

EXHIBIT A
Death Certificates coincidentally linked with VAERS Records

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Elizabeth A. Bundock	Burlington, VT 5401	11/21/2021
1442021205810	45	Karyn	Bethel (Town of)	Y
Pulmonary Thromboembolism; days; Multifactorial (See Part 2); days-years; ; ; ; Recently Sedentary, Obesity (Body mass index 46.9), Desogestrel/ethinyl estradiol use, and COVID-19 and Influenza vaccinations on 11/11/2021				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	11/21/2021	ONSET_DATE	11/20/2021
VAERS_ID	2317423	AGE_YRS	45.0	VAX_DATE	11/11/2021	RECEIVE_DATE	06/13/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Decedent was reportedly feeling unwell with respiratory complaints for several days to week prior to death, progressively became more "wiped out" and tired, staying in bed most of the time. She was found unresponsive in the bathroom where she was pronounced dead by EMS. Autopsy confirmed bilateral pulmonary thromboemboli as cause of death, with multiple risk factors including obesity (BMI 46.9), recently sedentary, COVID-19 and Influenza vaccinations, and Desogestrel/ethinyl estradiol							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
autopsy; Possibly Topiramate, Sertraline hydrochloride, Clonazepam, Desogestrel; ethinyl estradiol; unknown; migraines, anxiety							

Onset of symptoms was not the day before death as the author input above because the SYMPTOM_TEXT field states that "Decedent was reportedly feeling unwell with respiratory complaints several days to week prior to death, progressively became more "wiped out" and tired ... found unresponsive."

Clearly, this lung clot death began shortly after vaccination and became progressively worse over a week until death. Pulmonary emboli are common to the C19 vaccines.

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CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Carol M. Salazar	Bennington, VT 5201	1/5/2021
1442021200071	87	Dorothy	Bennington (Town of)	N
complications of Dementia with psychosis; 1-2 weeks; dementia; 1-2 years; ; ; ; chronic kidney disease, hypothyroid , venous stasis				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	01/05/2021	ONSET_DATE	01/05/2021
VAERS_ID	942072	AGE_YRS	87.0	VAX_DATE	01/02/2021	TODAYS_DATE	01/13/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Death occurred 3 days after vaccine receipt; attributed to complications of her chronic advanced dementia with aspiration at age 87. No evidence of acute vaccine reaction.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
COVID-19 PCR neg on 12/31/20 and 1/3/21; Tramadol, risperidone, fluoxetine, cyanocobalamin, colchicine, torsemide, levothyroxine; aspiration pneumonia-completed treatment prior to vaccination.; Advanced dementia with severe violent behavioral symptoms. Progressive decline and frailty due to late stage dementia with likely terminal aspiration after completion of treatment for previous aspiration pneumonia. Death attributed to complications of her advanced dementia. No evidence of acute reaction to vaccine (rash, dyspnea, swelling, redness). Chronic kidney disease, hypothyroidism, type 2 diabetes, gout, B12 deficiency							

“No evidence of acute vaccine reaction” except for the fact that she died only three (3) days after vaccination. In all fairness to the public interest, the vaccine must be considered as a possible cause of death in this case.

In a person with dementia, the already leaky vessels in the brain can become immediately and further damaged from the C19 vaccine, known to cause endothelial damage. Why would anyone vaccinate a person with a “venous stasis” condition knowing the thromboembolic and platelet dysregulation issues that occur from the C19 vaccine? Violence is a normal result of leakage.

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CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	T. Ray Lovko	Rutland, VT 5701	2/21/2021
1442021201006	82	John	Center Rutland	N
Non ST Elevation Myocardial Infarction; days; ; ; ; ; ; Pulmonary fibrosis possibly linked to prior radiation therapy for large b cell lymphoma which was in remission				

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	02/21/2021	ONSET_DATE	02/21/2021
VAERS_ID	1072218	AGE_YRS	82.0	VAX_DATE	02/13/2021	TODAYS_DATE	03/04/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Patient hospitalized for NSTEMI (from 2/18/2021 to 2/20/2021) and discharged on hospice/comfort care. Patient died 2/21/2021.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; aspirin, atorvastatin, clotrimazole topical, gabapentin, lisinopril, metoprolol, docusate, multivitamin, nitroglycerin, omeprazole, probenecid, triamcinolone topical, zolpidem; ; angina pectoris, coronary artery disease, epistaxis, gout, hyperlipidemia, hypertension, idiopathic pulmonary fibrosis, lymphoma							

Non-ST Segment Elevation Myocardial Infarction. The waves on an ECG indicating electrical signals in the heart can show issues caused by clot blockages, plaque blockages, dead or dying myocytes, ventricular failure, valve deterioration, and other heart issues.

From VAERS report, “Patient hospitalized for NSTEMI (from 2/18/2021 to 2/20/2021)” The patient died on 2/21/2021, the day after being discharged. Notice the ONSET_DATE states the date of death, which is an error. Clearly, the decedent had issues at least as early as 2/18/2021, which was five (5) days after C19 vaccination.

Given the link between the C19 vaccines and heart issues and that the NSTEMI happened only days after vaccination, this is possibly and likely caused by the vaccine and should be listed on CDC records as a Y59.0 and/or T88.1 or equivalent vaccine-caused death.

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Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Timothy Donald Bicknell	Vergennes, VT 5491	3/14/2021
1442021201300	94	Ramaiyer	New Haven (Town of)	N
Congestive Heart failure; 1 week; Severe coronary artery disease; 3 months; aortic stenosis; 3 months; ; ; hypertension				

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	03/14/2021	ONSET_DATE	03/14/2021
VAERS_ID	1152267	AGE_YRS	94.0	VAX_DATE	02/26/2021	TODAYS_DATE	03/31/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
The patient was a Hospice patient that passed away.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
none; ; Hospice patient; Hypertensive heart disease with heart failure							

There will likely be no way to tell if this was a vaccine-caused death or not. The decedent was 94-years-old.

Nonetheless, this was still only sixteen (16) days after vaccination and was congestive heart failure, a heart issue.

Why are we vaccinating 94yo's, when the C19 vaccine is known to cause heart, stroke, and blood deaths?

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Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Paul S. Unger	Colchester, VT 5446	3/25/2021
1442021201527	63	Mary	Ferrisburgh (Town of)	N
Metastatic Lung Cancer; years; ; ; ; ; ;				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	03/25/2021	ONSET_DATE	03/25/2021
VAERS_ID	1152421	AGE_YRS	63.0	VAX_DATE	03/12/2021	TODAYS_DATE	03/31/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
hospice patieth passed away							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
none; ; Hospice patient - Malignant neoplasm upper lobe r bronchus or lung and Secondary neoplasm of brain; Hospice patient - Malignant neoplasm upper lobe r bronchus or lung and Secondary neoplasm of brain							

Turbo cancer is known to be a result of the C19 vaccines. If someone with cancer dies only fourteen (14) days after vaccination, then one must ask what the point of vaccination is.

If someone is on death's door and the vaccine does not prevent transmission or infection, then why vaccinate the dying person?

If someone is not on death's door and has a chance to beat cancer, then takes the vaccine and dies in fourteen (14) days, then is not the vaccine causal in his or her death?

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CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	3/16/2021
1442021201383	79	Stanley	Barre Town	N
Neuromuscular disorder (type unspecified); 54 years; ; ; ; ; ; Atherosclerotic cardiac and cerebral vascular disease (presumed)				

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	03/16/2021	ONSET_DATE	03/16/2021
VAERS_ID	1169181	AGE_YRS	79.0	VAX_DATE	03/13/2021	TODAYS_DATE	04/05/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Wife reported that no side effects from vaccine noted until 3/16/2021 when patient had arm and back pain and wanted to go back to bed and she noted he was extremely sweaty at that time. He was lifted back to bed and was repositioned several times because he could not get comfortable. She went to get him a drink from the kitchen and heard a guttural sound and rushed back to find him unresponsive and blue in color. She called "911" and patient was dead upon arrival (and a DNR) so the Medical examiner arrived and pronounced him dead. She states sx started at about 4pm and he was pronounced dead at about 5pm. Medical examiner determined a heart attack cause of death. The family not sure that the vaccination had anything to do with death but wanted it to be reported.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
None; Vitamin D3 Sominex Probiotic Ferrous Sulfate 324mg Multivitamin Flomax 0.4mg Ketaconazole Cream PRN Triamcinolone Cream PRN; Quadraparesis due to neuromuscular junctional disorder Neurogenic bladder Hemrrhoids Basal Cell Carcinoma shoulder; Quadraparesis							

In VAERS, the records shows he had arm and back pain and was sweaty, then died only three (3) days after C19 vaccination.

