To all Public Agency Employees, Officers, & Officials:

Please Take Notice of the following matters of State & Federal Law: Upon your receipt of this Notice you have been given Constructive and Actual Notice of all the following:

"The original Founding document of The United States Of America" Titled:

"The Unanimous Declaration of the thirteen United States of America" Executed July 4, 1776, clearly Declared:

1. "WE HOLD THESE TRUTHS TO BE SELF EVIDENT, THAT ALL MEN ARE CREATED EQUAL. THAT THEY ARE ENDOWED BY THEIR CREATOR WITH CERTAIN UNALIENABLE RIGHTS, THAT AMONG THESE ARE LIFE, LIBERTY, AND THE PURSUIT OF HAPPINESS"

"THAT TO SECURE THESE RIGHTS GOVERNMENTS ARE INSTITUTED AMONG MEN, DERIVING THEIR JUST POWERS *FROM THE CONSENT OF THE GOVERNED."*

The implication of those words is clear:

the exercise of powers upon people ***that have not been consented to, are not just.***

The original Government Charter, Styled as "Constitution Of The United States of America" produced by the Constitutional Convention in Philadelphia Pennsylvania of 1787, which was Amended by the separate "Union States", in 1791 with the Bill of Unalienable Rights, with "Declaratory and Restrictive clauses" "in order to prevent misconstruction or abuse of its powers",

Did not provide any Express "Emergency Powers" or "Extraordinary

Executive Emergency War Powers" to the Executive Branch of the Federal or the State Governments.

The Supreme Court of the United States of America has Ruled numerous times on the application of Emergency Powers by Government and the limits of their authorization under the Constitution to apply Emergency Power !

The Supreme Court Of The United States of America has Ruled several times regarding the Right of an individual to Refuse any Medical Treatment, which of course includes any Inoculations, Vaccinations, or any other kind or type of Medical treatment, therapy, or surgery !

The Supreme Court of the United States of America stated in the Case of Home Building & Loan Assn. VS Blaisdell (1934) 290 US 398, at pages 425-426, as well as several other published Rulings on emergency power:

"Emergency does not create power. Emergency does not increase granted power or remove or diminish the restrictions imposed upon power granted or reserved."

"The Constitution was adopted in a period of grave emergency. Its grants of power to the federal government and its limitations of the power of the States were determined in the light of emergency, and they are not altered by emergency."

2. THE UNITED STATES SUPREME COURT STATED IN THE CASE OF: CHISOLM EXECUTOR, VS State of GEORGIA, 2 DALL 419 (1793):

"The only reason, I believe, why a free man is bound by human laws, is, that he binds himself."

3. U.S. SUPREME COURT IN Yick Wo v. Hopkins, 118 U.S. 356 (1886) Stated:

"Sovereignty itself is, of course, not subject to law, for it is the author and source of law; but in our system, while sovereign powers are delegated to the agencies of government,

sovereignty itself remains with the people, by whom and for whom all government exists and acts. And the law is the definition and limitation of power."

"When we consider the nature and the theory of our institutions of government, the principles upon which they are supposed to rest, and review the history of their development, we are constrained to conclude that :

they do not mean to leave room for the play and action of purely personal and arbitrary power."

"The fundamental rights to life, liberty, and the pursuit of happiness, considered as individual possessions, are secured by those maxims of constitutional law which

are the monuments showing the victorious progress of the race in securing to men the blessings of civilization under the reign of just and equal laws, *so that, in the famous language of the Massachusetts bill of rights, the government of the commonwealth may be a government of laws and not of men. For the very idea that one man may be compelled to hold his life, or the means of living, or any material right essential to the enjoyment of life, at the mere will of another, seems to be intolerable in any country where freedom prevails, as being the essence of slavery itself.”*

The Supreme Court stated the Individual Right to Refuse Medical Treatment Numerous Times:

4. In: Cruzan v. Director, Missouri Dept. of Health (1990) 497 U.S. 261, 343; 111 L. Ed. 2D 224, 282; 110 S.Ct. 2841 dis. opn. of Stevens, J.

"[T]he constitutional protection for the human body is surely inseparable from concern for the mind and spirit that dwell therein." ; id., at pages

279, 287-289 conc. opn. of O'Connor, J., 304-306 dis. opn. of Brennan, J.; 111 L. Ed. 2d at pages 242, 247-248, 258-260; Schmerber v. California (1966) 384 U.S. 757, 767 [16 L. Ed. 2d 908, 917, 86 S. Ct. 1826; ”

Mr. Justice Brandeis, whose views have inspired much of the 'right to be let alone' philosophy, said in Olmstead v. United States....

