one of his most important duties were selection of study participants 21CFR 312.23(a)(6)(iii)(c). MJS was informed EAP was scheduled for arthroscopic knee surgery 2/11/21 and was also aware of EAP's PTSD, medication list, and mind state. EAP should not have been selected as a participant in AZD due to the high risk of VITT, or Vaccine-Induced Immune Thrombotic Thrombocytopenia, is a rare but serious condition characterized by the following: Immune-**Mediated Thrombosis**: The formation of blood clots in unusual locations, such as the cerebral venous sinuses or the splanchnic veins, as well as other veins or arteries. **Thrombocytopenia**: A significant reduction in platelet count, which normally helps the blood to clot. Mechanism and Context VITT is believed to be triggered by an abnormal immune response following certain vaccines, such as the AstraZeneca and Johnson & Johnson COVID-19 vaccines. It is like a condition known as heparin-induced thrombocytopenia (HIT) but occurs in people who have not received heparin. Symptoms Severe headache, Abdominal pain, Leg swelling, Shortness of breath, Chest pain, Neurological symptoms like blurred vision or seizures. Mulligan should have assessed EAP's participation as high risk and that his participation would outweigh the benefits. (Personal Communications, Chat GPT, 11-2-24).

WILLIAMS SUPERVISING ACTIVE RICOH SCHEME WITH FEDERAL AGENTS

60. Since 2021, AG Damian Williams SDNY has engineered and carried out this complex civil criminal conspiracy and secret global counterintelligence operation with this COVID 19 pandemic at its center emplacing a mechanism of injustice, "designed in impairing, obstructing or defeating the lawful function of any department of government" (United States. Hass v Henkel, 216 U.S. 462 (1910).

- 61. May 31, 2021, 21-cv-04844 AG Williams SDNY were notified of EAP's experience with AZD. AG Williams refused to perform any investigation into this case or the possible 1.2-billion-dollar fraud perpetrated by AZ. Instead, AG Williams implemented & carried out a secret strategy that would provide the SDNY the opportunity to easily execute an official inquiry and investigation once enough time had elapsed and there was the right amount of pressure applied. Williams has all the technology, assets, and information pertaining to EAP & the AZD to include subpoenaed "Blood Tests" yet still refuses to perform his duties and end this grand crime.
- 62. Williams is supervising this fraud for his own benefit and outside his official authority, In Bivens v. Six Unknown Named Agents of Fed. Bur. of Narc., 456 F.2d 1339 (2d Cir. 1972), the court held that federal officers are immune only if they were acting within the scope of their authority and if their duties were discretionary.
- 63. EAP was issued subpoena for "blood test results" to include DNA panel DKT# 71. Subpoena was duly served and proof of service sent to SDNY. Covance Laboratory aka LabCorp issued noticed that they would not respond until discovery. Judge Netburn refuses to enforce the subpoena that she signed and issued. EAP believes that SDNY and outside agencies are in possession of these results and have obtained them illegally and chose to carry out this farce in further hence of providing payment to their lawyer friends and the SDNY.
- 64. All EAPs FOIA (Freedom of Information Act) requests to the FDA, CDC, NIH, and HHS have been illegally denied preventing a class action lawsuit against AZ.
- 65. EAP states that an ongoing complex scheme utilizing the National Security apparatus has been deployed against EAP in the form of this civil criminal conspiracy to dictate the outcome of this and other cases COVID 19 pandemic cases to mitigate the monetary obligations of the

biopharmaceutical companies & the government, ie not limited to entrapment or death.

- 66. This scheme is centered and based on the unwarranted invasion of privacy 18 U.S. Code §
- 2511, computer crimes Computer Fraud and Abuse Act, Wiretap Act, False Claims Act, Banking

Fraud, and Deprivations of Civil Rights under 42 U.S. Code § 1983.

67. The rerouting of EAP's phone calls, electronic, and physical communications via USPS

allow Williams and his agents to censor plaintiff, modify his legal work product, ie. removing

monetary amount asked from MJS & other violations, control his communications, and his

socio-economic condition with agreements between proxies deployed around him. This

scheme also involves and is perpetrated with complex updates to electronic systems

programmatically and specific to plaintiff Perez.

68. Williams is deliberately obstructing plaintiff's CICP proceeding as well as acting in concert

and in support of unknown federal agents who engineered this civil criminal conspiracy against

plaintiff as well as thousands of other veterans who were part of AZD.

RESPECTFULLY SUBMITTED,

ERIC ANDREW PEREZ

CAP

SAN ANTONIO, FL 33576

EXHIBITS

Exhibit # 1 21-cv-04844, docket sheet 22-cv-01560, revised complaint CICP 4-23-24, Exhibits CICP Lawsuit-1 and Astra Zeneca List including China 2

Exhibit # 2 Astra Zeneca W Subpoenas, Proof of all service 7-22-24, Denial Pre motion discovery, Covance Laboratory Subpoena, Professional Misconduct Dr. Stein

Exhibit # 3 Declaration 2 in Support of sanctions, Amended Complaint Astra Zeneca AB, FOIA Denial 7-23-24

Exhibit # 4 Declaration in support of Motion for Sanctions, Letter to Judge Broderick SDNY

Exhibit # 5 AZD1222 Study participation agreement

Exhibit # 6 NEJM Disclosure Mulligan

Exhibit # 7 Documents provided by Mulligan

Exhibit # 8 email to AAG SALK SDNY requesting information on immunity of MJS and informing of covert harassment 6-24-24

Exhibit # 9 Response OIG Horowitz

Exhibit # 10 Email PRAC Complaint misspelled COIVD-19

VA DIRECTIVES

VHA DIRECTIVE 1108 VA HANDBOOK 6300.1 VHA Directive 1605.01 Health Information Management (HIM) program

THE COUNCIL THE CITY OF NEW YORK

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Date:
Name: Christoph For Lean John Son
Address:
I represent:
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