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Attorneys for Petitioners CHILDREN’S HEALTH DEFENSE, CALIFORNIA CHAPTER, and PROTECTION OF THE EDUCATIONAL RIGHTS OF KIDS (P.E.R.K.)

Superior court of the state of california

for the county of LOS ANGELES

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| CHILDREN’S HEALTH DEFENSE-CALIFORNIA CHAPTER, a California 501(c)(3) non-profit corporation, on its own and on behalf of its members, and PROTECTION OF THE EDUCATIONAL RIGHTS OF KIDS (P.E.R.K.), a California 501(c)(3) non-profit corporation, on its own behalf and on behalf of its members,  Petitioners,  vs.  LOS ANGELES UNIFIED SCHOOL DISTRICT, a local educational agency and school district for the County of Los Angeles; MEGAN REILLY, in her official capacity as Superintendent of Los Angeles Unified School District; GEORGE MCKENNA, in his official capacity as a member of the LAUSD Board of Education; MONICA GARCIA, in her official capacity as a member of the LAUSD Board of Education; SCOTT SCHMERELSON in his official capacity as a member of the LAUSD Board of Education; NICK MELVOIN, in his official capacity as a member of the LAUSD Board of Education; JACKIE GOLDBERG, in her official capacity as a member of the LAUSD Board of Education; KELLY GONEZ, in her official capacity as a member of the LAUSD Board of Education; TANYA ORTIZ FRANKLIN, in her official capacity as a member of the LAUSD Board of Education; Respondents,  Respondents. |  | Case No.: 21STCP03429  **DECLARATION OF STEVEN T. KIRSCH IN SUPPORT OF PETITIONERS’ REPLY IN SUPPORT OF THEIR MOTION FOR A PRELIMINARY INJUNCTION**  **Date: December 8, 2021**  **Time: 9:30 a.m.**  **Dept.: 86**  Complaint Filed: October 13, 2021  Trial Date: Not yet set |
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**DECLARATION OF STEVEN T. KIRSCH**

I, STEVEN T. KIRSCH, declare as follows:

1. I am an adult over 18 years of age and have personal knowledge of the facts set forth herein this declaration, which are offered in support of the Reply in support of the Motion for a Preliminary Injunction of Petitioners CHILDREN’S HEALTH DEFENSE – CA CHAPTER (“CHD”), and PROTECTION OF THE EDUCATIONAL RIGHTS OF KIDS (“PERK”) (hereinafter collectively “Petitioners”). If called upon as a witness, I could and would competently testify under oath to the facts stated herein.

BACKGROUND

2. I attended Massachusetts Institute of Technology (“MIT”) from 1974 to 1980 and earned a SB/SM from MIT. The main computer science auditorium at MIT is named after me.

3. I am a retired high technology executive, but, prior to my retirement, founded seven (7) high technology companies, two with billion-dollar market caps.

4. I am independently wealthy. I have no conflicts of interest. My sole motivation is to save lives. Making a positive difference in the lives of others gives me a sense of purpose and fulfills me. I have received many awards for my philanthropy over the past 20 years, the most notable being awarded the recipient of a “National Caring Award” from the Caring Institute in 2003. Senator Hilary Clinton presented me with the award in Washington DC in front of a very large audience.

5. In March of 2020, I was working as Chief Executive Officer at a digital money startup company, M10, when COVID impacted our operations.

6. In April 2020, I decided to put my company on hold to do things that could save lives. I donated $1M to start the COVID-19 Early Treatment Fund. I raised another $5M and we funded research into early treatments for COVID.

7. The COVID-19 Early Treatment Fund funded fluvoxamine, an inexpensive, safe drug with virtually no side effects at the effective dose that can reduce the death rate from COVID by 12 times making it far more effective than any vaccine (e.g., the Pfizer vaccine only had only a 2X reduction in mortality in the clinical trials). (See *60 Minutes: Funding a Possible Early Treatment for COVID-19 in a 40-year-old Antidepressant,* <https://www.cbsnews.com/news/fluvoxamine-antidepressant-drug-covid-treatment-60-minutes-2021-03-07/> aired on March 7, 2021).

PERSONAL VACCINATION

8. On March 29, 2021, I completed my second dose of Moderna. At the time, I was convinced by government assurances that the vaccines were safe and effective. I had no reason at all to question the experts. I had always complied with advice from the Centers for Disease Control (“CDC”).