“The makers of our Constitution ... sought to protect Americans in their beliefs, their thoughts, their emotions and their sensations. They conferred, as against the Government, the right to be let alone-the most comprehensive of rights and the right most valued by civilized man.”[7]

More than a century ago, the United States Supreme Court declared:

“ No right is held more sacred, or is more carefully guarded, by the common law, than the right of every individual to possession and control of his own person, free from all restraint or interference of others, unless by clear and unquestionable authority of law. ...

'The right to one's person may be said to be a right of complete immunity: to be let alone.'

[Citation.]" Union Pacific Railway Co. v. Botsford (1891) 141 U.S. 250, 251 35 L. Ed. 734, 737, 11 S.Ct. 1000. Cited and quoted by the California Supreme Court in the Case of: Thor v. Superior Court (Andrews) (1993) 5 Cal. 4th 725, 357; ARABIAN, J .

“A competent person has a liberty interest under the Due Process Clause in refusing unwanted medical treatment.”

Jacobson v. Massachusetts,197 U.S. 11, 24-30, 25 S.Ct. 358, 360-363, 49 L. Ed. 643.”

U.S. Supreme Court

West Virginia State Board of Education v. Barnette
319 U.S. 624 (1943) No. 591

Argued March 11, 1943; Decided June 14, 1943

“ The very purpose of a Bill of Rights was to withdraw certain subjects from the vicissitudes of political controversy, to place them beyond the reach of majorities and officials, and to establish them as legal principles to be applied by the courts. One's right to life, liberty, and property, to free speech, a free press, freedom of worship and assembly, and other fundamental rights may not be submitted to vote; they depend on the outcome of no elections.”

The California Supreme Court has previously Ruled in the Case of: Thor v. Superior Court (Andrews) (1993) 5 Cal. 4th 725 , 21; No. S026393. Jul 26, 1993:

OPINION

ARABIAN, J.

More than a century ago, the United States Supreme Court declared, "No right is held more sacred, or is more carefully guarded, by the common law, than the right of every individual to possession and control of his own person, free from all restraint or interference of others, unless by clear and unquestionable authority of law. ...

'The right to one's person may be said to be a right of complete immunity: to be let alone.' [Citation.]" (Union Pacific Railway Co. v. Botsford (1891) 141 U.S. 250, 251 35 L. Ed. 734, 737, 11 S.Ct. 1000. Speaking for the New York Court of Appeals, Justice Benjamin Cardozo echoed this precept of personal autonomy in observing, "Every human being of adult years and sound mind has a right to determine what shall be done with his own body ...." (Schloendorff v. Society of New York Hospital (1914) 211 N.Y. 125 [105 N.E. 92, 93], overruled on other grounds in Bing v. Thunig (1957) 2 N.Y.2d 656 [163 N.Y.S.2d 3, 143 N.E.2d 3].) And over two decades ago, Justice Mosk reiterated the same principle for this court: "[A] person of adult years and in sound mind has the right, in the exercise of control over his body, to determine whether or not to submit to lawful medical treatment." (Cobbs v. Grant (1972) 8 Cal.3d 229, 242 [104 Cal. Rptr. 505, 502 P.2d 1].) [5 Cal.4th 732]

[3a] Until recently, the question of a patient's right to refuse life-sustaining treatment has implicated potentially conflicting medical, legal, and ethical considerations.

The developing interdisciplinary consensus, however, now uniformly recognizes the patient's right of control over bodily integrity as the subsuming essential in determining the relative balance of interests. (See In the Matter of Farrell (1987) 108 N. J. 335 [529 A.2d 404, 410-412] and cases cited.)