Stanley's Death Certificate shows "Atherosclerotic cardiac and cerebral vascular disease (presumed)" Why is this presumed? Cause A is a 54 year condition. Clearly, the certifier of this death does not know how to fill out a death certificate. This is likely a vaccine death and should be noted as such in CDC records.

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CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Elizabeth A. Bundock	Burlington, VT 5401	4/23/2021
1442021201983	52	Martin	West Burke	N
Cardiopulmonary arrest; Unknown; Congestive Heart Failure; Unknown; Non-ST segment elevation myocardial infarction; Unknown; Arteriosclerotic cardiovascular disease; years; Obesity, Chronic obstructive pulmonary disease (type unspecified)				

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	04/23/2021	ONSET_DATE	04/21/2021
VAERS_ID	1247687	AGE_YRS	52.0	VAX_DATE	04/20/2021	TODAYS_DATE	04/23/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Patient presented early this morning with increasing shortness of breath, chest tightness and associated chills. Treated with laboratory studies, xray and CT for PE studies, EKG x2, BIPAP, decline in status, intubated, CPR , expired.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
COVID nasopharynx PCR negative d-dimer 712 lactate 4.0 LDH 364 ferritin 454 c-reactive protein 1.16 procalcitonin <0.1 troponin 2.54 4 hr troponin 2.88 ABG: site left radial, FI02L BiPAP 15/5, FI02 40, ph 7.35, pCO2 30, pO2 57, sO2 88, tCO2 14, BE -9, HCO3 17 Complete blood count: WBC 16.56, RBC 5.36, HGB 18.2, HCT 53.1, MCV 99.1, MCH 34.0, MCHC 34.3, RDW 13.4, Platelet count 257, MPV 10.4, Neutrophils % 78.5, Lymphocytes % 14.1, Monocytes % 6.1, Eosinophils % 0.2, Basophils % 0.5, Immature Grans % 0.6, Nucleated RBC 0, Absolute Neutrophil Count 13.00, Absolute Lymphocyte Count 2.33, Absolute Monocyte count 1.01, Absolute Eosinophil Count 0.03, Absolute Basophil count 0.08. Comprehensive metabolic panel: calcium 9.4, glucose 273, BUN 18, creatinine 1.2, estimated GFR >= 60.00, total protein 8.6, albumin 4.1, bilirubin, total 1.5, alk phos 81, sodium 134, potassium 3.8, chloride 98, CO2 23.6, anion gap 12.4, AST 59, ALT 52, NT-proBNP 3186. CTA chest w/contrast: no saddle embolus/large central pulmonary emboli. Distal vessels not as well evaluated without discrete evidence of acute thromboembolic disease. Cardiac size mildly enlarged. no pericardial effusion. no right heart strain, coronary artery calcifications. Aorta normal caliber without aneurysm, dissection or disruption. Septal thickening throughout with diffuse bilateral airspace infiltrates and bilateral effusions. Likely acute CHF. Portable chest xray: diffuse patchy bilateral infiltrates, asymmetric edema versus multifocal pneumonia.; None; ; history of heart artery stent mixed dyslipidemia GERD coronary artery disease COPD smoker erectile dysfunction hypertension							

Clearly should be possible vax death. NSTEMI & died only 3 days after C19 vaccination.

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CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Stacey K. Whitten	Bennington, VT 5201	4/23/2021
1442021201968	98	Ethel	Bennington (Town of)	N
Congestive Heart Failure; 24 hours; Myocardial Infarction; 24 hours; Hypertensive cardiovascular disease; years; ; ;				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	04/23/2021	ONSET_DATE	04/22/2021
VAERS_ID	1267587	AGE_YRS	98.0	VAX_DATE	04/21/2021	TODAYS_DATE	04/28/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
patient woke up on 04/22/2021 with shortness of breath and weakness. On exam, she was hypotensive, tachycardic and edematous							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
4/22/2021 EKG: A fib, RVR, 145 bpm, q wave abnormalities showing ischemia inferiorly and anterolaterally.; gabapentin 100 mg once a day; none; none							

Clearly a C19 vaccine associated death, Ethel's 98-year-old heart raced to 145 bpm shortly after C19 vaccination and arrested only two (2) days after C19 vaccination. Her age does not matter in this clear evidence of causality. The CDC record should be updated to include C19 vaccine as a cause of death. &Y59.0 or T88.1 or both or another appropriate ICD-10 code should be placed on Ethel's CDC record.

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Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Linda Marie McKenna	Rutland, VT 5701	5/24/2021
1442021202515	23	Rebecca	Rutland City	N
metastatic fibrolamellar hepatocellular carcinoma to lung and abdomen; 3 months; ; ; ; ; ;				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	05/24/2021	ONSET_DATE	05/20/2021
VAERS_ID	1343614	AGE_YRS	23.0	VAX_DATE	05/18/2021	TODAYS_DATE	05/24/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
presented to ED dept confused, incr n/v, weakness. Received palliative carex4 days. deceased 05/24							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; xarelto, methadone, morphine, prochlorperazine, lorazepam, ondansetron, protonix; fibrolamellar hepatic carcinoma with metastatic disease;							

Rebecca was only 23yo and apparently went to the Emergency Department confused only two (2) days after C19 vaccination. Four (4) days later, Rebecca died purportedly from cancer that only took three (3) months to kill her. Why so fast? When did she receive dose1?

Why was she confused? Was she having a stroke? Did they bother do to any tests?

The point is not that she was going to die anyway at 23yo. The point here is that if the C19 vaccine is causally related to the death, then it should not be given to cancer patients or perhaps anyone 23yo or any age. The onset of symptoms was at most two (2) days and more likely a day or two before that.

The C19 vaccine is clearly a possible supervening cause of death and needs to be documented in the CDC Death Certificate records using a vaccine ICD-10 code like Y59.0 or T88.1.

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Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Michael Philip Carson	Burlington, VT 5401	5/6/2021
1442021202271	67	George	Virginia Beach	U
PEA Cardiac Arrest; Immediate; Aortic Valvular Failure; Days; Subacute Bacterial Endocarditis; Weeks; ; ; Coronary Artery Disease				

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	05/06/2021	ONSET_DATE	03/10/2021
VAERS_ID	1354115	AGE_YRS	67.0	VAX_DATE	02/26/2021	TODAYS_DATE	05/27/2021
PRIOR_VAX	reported his 5 1/2 to 6 days flu-like symptoms to CDC and Moderna						
SYMPTOM_TEXT							
MIGHT NOT BE LINKED TO VACCINE but, please, watch for Bacterial Endocarditis following Covid vaccinations. On-set following vaccination seems suspicious but might be coincidental. He died of Bacterial Endocarditis on May 6, 2020. First weird symptoms began March 10, very slight chills after going out for a walk. He had had pretty strong flu-like symptoms began 4 1/2 days after first vaccine dose and lasted 5 1/2 to 6 days (we reported to CDC and Moderna). Then he felt great for 3 days, then weird little symptoms began. Please, just put in data base to look for trends. He most likely had a very very mild case of Covid in early to mid February 2020. Lasted 3 days with fatigue and diarrhea only. Thank you very much							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
Medical center May 4, 2021 to May 6, 2021. Patient died of Bacterial Endocarditis on May 6, 2021. May not be connected to vaccination but could be so, please, look for more incidence (higher than normal rates) of Bacterial Endocarditis following Covid vaccination, please.; Qvar 80 mcg (Beclomethasone Dipropionate HFA) Patient died of Bacterial Endocarditis on May 6th, 2021. Could there be a vaccine; Absolutely none. Had been hunkered down since March 21, 2020 (that's 2020 --- twenty). We were extremely COVID careful. He might have had very mild case of Covid in early February 2020. He died of Bacterial Endocarditis on May 6, 2021. Timing just seems a bit questionable. See if you find overtime and increase of Bacterial Endocarditis post Covid vaccines, please.; None other than the slight allergies, asthma(very slight). Only took half his Qvar dose a day because worked for him fine. So he took half of the prescribed dose, think the lowest you could take(?)							