9. In early May, 2021, I began hearing stories from my friends who related stories of either themselves or loved ones who died or became permanently disabled shortly after being vaccinated. All of these cases were statistically unlikely if the government assurances of safety were true. However, I knew my friends weren’t lying, so that left only two possibilities: 1) the government was lying or 2) I am a very unlucky person. I put my job on hold and devoted full time to uncovering which option was more likely.

RESARCH FINDINGS

10. By May 25, 2021, it was more than clear to me what was going on, so I wrote a 287-page document detailing what I had learned on TrialSiteNews entitled “*Should you get vaccinated?*” That article had over 1 million views and over 18,000 “likes.” That is pretty amazing for a 287-page article! My article laid out the evidence behind my assertion that these COVID vaccines were more deadly than any vaccine in human history and should be immediately halted.[[1]](#footnote-1)

11. Specifically, I found that the vaccine doesn’t stay in your arm like most vaccines, but gets delivered everywhere in your body, including your brain, heart, lung, and reproductive organs. Secondly, the payload delivered by the vaccine causes cells to express a protein which is cytotoxic causes inflammation and blood clots, which leads to a wide range of neurological, cardiovascular, immunological, and reproductive symptoms. Ultimately, I found that COVID-19 vaccines kill more people than they save.

12. I also verified with a local neurologist who told me that in her 11 year in her current practice, her office has never had to make a Vaccine Adverse Event Reporting System (VAERS) report. This year, they need to make 2,000 VAERS reports and they have 20,000 patients. This is exceptional. It is clear, irrefutable evidence that these vaccines are thousands of times more dangerous than any vaccine that has been used in the last 10 years.

13. After publication of my article, for the very first time in my life, I was labelled as a spreader of misinformation and people told me that they no longer would speak to me. When I asked if there was anything wrong with my logic, nobody could point out a flaw in what I wrote. They said I was an evil person for opposing the supposedly “safe and effective” vaccines.

CORROBORATION OF FINDINGS

14. The conclusions of my original article that the COVID-19 vaccines kill more people than they save were subsequently confirmed by two papers published in peer-reviewed medical journals: one “*Why are we vaccinating children against COVID-19?”* by Ronald Kostoff et al.[[2]](#footnote-2) and “*The Safety of COVID-19 Vaccinations: Should We Rethink the Policy?”* by Harald Walach et al.[[3]](#footnote-3), both published in August 2021.

15. The conclusions of my original article that vaccines kill more people than they save were also subsequently confirmed by official government data: the Food and Drug Administration (“FDA”) stunning admission that in the clinical trials for Pfizer, more people died who got the vaccine than who got the placebo. Let me repeat that: The FDA admitted that vaccine killed more people than it saved.

16. On page 23 of the *Summary Basis for Regulatory Action* submitted by Dr. Ramchandra Naik on May 18, 2021, it says “From Dose 1 through the March 13, 2021 data cutoff date, there were a total of 38 deaths, 21 in the COMIRNATY group and 17 in the placebo group.”[[4]](#footnote-4) Since there were just two COVID deaths in the placebo group and 1 COVID death in the vaccine group, a net total of 1 death from COVID was saved by the vaccine. However, when all causes of death were considered, there were 4 net deaths (21-17). If there is 1 life saved, this means than 5 people died (since 1-5 = -4). In short, 5 people

lost their lives, one person was saved, resulting in a net loss of 4 people. Another way to look at this is that 5 times as many people lost their lives from all-cause mortality due to the vaccine as compared to the number who were saved from dying from COVID.

17. The bottom line is that Pfizer’s own clinical trial showed no evidence whatsoever that the vaccine was saving lives overall. In fact, it showed the reverse: the vaccine kills around 5 people (who die from the vaccine) for every 1 person saved from COVID.

18. The Pfizer trial also showed that for every 22,000 fully-vaccinated people, we would save a total of approximately 1 life from COVID. This means with 220M vaccinated people, we’d save only 10,000 lives from death from COVID, but this would be at a cost of at least 50,000 lives resulting in a net loss of 40,0000 lives after 220M full vaccinations.

19. In short, the vaccines are nonsensical. They do appear to save people from dying from COVID, however, at the cost of killing them from cardiac, neurologic, or immunologic causes caused by the vaccine itself. In short, the cure is worse than the disease.

20. The CDC is focusing the public’s attention exclusively on lives saved “from Covid” and completely ignoring the people killed and disabled from the vaccines.