This preeminent deference derives principally from "the long-standing importance in our Anglo-American legal tradition of personal autonomy and the right of self-determination." (In re Gardner (Me. 1987) 534 A.2d 947, 950; see Rasmussen v. Fleming (1987) 154 Ariz. 207 [5 Cal.4th 735] ; Satz v. Perlmutter (Fla. Dist. Ct. App. 1978) 362 So.2d 160, 162, affd. (1980) 379 So.2d 359; Brophy v. New England Sinai Hospital, Inc. (1986) 398 Mass. 417 [497 N.E.2d 626, 633] (Brophy); In the Matter of Farrell, supra, 108 N.J. 335 [529 A.2d at p. 410].) As John Stuart Mill succinctly stated, "Over himself, over his own body and mind, the individual is sovereign." (Mill, On Liberty (1859) p. 13.) fn. 5

[4] The common law has long recognized this principle: A physician who performs any medical procedure without the patient's consent commits a battery irrespective of the skill or care used. (Estrada v. Orwitz (1946) 75 Cal.App.2d 54, 57 [170 P.2d 43]; Valdez v. Percy (1939) 35 Cal.App.2d 485, 491 [96 P.2d 142]; Schloendorff v. Society of New York Hospital, supra, 211 N.Y. 125 [105 N.E. at p. 93]; see Union Pacific Railway Co. v. Botsford, supra, 141 U.S. at p. 252 [35 L.Ed.2d at pp. 737-738]; Mohr v. Williams (1905) 95 Minn. 261 [104 N.W. 12, 14- 15],

As a corollary, the law has evolved the doctrine of informed consent. (See Cobbs v. Grant, supra, 8 Cal.3d at pp. 239-241.) "Under this doctrine, 'the patient must have the capacity to reason and make judgments, the decision must be made voluntarily and without coercion, and the patient must have a clear understanding of the risks and benefits of the proposed treatment alternatives or non treatment, along with a full understanding of the nature of the disease and the prognosis.' [Citations.]" (Rasmussen v. Fleming, supra, 154 Ariz. 207 [741 P.2d at p. 683].)

While the physician has the professional and ethical responsibility to provide the medical evaluation upon which informed consent is predicated, the patient still retains the sole prerogative to make the subjective treatment decision based upon an understanding of the circumstances. (In re Gardner, supra, 534 A.2d at p. 951; In the Matter of Conroy (1985) 98 N.J. 321 [486 A.2d 1209, 1222, 48 A.L.R.4th 1].)

Accordingly, the right to refuse medical [5 Cal.4th 736] treatment is equally "basic and fundamental" and integral to the concept of informed consent. fn. 6 (Bouvia, supra, 179 Cal. App. 3d at p. 1137; Bartling, supra, 163 Cal. App.3d at p. 195; Cruzan v. Director, Missouri Dept. of Health, supra, 497 U.S. at p. 277 [111 L.Ed.2d at p. 241]] (Cruzan); In re Gardner, supra, 534 A.2d at p. 951; Brophy, supra, 398 Mass. 417 [497 N.E.2d at p. 633]; In the Matter of Conroy, supra, 98 N.J. 321 [486 A.2d at p. 1222].)

"The purpose underlying the doctrine of informed consent is defeated somewhat if, after receiving all information necessary to make an informed decision, the patient is forced to choose only from

alternative methods of treatment and precluded from foregoing all treatment whatsoever." (Rasmussen v. Fleming, supra, 154 Ariz. 207 [741 P.2d at p. 683].)

"Obviously, if a patient is powerless to decline medical treatment upon being properly informed of its implications, the requirement of consent would be meaningless." (McKay v. Bergstedt (1990) 106 Nev. 808 [801 P.2d 617, 621]; see Cal. Code Regs., tit. 22, § 70707, subd. (6)

[under administrative regulations patients have right to "[p]articipate actively in decisions regarding medical care. To the extent permitted by law, this includes the right to refuse treatment.".

[3b] Because health care decisions intrinsically concern one's subjective sense of well-being, this right of personal autonomy does not turn on the wisdom, i.e., medical rationality, of the individual's choice. (Lane v. Candura (1978) 6 Mass.App. 377 [376 N.E.2d 1232, 1236, 93 A.L.R.3d 59]; In re Gardner, supra, 534 A.2d at p. 951; see also Bouvia, supra, 179 Cal.App.3d at p. 1143.)

"Anglo-American law starts with the premise of thorough-going self determination. It follows that each man is considered to be master of his own body, and he may, if he be of sound mind, expressly prohibit the performance of life-saving surgery, or other medical treatment.

A doctor might well believe that an operation or form of treatment is desirable or necessary, but the law does not permit him to substitute his own judgment for that of the patient by any form of artifice or deception." fn. 7 (Natanson v. Kline (1960) 186 Kan. 393, 406-407 [350 P.2d 1093, 1104].) [5 Cal.4th 737]

Moreover, in this regard both courts and commentators generally reject attempts to draw distinctions between, for example, "ordinary" and "extraordinary" procedures, fn. 8 or "terminal" and "non terminal" conditions, fn. 9 or "withholding" and "withdrawing" life-sustaining treatment.