Given the cardiac nature of this death and onset of symptoms in 4.5 days, this should be investigated and C19 vaccine cause codes should likely be added to the Death Certificate.

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Death Certificates Correlated with VAERS Records

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Steven L. Shapiro	Burlington, VT 5401	5/29/2021
1442021202630	96	Barbara	East Montpelier (Town of)	Y
Generalized medical deconditioning, multifactorial: see part 2.; months; ; ; ; ; Hypertensive and atherosclerotic cardiovascular disease; Old age; Clinical impression of generalized decline following Covid-19 Johnson & Johnson Vaccine 5/7/2021.				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	05/29/2021	ONSET_DATE	05/07/2021
VAERS_ID	1361961	AGE_YRS	96.0	VAX_DATE	05/07/2021	TODAYS_DATE	05/30/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
profound exhaustion, unable to stay awake even with stimulation, severe anorexia - unwilling to eat pleural effusion +4 leg edema UTI felt like she was shaking internally (found it painful) felt hot (not common) body aches outcome=death							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
ProBMP metabolic panel urine for C&S CBC; Eliquis 2.5 mg BID Lasix 40 mg QD KCL 10 meq 3 AM/week gabapentin 300 mg QHS magnesium 120 mg BID Vitamin B12 500 mcg QAM Vitamin B2 100 mg QAM PreserVision AREDS 1 BID Vitamin D3 1000 IU QHS; none; A-FIB well controlled CHF well controlled TIAs Macular Degeneration							

The Death Certificate clearly states “generalized decline following Covid-19 ... Vaccine ...”

There is no question that this must have ICD-10 codes applied to the Death Certificate on file at the CDC. Anything less that inclusion of the vaccine as a cause of death for Barbara is fraud of omission. The agents of Vermont have been notified and have a duty to ensure this happens.

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CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Usha Abbineni	Berlin, VT 5641	6/17/2021
1442021202839	83	Arlene	Williamstown (Town of)	N
Cardiopulmonary arrest; Seconds; Aspiration; Minutes; Dysphagia; Days; Posterior cerebrovascular accident; Days;				

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	06/17/2021	ONSET_DATE	06/10/2021
VAERS_ID	1408193	AGE_YRS	83.0	VAX_DATE	01/07/2021	TODAYS_DATE	06/17/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Stroke possibly from intermittent atrial fibrillation							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
Cat scan 6/10/21; Propanol; None; Asthma, copd							

This would require investigation of Arlene's vaccination date, any type of medical history describing onset of symptoms shortly following vaccination, or other stronger evidence than is shown in this pairing.

Nonetheless, The People deserve know Arlene's vaccination status and if the C19 vaccine was causally related to her death by stroke. Strokes are common from C19 vaccines as shown in many Massachusetts Death Certificates.

EXHIBIT B
Death Certificates stating that C19 Vaccine
is Causally Related to Death

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Steven L. Shapiro	Burlington, VT 5401	5/29/2021
1442021202630	96	Barbara	East Montpelier (Town of)	Y
Generalized medical deconditioning, multifactorial: see part 2.; months; ; ; ; ; Hypertensive and atherosclerotic cardiovascular disease; Old age; Clinical impression of generalized decline following Covid-19 Johnson & Johnson Vaccine 5/7/2021.				
2021	F	Daniel Caloras	Charlestown, NH 3603	9/11/2021
1442021204347	102	Marion	Springfield (Town of)	N
Probable Acute Myocardial Infarction; 1-2 Weeks; Coronary Artery Disease; > 5 Years; Congestive Heart Failure; > 5 Years; Hypertension; > 10 Years; Covid Positive Test Result in Asymptomatic Vaccinated Person				
2021	M	Barbara Lazar	Norwich, VT 5055	9/16/2021
1442021204436	86	Leland	Windsor (Town of)	N
Inanition; weeks; COVID 19 breakthrough infection after fully vaccinated; 1 month; ; ; ; Rheumatoid Arthritis, Depression, personal history of squamous cell cancer metastatic to parotid gland				
2021	F	Elizabeth A. Bundock	Burlington, VT 5401	11/21/2021
1442021205810	45	Karyn	Bethel (Town of)	Y
Pulmonary Thromboembolism; days; Multifactorial (See Part 2); days-years; ; ; ; Recently Sedentary, Obesity (Body mass index 46.9), Desogestrel/ethinyl estradiol use, and COVID-19 and Influenza vaccinations on 11/11/2021				

These four (4) deaths are reviewed in paragraph fourteen (14) of the Memorandum.

EXHIBIT C
 VAERS Records to be investigated
 SYMPTOM_TEXT containing strings

“carditis” VAERS_ID	“tachycard” VAERS_ID	“clot” VAERS_ID	<u>2022 (7)</u> 2010527 2011622 2071661 2118758 2314253 2480392 2529934 _____	“rhythmi” VAERS_ID
<u>2021 (18)</u>	<u>2021 (14)</u>	<u>2021 (31)</u>		<u>2021 (5)</u>
1279082	929654	1391336		1053572
1310384	945416	1097064		1134541
1354115	969127	1150385		1464196
1394857	981201	1178463		1632243
1398938	981214	1184334*		1849303
1424310	1004913	1189855		
1432000	1009455	1212144	“embol”	<u>2022 (4)</u>
1443042	1077025	1214097	VAERS_ID	2035562
1514481	1184334	1214158		2114154
1590937	1267587	1219841	<u>2021 (16)</u>	2324113
1641145	1395392	1290857	941522	2326601
1641711	1611086	1323766	973105	_____
1686608	1743033	1354283	1184334*	
1761635	1894490	1382339	1237585	“thromb”
1866851		1383387	1363795	VAERS_ID
1902138	<u>2022 (4)</u>	1440407	1440407*	
1912754	2270785	1505017	1459807	<u>2021 (13)</u>
1966710	2523400	1529091	1478638	1125050
	2527804	1601118	1505017*	1150385*
<u>2022 (8)</u>	2529392	1623568	1632255	1223052
1998944	_____	1640992	1640992*	1223445
2014161		1695482	1821450*	1241116
2035797	“ischemi”	1719026	1906283	1264125
2076959	VAERS_ID	1743465	1923944	1264488
2257808		1773537	1935625	1354911
2261983	<u>2021 (3)</u>	1818645	1980817	1440407*
2300975	1227257	1821450		1505017*
2433716	1848844	1833023	<u>2022 (3)</u>	1578729
	1877094	1846141	2257808*	1632255*
		1869845	2317423	1773537*
		1988741	2529934	
				<u>2022 (2)</u>
				2317423*
				2326657

EXHIBIT D
 Death Certificates from ¶16.
 to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Steven L. Shapiro	Burlington, VT 5401	0
1442021206518	39	Amanda	Winooski	Y
Acute upper gastrointestinal hemorrhage; minutes; Ruptured varix/Hepatic cirrhosis; minutes/months; Hepatitis C/Chronic substance abuse; years; ; ;				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	0
1442021201293	36	Paul	Burlington	N
Cardiac arrhythmia; seconds; Congenital anomalies (unspecified: Dextrocardia; Muscular dystrophy); years; ; ; ; ; Obesity (body mass index 43.3)				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	1/28/2021
1442021200553	27	Joshua	Berlin (Town of)	Y
Complications (cerebral hypoxia; adult respiratory distress syndrome; pulmonary emboli); days; following elective nasal septoplasty under general anesthesia; days; ; ; ; ; Obesity (Body mass index 46.3)				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Elizabeth A. Bundock	Burlington, VT 5401	2/12/2021
1442021200897	30	Thomas	Brattleboro (Town of)	Y
Hemorrhagic Pancreatitis; days; Chronic alcohol use; years; ; ; ; ;				