21. Because the numbers in the Pfizer clinical trial were small and not statistically significant, they needed to be validated using larger sample sizes – real-world data – so I sought out assistance from researchers from all over the world and assembled 8 different methods and different data sources. Through this research we identified at least 150,000 excess deaths in the US were caused by the vaccine.

22. The results showed that we killed a minimum of 150,000 from the vaccine itself, but we saved 10,000 people from dying from COVID. This is an even worse tradeoff than the 5 to 1 calculated from the Pfizer clinical trial data. This is a 15 to 1 ratio. The detailed calculations and methodology are laid out in my article, “Estimating the number of COVID vaccine deaths in America.”[[5]](#footnote-5) These are only estimates, but these are conservative estimates, since I used the lowest death estimate of the 8 methods I used (the highest death estimates were over 300,000 people).

23. Just because the vaccine is deadly overall, it still might have a positive risk-benefit for certain age groups. However, because there was no risk-benefit analysis by age performed by the CDC (and still isn’t), I did the calculations myself, being very conservative in my calculations (e.g., assume the vaccine saves 100% of all COVID deaths). What I determined is that, even if the vaccine was 100% effective, is has a negative benefit for every age group and the younger you are, the worse it was.

24. For example, for very old people, we would kill approximately 2 people from all-cause mortality causes to save 1 person from dying from COVID. For 20-year-olds, the number was more than 6 people killed by the vaccine for every 1 person saved. At the time I did the calculation, data for younger people wasn’t available (since they hadn’t been vaccinated yet), but the trend was extremely clear: the younger you are, the more nonsensical vaccination was.

25. The detailed calculations are set out in my article, [Vaccine risk benefit by age](https://www.skirsch.com/covid/VCage.pdf), and the table by age is on page 11[[6]](#footnote-6):

Computing the final V:C ratio

So here is our final result in one table that shows that the vaccines don’t make sense for any age group. The V:C ratio should be .1 or lower to make sense.

|  |  |  |  |
| --- | --- | --- | --- |
| **Age range** | **V** | **C** | **V:C** |
| 20-30 | 67 | 11 | 6.09 |
| 30-40 | 120 | 31 | 3.87 |
| 40-50 | 209 | 76 | 2.75 |
| 50-60 | 436 | 185 | 2.36 |
| 60-70 | 1029 | 450 | 2.29 |
| 70-80 | 2133 | 1133 | 1.88 |
| 80+ | 6266 | 3458 |  |

26. Although my work has not been peer-reviewed or published in a medical journal, the results are consistent with two papers published in peer-reviewed medical journals showing the same results: the vaccines kill more people than they save, they don’t make sense for any age group, and the younger you are, the more pronounced the harm (Kostoff and Walach papers previously mentioned).

DISPROVING THE RESULTS

27. I have over 100,000 followers on social media (Twitter, Gab, and Substack) and my analyses have attracted worldwide attention. Despite this, to date, there is not an alternative estimate that I am aware of that is more credible than what I have developed. If there was, I would have adopted it. I am more interested in truthful information being spread than being right. I am happy to be proven wrong.

28. I also publicly offered a $1M reward to any researcher who could find an error in one of the 8 methods I used to determine the 150,000 deaths caused by the vaccine that would significantly change the results. No one has come forward showing an error.

IMPACT OF FINDINGS

29. The most important conclusion from my work establishing that over 150,000 people have been killed by the COVID-19 vaccines means that the COVID-19 vaccines are more deadly than any vaccine in human history.

30. The normal “stopping condition” of a vaccine is around 50 deaths. For example, in 1976, we stopped the H1N1 vaccine after just 35 deaths (see [https://edition.cnn.com/2009/HEALTH/04/30/ swine.flu.1976/index.html](https://edition.cnn.com/2009/HEALTH/04/30/%20swine.flu.1976/index.html)). These vaccines should have been stopped for all ages in January 2021. However, the FDA has not set a stopping condition for the vaccines.

31. I am friends with FDA acting commissioner Janet Woodcock and she refused to answer the stopping condition question.

32. I don’t know of anyone who knows what the stopping condition for the COVID-19 vaccines is. This is unheard of for a clinical trial. A clinical trial without a stopping condition would never be approved by the institutional review board (IRB). Before the COVID vaccines, this was unheard of.