(See generally, President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, Rep. (President's Com., Rep.) (1983) Deciding to Forego Life-Sustaining Treatment, pp. 60-90.)

Rather, effectuating the patient's freedom of choice remains the ultimate arbiter. (In re Gardner, supra, 534 A.2d at p. 955; cf. Health & Saf. Code, § 7191.5, subd. (e)

["This chapter [Natural Death Act] does not affect the right of a patient to make decisions regarding use of life-sustaining treatment, so long as the patient is able to do so, or impair or supersede a right or responsibility that a person has to effect the withholding or withdrawal of medical care."].)

Other, nonlegal sources uniformly reaffirm these tenets.

Reports by the presidential commission studying these interrelated issues emphasize the necessity and value of personal autonomy with respect to both informed consent generally (President's Com., Rep. (1982) Making Health Care Decisions, pp. 43-51) and decisions to forego life-sustaining treatment (President's Com., Rep., supra, Deciding to Forego Life-Sustaining Treatment, pp. 2-4, 23-41).

In a publication discussing the termination of such procedures, the Hastings Center, which devotes itself to the research of ethical

problems in medicine, biology, and the life sciences, stated: "[O]ur ethical framework draws on the value of patient autonomy or self-determination, which establishes the right of the patient to determine the nature of his or her own medical care.

This value reflects our society's long-standing tradition of recognizing the unique worth of the individual. We respect human dignity by granting individuals the freedom to make choices in accordance with their [5 Cal.4th 738] own values.

The principle of autonomy is the moral basis for the legal doctrine of informed consent, which includes the right of informed refusal." (Hastings Center, Guidelines on the Termination of Life-Sustaining Treatment and the Care of the Dying (1987) p. 7; see also Bouvia, supra, 179 Cal.App.3d at pp. 1140-1141 [citing medical association statements affirming the preeminence of patient autonomy].) Accordingly, "[t]he duty of the State to preserve life must encompass a recognition of an individual's right to avoid circumstances in which the individual himself would feel that efforts to sustain life demean or degrade his humanity. [Citation.]

It is antithetical to our scheme of ordered liberty and to our respect for the autonomy of the individual for the State to make decisions regarding the individual's quality of life. It is for the patient to decide such issues." (Brophy, supra, 497 N.E.2d at p. 635; McKay v. Bergstedt, supra, 801 P.2d at pp. 624, 627.)

In this situation, "the value of life is desecrated not by a decision to refuse medical treatment but 'by the failure to allow a competent human being the right of choice.' [Citations.]" (In the Matter of Farrell, supra, 108 N.J. 335 [529 A.2d at p. 411], quoting

Superintendent of Belchertown State School v. Saikewicz (1977) 373 Mass. 728 [370 N.E.2d 417, 426] (Saikewicz).)

The fact that an individual's decision to forego medical intervention may cause or hasten death does not qualify the right to make that decision in the first instance. (Bouvia, supra, 179 Cal.App.3d at pp. 1143, 1144; In the Matter of Farrell, supra, 108 N.J. 335 [529 A.2d at p. 410].)

For self-determination to have any meaning, it cannot be subject to the scrutiny of anyone else's conscience or sensibilities.

It is the individual who must live or die with the course of treatment chosen or rejected, not the state. Particularly when the restoration of normal health and vitality is impossible, only the person whose moment-to-moment existence lies in the balance can resolve the difficult and uniquely subjective questions involved. fn. 12 Regardless of the consequences, the courts, the medical profession, and even family and friends must accept the decision with understanding and compassion. We therefore hold that Andrews's right of self-determination and bodily integrity prevails over any countervailing duty to preserve life. (Myers, supra, 399 N.E. 2d at p. 458.)

Particularly in this day of sophisticated technology, the potential medical benefit of a proposed treatment is only one of the factors a patient must evaluate in assessing his or her perception of a meaningful existence. Since death is the natural conclusion of all life, the precise moment may be less critical than the quality of time preceding it.

Especially when the prognosis for full recovery from serious illness or incapacitation is dim, the relative balance of benefit and burden must lie within the patient's exclusive estimation:
"That personal weighing of values is the essence of self-determination." (In re Gardner, supra, 534 A.2d at p. 955; Conservatorship of Drabick (1988) 200 Cal. App.3d 185, 208 [245 Cal. Rptr. 840]; Barber, supra, 147 Cal.App.3d at p. 1019; Rasmussen v. Fleming, supra, 154 Ariz. 207 [741 P.2d at p. 683].)