EXHIBIT D
Death Certificates from ¶16.
to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Joshua Daniel Zimmer	Burlington, VT 5401	5/18/2021
1442021202418	36	Alex	Westford (Town of)	N
Distributive Shock and Multisystem Organ Failure; 6 hours; Hepatorenal Syndrome, cannot exclude underlying infectious etiology.; 1 day; Acute Alcoholic Hepatitis; Weeks; ; ;				
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	5/22/2021
1442021202468	39	Joshua	Newport Center (RR name Center)	N
Sudden cardiac arrhythmia; seconds/minutes; Obesity related cardiomyopathy; years; ; ; ; Diabetes				
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Daniel Caloras	Charlestown, NH 3603	6/21/2021
1442021202884	24	Reuben	Putney (Town of)	N
Probable Cerebrovascular Accident; < 1 Year; Congenital Brain Malformation; 24 Years; ; ; ; Seizure Disorder, Congenital Hydrocephalus with Porencephalic Cyst				
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	7/2/2021
1442021203127	35	Ralph	Woodstock (Town of)	Y
Terminal arrhythmia; minutes; Cardiac hypertrophy with pericardial adhesions and/or Autonomic dysreflexia; unknown; Remote cervical spinal cord injury; years; Motor vehicle collision; years;				

EXHIBIT D
Death Certificates from ¶16.
to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Sean Daniel Till	Burlington, VT 5401	7/4/2021
1442021203159	30	Britni	West Chazy	N
acute renal failure; hours; septic shock; hours; Staphylococcus bacteremia; hours; intravenous drug use; years; opioid use disorder, tricuspid valve endocarditis				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Kristin Roman	Burlington, VT 5401	8/16/2021
1442021203876	38	Donald	Lisbon	N
Hemorrhagic Infact of Right Basal Ganglia, Etiology Undetermined (Non-Traumatic); hours; ; ; ; ; ;				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Suzanne P. Burgos	Randolph, VT 5060	8/28/2021
1442021204087	26	Shawn	Braintree (Town of)	N
Ventricular Cardiac Arrhythmia; 12 hours; Hyperkalemia; 72 hours; Renal Failure; 3 years; Type 1 Diabetes; 15 years; Severe Protein Malnutrition				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Linda Louise Logan	Burlington, VT 5401	10/16/2021
1442021205119	29	Catalina	Shoreham (Town of)	N
Acute right ventricular failure; days; Pulmonary Hypertension; days; Pulmonary embolism/ deep vein thromboses; days; Nexplanon implant; years;				

EXHIBIT D
 Death Certificates from ¶16.
 to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Danielle Jaclyn Wall	Burlington, VT 5401	11/8/2021
1442021205567	38	Amanda	Enosburg Falls	N
cardiogenic shock; days; myocardial infarction; days; coronary artery disease; years; ; ; distributive shock in the setting of lower extremity compartment syndrome				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Steven L. Shapiro	Burlington, VT 5401	12/3/2021
1442021206085	40	Scott	Chester (Town of)	N
Cardiovascular effects of obesity; years; ; ; ; ; ;				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Ryan Mitchell Thomas	Burlington, VT 5401	12/18/2021
1442021206363	37	Danielle	Merrill	N
multiorgan failure; days; COVID infection; month; immunosuppression; years; multiple sclerosis; years;				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Massoud Saleki	Burlington, VT 5401	12/29/2021
1442021206600	37	Travis	Essex Junction	N
acute hypoxemic respiratory failure; days; lymphangitic carcinomatosis; weeks; metastatic wild type colon adenocarcinoma; years; ; ; pulmonary embolism, small bowel obstruction				

EXHIBIT D
 Death Certificates from ¶16.
 to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Kelly Lemieux	Saint Johnsbury, VT 5819	1/2/2022
1442022200105	16	Erik	Danville (Town of)	N
Pancytopenia; weeks; lymphoblastic lymphoma; months; ; ; ;				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Peter Paul Bertolozzi	Springfield, VT 5156	1/7/2022
1442022200113	37	Jeremiah	North Springfield	N
Cardiac arrest; hours; cardiovascular disease; years; obesity; years; ; ;				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Elizabeth A. Bundock	Burlington, VT 5401	2/18/2022
1442022201043	16	Aiden	Charlotte (Town of)	Y
Hypoxic-ischemic encephalopathy; 15 hours; Presumed seizure; 15 hours; Epilepsy and neurocognitive disorder due to STXBP1 mutation; 16 years; ; ;				

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Elizabeth A. Bundock	Burlington, VT 5401	2/18/2022
1442022201055	37	Capri	Bennington (Town of)	Y
Pulmonary thromboembolism; minutes; Deep venous thromboses of left leg; unknown; History of Coagulopathy (type not specified); years; ; ;				

EXHIBIT D
Death Certificates from ¶16.
to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	F	Dijana Poljak	Burlington, VT 5401	3/1/2022
1442022201226	39	Elizabeth	Burlington	Y
Increased intracranial pressure; Weeks; Metastatic triple negative intraductal breast cancer to leptomeninges; Months; ; ; ;				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	F	David Yarnall Jackson	Burlington, VT 5401	4/1/2022
1442022202812	40	Heidi	0	N
diffuse end organ ischemia and infarction; minutes; acute hypoxic respiratory failure; days; acute respiratory distress syndrome; days; Post-ERCP pancreatitis; Days; Hypotension / shock, elevated liver enzymes, chronic obstructive pulmonary disease, alcohol use disorder, acute kidney injury				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	F	Rebecca Cunningham Bell	Burlington, VT 5401	4/10/2022
1442022201915	14	Allison	Richmond (Town of)	N
left MCA infarct; one day; possible thrombotic disorder; unknown; ; ; ; Pulmonary Emboli, left femoral deep vein thrombosis, multi-focal cerebral infarcts, cardiac arrest with resultant multi-organ system dysfunction				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	F	Elizabeth A. Bundock	Burlington, VT 5401	4/14/2022
1442022202060	14	Adrianna	Alburgh	Y
Sudden Cardiac Death; Presumed Arrhythmia; minutes; ; ; ; ; ;				

EXHIBIT D
 Death Certificates from ¶16
 to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Dylan Scott Adams	Burlington, VT 5401	5/24/2022
1442022202840	25	Nicholas	Bolton (Town of)	N
Intracranial hypertension; 1-2 hours; Cerebral edema; 24-48 hrs; Intracranial abscess; 48-72 hours; Dental abscess; 1-2 weeks;				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Elaine R. Amoresano	Burlington, VT 5401	6/1/2022
1442022203138	38	Max	St. Albans City	Y
Sudden Death Following Acute Psychosis Episode; Unknown; ; ; ; ; ; Acute Methamphetamine Intoxication, Bipolar 1 Disorder With Hallucinations, Atherosclerotic Hypertensive Cardiovascular Disease, Obesity				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Ryan Mitchell Thomas	Burlington, VT 5401	6/5/2022
1442022202883	39	Timmothy	Plattsburgh	N
Intracranial hemorrhage; days; Septic emboli from Granulicatella adiacens bacteremia; weeks; Mitral valve endocarditis with Granulicatella adiacens bacteremia; weeks; Intravenous drug use disorder; years; Hypertension, hepatitis C				
Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	David Yarnall Jackson	Burlington, VT 5401	6/11/2022
1442022203005	30	Jacob	Bristol (Town of)	N
diffuse end organ ischemia and infarction; minutes to hour; hemorrhagic shock; hours; presumed variceal upper gastrointestinal bleed; hours; Alcoholic cirrhosis; months to years;				

EXHIBIT D
 Death Certificates from ¶16
 to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2022	M	Steven L. Shapiro	Burlington, VT 5401	6/11/2022
1442022203011	40	Justin	Williamstown (Town of)	Y
Terminal arrhythmia; seconds; Dehydration (vomiting); hours/days; Gastroenteritis, probably viral; days; ; ;				