33. The second most important conclusion from my work establishing that over 150,000 people have been killed by the COVID-19 vaccines is that, because the vaccine kills more people than it saves for every age group, it is nonsensical to vaccinate kids because you are much more likely to kill the child than to save his life.

34. A careful risk-benefit analysis for children 5 to 11 was done by Dr. Toby Rogers who found that we will kill an estimated 117 kids from the vaccine for every child we save from a COVID death. (See “*What is the Number Needed to Vaccinate (NNTV) to prevent a single COVID-19 fatality in kids 5 to 11 based on the Pfizer EUA application?”* published October 31, 2021.[[7]](#footnote-7) I have read his analysis and are not aware of any flaws. He used the best data from all sources for all of the values. (Ibid.) I believe it would be hard for anyone to dispute it. Over 20,000 people have viewed his analysis and there has been only praise in the comments that were posted. That is the ultimate peer review.

REFUSAL OF MEDICAL AND SCIENTIFIC COMMUNITIES TO ACCEPT RESULTS

35. Early treatments are extremely effective against COVID. Nobody has to lose their life from COVID if they are treated early. Uttar Pradesh in India uses early treatments, not vaccination. Their COVID death rate is now nearly *zero*. Uttar Pradesh’s population is 204 million, which is just 1/3 smaller than the United States’ population of 329M. Here is the most current data from Johns Hopkins University[[8]](#footnote-8):

Chart

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36. There are people inside the CDC that know all of this is happening, but they are told that if they speak out, they will be fired. I know this because I have spoken to a trusted source who explained to me that that is how he knew to avoid taking the COVID vaccines in January.

37. I have made multiple offers to the CDC and FDA to discuss my findings, but they refuse to have a meeting to discuss any of the results from the team of 29 experts that I collaborate with.[[9]](#footnote-9)

38. I attempted to get the attention of the members of the outside committees of the FDA and CDC by offering any of these members $1M just to have a recorded, on-the-record discussion of my results for a few hours. If I was wrong, they could correct our errors – this would significantly reduce vaccine hesitancy – no member was interested in my offer.

THE VACCINES DO MORE HARM THAN GOOD: RISK-BENEFIT ANALYSI WEIGHS

*AGAINST* VACCINATING CHILDREN

39. No one in the world can produce any evidence that the COVID-19 vaccines reduce all-cause mortality (death) or morbidity (disability). In fact, all the evidence I am aware of shows the reverse.

40. In *US COVID-19 Vaccines Proven to Cause More Harm than Good Based on Pivotal Clinical Trial Data Analyzed Using the Proper Scientific Endpoint, “All Cause Severe Morbidity,”* published August 25, 2021, the peer-reviewed medical article points out the statistically significant rise in all-cause morbidity for all vaccines.[[10]](#footnote-10)

41. The CDC examined the cause(s) of death of 14 children who died shortly after vaccination and were reported in the VAERS.[[11]](#footnote-11) In all cases, the causes of death were consistent with the causes of death elevated by the COVID vaccine, including pulmonary embolism, intracranial hemorrhage, suicide, and cardiac arrest. The causes of deaths of these children were not consistent with “natural causes” of death. Despite this, the CDC stated the cause of death with absolutely no commentary whatsoever regarding possible vaccine injury, and changed the topic. (*Ibid*.)

42. We would typically expect only 1.6 deaths in that age group to be reported in VAERS and we got 14, confirming my 12 “excess deaths” conclusion. The 1.6 was derived using VAERS queries over the period from 2015 to 2019 looking at deaths in that age range.

43. The VAERS database is approximately 41 times under-reported according to the CDC’s own methodology,[[12]](#footnote-12) so the 12 excess deaths actually represent 492 child deaths that were excess and caused by the vaccine.

44. The vaccines also are linked to prion diseases, a family of rare progressive neurodegenerative disorders that affect both humans and animals, that are distinguished by long incubation periods, neuronal loss, and a failure to induce inflammatory response.[[13]](#footnote-13) Once prion disease starts in the brain, it is not treatable and always leads to death. 100% of the time. No exceptions.[[14]](#footnote-14)

45. Finally, these vaccines are based on the original “wild type” virus. It is unknown how effective these vaccines will be against the new Omicron or any other variant, especially in kids where we do not even have data regarding vaccine efficacy from the original vaccines.