As Justice Brennan explained in his dissenting opinion in Cruzan, supra, "The possibility of a medical miracle [may] indeed [be] part of the calculus, but it is a part of the patient's calculus." (497 U.S. at p. 321 [111 L.Ed.2d at p. 269] (dis. opn. of Brennan, J.), italics in the original.)

Thus, "[w]hile both of the state interests in life are certainly strong, in themselves they will usually not foreclose a competent person from declining life-sustaining medical treatment ....

This is because the life that the state is seeking to protect in such a situation is the life of the same person who has competently decided to forego the medical intervention;

it is not some other actual or potential life that cannot adequately protect itself. [Citations.]" (In the Matter of Conroy, supra, 98 N.J. 321 [486 A.2d at p. [5 Cal.4th 740] 1223]; see also Bouvia, supra, 179 Cal. App. 3d at p. 1143; Cruzan, supra, 497 U.S. at p. 313 [111 L. Ed. 2d at pp. 263-264] (dis. opn. of Brennan, J.); In re Gardner, supra, 534 A.2d at p. 955; Brophy, supra, 497 N.E. 2d at p. 636; Myers, supra, 399 N.E. 2d at p. 458; McKay v. Bergstedt, supra, 801 P.2d at pp. 622-623.)

Moreover, the state has not embraced an unqualified or undifferentiated policy of preserving life at the expense of personal autonomy. (See Cruzan, supra, 497 U.S. at p. 314, fn. 15 [111 L. Ed. 2d at p. 265] (dis. opn. of Brennan, J.).)

As a general proposition, "[t]he notion that the individual exists for the good of the state is, of course, quite antithetical to our fundamental thesis that the role of the state is to ensure a maximum of individual freedom of choice and conduct." (In re Osborne (D.C. 1972) 294 A.2d 372, 375, fn. 5.)

In California, the Natural Death Act and other statutory provisions permitting an individual or designated surrogate to exercise conclusive control over the administration of life-sustaining treatment evidence legislative recognition that fostering self-determination in such matters enhances rather than deprecates the value of life. (Health & Saf. Code, § 7185 et seq.; Civ. Code, § 2500 et seq.; see also McKay v. Bergstedt, supra, 801 P.2d at p. 623; In the Matter of Conroy, supra, 98 N.J. 321 [486 A.2d at pp. 1223- 1224].)

[7b] Examining the facts of the present case in light of the foregoing considerations, we find no countervailing state interest in the preservation of life sufficient to sustain a duty on the part of petitioner superseding the right to refuse unwanted medical treatment.

Our conclusion that the patient's choice must be respected regardless of the doctor's judgment does not denigrate professional standards of care. Rather, it attests to their continuing and critical

importance in maximizing the broader precept of self-determination that transcends a particular course of treatment. Patient autonomy and medical ethics are not reciprocals; one does not come at the expense of the other. The latter is a necessary component and complement of the former and should serve to enhance rather than constrict the individual's ability to resolve a medical decision in his or her best overall interests.

[12] In summary, we conclude that a competent, informed adult, in the exercise of self-determination and control of bodily integrity, has the right to direct the withholding or withdrawal of life-sustaining medical treatment, even at the risk of death, which ordinarily outweighs any countervailing state interest.

The right does not depend upon the nature of the treatment refused or withdrawn; nor is it reserved to those suffering from terminal conditions. Once a patient has declined further medical intervention, the physician's duty to provide such care ceases.

Government Is Forbidden By Law To Punish or Penalize anyone for Exercising Any Statutory or Constitutional Rights:

“It is Unconstitutional Deprivation of Due Process for Government to penalize person merely because he has exercised protected

statutory or Constitutional Right." US Supreme Court in:

BLACKLEDGE VS PERRY, 417 US 21, (1974);

GUAM VS DERGURGUR, 800 F2d 1470 (9th Cir. 1986) ;

" For the Government to punish a person because he had done what the law plainly allows him to do is a Due Process Violation of the most basic sort" US VS GUTHRIE, 789 F2d 356 (5th CIR. 1986)

" Due Process of law is violated when Government vindictively attempts to penalize a person for exercising protected statutory or Constitutional Rights "

US VS CONKINS, 987 F2d 564 (9th Cir. 1993)