EXHIBIT E
 Death Certificates from ¶17
 involving “myocarditis” to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	M	Yelena Aleksandrovna Kogan	Saint Johnsbury, VT 5819	4/15/2021
1442021201861	96	Edward	Lyndonville	N
Acute respiratory failure; hours; pneumonia; days; COVID-19; days; ; ; Encephalopathy due to COVID-19, myocarditis due to COVID-19, Pseudomonas urinary tract infection, acute on chronic diastolic congestive heart failure, pulmonary hypertension, metastatic prostate cancer				
2021	F	John Henry Priester	Burlington, VT 5401	8/25/2021
1442021204098	77	Maryhelen	Essex Junction	N
Cardiogenic Shock; hours; Myocarditis; days; COVID-19; days; ; ;				
2021	M	Steven L. Shapiro	Burlington, VT 5401	8/25/2021
1442021204105	51	Peter	Haines	Y
Dilated cardiomyopathy due to Acute myocarditis, consistent with viral etiology.; days; ; ; ; ; ;				
2022	F	Jennifer Pfeiffer	Burlington, VT 5401	4/28/2022
1442022202201	64	Catheryn	Wolcott (Town of)	Y
Lymphocytic Myocarditis; minutes; ; ; ; ; ; Hypertensive and atherosclerotic coronary artery disease, emphysema				
2022	F	Michael Lees	Rutland, VT 5701	8/15/2022
1442022204182	44	Kristy	Brandon (Town of)	N
gastric adenocarcinoma with metastasis to spine and ovaries; 22 months; ; ; ; ; ; hypothyroid, myocarditis related to treatment				

EXHIBIT F
 Death Certificates from ¶18
 involving “pericarditis” to be investigated

Year	Sex	Certifier Name	Certifier City, State Zip Code	Date of Death
CERTIFICATE ID	Age	Decedent First Name	Decedent City of Residence	Autopsy Y/N/U
CODIA; Length of time A; CODIB; LoT B; CODIC; LoT C; CODID; LoT D; CONDITIONS CONTRIBUTING				
2021	F	Christopher J. Hebert	Burlington, VT 5401	3/3/2021
1442021201127	83	Margaret	Shelburne (Town of)	N
Failure to thrive; 2 months; Pancytopenia most likely due to methotrexate; 2 months; Rheumatoid Arthritis; Decades; ; ; Constrictive Pericarditis, Osteoporosis				
2021	M	Timothy Philip Shafer	Townshend, VT 5353	5/28/2021
1442021202603	82	Michael	Wardsboro (Town of)	N
anorexia; 3 weeks; pleural effusions; 2 months; pericarditis; 2 months; ; ; Parkinson's disease, coronary artery disease, recurrent pneumonia, atrial fibrillation				
2022	M	Elizabeth A. Bundock	Burlington, VT 5401	0
1442022202613	59	Thomas	Townshend (Town of)	Y
Acute pyelonephritis and pericarditis; unknown; Nephrolithiasis; unknown; ; ; ; Fentanyl intoxication				
2022	F	Andrew Philip DeNicco	Rutland, VT 5701	7/22/2022
1442022203720	47	Stacy	Richford (Town of)	N
Cirrhosis of the liver; unknown; Nonalcoholic steatohepatitis; unknown; Morbid Obesity; several years; ; ; Pericarditis, rheumatoid arthritis, polyneuropathy, bedbound, malnutrition				

EXHIBIT G
 VAERS reports from ¶19
 to be investigated

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	03/01/2021
VAERS_ID	1505017	AGE_YRS	41.0	VAX_DATE	01/09/2021	TODAYS_DATE	07/27/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>a month and a half after receiving the vaccine, I developed blood clots in legs; I was diagnosed with DVT; it travelled to the lungs; This spontaneous case was reported by a consumer and describes the occurrence of THROMBOSIS (a month and a half after receiving the vaccine, I developed blood clots in legs), DEEP VEIN THROMBOSIS (I was diagnosed with DVT) and PULMONARY EMBOLISM (it travelled to the lungs) in a 41-year-old male patient who received mRNA-1273 (Moderna COVID-19 Vaccine) (batch nos. 031L20A and 026L20A) for COVID-19 vaccination. No Medical History information was reported. On 09-Jan-2021, the patient received first dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) 1 dosage form. On 06-Feb-2021, received second dose of mRNA-1273 (Moderna COVID-19 Vaccine) (Intramuscular) dosage was changed to 1 dosage form. In March 2021, the patient experienced THROMBOSIS (a month and a half after receiving the vaccine, I developed blood clots in legs) (seriousness criteria hospitalization and medically significant), DEEP VEIN THROMBOSIS (I was diagnosed with DVT) (seriousness criteria hospitalization and medically significant) and PULMONARY EMBOLISM (it travelled to the lungs) (seriousness criteria hospitalization and medically significant). The patient was treated with APIXABAN (ELIQUIS) in March 2021 for Deep vein thrombosis, at a dose of UNK dosage form. At the time of the report, THROMBOSIS (a month and a half after receiving the vaccine, I developed blood clots in legs), DEEP VEIN THROMBOSIS (I was diagnosed with DVT) and PULMONARY EMBOLISM (it travelled to the lungs) outcome was unknown. DIAGNOSTIC RESULTS (normal</p>							

EXHIBIT G
VAERS reports from ¶19
to be investigated

VEIN THROMBOSIS (I was diagnosed with DVT) and PULMONARY EMBOLISM (it travelled to the lungs) outcome was unknown. DIAGNOSTIC RESULTS (normal ranges are provided in parenthesis if available): In 2021, Computerised tomogram: he was diagnosed as having deep vein thrombosis (abnormal) CT scan of his lungs. He was diagnosed as having Deep Vein Thrombosis (DVT). In 2021, Ultrasound Doppler: he was diagnosed as having deep vein thrombosis (abnormal) An ultrasound of his heart and legs. He was diagnosed as having Deep Vein Thrombosis (DVT). Patient reports having to be hospitalized overnight, one month after vaccination. He stated that he was previously a healthy male with no underlying health conditions. Concomitant medications were not provided. Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded.; Sender's Comments: Based on the current available information and temporal association between the use of the product and the start date of the event, a causal relationship cannot be excluded.

LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY

Test Date: 2021; Test Name: CT scan; Result Unstructured Data: CT scan of his lungs. He was diagnosed as having Deep Vein Thrombosis (DVT); Test Date: 2021; Test Name: ultrasound; Result Unstructured Data: An ultrasound of his heart and legs. He was diagnosed as having Deep Vein Thrombosis (DVT); ; ;

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	02/21/2021
VAERS_ID	1999297	AGE_YRS	25.0	VAX_DATE	02/18/2021	RECEIVE_DATE	01/03/2022

PRIOR_VAX 0

SYMPTOM_TEXT

Myocardial injury: The pt was found to have an elevated Troponin in the setting of waking from sleep with chest discomfort. An Echocardiogram was performed: no wall motion abnormalities, EF of 68% D dimer was negative at 456. A cardiac CT scan was done that showed normal coronary arteries with no atherosclerotic disease. It was presumed in the setting of her bodies reaction to her second COVID dose that she had this troponin leak associated chest pain as there was no cause identified.

LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY

TnT and TTE is normal on 2/23/21, EKG normal, CXR unremarkable,; Fluoxetine 40 mg po QD; ;

EXHIBIT G
VAERS reports from ¶19
to be investigated

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	03/04/2021
VAERS_ID	1150385	AGE_YRS	67.0	VAX_DATE	03/01/2021	TODAYS_DATE	03/29/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>I had a return of a superficial thrombophlebitis on my left arm above where a catheter had been when I had surgery 7 weeks before. The blood clot returned again to the same level of pain and the same; I had a return of a superficial thrombophlebitis on my left arm above where a catheter had been when I had surgery 7 weeks before. The blood clot returned again to the same level of pain and the same; This is a spontaneous report from a contactable consumer (patient). A 67-year-old female patient received the first dose of BNT162B2 (PFIZER-BIONTECH COVID-19 VACCINE), via an unspecified route of administration, administered in right arm on 01Mar2021 13:30 (lot/batch number was not reported) as single dose for COVID-19 immunisation. The patient's medical history included high blood pressure. The patient had no known allergies. The patient's concomitant medications were not reported. On 04Mar2021 07:30, the patient had a return of a superficial thrombophlebitis on her left arm above where a catheter had been when she had surgery 7 weeks before. The blood clot returned again to the same level of pain and the same. No treatment was received for the events. Patient was not pregnant at the time of vaccination. Patient had no COVID prior to vaccination and not tested for COVID post vaccination. Vaccine facility type was other. There was no other vaccine in four weeks and there was other medications in two weeks. The outcome of the events were not recovered. Information on the lot/batch number has been requested.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; ; ; Medical History/Concurrent Conditions: Blood pressure high							

EXHIBIT G
VAERS reports from ¶19
to be investigated

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	05/22/2021
VAERS_ID	1354911	AGE_YRS	66.0	VAX_DATE	03/07/2021	TODAYS_DATE	05/27/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>Patient is a 66 y.o. female with an unknown PMHx admitted with DKA and found to have thrombocytopenia, an intraparenchymal bleed on Head CT 2/2 to dural venous thrombosis. Course also complicated by saddle submassive PE w/ + biomarkers and mild RHS. Given unclear etiology of thrombocytopenia, venous thrombosis, and PE, suspect a precipitating/underlying etiology and cannot rule out possible occult malignancy, autoimmune disorder or alternative hypercoagulable state such as APLS. Possibly bacteremic given GPB and Staph on blood cx, though likely contaminant. DKA resolved, anion gap is closed, continued monitoring of glucose and insulin adjustment .OB/Gyn following for heavy vaginal bleeding and possibly gyn malignancy workup, endometrial biopsy pending. Heme also following.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; ; ;							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	04/06/2021	ONSET_DATE	03/24/2021
VAERS_ID	1243715	AGE_YRS	63.0	VAX_DATE	03/13/2021	TODAYS_DATE	04/22/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>Report received from co-worker of patient. Patient received J&J vaccine on 3/13/21. Patient was at work and collapsed 11 days after vaccination. Was intubated at work site and taken to local hospital - the patient was then airlifted to a Medcial Center. Diagnosed with a brain bleed and subsequently died on 4/6/21.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; Unknown; unknown; Unknown							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	04/03/2021
VAERS_ID	1223445	AGE_YRS	40.0	VAX_DATE	03/20/2021	TODAYS_DATE	04/17/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Superficial Thrombosis in right leg began to present 2 weeks after first injection. Worsened over next two weeks until I visited my doctor who sent me for an ultrasound.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
Veneous ultrasound confirmed large superficial clot in upper right leg. No DVT detected.; LDN collagen zzquil ibuprofen; ; Chronic pain							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	04/14/2021
VAERS_ID	1223052	AGE_YRS	71.0	VAX_DATE	03/26/2021	TODAYS_DATE	04/17/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Approximately 3 weeks following the administration of second dose of Moderna COVID-19 vaccine, this patient developed epistaxis, blood blisters on his skin and in his mouth, petechiae over his legs, and bleeding of his gums. Lab work revealed severe thrombocytopenia with a platelet count of "0".							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
Platelet Count: 0 L (10 ³ /uL units, range 130-400); Amlodipine, lisinopril, atorvastatin, chlorthalidone, albuterol HFA, ibuprofen, vitamin b-12; Pneumonia, bronchospasm, AKI; Hypertension, hyperlipidemia, prediabetes, obesity, acute type A viral hepatitis (onset: 11/7/2013),							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	04/19/2021
VAERS_ID	1440407	AGE_YRS	69.0	VAX_DATE	03/28/2021	TODAYS_DATE	07/01/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>So I had the shot on March 28, 2021 and let's see if I can remember the date, I'll get my calendar which will help me a little bit, so it started the end of April 2021. I noticed a difference in my breathing, I had not been active and I just didn't feel very good. On the 28th of April I was feeling very weak, feeling like a wimp, I couldn't do anything without feeling very exhausted. Then on May 5 2021 I told my husband I just was not feeling right, I had to sit down just when getting dressed. I went to the bathroom and I felt like something was really wrong, I could not even walk around without feeling tired. On May 5 2021 I called my son who is an RN and he took my BP and heart rate, but my oxygen was 91 and then 87 again when he tested again. He said he felt I had a pulmonary embolism, they called my cardiologist. The DR told me to go to the hospital and they did an EKG and took me to an ER room to do a chest x-ray. They said there was something on my chest so they did bloodwork. He then said I had blood clots on both my lungs. Then later on that night they did ultrasounds of my legs. They found a deep vein thrombosis. They then broke the news that I was not going home, that they were going to admit me. I ended up in a monitored room for four days. They put me on oxygen and wires. 4,000 units of heparin drip w/ 2,0000</p>							

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legs. They found a deep vein thrombosis. They then broke the news that I was not going home, that they were going to admit me. I ended up in a monitored room for four days. They put me on oxygen and wires. 4,000 units of heparin drip w/ 2,000 units per hour. They then switched me to Luvanox and Coumadin. They could not figure out why this happened to me. They found no infections, nothing cancerous or anything. They sent me home with blood thinners (coumadin) all the time. Then two weeks later I woke up in the middle of the night with a lot of pressure on my chest and I went to the ER again. I was never admitted, they just checked me. Then two weeks later again it happened and I went to on call, they took pictures of my heart and everything again and they could not find anything. They did a study of sleep on me and they found I have a sleep apnea problem. They are recently now working on my sleeping problem and I will be admitted and studied over night on the machines. In between all this I also went to my PCD and now that is to current, up to date is what has been happening recently.

LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY

May 5, 2021: EKG - normal Chest xray - normal D-Dimer test - 2,092NG (high) Covid-19 test - negative B type Natriuretic peptide - 161 - high (normal = 0-100) PPT - normal PTINR - normal Procalcitonin - low risk Liver profile - normal High sensitivity troponin - very elevated Cardiac Monitor Data strip - no results; Lisinopril HCTZ, Sertraline, Metoprolol, 81mg Aspirin morning and night, Famotidine, Stool softener, Fish oil, Vitamin C, vitamin D3, Garlic, Curcumin; N/a; Slight High BP, Some anxiety, Hip and knee replacements, Cancerous mole removed, Tested positive for a lyme disease : all at this time under control

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	05/11/2021
VAERS_ID	1632255	AGE_YRS	56.0	VAX_DATE	04/09/2021	TODAYS_DATE	08/25/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Approximately a week after first vaccine, began to experience SOB, cough which persisted through 2nd vaccine. She finally presented to the ED on 5/11/21 and was found to have bilateral PEs. No recent travel, surgery, trauma or immobility. Not on hormones. Normal BMI. Non-smoker. No prior hx venous thromboembolism.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
D-Dimer 2527 (normal < 230) CT PE protocol - bilateral PEs with evidence of right heart strain Normal PT, PTT Normal CBCD Negative LE ultrasounds; melatonin multivitamin; None; None							