46. Based upon my analysis, research, and understanding of the data described in greater detail herein, above, mandating a vaccine for kids for an unknown risk that kills 117 kids within 6 weeks of vaccination, and/or causes brain damages in order to save 1 COVID life is nonsensical, unethical, and immoral. If these vaccine mandates are not halted immediately, kids will unnecessarily lose their lives. That is irreparable harm.

47. Since we couldn’t cost-benefit justify vaccination with the current variants, it will be even harder to conduct with respect to the newest variants, which appear to be very different from the original wild-type variant. Furthermore, Omicron is rapidly spreading and yet very mild, making vaccination even more unnecessary.

CONCLUSION

48. There are clear, significant dangers and a dubious benefit to vaccines, generally but especially now due to Omicron, and especially of children. COVID-19 vaccination clearly is killing people, and administering a vaccine designed for the “wild type” variant against what will soon be a pandemic of Omicron without clear scientific proof in double blind randomized trials of a positive all-cause mortality benefit is unethical. It is experimenting on our kids.

49. The failure to disclose the risks of adverse events (including death) violates California Health and Safety Codes, Federal laws against human experimentation and relating to emergency use authorizations, and the Nuremberg Code, among other things.

50. The mandated vaccination of our children is reprehensible and should be halted immediately.

I declare under penalty of perjury under the laws of the State of California, County of Los Angeles, that the foregoing is true and correct.

Executed on this 1st day of December, 2021.

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**STEVEN T. KIRSCH**

1. <https://trialsitenews.com/should-you-get-vaccinated/> [as of 12/1/21] [↑](#footnote-ref-1)
2. <https://www.sciencedirect.com/science/article/pii/S221475002100161X> [as of 12/1/21] [↑](#footnote-ref-2)
3. [https://cf5e727d-d02d-4d71-89ff9fe2d3ad957f.filesusr.com/ugd/adf864\_ 8c97b2396c2842b3b05975bfbd8254cb.pdf](https://cf5e727d-d02d-4d71-89ff9fe2d3ad957f.filesusr.com/ugd/adf864_%208c97b2396c2842b3b05975bfbd8254cb.pdf) [as of 12/1/21]) [↑](#footnote-ref-3)
4. <https://www.fda.gov/media/151733/download> [as of 12/1/21] [↑](#footnote-ref-4)
5. [https://www.skirsch.com/covid/ Deaths.pdf](https://www.skirsch.com/covid/%20Deaths.pdf) (last updated November 1, 2021) [as of 12/1/21] [↑](#footnote-ref-5)
6. <https://www.skirsch.com/covid/VCage.pdf> (last updated November 1, 2021) [as of 12/1/21] [↑](#footnote-ref-6)
7. https://tobyrogers. substack.com/p/what-is-the-number-needed-to-vaccinate [as of 12/1/21] [↑](#footnote-ref-7)
8. <https://coronavirus.jhu.edu/data/new-cases> [as of 12/1/21] [↑](#footnote-ref-8)
9. <https://stevekirsch.substack.com/p/my-team-of-vaccine-safety-experts> [as of 12/1/21] [↑](#footnote-ref-9)
10. <https://www.skirsch.com/covid/Morbidity.pdf> [as of 12/1/21]). [↑](#footnote-ref-10)
11. See *COVID-19 Vaccine Safety in Adolescents Aged 12–17 Years — United States, December 14, 2020–July 16, 2021*. [https://www.cdc.gov/mmwr/volumes/70/wr/ mm7031e1.htm](https://www.cdc.gov/mmwr/volumes/70/wr/%20mm7031e1.htm) (published August 6, 2021) [as of 12/1/21] [↑](#footnote-ref-11)
12. [The reporting sensitivity of the Vaccine Adverse Event Reporting System (VAERS) for anaphylaxis and for Guillain-Barré syndrome](https://www.sciencedirect.com/science/article/pii/S0264410X20312548?via%3Dihub) at <https://www.sciencedirect.com/science/article/> pii/S0264410X20312548?via%3Dihub), [↑](#footnote-ref-12)
13. *PROOF: COVID vaccines cause prion diseases,* <https://stevekirsch.substack.com/p/proof-covid-vaccines-cause-prion> (published November 26, 2021) [as of 12/1/21]. [↑](#footnote-ref-13)
14. *Identified Prion Diseases,* [*https://www.cdc.gov/prions/index.html*](https://www.cdc.gov/prions/index.html)[as of 12/1/21]) [↑](#footnote-ref-14)