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VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	04/13/2021
VAERS_ID	1241116	AGE_YRS	45.0	VAX_DATE	04/09/2021	TODAYS_DATE	04/22/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Previously healthy 46 yoM received moderna dose 1 on 4/9. On 4/13 starts noticing a petechial rash on bilateral feet. This spreads up the legs with some involvement in the torso. On 4/15 notices mucosal bleeding with gums while brushing teeth, increasing spontaneous nose bleeds overnight. On 4/21 has a telehealth PCP visit, sent for lab work which shows thrombocytopenia with a platelet count of 2k as well as a hemoglobin of 12.9. Is sent to the ED with repeat platelet count of 1k. Previously platelets were 143k in 2019. Pt admitted for further work-up							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
CBC 4/21; Vitamin D supplement.; none; eczema							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	04/19/2021
VAERS_ID	1264125	AGE_YRS	59.0	VAX_DATE	04/14/2021	TODAYS_DATE	04/27/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
R popliteal thrombus, and B/L PE's							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
US, CXR, CT scan; simvastatin, cetirizine, duloxetine, hydroxyzine, melatonin, naproxen, omeprazole, tizanidine, trazodone; unknown; CKD 3, obesity, hyperlipidemia							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	07/11/2021
VAERS_ID	1632243	AGE_YRS	30.0	VAX_DATE	05/20/2021	TODAYS_DATE	08/25/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>After the 2nd dose, I developed 5 swollen lymph nodes in my neck and collar bone and 2 in my groin (I already had 2 swollen lymph nodes with the 1st dose). It took 4 weeks to resolve. I also had pain at injection site which resolved after 3-4 days. On July 11, 2021, I woke up with an achy feeling in my chest. I started having loud and hard pounding. I had about 60-70 heart palpitations episodes. I was feeling tired, fatigue, chest heaviness, chest achiness which radiated outwards when I had episode of arrhythmia. I did go see my doctor 2 weeks later on July 28 2021. By the time I saw the doctor, the intensity had decreased. I had to wear a holster monitor which showed premature ventricular contractions and atrial contractions. I was not placed on medications since my cardiac event was not hindering my quality of life or life threatening. As of now, I am still having 10-15 episodes of arrhythmias mostly in the mornings or evenings. I do I get the discomfort/achiness/soreness in my chest when I am having an episode.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
heart holster monitor; Zyrtec; Microgestin 1/20 birth control pills; none; none							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	08/09/2021
VAERS_ID	1578729	AGE_YRS	83.0	VAX_DATE	07/26/2021	TODAYS_DATE	08/17/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>She developed thrombocytopenia, probably at least in part secondary to her vaccine. See below platelet count 1 day prior to vaccination was normal, it fell to 45 approximately 2 weeks later.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
<p>Platelet counts: 7/25/21: 187 8/9/21:45; ; pancytopenia secondary to methotrexate toxicity with complicated hospitalization including neutropenic fever; many of relevance she has a remote history of ITP</p>							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/12/2022
VAERS_ID	2092877	AGE_YRS	31.0	VAX_DATE	11/23/2021	RECEIVE_DATE	02/07/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Estimated date of birth of unborn babe - 4 weeks pregnant at date of covid vaccine injection. Went to initial OBGYN appointment(1/12/2022) for check up to verify pregnancy at 9 weeks pregnant. Ultrasound was done(1/12/2022), babes heart rate was measured and concluded to be 50 BPM. Came back 2 weeks later(1/26/2022) to do another ultrasound, no heart beat was present, resulting in miscarriage. Following day(1/27/2022) a D&C was performed to remove miscarriage.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
N/A; Pre-natal gummy vitamin; N/A; PCOS- Poly cystic ovarian syndrome							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	11/01/2021
VAERS_ID	2387108	AGE_YRS	34.0	VAX_DATE	11/26/2021	RECEIVE_DATE	07/23/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
First dose I had a long standing rash, SOB and allergic reaction needing treatment. Second dose the rash went away, and all my lymphnodes have swollen and all over my body, I have persistant fatigue, brain fog, DOE, and occasional chest pain and tightness. I have had no relief. Being referred to local Infectious Disease.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; None, just OTC IBU and Tylenol; None; None at time of vaccination. Now I have a systemic allergic long standing reaction. No my skin breaks out and itches if someone with covid coughs on me.							

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VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	12/05/2021
VAERS_ID	2122755	AGE_YRS	8.0	VAX_DATE	12/04/2021	RECEIVE_DATE	02/18/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>severe stomach pain; Nausea; Vomiting; Fever; Lethargy; This is a spontaneous report received from contactable reporter(s) (Consumer or other non HCP and Physician). The reporter is the patient. The initial safety information received was reporting only non-serious adverse drug reaction(s). Upon receipt of follow up information on 01Feb2022, this case contains serious adverse reaction(s) and all safety information is processed together. A 8 year-old male patient received bnt162b2 (BNT162B2), intramuscular, administered in arm left, administration date 04Dec2021 13:15 (Lot number: FK5618) at the age of 8 years as dose 2 (tris), single for covid-19 immunisation. The patient had no relevant medical history. There were no concomitant medications. Vaccination history included: Padiatric pfizer (Dose 1, Batch/Lot No: FK5127, Location of injection: Arm Left, Vaccine Administration Time: 04:30 PM, Route of administration: Intramuscular), administration date: 12Nov2021, when the patient was 7 years old, for Covid-19 Immunization. The following information was reported: ABDOMINAL PAIN UPPER (medically significant) with onset 06Dec2021 07:30, outcome "recovered" (Dec2021), described as "severe stomach pain"; LETHARGY (non-serious) with onset 05Dec2021 07:00, outcome "recovered" (06Dec2021), described as "Lethargy"; PYREXIA (non-serious) with onset 05Dec2021 08:00, outcome "recovered" (06Dec2021), described as "Fever"; NAUSEA (non-serious) with onset 06Dec2021 07:30, outcome "recovered" (06Dec2021 13:00), described as "Nausea"; VOMITING (non-serious) with onset 06Dec2021 07:30, outcome "recovered" (06Dec2021 13:00), described as "Vomiting". Therapeutic measures were not taken as a result of lethargy, pyrexia, nausea, vomiting. No other vaccine in four weeks and no other medications in two weeks. The patient did not experienced covid prior vaccination. The morning after second dose of vaccination 05Dec2021 patient had fever starting in the morning (approximately 8:00 AM)</p>							

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vaccine in four weeks and no other medications in two weeks. The patient did not experienced covid prior vaccination. The morning after second dose of vaccination 05Dec2021 patient had fever starting in the morning (approximately 8:00 AM) continuing through the day until bed time (approximately 8:00 PM), lethargy also started next day 05Dec2021, but continued through late afternoon 2 days following vaccination 06Dec2021. Reporter was not surprised by either of these symptoms as they are pretty common, but the second day after vaccination 06Dec2021, patient woke complaining of severe stomach pain, which was followed by vomiting (around 7:30 AM), constant nausea, and repeated bouts of vomiting, about once every 45 minutes, until about 1:00 PM when both vomiting and nausea stopped. The patient did not test for covid post vaccination. No relevant tests. The reporter consider the Pfizer product had a causal effect to the adverse events. The reporter considered the events lethargy, pyrexia, nausea, vomiting as non-serious. No follow-up attempts are possible. No further information is expected.; Sender's Comments: Based on available information and a plausible temporal association, the causa association between the event severe stomach pain and the suspect drug BNT162B2 cannot be totally excluded. The impact of this report on the benefit/risk profile of the Pfizer product is evaluated a part of Pfizer procedures for safety evaluation, including the review and analysis of aggregate data for adverse events. Any safety concern identified as part of this review, as well as any appropriate action in response, will be promptly notified to Regulatory authorities, Ethics committees, and Investigators, as appropriate.

LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY

; ; ; Comments: List of non-encoded Patient Relevant History: Patient Other Relevant History 1: None

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	12/15/2021
VAERS_ID	2010602	AGE_YRS	7.0	VAX_DATE	12/11/2021	RECEIVE_DATE	01/06/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Large lymph node by ear, about 5 cm, resolved in 7-10 days							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; None; None; None							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	12/24/2021
VAERS_ID	1992697	AGE_YRS	30.0	VAX_DATE	12/21/2021	TODAYS_DATE	12/30/2021
PRIOR_VAX	0						
SYMPTOM_TEXT							
Chest pain (central and left started Dec 24th and still experiencing slight central pain), left arm numbness and tingling on the inside (Dec 25- 26th lasted 2 days), swollen lymph nodes in left armpit, shortness of breath when sharp chest pains (24th-26th). I went to ER on Dec 26th for symptoms. They did an EKG, said everything looked normal and told it was likely a reaction to booster. It was effecting my musculoskeletal system. I was told to take ibuprofen and keep an eye out. Called PCP to follow-up with persistent chest tightness. Scheduled to be seen tomorrow, December 31st, to get a second look.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
EKG and vitals are ER on December 26th, everything looked normal.; Nortriptyline, Junel, Tizanidine, Magnesium, Riboflavin, Women's Multivitamin; None; Head injury, anxiety							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/06/2022
VAERS_ID	2540777	AGE_YRS	9.0	VAX_DATE	12/29/2021	RECEIVE_DATE	12/22/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Patient with onset of dizzy spells, headaches, body pain post vaccine, worsened after 2nd. Diagnosed with POTS Saw PEDI Neuro							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; None; None; Patient started to feel awful post first covid vaccine, worsened after the second vaccine and has since been diagnosed with POTS syndrome							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/06/2022
VAERS_ID	2313042	AGE_YRS	33.0	VAX_DATE	01/06/2022	RECEIVE_DATE	06/08/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
- unable to breathe, heart pounding, rapid heart rate, chest pain, fever, aches, chills (10 hours after 3rd vaccine) - chest pain (lasted for 2 months) - occasional chest pain and rapid heart rate (still happening)							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
EKG; none; none; none							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/14/2022
VAERS_ID	2036608	AGE_YRS	9.0	VAX_DATE	01/08/2022	RECEIVE_DATE	01/14/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Unusual bruising in the shoulders of both arms. It was more so in the arm that had most recently gotten the vaccine and less so in the arm that had gotten the first dose. Bruising didn't show up until day 6 after the second shot. No swelling, itching or pain. Went to the Dr. and all blood work came back normal so there is no explanation for the bruising.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
blood work 01/14/2022; Methlyphenidate 5mg; none;							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	01/14/2022
VAERS_ID	2035260	AGE_YRS	8.0	VAX_DATE	01/14/2022	RECEIVE_DATE	01/14/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Patient arrived to clinic for 1st dose of pediatric pfizer vaccine. Vaccination was completed successfully with no immediate complaints from the patient. Approximately 10 minutes post-vaccination patient complained of nausea. Patient was brought to a restroom by parent and patient and parent reported that he vomited. Patient appeared pale/gray complexion RN's assessment. Parent reported that patient had not had anything to eat or drink yet this morning. Patient was asked to sit in a chair and drink small amounts of juice and was given pretzels. Patient's coloring improved with food and drink. Patient was observed for a total of 30 minutes with no other complaints except nausea which improved during observation. Parent reported that patient can get carsick, staff provided parent with emesis bag in case of nausea presenting again. Parent reported they would be getting food after leaving clinic site.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
:::							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/18/2022
VAERS_ID	2047662	AGE_YRS	26.0	VAX_DATE	01/18/2022	RECEIVE_DATE	01/19/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
~20 minutes after injection tongue began to swell and was hard to move and throat became tight. Did not subside for 4 hours. Took 1 Benadryl when the swelling and tightness began and another one an hour after when symptoms did not improve. No allergies known and no allergic reaction to first 2 Pfizer shots.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; none; none; none							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/26/2022
VAERS_ID	2071661	AGE_YRS	21.0	VAX_DATE	01/25/2022	RECEIVE_DATE	01/28/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
1/26, day after the shot [within 24 hours] Wiped and noticed a blood clot 1/27 Bleeding Heavier, not like normal menstrual discharge. Have not had any significant discharge during menstruation due to being on the pill, however, bleeding come on within 24 hours of getting booster shot. Also bedridden with fever, nausea and vomiting at this stage, which lasted one day. Smell and consistency of blood NOT like normal menstrual blood. 1/28 Bleeding stopped							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; MultiVitamin Birth Control; None; None							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	01/31/2022
VAERS_ID	2079226	AGE_YRS	16.0	VAX_DATE	01/31/2022	RECEIVE_DATE	02/01/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Patient became light headed and fainted shortly after receiving vaccination. Patient recovered shortly after at least 10 seconds.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; None.; None.; None.							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	02/16/2022
VAERS_ID	2123625	AGE_YRS	21.0	VAX_DATE	02/16/2022	RECEIVE_DATE	02/18/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
The patient developed light-headedness and dizziness along with headache the evening after vaccines were given							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
None; Novolog; NA; Diabetes, Depression							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	0	ONSET_DATE	05/10/2022
VAERS_ID	2269368	AGE_YRS	22.0	VAX_DATE	05/09/2022	RECEIVE_DATE	05/10/2022
PRIOR_VAX	Had practically the same flu-like reaction to second dose of the Pfizer vaccine, aged 21 at the time, vaccine received 4/14/2021						
SYMPTOM_TEXT							
Flu like symptoms, bodily weakness, pain in left armpit, headache, fatigue							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; Ibuprofen, Flonase, and Xyzal; None.; None.							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	05/31/2022
VAERS_ID	2308461	AGE_YRS	7.0	VAX_DATE	05/31/2022	RECEIVE_DATE	06/03/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Swollen Lymph Nodes in neck tachycardia mottling of the skin nausea vomiting rigors fever							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
swab for flu, rsv, covid and rapid strep test; Fluoride- 1MG Magnesium citrate 100 MG Multivitamin with probiotic; Seasonal allergies; None							

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	11/06/2022
VAERS_ID	2529025	AGE_YRS	31.0	VAX_DATE	06/07/2022	RECEIVE_DATE	12/12/2022
PRIOR_VAX	Jansen COVID Vaccine, 1st dose.						
SYMPTOM_TEXT							
Since my second booster I have now had COVID a third time. I have had COVID three times since January 2022. After conversations with my doctor, we have spoken about whether my body is having a hard time really getting rid of the virus. I have had adverse effects to all vaccines. I am in the process of being tested for issues relating to fatigue and there is concern that I could unknowingly be experiencing some sort of "long COVID" side effects.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; ; COVID for the second time in May 2022 and Flu in April 2022; Migraines, Anxiety, Depression, PTSD							

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VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	10/14/2022
VAERS_ID	2480380	AGE_YRS	21.0	VAX_DATE	10/14/2022	RECEIVE_DATE	10/17/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>Patient received Moderna COVID19 Bivalent Updated Booster 12+ 0.5ml in the right deltoid and Fluarix quad 0.5ml in the left deltoid. The patient then asked for some water and for a receptacle to vomit into. The patient lost color, stated she was feeling unwell and shortly thereafter she her head fell back, her eyes rolled back in her head and she lost consciousness. She came to quickly, but again lost consciousness a second time. She did come to again and asked for the pharmacist and technician to contact her mother who was out waiting in the car. 911 was called immediately after she lost consciousness the first time. EMS arrived and evaluated the patient. The patient and her mother decided to not seek further treatment at the hospital. The patient does have a history of passing out after blood draws, but has never passed out after vaccinations. This information was not disclosed to the pharmacy prior to administration.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
N/A; Unknown; N/A; Ehlers Danlos Type 3, Hypothyroidism, Hiatal Hernia, Chronic Depression, Chronic Nausea, Chronic Fatigue							

VAERS Record Illustrator

State	VT	SEX	M	DATE_DIED	10/18/2022	ONSET_DATE	10/18/2022
VAERS_ID	2507187	AGE_YRS	66.0	VAX_DATE	10/16/2022	RECEIVE_DATE	11/14/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
<p>My husband reported feeling run down and achy on Tuesday morning and again on Tuesday night while working in NYC - this was followed by a cardiac event which required EMS and transport to the emergency room where my husband died.</p>							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
; multivitamin, fish oil; none; prostate cancer - in remission							

EXHIBIT G
 VAERS reports from ¶19
 to be investigated

VAERS Record Illustrator

State	VT	SEX	F	DATE_DIED	0	ONSET_DATE	10/22/2022
VAERS_ID	2486587	AGE_YRS	24.0	VAX_DATE	10/20/2022	RECEIVE_DATE	10/23/2022
PRIOR_VAX	0						
SYMPTOM_TEXT							
Red, tender area noted on left interior bicep at 7am 10/22/22. Area was slightly raised and warm to touch. Area is pain to the touch. Area was outlined with marker. On 10/23/22 redness had grown outside of marked area and still painful to touch. No medication taken to reduce pain.							
LAB_DATA; OTHER_MEDS; CUR_ILL; HISTORY							
None; ; ; Eczema							